Washington State Ferries - Oversized/Overweight Vehicle Travel Request

All Sections Must be Completed. Note: Requests cannot be refaxed or faxed to equipment owned by wire servies, ie., truck stops. Fax Completed Request, at Least One Business Day Prior to Travel, to Customer Information: (206) 515-3773

Company ____________________________ Length ____________________________

Phone ____________________________ Width ____________________________

Contact Person ____________________________ Height ____________________________

Fax ____________________________ Ground Clearance ____________________________

Address ____________________________ Vehicle License # ____________________________

City ____________________________ Base State ____________________________

State/Province ____________________________ Destination ____________________________

Zip ____________________________ Date of Travel ____________________________

Email ____________________________ Requested Sailing ____________________________

Total Weight ____________________________ Legal Weight ____________________________

Overweight specs if over 80,000 lbs.

Special Conditions ____________________________

Read this before signing
This travel permission issued in accordance with WAC 468.300.700 Sec. 1H with the specific understanding that all applicable Washington State Laws, administrative codes, regulations and conditions, including those not listed hereon will be complied with. I/We, the undersigned permittee or agent thereof, certify that the information shown hereon is known by me and is true and correct and understanding that the permittee shall be liable as set forth in RCW 48.44.110 for all damages to any public highway, bridge, elevated structure, dock, terminal or wsf ferry resulting from the movement of equipment authorized by this travel permission on the public highways of this state. The permittee shall further hold blameless and harmless and indemnify the state, its officers, agents and employees against any accident, liability, loss, injury, action and the costs thereof arising from the conduct or operations of the permittee in connection with this permission. Further understand that prior to movement the permittee shall establish a routing to safely detour all structures having a limited clearance less than the permitted height and width. I further affirm that the permitted vehicle(s) is insured in compliance with WAC 480-12-380.

Signed ____________________________ WSF Information Phone #: (888) 808-7977 or (206) 390-8543

REQUEST NOT VALID UNLESS SIGNED BY PERMITTEE OR AGENT THEREOF