

FLH BRIDGE OVERSIZED/OVERWEIGHT PERMIT LOAD REQUEST

APPLICATION DATE:

APPLICANTS NAME:

COMPANY NAME:

USDOT#:

PHONE NUMBER:

EMAIL ADDRESS:

DESCRIPTION OF LOAD:

DESCRIPTION OF ROUTE:

DATE OF MOVEMENT:

PERMIT VEHICLE CONFIGURATION

WIDTH:

HEIGHT:

LENGTH:

GROSS WEIGHT:

(COMPLETE VEHICLE CONFIGURATION SKETCH ON NEXT PAGE)

APPLICANTS SIGNATURE:

DATE:

(AGENCY USE ONLY)

REVIEWED BY:

DATE:

APPROVED

DENIED

PERMIT CONDITIONS:

VEHICLE TOP VIEW
(w/ dimensions)

VEHICLE SIDE VIEW
(w/ dimensions)

Axle Number										
Axle width (ft)										
Load (lbs) per axle										
No. of Tires per axle										

TOTAL
WEIGHT (lbs)

*Adjacent axles carrying the exact same load, dimensions and tires may be grouped in the axle table

A PERMIT SUBMITTED WITH INCOMPLETE, ILLEGIBLE, OR INCONSISTENT DATA WILL BE RETURNED FOR CORRECTION