

Request for Approval of Oversize/ Overweight Movement - Superloads

Approval Form Only. Applicant MUST submit Application (DOT Form 560-021) for permit

All Sections Must	Be Completed			Subii	пі Аррііс	alion (DOTT	οπτ 300-02 τ) τοι per	
Company Name A Trucking Co.							Contact Person Tohn Doe	
Street Address 1234 Main St.				Phone (with Area Code) 360~704~6340			(with Area Code)	
City Olympía	1 1 1 2 2	ip Code 98501	E-mail Address CVSpermits@wsdot.wa.gov					
Detailed Description of	Non-Reducible Load or	Vehicle						
	Empty Propa	ne Tank	/					
Proposed Dates of Mo	Origin		Destination					
July 21, 2015		Yakima, WA				WA/OR Border		
Total Miles		Number of Loads 2			Estimated Level Surface Speed Posted Speed Limit			
	sed Routes of Tra	1						
Highways	Beginning MP	Ending MP		Highways	Be	ginning MP	Ending MP	
I-82	31	102.53						
I-182	0.00	15.19						
<i>US12</i>	291.67	307.46						
<i>US730</i>	6.08	0.00						
	eights per axle group k Axle 2 = 16. Axle 7 = 17k	5k Axle	3= 16	.5k Axle 4	=16.51	k Axle 5	= 17k	
Stinger Steered/Steerable Trailer				Trailer GVW 111,500		500	Report Number	
Width 16'1"	Height 15'3"	Trailer (Load L	ength)	Front Overhang O	Rear <i>O</i>	Overhang	Number of Axles 7	
Signature of Person Requesting Approval Johnathan C. Doe				Date **July 21, 2015**				
		FOR		USE ONLY				
Date Recived and Initials				HQ Approval No.				
Special Conditions/Rec	quirements		I					