

Date: _____

Single Trip \$76.50

One vehicle for more than one trip (annual) \$255.00

1. General Information:

Applicant/Company: _____	Phone Number: _____
Contact Person: _____	Cell Number: _____
Mailing Address: _____	Fax Number: _____
	E-mail: _____

Permission will be granted to travel within the City of New Westminster as noted on the permit. Travel is restricted to designated truck routes until such time as it becomes necessary to leave the truck route to access the destination. This is to be done via the closest most direct route. Other deviations from truck routes must be approved by the City of New Westminster Engineering Services. The permit will not cover usage on Provincial Highways or weight restricted roads, bridges, or other structures.

EXPECTED DATE OF TRAVEL: From (YY/MM/DD): _____ To (YY/MM/DD): _____

DURING THE HOURS OF: From: _____ To: _____

2. Description of routes to be used:

FROM: _____ **TO:** _____

VIA: _____

3. Commodity to be Transported: _____

4. Provincial Permit Number: _____

5. Axle Loadings: _____

6. Description of vehicle	7. Sizes up to:	8. Weight up to:
Tractor MV License: _____	Width: _____	GVW Actual: _____
Make/Model: _____	Length: _____	Single Axle: _____
MV Registration#: _____	Height: _____	Tandem Axles: _____
Trailer License #: _____	Length of Rear Overhang: _____	Tridem Axles: _____
Jurisdiction: _____	Length of Front Overhang: _____	

- * Operator is responsible for all overhead and width clearances and to supply weights.
- * Operator is legally liable if the bridge formula is exceeded for any group of axles only for non-readily reducible loads.

Operator has driven the route to confirm that the route is acceptable and there will be no conflicts (Examples: overhead wires, traffic signals, street lights, traffic signs, roadside barriers, center medians, bridge or sidewalk railings, etc)

Signature: _____

9. Requirements: ALL SIGNS, FLAGS, LIGHTS or USE OF PILOT CARS as per PROVINCIAL COMMERCIAL TRANSPORT MANUAL

Beacons: <input type="checkbox"/>	Signs – Front: <input type="checkbox"/>	Lights/Floodlights: <input type="checkbox"/>
Pilot Cars: <input type="checkbox"/>	Signs – Rear: <input type="checkbox"/>	Flags: <input type="checkbox"/>

Signature of Applicant: _____

Engineering Approval Signature: _____ Date Approved: _____