

# CITY OF REDLANDS

## WIDELoad/OVERSIZE PERMIT

### ANNUAL PERMIT

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

TRANSPORTER		Permit valid _____ Sunrise _____ Sunset	Authorized Signature  _____
ADDRESS			
CITY/STATE		Authorized Date: _____	Date _____
PHONE NO.	FAX NO.		

_____ HAUL	Load or equipment and model no.  _____	Insurance Co.  _____
_____ DRIVE		
_____ TOW		
Type of Vehicle		Exp. Date _____

King Pin To Last Axle _____	Comb. Vehicle Length _____	Sending Station _____	Receiving Station _____
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**LOADED DIMENSIONS DIFFERENT THAN OR WEIGHT EXCEEDING THOSE SHOWN 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 Roads/Streets/Highways _____			

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Other Agency Permits Required ____ Yes ____ No	RETURN	PILOT CAR
Permit Conditions: PURPLE WEIGHT LOADS ARE NOT ALLOWED ON THE MISSION ZANJA BRIDGE LOCATED ON MT. VIEW AVENUE, NORTH OF I-10 FREEWAY.  SEE ATTACHED CONDITIONS.	Unladen _____	_____ Yes
	Laden _____	_____ No
PERMITTEES AUTHORIZED AGENT ( Signature) _____	DISTRIBUTION _____ MU&ED Treasurer _____	
Date: _____		