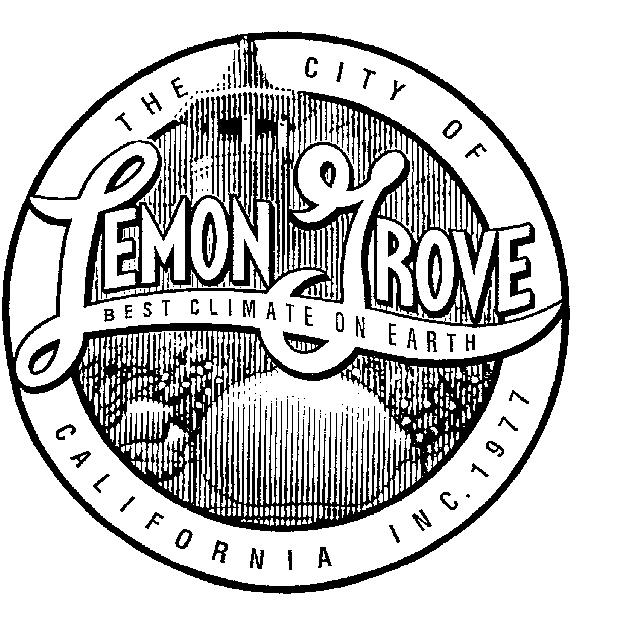
****

**PERMIT NUMBER**

**PERMIT VALID:**

FROM:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

M – T – W – TH – F – ST - SN

CITY OF LEMON GROVE

**TRANSPORTATION PERMIT**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS, CONDITIONS

AND RESTRICTIONS WRITTEN BELOW AND THE ACCOMPAINMENTS, PERMISSION IS

HERBY GRANTED TO:

|  |  |
| --- | --- |
| NAME: | |
| ADDRESS: | |
| CITY/STATE/ZIP: | |
| OFFICE PHONE: | OFFICE FAX: |

|  |  |
| --- | --- |
| DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO: | HAUL DRIVE  TOW |
| DIMENSIONS OF LOAD: | |
| DESCRIPTION OF HAULING EQUIPMENT: | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| VEHICLE WIDTH: | | SEMI-TRAILER LENIGHT: | | | | | KINGPIN TO LAST AXEL: | | | | COMB. VEHICL LENGTH: | | | | |
| AXEL NUMBER | | 1 | | 2 | | 3 | 4 | 5 | | 6 | 7 | | | 8 | 9 |
| NUMBER OF TIRES PER AXLE | |  | |  | |  |  |  | |  |  | | |  |  |
| DISTANCE BETWEEN AXLES | |  | |  | |  |  |  | |  |  | | |  |  |
| WIDTH OF TIRE SIDEWALL | |  | |  | |  |  |  | |  |  | | |  |  |
| MAXIMUM ALLOWABLE WEIGHT | |  | | | | | | | | | | | | | |
| NOT TO EXCEED THE LOADED DIMENSIONS SHOWN BELOW OR AXLE WEIGHTS SHOWN ABOVE | | | | | | | | | | | | | | | |
| LOADED HEIGHT: | LOADED WIDTH: | | | | LOADED OVERALL LENIGHT: | | | | LOADED OVERHANG: | | | WEIGHT CLASS: | | | |
| ORIGIN:       DESTINATION: | | | | | | | | | | | | | | | |
| REQUESTED ROUTE: | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| PILOT CAR  YES  NO | | | | | | | | | | | | | | | |
| PAYMENT INFO  CASH CHECK CHARGE | | | APPLICANT SIGNATURE | | | | | | | | | | DATE | | |
| **FEE $ 16.00** | | | AUTHORIZED CITY AGENT | | | | | | | | | | DATE | | |