Transportation Permits

Oversize Permit No. _____

City of Garden Grove
Building Services Division
Phone: (714) 741-5307

☐ **Individual Permit**
Please advise Police Department (714/741-5704) prior to move.
Fee: $15.00

☐ **Annual Permit**
Please advise Police Department (714/741-5704) prior to each move.
Fee: $90.00

Transportation Permit
California Department of Transportation

In compliance with your request and subject to all of the terms, conditions and restrictions written below and the attachments, permission is hereby granted to:

Name _____
Address _____
City/State _____
Phone _____
HCD No. _____

Permit Valid Between:
____ a.m. ____/____/____
p.m.
and sunset ____/____/____

Moving Authorized

	Yes	No
Saturday	☐	☐
Sunday	☐	☐
Sunset to Sunrise	☐	☐

Authorized State Representative

Telecopied Permits Not Valid Without Seal

Expiration Date for Annual Permits: _____

Expiration Date for Individual Permit: (10 day maximum span) _____

Remarks:

☐ Haul
☐ Drive
☐ Tow

Load or Equipment and Model No.

Type Vehicle

King Pin to Last Axle | Comb. Vehicle Length | Sending Station | Receiving Station

Loaded Dimensions Different Than or Weights Exceeding Those Shown Below are Not Authorized

Max Height: | Max Width: | Max Overall Length: | Max Overhang:

Axle Number	1	2	3	4	5	6	7	8	9
Number Tires									
Axle Spacing									
Axle Width									
Weight									

Origin | Destination | Trips

Authorized State Highways *County and/or City Permits Required

Pilot Car ☐ Yes ☐ None Required

Attachments
☒ Permit Conditions
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____

☐ Cash
☐ Charge
☐ Exempt
Fee: $ _____

I Certify That All County and/or City Transportation Permits Have Been Obtained If This Permit Is For Towing a Mobile Home.

Authorized Agent Signature _____ Date ____/____/____

Fees
Issue: $15.00
Fee: _____
Total: _____

Authorized by: _____ **Date:** _____

White: Applicant Yellow: Public Works Pink: Cashier

Disk: Com. Dev.-Transp. Permit (3/98)