

**A & W
Permits**

**SEATTLE DEPARTMENT OF TRANSPORTATION
Traffic Permits, 37th fl ~ 700 5th Ave, Suite 3768
PO Box 34996 ~Seattle, WA 98124-4996
Telephone: (206) 684-5086 ~ Fax: (206) 684-5085**

Application for Oversize/Over weight Vehicle Permit
Same Day Service Not Guaranteed if Received after 12:00 p.m. (noon)

1 day (\$18 ea*) _____ 30 days (\$60 ea*) _____ Annual Fee _____ (\$290 ea*)

*separate fee scale for vehicles that are both over-sized & over-weight

Company Name			Contact Name (please print)		
Street Address			Phone (with area code)		Fax (With Area Code)
City	State	Zip Code	Permit Start Date		Truck number (Annual Permits)
License Number	Power Unit # of Axles	Trailing Unit # of Axles	Gross Weight	Licensed Weight	
Width	Height	Overall Length	Front O/H	Rear O/H	
Load Description					

Origin	Destination
Purposed Route: _____ _____ _____ _____ _____	

Overweight Only: Give axle spacing measured from center of axle to center of axle in feet & inches and number of tires per axle.

Hours of Operation: 9:00 a.m. to 3:00 p.m. _____ or 7:00 p.m. to 6:00 a.m. _____

NO REFUNDS. OBSERVE ANY PEAK HOUR RESTRICTIONS

I understand that if I knowingly make a false statement or representation in this application, I may be punished by a civil fine or by revocation of this permit. By signing this application I agree to pay all fees involved and to abide by requirements set forth herein.

Date: _____ Signature: _____

Pager, Cell Phone, or email: _____