

# BECKER COUNTY HIGHWAY DEPARTMENT

1771 North Tower Road, Detroit Lakes, MN 56501

Phone (218) 847-4463

## APPLICATION FOR TRANSPORTATION PERMIT

PART A: TOWING VEHICLE			PART B: TOWED / TRAILED EQUIPMENT		
CHECK TYPE: <input type="checkbox"/> TRUCK <input type="checkbox"/> TRUCK-TRACTOR <input type="checkbox"/> _____			CHECK TYPE: <input type="checkbox"/> TRAILER <input type="checkbox"/> TRAILED EQUIPMENT <input type="checkbox"/> _____		
MAKE/MODEL:	LICENSE #:	STATE	MAKE/MODEL:	LICENSE #:	STATE
REGISTERED WEIGHT:	EMPTY WEIGHT:		REGISTERED WEIGHT:	EMPTY WEIGHT:	

PART C: LOAD INFORMATION		
OBJECT OR MATERIAL:	SIZE/MODEL:	LOAD WEIGHT:
		TOTAL EMPTY WEIGHT:
		TOTAL WEIGHT:
		OVERALL DIMENSIONS:
		Height: _____ FT _____ INCHES Width: _____ FT _____ INCHES Length: _____ FT _____ INCHES

PART D: MOVEMENT INFORMATION	
MOVEMENT FROM:	MOVEMENT TO:
PLANNED ROUTE:	
MOVEMENT DATES:	MOVEMENT HOURS:

PART E: MOVER INFORMATION	
MOVER'S NAME:	OWNER OF LOAD: (IF DIFFERENT)
ADDRESS: (STREET, CITY, STATE, ZIP)	PHONE NUMBER:
APPLICANT'S SIGNATURE:	CONTACT PERSON EMAIL:

PART F: AUTHORIZATION ( TO BE COMPLETED BY BECKER COUNTY HIGHWAY DEPARTMENT)	
SPECIAL REQUIREMENTS:	PERMIT NUMBER: _____ (Void without "Affixed Permit Number")
	PERMIT FEES:
	STANDARD FEE: _____
	OVERAGE FEE: _____
	TOTAL PERMIT FEE: _____

AUTHORIZATION OF MOVEMENT IS HEREBY GRANTED subject to compliance with the provisions of the Minnesota Highway Traffic Regulation Act and under the terms, conditions, and restrictions above and on the reverse side of this permit and is subject to revocation upon noncompliance or alterations. Permit issued for the above described over legal dimensions and/or weights.

AUTHORIZED SIGNATURE:	DATED: _____ AT _____ AM / PM
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