



# CITY OF PETALUMA TRANSPORTATION PERMIT

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND IN THE ACCOMPANIMENTS, PERMISSION IS HEREBY GRANTED TO:

PERMIT VALID:

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

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

MOVEMENT AUTHORIZED:

SATURDAY: \_\_\_\_\_

SUNDAY: \_\_\_\_\_

DARKNESS:  
(CVC280): \_\_\_\_\_

PERMIT NUMBER

\_\_\_\_\_

PERMIT ACCOMPANIMENTS

**PILOT CAR REQUIREMENTS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

OFFICE PHONE NUMBER (Including Area Code) \_\_\_\_\_

OFFICE FAX NUMBER (Including Area Code): \_\_\_\_\_

DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.:  HAUL  DRIVE  TOW

DIMENSIONS OF LOAD: \_\_\_\_\_

DESCRIPTION OF HAULING EQUIPMENT: \_\_\_\_\_

|                |                      |                       |                       |
|----------------|----------------------|-----------------------|-----------------------|
| VEHICLE WIDTH: | SEMI-TRAILER LENGTH: | KINGPIN TO LAST AXLE: | COMB. VEHICLE LENGTH: |
| _____          | _____                | _____                 | _____                 |

|                          |       |       |       |       |       |       |       |       |       |
|--------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| AXLE NUMBER              | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     |
| NUMBER OF TIRES PER AXLE | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |

DISTANCE BETWEEN AXLES \_\_\_\_\_

WIDTH OF AXLES AT TIRE SIDEWALL \_\_\_\_\_

MAXIMUM ALLOWABLE WEIGHT \_\_\_\_\_

### NOT TO EXCEED DIMENSIONS SHOWN BELOW OR AXLE WEIGHTS SHOWN ABOVE

|                |               |                        |                  |               |
|----------------|---------------|------------------------|------------------|---------------|
| LOADED HEIGHT: | LOADED WIDTH: | LOADED OVERALL LENGTH: | LOADED OVERHANG: | WEIGHT CLASS: |
| _____          | _____         | _____                  | _____            | _____         |

ORIGIN: \_\_\_\_\_ DESTINATION: \_\_\_\_\_

**AUTHORIZED CITY ROUTES - STATE AND/OR COUNTY PERMITS MAY BE REQUIRED**

**PERMIT VALID FOR POSTED TRUCK ROUTES ONLY**  
with local access for pickup/delivery according to Section 35703 of the CVC

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PILOT CAR  YES  NO \*\*\*PILOT CAR REQUIRED ON LOADS EXCEEDING 12' WIDE

Pursuant to California Vehicle Code, Section 35780, this permit does NOT exempt the permittee from meeting the requirements set forth by the California Department of Transportation to operate extra-legal loads within the state right-of-way.

|   |                     |       |
|---|---------------------|-------|
| CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION | APPLICANT SIGNATURE | DATE  |
| _____   | _____               | _____ |

|                       |        |                 |                       |       |
|-----------------------|--------|-----------------|-----------------------|-------|
| CREDIT CARD EXP. DATE | FEE \$ | NUMBER OF TRIPS | AUTHORIZED CITY AGENT | DATE  |
| _____                 | _____  | _____           | _____                 | _____ |

REQUESTED ROUTE: \_\_\_\_\_

APPLICANT CONTACT PERSON (PRINT) \_\_\_\_\_