



**CITY OF MARTINEZ  
TRANSPORTATION PERMIT**

In compliance with your request and subject to all the terms, conditions and restrictions written below and in the accompaniments, permission is hereby granted to:

<b>PERMIT VALID</b>  <b>FROM:</b>  <b>TO:</b>		<b>PERMIT NUMBER</b>	
		This Permit is not valid without the following accompaniments:	
		<b>9 PERMIT CONDITIONS</b>	
<b>NAME:</b>		<b>MOVEMENT AUTHORIZED</b>	
<b>ADDRESS:</b>		<b>SATURDAY:</b>	
<b>CITY/STATE/ZIP:</b>		<b>SUNDAY:</b>	
<b>OFFICE PHONE # (including Area Code)</b>		<b>DARKNESS: (CVC280)</b>	
<b>OFFICE FAX # (including Area Code)</b>		<input type="checkbox"/> Pilot Car Special Conditions <input type="checkbox"/> Inspection Report <input type="checkbox"/> SC MH <input type="checkbox"/> SC 3AM	
<b>DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.</b> <input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW		<input type="checkbox"/> Curfew Maps (LA SAC SD SF) <input type="checkbox"/>	
<b>DIMENSIONS OF LOAD:</b>		<input type="checkbox"/>	
<b>DESCRIPTION OF HAULING EQUIPMENT:</b>		<input type="checkbox"/>	
<b>VEHICLE WIDTH:</b>		<b>SEMI-TRAILER LENGTH</b>	
<b>KINGPIN TO LEFT AXLE:</b>		<b>COMB. VEHICLE LENGTH:</b>	
<b>AXLE NUMBER</b>	1	2	3
<b>NUMBER OF TIRES PER AXLE</b>			
<b>DISTANCE BETWEEN AXLES</b>			
<b>WIDTH OF AXLES AT TIRE SIDEWALL</b>			
<b>MAXIMUM ALLOWABLE WEIGHT</b>			
<b>LOADED HEIGHT:</b>	<b>LOADED WIDTH</b>	<b>LOADED OVERALL LENGTH</b>	<b>LOADED OVERHANG</b>
<b>ORIGIN (INCLUDE CITY/TOWN AND ON RAMP/CROSS STREET)</b>		<b>DESTINATION (INCLUDE CITY/TOWN AND EXIT RAMP/CROSS STREET)</b>	
<b>AUTHORIZED STATE HIGHWAYS - CITY AND/OR COUNTY PERMITS MAY BE REQUIRED WHENEVER THE * IS SHOWN IN THE STATE ROUTE</b>		<b>CERTIFICATE OF INSURANCE COMPANY AND NUMBER</b>	
<b>PILOT CAR</b> <input type="checkbox"/> YES <input type="checkbox"/> NO			
<b>REQUESTED ROUTE:</b>			
<b>CASH, CHARGE OR EXEMPT INFO:</b>		<b>APPLICANT SIGNATURE</b>	
<b>FEE: \$</b>	<b>NO. OF TRIPS</b>		