



This permit, when endorsed below by the City Engineer or his/her designee, becomes your Transportation Permit. You are subject to all the terms, conditions and restrictions shown below. This permit is issued pursuant to Section 35780 of the California Vehicle Code and does not waive applicable vehicle registration requirements. This permit only allows the work to be done specifically mentioned here and no other, and that work must be completed within the time period given below.

Company Name: Contact:	Permit Classification:
Phone: Email:	Load-Equipment:
Address:	Type of Vehicle:

Permit Valid From: _____ at _____ Moving NOT Authorized:
 To: _____ at _____
 Pilot Car Required: _____

DIMENSIONS OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED

Axle	1	2	3	4	5	6	7	8	9
# of Tires									
Ax Spacing									
Axle Width									
Weight									
Max. Height:	Max. Width:		Max. Length:			Max. Overhang:			

Weight Classification:

Authorized Routes: (State or County permits are required wherever the ** is shown in the route)

Insurance on File: _____ Fee(s): _____

The City of San Luis Obispo Public Works Department

By: _____ Date: _____

Permit has been: Faxed Mailed Copies to: Police Dept. Fire Dept. Building Div.



The City of San Luis Obispo is committed to include the disabled in all of its services, programs and activities. Telecommunications Device for the Deaf (805) 781-7410.



For questions regarding the Transportation Permit process, please call (805) 781-7015.