

**County of Riverside Transportation Department
Transportation Permit Application**



Permit Number

TRANSPORTER:

Name _____
Address _____
City _____
State _____ Zip _____
Phone (_____) _____ - _____

Incompliance with your request and subject to all of the terms, conditions and restrictions written below and the attachments, permission is hereby granted to:

HAUL
DRIVE
TOW

PERMIT VALID:

Sunrise ____/____/____
To
Sunset ____/____/____

MOVING AUTHORIZED:

Saturday until noon Yes No
Sunday Yes No
Sunset to Sunrise Yes No

LOAD OR EQUIPMENT AND MODEL NUMBER: _____

TYPE OF VEHICLE _____
KING PIN TO LAST AXLE _____ COMB. VEHICLE LENGTH _____
(LOADED DIMENSIONS DIFFERENT THAN OR WEIGHT EXCEEDING THOSE SHOWN ARE NOT AUTHORIZED.)
MAX. HEIGHT _____ MAX. WIDTH _____
MAX. OVERALL LENGTH _____ MAX. OVERHANG _____

AXEL #	1	2	3	4	5	6	7	8	9
NUMBER OF TIRES									
AXLE SPACING									
AXLE WIDTH									
AXLE WEIGHT									

Origin: _____ Destination: _____ Trips: _____

ROUTE: _____

PILOT CAR YES NO

CASH
 CREDIT CARD
 EXEMPT
 BILL ACCOUNT
Fee Amount \$ _____

PERMITTEE (AUTHORIZED AGENT)

Return Fax (_____) _____ - _____

775588 El Duna Court- Suite H – Palm Desert, California 92211
Phone (760) 863-8267- Fax (760) 863-7040