



# TRANSPORTATION PERMIT

CITY OF RIPON  
 Engineering Department  
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Visit us online: [www.cityofripon.org](http://www.cityofripon.org)

PERMIT NO:

CHECK PERMIT TYPE:

- ANNUAL (\$90)  
 SINGLE USE (\$16)

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

<b>PERMIT VALID</b>		
FROM: _____		
TO: _____		
<b>MOVEMENT AUTHORIZED</b>		
	<b>YES</b>	<b>NO</b>
SATURDAY	<input type="checkbox"/>	<input type="checkbox"/>
SUNDAY	<input type="checkbox"/>	<input type="checkbox"/>
SUNSET TO SUNRISE	<input type="checkbox"/>	<input type="checkbox"/>
<div style="border: 1px solid black; width: 100%; height: 20px; background-color: #cccccc; margin-bottom: 5px;"></div> <b>AUTHORIZED CITY AGENT</b>  <div style="border: 1px solid black; width: 100%; height: 20px; background-color: #cccccc; margin-bottom: 5px;"></div> <b>DATE</b>		

<b>TRANSPORTER NAME</b>			
<b>ADDRESS</b>			
<b>CITY/STATE/ZIP</b>			
<b>PHONE</b>		<b>FAX</b>	
<b>EMAIL</b>			
<b>DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.</b>			
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW			
<b>PILOT CAR</b> <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED			
<b>KING PIN TO LAST AXLE</b>		<b>COMB. VEHICLE LENGTH</b>	

<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>									
<b>MAX HEIGHT</b>	<b>MAX WIDTH</b>		<b>MAX OVERALL LENGTH</b>			<b>MAX OVERHANG</b>			
<b>AXLE NUMBER</b>	1	2	3	4	5	6	7	8	9
<b>NUMBER TIRES</b>									
<b>AXLE SPACING</b>									
<b>AXLE WIDTH</b>									
<b>WEIGHT</b>									
<b>ORIGIN:</b>	AS AUTHORIZED		<b>DESTINATION:</b>	AS AUTHORIZED			<b>TRIPS:</b>		

AUTHORIZED STREETS/ROADS AS SHOWN ON ATTACHED MAP. PERMIT VOID UPON CANCELLATION OF LIABILITY INSURANCE. PERMIT NOT VALID UNTIL ORIGINAL IS SIGNED AND RETURNED.

ROUTE:

OTHER AGENCY PERMITS REQUIRED

<b>PERMIT COMPANY NAME (IF APPLICABLE)</b>	<b>APPLICANT SIGNATURE</b>	<b>DATE</b>

<b>TOTAL PERMIT FEE:</b>	\$		<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> MAP - TRUCK ROUTE <input type="checkbox"/>
<b>DATE PAID:</b>		<input type="checkbox"/> CASH <input type="checkbox"/> CHECK NO.:	
<b>INSURANCE:</b> <input type="checkbox"/> ATTACHED <input type="checkbox"/> ON FILE			

**FOR QUESTIONS REGARDING TRANSPORTATION PERMITS,  
 PLEASE CONTACT THE ENGINEERING DEPARTMENT AT 209-599-2108**