

CITY OF ROCKLIN

Department of Public Services 4081 Alvis Court Rocklin, CA 95677 Phone: 916-625-5500 Fax: 916-625-5501

PERMIT VALID BETWEEN:	PERMIT NUMBER:									
(AM / PM)	LOAD NUMBER:									
//										
AND SUNSET										
//	AUTHORIZED REPRESENTATIVE									
MOVING IS AUTHORIZED BETWEEN THE HOURS OF 9:00 AM to 4:00 PM MONDAY THROUGH FRIDAY and 7:00 AM to 10 PM SATURDAY AND SUNDAY										

MUST CARRY IN TRANSPORT VEHICLE

OVERLOAD TRANSPORTATION ROUTE SHEET

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS, AND RESTRICTIONS WRITTEN BELOW AND ANY ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:											☐ HAUL ☐ DRIVE ☐ TOW								
NAME:	LOAD OR EQUIPMENT DESCRIPTION AND MODEL NUMBER:																		
ADDRESS:										TYPE OF VEHICLE:									
CITY/STATE/ZIP										KING PIN TO LAST AXLE: COM						MB. VEHICLE LENGTH:			
PHONE NUMBER:					FAX NUMBER:					VEHICLE WIDTH: SE					EMI-TRAILER LENGTH:				
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED																			
MAX HEIGHT	:		M	MAX WIDTH:					MAX OVERALL LENGTH: M					MAX OVERHANG:					
AXLE NUMBER NUMBER	1	2			3		4		5	1	6		7		8		9		
OF TIRES AXLE SPACING																			
AXLE WIDTH																			
MAXIMUM WEIGHT																			
ORIGIN: DESTINATION: NUMBER OF TRIPS:																			
PILOT CAR (PILOT C	ARS:	P(SCOR	T REQL	JIRED?	YES	N	C		
AUTTORIZE			001111			OUKLI	<u>v.</u>												
																ГАСНМ			
♦ CASH																			
 CHARGE EXEMPT 										/									
	AU	THORIZE	D AGE	EXEMPT AUTHORIZED AGENT SIGNATURE MUST CARRY IN TRANSPORT VEHICLE															