CITY OF CUPERTINO

City of Cupertino

Permit # _____

Receipt # _____

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

ADDRESS

CITY/STATE/ZIP

OFFICE PHONE NUMBER | HCD. NO.

PERMIT VALID BETWEEN AM _____ PM _____

AND SUNSET _____

MOVING AUTHORIZED:

	YES	NO
SATURDAY:	☐	☐
SUNDAY:	☐	☐
SUNSET TO SUNRISE	☐	☐

AUTHORIZED AGENCY REPRSENTATIVE

☐ Haul: LOAD OR EQUIPMENT AND MODEL NO.

☐ Drive:

☐ Tow:

TYPE VEHICLE

TELECOPIED PERMITS NOT VALID WITHOUT SEAL

OK TO FAX

KINGPIN TO LAST AXLE: | COMB. VEHICLE LENGTH: | SENDING STATION | RECIEVING STATION

LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW 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 CITY STREETS - STATE AND/OR COUNTY PERMITS ARE REQUIRED WHEREVER THE * IS SHOWN IN THE STATE ROUTE.

PILOT CAR ☐ Yes ☐ NONE REQUIRED

ATTACHMENTS:

☐ CASH

☐ CHARGE

☐ EXEMP

FEE $ _____

AUTHORIZED AGENT SIGNATURE | DATE

File:74,013