## TRANSPORTATION PERMIT APPLICATION FOR SPECIAL USE OF COUNTY OR PUBLIC HIGHWAYS IN TULARE COUNTY

| IN COM   | MPLIANCE WITH YOU                                       | IR REQUEST AND SUBJE | CT TO ALL OF THE TE<br>PERMISSION IS HE | RMS, CONDITIONS<br>REBY GRANTED T | S AND RESTRICTIONS<br>O <sup>.</sup> | S WRITTEN BELOW ANI | THE ATTACHMENTS |  |  |  |  |
|--|---|----------------------|---|-----------------------------------|--------------------------------------|---------------------|-----------------|--|--|--|--|
| TRANSPORTER:  John Doe   | Trucking  |                      | T ENVIRONMENT TO THE                    | PHONE: (559) 111-2222             |                                      |                     | RELOCATION NO:  |  |  |  |  |
| ADDRESS: 123 Mead  | ow Ave  |                      |   | ITY:<br><b>Visalia</b>            |                                      | STATE <b>CA</b>     |                 |  |  |  |  |
| X HAUL   | LOAD OR EQUIPMENT AND MODEL NO.  John Deere Tractor     |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| DRIVE  | TYPE VEHICLE  3 axle tractor / 2 axle trailer           |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| Тош  | KING PIN TO LAST AXLE  COMB. VEHICLE LENGTH (FEET)  70' |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| MAX. HEIGHT  |   | MAX. WIDTH           |   | OVERALL LENGTH                    | 1                                    | MAX. OVERHANG       |                 |  |  |  |  |
| WEIGHT   | 14'   | 12'                  |   |                                   | 70'                                  |                     | Legal           |  |  |  |  |
| GRE  | EN  |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| COUNTY STARTI  | COUNTY STARTING LOCATION / ORIGIN DESTINATION           |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| Ave 00 & I   | Road 000  |                      |   | Ave 222 & Road 222                |                                      |                     |                 |  |  |  |  |
| AUTHORIZED I   | ROADS / STREET  | S / HIGHWAYS         | *OTHER AGENCY                           | PERMITS REQU                      | JIRED                                |                     |                 |  |  |  |  |
| Starting at Ave 00 & Road 000, east on Ave 00 to Road 222, north on Road 222 to Ave 222    |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
|  |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
|  |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
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|  |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
|  |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| PILOT CAR  | ☐ YES   | ☐ NONE REQUI         | RED                                     |                                   |                                      |                     |                 |  |  |  |  |
|  |   |                      |   |                                   |                                      |                     |                 |  |  |  |  |
| MOVING   | AUTHORIZED  | PERMIT VALID         | BETWEEN                                 |                                   | ТА                                   | TTACHMENTS          |                 |  |  |  |  |
|  | YES NO  | TIME:                | DATE:                                   | X Permit Co                       |                                      | _ □                 |                 |  |  |  |  |
|  | day 🗌 🗓   | AM PM                | 1/8/01                                  |                                   |                                      |                     |                 |  |  |  |  |
| Sunda<br>Sunrise to Sur  |   | AND SUNSET           | 1/10/01                                 |                                   |                                      |                     |                 |  |  |  |  |
|  | Royal   | <del>ا</del>         | 18/01                                   | <b>T</b>                          |                                      |                     |                 |  |  |  |  |
| SIGNATUR   | RE PERMITTEE'S  | AUTHORIZED AGE       | T DATE                                  |                                   |                                      |                     |                 |  |  |  |  |

## TRANSPORTATION PERMIT

## APPLICATION FOR SPECIAL USE OF COUNTY OR PUBLIC HIGHWAYS IN TULARE COUNTY

| IN CON                                 | MPLIANCE WITH YOUR    | R REQUEST AND SUBJECT | TTO ALL OF THE TER | MS, CONDITIONS AND RES      | TRICTIONS WRITTEN BELOW AN            | D THE ATTACHMENTS, |  |  |
|--|-----------------------|-----------------------|--------------------|-----------------------------|---------------------------------------|--------------------|--|--|
|  |                       |                       | PERMISSION IS      | HEREBY GRANTED TO:          |                                       |                    |  |  |
| TRANSPORTER:                           |                       |                       |                    | PHONE                       | :                                     | RELOCATION NO:     |  |  |
| ADDRESS:                               |                       |                       | С                  | ITY:                        | STATE                                 | ZIP                |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
| HAUL                                   | LOAD OR EQUIPME       | NT AND MODEL          |                    |                             |                                       |                    |  |  |
| DRIVE                                  | TYPE VEHICLE          |                       |                    |                             |                                       |                    |  |  |
| TOW                                    | KING PIN TO LAST AXLE |                       |                    | COMB. VEHICLE LENGTH (FEET) |                                       |                    |  |  |
|  | LOADED DIMEN          | PIONE DIFFERENT TH    | IAN OR WEIGHTS     | EVEEDING THOSE S            | HOWN BELOW ARE NOT                    | VIITUODIZED        |  |  |
| MAX. HEIGHT                            | LOADED DIMEN.         | MAX. WIDTH            | MAX.               | OVERALL LENGTH              | HOWN BELOW ARE NOT A<br>MAX. OVERHANG | RUTHORIZED         |  |  |
| WEIGHT                                 |                       |                       |                    |                             |                                       |                    |  |  |
|  | NG LOCATION / ORIG    | IN                    |                    | DESTINATION                 |                                       |                    |  |  |
| 000W1 31/W1                            | NO EGO/MIGIN / GINIC  | 111 V                 |                    | BESTINATION                 |                                       |                    |  |  |
| AUTHORIZED                             | ROADS / STREET:       | S/HIGHWAYS *          | OTHER AGENCY       | PERMITS REQUIRED            |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
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|  |                       |                       |                    |                             |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
| PILOT CAR                              | ☐ YES                 | ☐ NONE REQUIR         | FD.                |                             |                                       |                    |  |  |
| 1 120 1 07 11 1                        |                       |                       |                    |                             |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
| MOVING AUTHORIZED PERMIT VALID BETWEEN |                       |                       | BETWEEN            |                             | ATTACHMENTS                           |                    |  |  |
|  | YES NO                | <u>TIME:</u>          | <u>DATE:</u>       | Permit Conditions           |                                       |                    |  |  |
| Satur                                  | day 🗌 🗎               |                       |                    |                             |                                       |                    |  |  |
| Sund                                   | ay 🗌 🖺                | AIVI FIVI             |                    |                             |                                       |                    |  |  |
| Sunrise to Sur                         | nset 🗌 🗎              | AND SUNSET            |                    |                             |                                       |                    |  |  |
|  |                       |                       |                    |                             |                                       |                    |  |  |
| SIGNATI I                              | RE PERMITTEE'S        | AUTHORIZED AGEN       | T DATE             |                             |                                       |                    |  |  |