



**CENTRAL PERMITS
Oilfield Certification Application**

OIL

(These permits may not be transferred to another owner)

MAILING ADDRESS		FEES		1 Year - 150.00	\$20.00 (Single Trip)	Start Permit	U.S.DOT #	
Central permits		Phone	785-368-6501		Customer			_____
Docking State Office Building		Fax	785-296-6558		Address			_____
915 SW Harrison Room 150		[REDACTED]			City		State _____ Zip _____	
Topeka, Kansas 66612					Phone		Fax _____	
Email _____								

PAYMENT OPTIONS					CREDIT CARD INFORMATION				
Method	Cash	Check	Escrow	Escrow #	Credit	VISA	Master Card	AMEX	Discover
	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POINT OR ORIGIN AND DESTINATION					CREDIT CARD NUMBER			EXPIRATION	
Point of Origin	_____				ROUTE (Single Trip- Outside the 100 mile radius requires a route)			_____	
	(City or Entry Point within Kansas)								
Destination	(100 mile radius from Point of Origin)				_____			_____	

VEHICLE INFORMATION								
VIN (Last 5 digits)		VEHICLE TYPE	UNIT NUMBER	YEAR	MAKE	LENGTH	WIDTH	HEIGHT
_____		OR	_____	_____	_____	_____	_____	_____
AXLE GROUP	YEAR or Single Trip	AXLE TYPE (S,D,J,T,B)	AXLES / GROUP	WEIGHT ON AXLE GROUP	INTERNAL SPACING	GROUP DISTANCE	AXLE WIDTH	NUMBER OF TIRES/AXLE
1	Yr <input type="checkbox"/> ST <input type="checkbox"/>	_____	_____	_____	_____	_____	_____	_____
2	Yr <input type="checkbox"/> ST <input type="checkbox"/>	_____	_____	_____	_____	_____	_____	_____
3	Yr <input type="checkbox"/> ST <input type="checkbox"/>	_____	_____	_____	_____	_____	_____	_____
4	Yr <input type="checkbox"/> ST <input type="checkbox"/>	_____	_____	_____	_____	_____	_____	_____