APPLICATION FOR MOVING PERMIT

- MOBILE HOME
- EQUIPMENT
- BUILDING

COUNTY OF SAN DIEGO
DEPARTMENT OF PUBLIC WORKS
5201 RUFFIN ROAD, SUITE D (MS-O336)
SAN DIEGO, CA 92123-1666
PHONE (858) 694-3275 FAX (858) 279-7020

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

TRANSPORTER

ADDRESS

CITY/STATE

PHONE | HCD. NO.

PERMIT VALID BETWEEN

_____ AM ____/_____/____

_____ PM ____/_____/____

MOVING AUTHORIZED

	YES	NO
SATURDAY	❒	❒
SUNDAY	❒	❒
SUNSET TO SUNRISE	❒	❒

AUTHORIZED AGENCY REPRESENTATIVE

❒ HAUL
❒ DRIVE
❒ TOW

LOAD OR EQUIPMENT AND MODEL NO.

TYPE VEHICLE

KING PIN TO LAST AXLE | COMB. VEHICLE LENGTH

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 ROADS/STREETS/HIGHWAYS ★ = OTHER AGENCY PERMIT/S REQUIRED

1. 2. 3.
4. 5. 6.
7. 8. 9.
10. 11. 12.

PILOT CAR ❒ YES ❒ NONE REQUIRED

ATTACHMENTS
❒ PERMIT CONDITIONS
❒ _____
❒ _____
❒ _____
❒ _____
❒ _____
❒ _____
❒ _____
❒ _____
❒ _____

❒ CASH
❒ CHARGE FEE
❒ EXEMPT $_____

"I declare under penalty of perjury under the laws of the State of California that the statements made herein are true and correct."

_____ ____/____/____
PERMITTEES AUTHORIZED AGENT (SIGNATURE) DATE

Printed on Recycled Paper