City of Cupertino

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

Permit # _____

Receipt # _____

NAME	PERMIT VALID BETWEEN: _____ AM _____ PM AND SUNSET _____	
ADDRESS	MOVING AUTHORIZED: YES NO	
CITY/STATE/ZIP	SATURDAY: ☐ ☐	
OFFICE PHONE NUMBER / OFFICE FAX NUMBER	SUNDAY: ☐ ☐	_____ AUTHORIZED AGENCY REPRESENTATIVE
	SUNSET TO SUNRISE ☐ ☐	

☐ HAUL: ☐ DRIVE: ☐ TOW:	LOAD OR EQUIPMENT AND MODEL NO.	TELECOPIED PERMITS NOT VALID WITHOUT SEAL **OK TO FAX**
TYPE VEHICLE		
KINGPIN TO LAST AXLE:	COMB. VEHICLE LENGTH	SENDING STATION / RECEIVING 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:

☒ Clearance Map

☐ _____

☐ _____

☐ CASH FEE
☐ CHARGE
☐ EXEMPT $ _____

_____ AUTHORIZED AGENT SIGNATURE

_____ DATE

File: 74,013