



CITY OF FULLERTON
PUBLIC WORKS DEPARTMENT - ENGINEERING DIVISION
TRANSPORTATION PERMIT - SINGLE TRIP

Permit No. _____

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

Name		PERMIT VALID:		Payment Validation											
Address															
City/State/Zip		From:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td align="center" colspan="2">Moving Authorized:</td> </tr> <tr> <td align="center">Yes</td> <td align="center">No</td> </tr> <tr> <td>Saturday</td> <td><input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>Sunday</td> <td><input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>Darkness</td> <td><input type="checkbox"/> <input type="checkbox"/></td> </tr> </table>		Moving Authorized:		Yes	No	Saturday	<input type="checkbox"/> <input type="checkbox"/>	Sunday	<input type="checkbox"/> <input type="checkbox"/>	Darkness	<input type="checkbox"/> <input type="checkbox"/>
Moving Authorized:															
Yes	No														
Saturday	<input type="checkbox"/> <input type="checkbox"/>														
Sunday	<input type="checkbox"/> <input type="checkbox"/>														
Darkness	<input type="checkbox"/> <input type="checkbox"/>														
Office Phone Number Fax Number		At: :													
(Show a description of the load or equipment and Model No.- Include dimension's of load) <i>Authorization is granted for the following:</i> Haul Drive Tow		Thru:													
Description of Load or Equipment and Model No.:		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> (Check Box) All dimensions and weights have been reviewed by the applicant and are accurate.											
Dimensions of Load:															
Description of Hauling Equipment:															
License No. or Serial No.:															
			Vehicle Width:		Kingpin to Last Axle:										
					Comb. Vehicle Length:										
AXLE NUMBER	1	2	3	4	5	6	7	8	9						
Number Tires Per Axle															
Distance Between Axles															
Width of Axles at Tire Sidewall															
Maximum Allowable Weight															
LOADED DIMENSIONS GREATER THAN THOSE SHOWN BELOW OR WEIGHTS EXCEEDING THOSE SHOWN ABOVE ARE NOT AUTHORIZED															
Loaded Height:	Loaded Width:	Loaded Overall Length:			Loaded Overhang:		Weight Class:								
ORIGIN: (FULLERTON)				DESTINATION: (FULLERTON)				TRIPS:							
								Single							
Authorized Roads/Streets/Highways - Other Agency Permits may be required															
<p>*THIS PAPER COPY OF PERMIT WITH CONDITIONS SHALL BE IN THE DRIVER'S POSSESSION DURING APPROVED PERMITTED TRIP(S).</p> <p>TRUCK CRANE OR CRANE MUST BE PLACED ON PRIVATE PROPERTY UNLESS ENCROACHMENT PERMIT IS ISSUED.</p> <p>CRANE COMPANIES SETTING UP WEST OF HARBOR BLVD: Crane Contractor "must" Notify City of Fullerton Airport's FAA Control Tower at (714) 525-1623 and Brendan O'Reilly (Airport Manager) at (714) 738-6323 a minimum of 24 hours prior to commencing work.</p>															
CASH <input type="checkbox"/> Account No. 10325-4284	<input type="checkbox"/> One (1) Pilot Car Required for Widths Greater than 12' and/or length 100' or greater.														
CHECK <input type="checkbox"/> Tran Code: 2050	<input type="checkbox"/> Two (2) Pilot Cars Required for Widths 14' or Greater and/or Length 120' or greater.														
CHARGE <input type="checkbox"/> Fee:	<input type="checkbox"/> None														
EXEMPT <input type="checkbox"/> \$16.00															
THIS PERMIT IS VALID ONLY FOR MOVEMENT ON THE ASSIGNED CITY STREETS & IS NOT VALID ON STATE HIGHWAYS & OVERCROSSINGS.															
Applicant Signature:							Date:								
Authorized Agency Representative :							Date:								
FOR INQUIRES REGARDING THIS PERMIT CALL: Public Works - Engineering at (714) 738-6845															