COLORADO DEPARTMENT OF TRANSPORTATION

TRANSPORTATION PERMIT APPLICATION

(For longer vehicle combinations)

Company name:

Company address (street, PO box, city, state, zip):

List below: exit number, highways utilized for ingress and egress including city streets, and exact terminal address applying for:

Hwy #	Exit #	Highways utilized	Terminal address

Type of commodity hauled:

The Applicant affirms that:

1. All equipment conforms to the statutory configurations and meets the rule requirements as to standards and performance.
2. All drivers shall be certified in accordance with the rule requirements prior to operating the combinations and the certification shall be on file at the applicant's address as it appears upon the application.
3. All permits have been secured from all local governmental entities for the purpose of ingress and egress to the permittee's terminal from the designated section of the interstate.
4. The 80,000 pounds weight limit and load distribution requirements are known and will be followed.
5. The insurance requirements contained in the rules, $100,000/$300,000 public liability and $100,000 property damage are insured with

   (company's name) _____

   for the policy period of _____ to _____
6. No restricted materials as set forth in the rules will be transported as cargo under Longer Vehicle Combination permit.
7. I have read and understand 42-4-405 C.R.S. concerning the Operations of Longer Vehicle Combinations and Rules and Regulations For Operation of Longer Vehicle Combinations on designated state highway segments, and will conform operations to the requirements contained therein.

I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OR FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Company representative signature	Date