



**CENTRAL PERMITS  
STANDARD PERMIT APPLICATION**

**STANDARD  
(7 Days)**

**(The resulting permit may not be transferred to another owner or vehicle)**

<b>MAILING ADDRESS</b>	<b>FEE</b>	<b>\$20.00</b>	<b>START DATE:</b>	<b>U.S.DOT #</b>
Central Permits Docking State Office Building 915 SW Harrison Room 150 Topeka, Kansas 66612	Phone Fax	785-368-6501 785-296-6558	Customer Address City Phone	State Zip Fax
			Email	

**(Providing an email address will enhance communicating with our customers)**

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"/>	<input type="checkbox"/>
ORIGIN AND DESTINATION					CREDIT CARD NUMBER			EXPIRATION	
Origin									
Destination					ROUTE				
Article									

MAXIMUM DIMENSIONS <b>(Exceeding the width or height maximums = large structure application)</b>			MAXIMUM WEIGHT ON AXLE GROUPINGS <b>(Exceeding these maximums requires a bridge study)</b>				GVW	
Length 126' 0"	Width 16' 6"	Height 18' 00"	Single Non-Drive 22,000 lbs	Single Drive 24,000 lbs	Tandem 45,000 lbs	Tridem 60,000 lbs	Quad or More 65,000 lbs	150,000 LBS

VEHICLE INFORMATION											
VIN (Last 5 digits)	TYPE		UNIT #	YEAR	MAKE	STATE	LICENSE	RGVW	OVERALL LOADED DIMENSIONS		
	T <input type="checkbox"/>	TT <input type="checkbox"/>	SME <input type="checkbox"/>						LENGTH	WIDTH	HEIGHT
<p align="center"><b>(Fill out section below only if weight is involved)</b></p>											

AXLE GROUP	TYPE (S,D,J,T,B)	AXLES / GROUP	AXLE WT.	INTERNAL SPACING	GROUP DISTANCE	AXLE WIDTH	TIRES/AXLE	TOTAL AXLES	GVW
1									
2									
3									
4									
5									