


# TRANSPORTATION PERMIT

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

TRANSPORTER ADDRESS CITY/STATE PHONE _____ HCD NO. _____		<b>PERMIT VALID BETWEEN</b> EFFECTIVE DATE _____ EXPIRATION DATE _____ MOVING AUTHORIZED YES NO SATURDAY <input type="checkbox"/> <input type="checkbox"/> SUNDAY <input type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW LOAD OR EQUIPMENT AND MODEL NO. _____ TYPE VEHICLE _____ KING PIN TO LAST AXLE _____ COMB VEHICLE LENGTH _____		DEPARTMENT OF TRANSPORTATION TRANSPORTATION PERMIT _____ AUTHORIZED SIGNATURE _____ DATE _____ PERMIT NUMBER _____	
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED			
MAX HEIGHT	MAX WIDTH	MAX OVERALL LENGTH	MAX OVERHANG
AXLE NUMBER	1 2 3 4 5 6 7 8 9		
NUMBER TIRES			
AXLE SPACING			
AXLE WIDTH			
WEIGHT			
ORIGIN		DESTINATION	TRIPS
AUTHORIZED CITY STREETS _____ * - OTHER AGENCY PERMIT(S) REQUIRED			
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED			ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
PERMITTEE IS RESTRICTED FROM USE OF CITY STREETS DURING THE HOURS OF 7 A.M. – 9 A.M. AND 4 P.M. – 6 P.M., MONDAY THROUGH FRIDAY.			
PLEASE OBTAIN A LIGHT RAIL CLEARANCE BY CALLING THE VTA OFFICE AT (408) 546-7616.			
<input type="checkbox"/> CASH <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHECK <input type="checkbox"/> EXEMPT FEE <input type="checkbox"/> \$16.00 Single <input type="checkbox"/> \$90.00 Annual		I CERTIFY THAT ALL CITY OF SAN JOSE GENERAL REGULATIONS AND CONDITIONS FOR EXTRA LEGAL LOADS HAVE BEEN MET _____ / _____ / _____ PERMIT AUTHORIZED AGENT (SIGNATURE) DATE	