State Permit:

									PERMIT VALID					PERMIT NUMBER					
WINDSOR													ANNUAL						
							FR	CM:											
ANNUAL TO ANCOOD ATION DEDMIT									•								ITHOUT TH	E	
ANNUAL TRANSPORTATION PERMIT IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE									MOVING AUTHORIZED:					FOLLOWING ACCOMPANIMENTS:					
TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND IN THE ACCOMPANIMENTS, PERMISSION IS HEREBY GRANTED TO:								1	MOTING ASTRONEED.						Pern	nit Co	nditions	3	
NAME	SA.	SATURDAY: <u>YES</u>					☐ Bridge Lo												
	SU	NDAY:			Pilot	Car	<u> Fable</u>												
ADDRESS	DA	RKNESS																	
CITY/STATE/ZIP																			
CITT/STATE/ZIP																			
OFFICE PHONE NUMBER (Including Area Code) Email Address: (REQUIRED to return permit)																			
DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.: HAUL DRIVE TOW																			
DESCRIPTION OF T	HE LOAL	JUK	EQUIPINI	EIN I F	AND MC	DEL N	O.: L	L HAU		DRIVE		TOW							
DIMENSIONS OF LOAD:													_						
DESCRIPTION OF H	IAULING	EQU	IIPMENT:																
VEHICLE SEMI-TRAILER WIDTH: LENGTH:										KINGPIN TO LAST AXLE:				COMB. VEHICLE LENGTH:					
AXLE NUMBER	1		2	: [3	1		4		LE:	(6	7			8	9	1	
NUMBER OF TIRES PER AXLE																			
DISTANCE BETWEEN AXLES		I					ı						<u>I</u>				1		
WIDTH OF AXLES AT TIRE SIDEWALL								<u> </u>						1		1			
MAXIMUM ALLOWABLE WEIIGHT							ı						I						
LOADED HEIGHT:	LOADED WIDTH: LOADED OVERALL LENGTH: LOADED OVERHAN												NG: WEIGHT CLASS:						
ORGIN (INCLUDE CITY/TOWN AND RAMP/CROSS STREET): DESTINATION (INCLUDE CITY/TOWN													AND RAMP/CROSS STREET):						
AUTHORIZED TOWN STREETS - STATE AND/OR COUNTY PERMITS ARE REQUIRED.																			
ROUTE: Moves authorized by this permit may travel on all Town streets and overcrossings paying particular																			
Attention to weight limitations on certain overcrossings, see copy of Town Bridge Load Map.																			
PILOT CAR: When pilot car is required, travel is prohibited on Saturday, Sunday and Holidays or between																			
Sunset and Sunrise.																			
LICENSE OF TRUCK AI	ND/OR TR	UCK	NUMBER (REQU	IRED):														
CASH,CHARGE, EXEMPT I	NFORMATION	ON						- /	APPLICANT SIGNATURE								DATE		
CHARGE TO:	\$	l -				ER OF TR		7	AUTHORIZED TOWN AGENT								DATE		
REQUESTED ROUTE:	, T																		
Disclaimer: The Town does Contact The appropriate util								FICE HOU	RS: Monda 7:00 A	y - Thurso M to 6:00		APPLICAN	NT CONT	ACT PE	RSON (P	RINT)			