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## City of Calimesa Public Works Department

### Oversize Load Permit

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS, CONDITIONS, REQUIREMENTS AND RESTRICTIONS OF THE CITY OF CALIMESA MUNICIPAL CODE CHAPTER 12 AND CALIFORNIA VEHICLE CODE DIVISION 15, AND ANY SPECIAL CONDITIONS WRITTEN BELOW, **PERMISSION IS HEREBY GRANTED** TO PERMITTEE LISTED TO PERFORM THE ACTIVITES DESCRIBED:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Phone Number: \_\_\_\_\_

(Include Area Code)

Office Fax Number: \_\_\_\_\_ Permit Haul Request Date: \_\_\_\_\_

(Include Area Code)

Description of the Load or Equipment and Model No.: \_\_\_\_\_

Dimensions of Load: \_\_\_\_\_

Description of Hauling Equipment: \_\_\_\_\_

Vehicle Width: \_\_\_\_\_ Kingpin to Last Axle: \_\_\_\_\_

Semi-Trailer Length: \_\_\_\_\_ Comb Vehicle Length: \_\_\_\_\_

Loaded Height: \_\_\_\_\_ Loaded Width: \_\_\_\_\_

Origin: \_\_\_\_\_ Destination: \_\_\_\_\_

Requested Route: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

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#### THIS SECTION TO BE COMPLETED BY DEPARTMENT OF PUBLIC WORKS

Special Conditions: \_\_\_\_\_

\_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_