MADERA COUNTY SINGLE TRIP TRANSPORTATION PERMIT APPLICATION					FROM: TO:				DATE OF APPLICATION:				
IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSIONS IS HEREBY GRANTED TO:					MOVING AUTHORIZED:  SATURDAY				REASON FOR WEEKEND OR DARKNESS				
TRANSPORTER													
ADDRESS					SUNDAY								
					DARKNESS (CVC 280)								
CITY/STATE/ZIP					Frittin (200)								
OFFICE PHONE NUMBER					FAX NUMBER								
									☐ PERMIT CONDITIONS				
AUTHORIZATION IS GRANTED FOR THE FOLLOWING: HAUL					TOW DRIVE				☐ PILOT CAR CONDITIONS				
										NDITIONS			
								MOBILE H					
DESCRIPTION OF HAULING EQUIPMENT AND VEHICLE LICENSE NO:								CONDITIC		LenE			
									□				
VEHICLE WIDTH: KING PIN TO LAST A							COI	MB. VEH	LENG	TH:			
AXLE NUMBER	1	2	3	4	5	6	7		8	9	10		
NUMBER TIRES PER AXLE													
DISTANCE BETWEEN AXLES													
WIDTH OF AXLES AT TIRE SIDEWALL									-				
MAXIMUM ALLOWABLE WEIGHT													
LOADED DIMENSIONS GREA LOADED HEIGHT: LC	ADED WI		N BELOW OR V			LL LENGTH		LOADEI					
ORIGIN:					DESTINATION:								
AUTHORIZED CO	UNTY RO	DADS – CIT	Y AND/OR	 STATE HI	GHWAY	PERMIT	S MAY	BE REQ	UIREI	)			
Route:													
Pilot Car:													
CASH, CHECK, CHARGE OR EXEMPT INFORMATION: MAILED				: FEE: \$16.00			00	NUMBER OF TRIPS					
APPLICANT SIGNATURE:							DATE:						
FOR INQUIRIES REGARDING THIS APPLICATION CALL MADERA COUNTY PUBLIC WORKS DEPARTMENT AT (559) 675-7811 FOR THE PROCESSING OF THIS APPLICATION, PLEASE FAX TO (559) 675-7631													