



ANNUAL TRANSPORTATION PERMIT

SUBJECT TO ALL THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW, IN THE ACCOMPANIMENTS, AND PER THE CALIFORNIA VEHICLE CODE, PERMISSION IS HEREBY GRANTED TO:

PERMIT VALID: FROM: _____ TO: _____ MOVEMENT AUTHORIZED: SATURDAY: <input type="checkbox"/> Yes SUNDAY: <input type="checkbox"/> Yes DARKNESS: (CVC280): <input type="checkbox"/> Yes	PERMIT NUMBER _____ This permit is not valid without the following attached (copies ok) <input checked="" type="checkbox"/> PILOT CAR REQUIREMENTS <input checked="" type="checkbox"/> PROVISIONS & CONDITIONS <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
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NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

OFFICE PHONE AND FAX NUMBERS (Including Area Code):
P - _____ **F -** _____

OFFICE EMAIL ADDRESS: _____

DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.: _____ HAUL DRIVE TOW

EXTRA LEGAL LOADS AS DEFINED IN SECTION 320.5 OF THE CALIFORNIA VEHICLE CODE

DIMENSIONS OF LOAD: _____

DESCRIPTION OF HAULING EQUIPMENT: _____

MAXIMUM VEHICLE WIDTH:	MAXIMUM SEMI-TRAILER LENGTH:	MAXIMUM KINGPIN TO LAST AXLE:	COMB. VEHICLE LENGTH:
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AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER OF TIRES PER AXLE									
DISTANCE BETWEEN AXLES									
WIDTH OF AXLES AT TIRE SIDEWALL									
MAXIMUM ALLOWABLE WEIGHT									

MAXIMUM ALLOWABLE WEIGHT: Purple weight as per Caltrans permit

NOT TO EXCEED DIMENSIONS SHOWN BELOW OR AXLE WEIGHTS SHOWN ABOVE

LOADED HEIGHT:	LOADED WIDTH:	LOADED OVERALL LENGTH:	LOADED OVERHANG:	WEIGHT CLASS:
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ORIGIN: _____ DESTINATION: _____

AUTHORIZED CITY ROUTES - STATE AND/OR COUNTY PERMITS MAY BE REQUIRED	PERMIT VALID FOR POSTED TRUCK ROUTES ONLY with local access for pickup/delivery according to Section 35703 of the CVC
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- ADDITIONAL SUBMITTALS REQUIRED:**
1. Check in the fee amount of \$90.00 made payable to the City of Goleta.
 2. Insurance per Item 9 of the Provisions and Conditions.

PILOT CAR YES NO ***PILOT CAR REQUIRED ON LOADS EXCEEDING 12' WIDE

Pursuant to California Vehicle Code, Section 35780, this permit does NOT exempt the permittee from meeting the requirements set forth by the California Department of Transportation to operate extra-legal loads within the state right-of-way.

CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION	APPLICANT SIGNATURE	DATE										
<table border="1"> <tr> <td>CREDIT CARD EXP. DATE</td> <td>FEE</td> <td>NUMBER OF TRIPS</td> <td>AUTHORIZED CITY AGENT</td> <td>DATE</td> </tr> <tr> <td>N/A</td> <td>\$90.00</td> <td>Annual</td> <td></td> <td></td> </tr> </table>	CREDIT CARD EXP. DATE	FEE	NUMBER OF TRIPS	AUTHORIZED CITY AGENT	DATE	N/A	\$90.00	Annual				
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REQUESTED ROUTE: This permit authorizes travel within City of Goleta only. Permits from other Jurisdictions required outside of Goleta's jurisdiction.

APPLICANT CONTACT PERSON (PRINT) _____



**TRANSPORTATION PERMIT
SUPPLEMENTAL ACCOMPANIMENT
VEHICLE LIST**

PERMIT VALID:

PERMIT NUMBER:

FROM:

TO:

NAME:

OFFICE PHONE NUMBER *(Including Area Code)*

ADDRESS:

OFFICE FAX NUMBER *(Including Area Code)*

CITY/STATE/ZIP

OFFICE EMAIL ADDRESS

Copy additional sheets as necessary and submit with your application.

VEHICLE DESCRIPTION:

YEAR	MAKE			LICENSE NO.			VIN		
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER OF TIRES PER AXLE									
DISTANCE BETWEEN AXLES									
WIDTH OF AXLES AT TIRE SIDEWALL									
MAXIMUM ALLOWABLE WEIGHT									

NOT TO EXCEED AXLE WEIGHTS SHOWN ABOVE

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