

**TRANSPORTATION
 PERMIT**

Condition of Permit:
 IT IS THE APPLICANTS
 RESPONSIBILITY TO HAVE ON FILE
 WITH THE CITY A CURRENT COPY OF
 "CERTIFICATE OF INSURANCE. THIS
 PERMIT WILL BE NULL AND VOID /IF
 THIS CERTIFICATE IS NOT ON FILE
 AND/OR EXPIRED.

Please submit an application one business day before the start of trip. Permits will be processed within one business day after receipt of application. The cost of a single trip permit is \$16 and \$90 for annual permit. Single Trip and Annual Permits may be processed in person or by email to Tim Quach at tquach@placentia.org. In addition, proof of insurance and copy of payment check is required prior to issuing a permit. Annual permits will not be issued until payment of \$90 has been received by mail or in person. If you have any questions, please contact Tim Quach at (714) 993-8149.

TRANSPORTER	ADDRESS	PHONE
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SINGLE TRIP <input type="checkbox"/> ANNUAL TRIP* <input type="checkbox"/> *CONTACT ENGINEERING AT (714) - 993-8131 AND POLICE AT (714) 993- 8164, 24 HOURS PRIOR TO EACH TRIP.	PERMIT VALID BETWEEN _____ A.M. / P.M ____/____/____ _____ AND SUNSET ____/____/____	MOVING AUTHORIZED Yes No SATURDAY <input type="checkbox"/> <input type="checkbox"/> SUNDAY <input type="checkbox"/> <input type="checkbox"/> SUNSET TO RISE <input type="checkbox"/> <input type="checkbox"/>
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HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW <input type="checkbox"/>	LOAD OR EQUIPMENT AND MODEL NO.
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TYPE OF VEHICLE	KING PIN TO LAST AXLE	COMB. VEHICLE LENGTH
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SENDING STATION	RECEIVING STATION
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LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE BELOW ARE NOT AUTHORIZED

Max Width	Max Width			Max Overall Length:			Max Overhang		
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER OF TIRES									
AXLE SPACING									
AXLE WIDTH									

WEIGHT

ORIGIN	DESTINATION	TRIPS
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PILOT CAR REQUIRED	PILOT NOT REQUIRED
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AUTHORIZED ROADS STREETS/HIGHWAYS *- OTHER AGENCY PERMITS REQUIRED

I UNDERSTAND AND AGREE TO THE CONDITIONS AND REQUIREMENTS OF THIS APPLICATION FOR PERMIT.	_____ PERMITTEES AUTHORIZED AGENT SIGNATURE	_____ DATE
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ATTACHMENTS	DISTRIBUTION	CASH	CHARGE	EXEMPT	FEES
<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	WHITE – ENGINEERING GREEN – PERMITTEE YELLOW – INSPECTOR PINK – MAINTENANCE GOLD – FINANCE				
	PERMIT NO.				