STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

ANNUAL PERMIT APPLICATION

TR-0031 (REV 4/2014)

Please Print Legil	bly Or T	уре											
NAME											CUSTOMER#		
ADDRESS													
CITY		STATE					ZIP CODE						
PHONE# FAX#					E-MAIL ADDRESS**								
**E-mail must be a	vailable	24hrs			•			_	-	informa	tion updates	•	
VEHICLE WIDTH	EMI-TRAILER LENGTH				KINGPIN TO LAST AXLE				COMB. VEHICLE LENGTH				
AXLE NUMBER			1 2			4		5 6		7 8 9		9	
NUMBER OF TIRES PER AXLE		•			3	-							
DISTANCE BETWEEN AXLES	N			'			'						
WIDTH OF AXLES AT TIRE SIDEWALL													
MAXIMUM ALLOWAR WEIGHT	BLE			·									
LOADED HEIGHT LOADED			WIDTH LOADED O'' MAX			OVERALL LENGTH LEGAL		LOADED OVERHANG LEGAL			WEIGHT CLASS		
☐ TRUCKS W/ MORE THAN 20K LBS ON STEE						ERING AXLE VIN # / INSPECTION REPORT REQ. LEGAL							
TOWS/DRIVERS - INSPECTION REPORT REQ.										GREEN			
UNLADEN 7/9 AXLE - INSPECTION REPORT REQ.												PURPLE	
─ TOW TRUCKS - VIN # REQUIRED													
	_												
MOBILE HOME		EDT	DD ACCI	-						EVD D	ATE		
CREDIT CARD NO. / DEBTOR ACCT						EXP. DATE							
SIGNATURE					DATE								
OVERNIGHT SERVICE MUST HAVE A PHYSICAL ADDRESS NO P.O. BOX					NOT	ES:							
			ED EX										
UPS													
			OTHER										
					NO. C	F PER	MITS (90.00	EACH				

For Permits information, contact the Transportation Permits Office at (916) 322-1297.