

## Oversize/Overweight Vehicle Single Trip Permit Application

Commercial Vehicle Services

PO Box 47367 7345 Linderson Way SV Olympia, WA 98504-736		elf-Issued Pe	ermits - 24-h	nours	a day/7 day	ys a w	eek		CVSpe	360-704 ermits@wsdot.w eSNOOPIPro	a.gov	
Company Name					Contact Name					DOT#		
Street Address					Phone (with Area Code)					Permit Start Date		
City State Zip Code					Fax (with Area Code)					Permit End Date		
E-Mail Address												
Power Unit License Number					VIN Number (Complete)							
Make					'ear	Base State Unit #		Unit #				
DETAILED LOAD DESCRIPTION					Tractor/Trailer (Connected by 5th Whee Truck/Trailer (Connected by Hitch Single Vehicle					•		
Origin (Address)				D	estination (Add	dress)						
Power Unit - # of Axles					Licensed Weight				Previous Permit ID			
Width Height	railer L	ength (Whiche	ver is lo	nger)	Fro	nt O/H	Rear O/H					
Overweight Only: Axle spacings are required if no axle spacing report number is provided. Give axle spacing measured from center of axle to center of axle in feet and inches and number of tires per axle.												
Axle Weights: (required)												
Tires per axle:		) ( ) (		)(		)(		$\mathcal{L}($				
Spacing:												
Tire Size on Steer Axle  Lift Axle?  Yes No  Which Axle?					Tire Size?			Single Self Steering?  Dual Yes No				
Desired Route (Sta	ate Highways with mile			ize/ov	erweight rec	quired.)	)					
Highways	Beginning MP	Ending N	ng MP		Highw	rays	Beç	Beginning M		Ending MP		
County City Miles												
Signature								Da	ate			