

Permitting & Approvals **Application Form**

Steering Axle Overweight Permit Request Last Modified: Jan 18, 2021

Part 1, Application						
Name of Organization:				MVID:		
Contact Name: Phone Nu		Phone Nui	mber:			
Mailing Address:						
City:	Province:		Postal Code:			
Contact Email:						
Part 2, Configuration & Vehicle Information Please use checkboxes to indicate number of axles on the vehicle.						
Picker Overhang VEHICLE LENGTH		Picker Overhang: Hitch Offset: Drive Spread: Wheelbase: Vehicle Length: Track Width: Vehicle Width:				
Vehicle Type: (ex: Vac, Hydrovac)			Plan	etary Drives Yes No		

Steering Tire Size:	Drive Tire Size:
Steering Tare Weight:	Drive Tare Weight:

Unit Number:	Plate Number: (include jurisdiction)
Make:	Model:
Serial Number:	Registered GVW:



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I certify that the information shown on this page is accurate and correct.						
Owner:	rinted Name)	(Signature)	(Date)			
Payment Method:						
On Account	Credit Card Email: An email link will be s	ent to the email listed below f	or credit card payment.			