

CITY OF HOLLISTER • Engineering Department



**TRANSPORTATION PERMIT**

**Send all Mail to:**  
 City of Hollister-Engineering Department  
 375 Fifth Street  
 Hollister, CA 95023

Phone: (831) 636-4340 Fax: (831) 634-4913  
 IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS,  
 CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS,  
 PERMISSION IS HERBY GRANTED TO:

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY/STATE/ZIP \_\_\_\_\_

OFFICE PHONE NUMBER (Include Area Code) \_\_\_\_\_ FAX NUMBER (Include Area Code) \_\_\_\_\_

(PROVIDE A DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO. - INCLUDE DIMENSIONS OF LOAD)  
 Authorization is granted for the following:  Haul  Drive  Tow

DESCRIPTION OF HAULING EQUIPMENT:

	VEHICLE WIDTH:			KINGPIN TO LAST AXLE:		COMB. VEHICLE LENGTH:			
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER TIRES PER AXLE									
DISTANCE BETWEEN AXLES									
WIDTH OF AXLES AT TIRE SIDEWALL									
MAXIMUM ALLOWABLE WEIGHT									

**LOADED DIMENSIONS GREATER THAN THOSE SHOWN BELOW OR WEIGHTS EXCEEDING THOSE SHOWN ABOVE ARE NOT AUTHORIZED**

LOADED HEIGHT: \_\_\_\_\_ LOADED WIDTH: \_\_\_\_\_ LOADED OVERALL LENGTH: \_\_\_\_\_ LOADED OVERHANG: \_\_\_\_\_ WEIGHT CLASS: \_\_\_\_\_

ORIGIN: \_\_\_\_\_ DESTINATION: \_\_\_\_\_

**AUTHORIZED STATE HIGHWAYS - CITY AND/OR COUNTY PERMITS ARE REQUIRED WHEREVER THE \* IS SHOWN IN THE STATE ROUTE.**

*The City of Hollister will allow copies of this permit. Use Hillcrest Road/Memorial Drive/Sunnyslope. No loads over 102" width will be allowed on McCray Street south of Hillcrest Road*

PILOT CAR Yes  No

*When required by Caltrans pilot car table.*

CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION \_\_\_\_\_ APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CREDIT CARD EX. DATE \_\_\_\_\_ FEE \$ \_\_\_\_\_ NUMBER OF TRIPS \_\_\_\_\_ AUTHORIZED CITY AGENT \_\_\_\_\_ DATE \_\_\_\_\_

REQUESTED ROUTE: (Include Address of Origin and Delivery Site) \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

For inquiries about this permit, please call The City of Hollister Engineering Department at (831) 636-4340

**PERMIT VALID**

FROM: \_\_\_\_\_

TO: \_\_\_\_\_

**MOVING AUTHORIZED:**

SATURDAY: \_\_\_\_\_

SUNDAY: \_\_\_\_\_

DARKNESS (CVC 280): \_\_\_\_\_

**PERMIT NUMBER**

THIS PERMIT IS NOT VALID WITHOUT THE FOLLOWING ATTACHMENTS:

Permit Conditions

Holiday Restrictions

Per Cal Trans Permit # \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_