# TRANSPORTATION PERMIT

CITY OF FOSTER CITY
PUBLIC WORKS DEPARTMENT – TRAFFIC ENGINEERING DIVISION
610 FOSTER CITY BLVD.
FOSTER CITY CALIFORNIA 94404
PHONE: (650) 286-3270 FAX: (650) 345-4626

| IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO: | PERMIT VALID BETWEEN | PERMIT NUMBER |
|---|---|---|
| NAME / BUSINESS LICENSE # | FROM ____ TO ____ | |
| ADDRESS | MOVING AUTHORIZED — YES / NO<br>SATURDAY ☐ ☐<br>SUNDAY ☐ ☐<br>HOLIDAY ☐ ☐<br>DARKNESS (CVC 280) ☐ ☐ | |
| CITY/STATE/ZIP | | |
| PHONE (INCLUDE AREA CODE) / FAX (INCLUDE AREA CODE) | | |

☐ HAUL ☐ DRIVE ☐ TOW

LOAD OR EQUIPMENT AND MODEL NO.

TYPE VEHICLE

| KING PIN TO LAST AXLE | COMBINED VEHICLE LENGTH |
|---|---|
| | |

LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED

| MAXIMUM HEIGHT LOADED | MAXIMUM WIDTH LOADED | MAXIMUM OVERALL LENGTH LOADED | MAXIMUM OVERHANG LOADED FRONT OR REAR |
|---|---|---|---|
| | | | |

PLEASE PROVIDE COMPLETE INFORMATION – DO NOT USE THE TERM "LEGAL" IN PLACE OF ACTUAL DIMENSIONS

| AXLE NUMBER | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|---|---|---|---|---|---|---|---|---|---|
| # TIRES PER AXLE | | | | | | | | | |
| DISTANCE BETWEEN AXLES | | | | | | | | | |
| AXLE WIDTH AT TIRE SIDEWALL | | | | | | | | | |
| WEIGHT PER AXLE | | | | | | | | | |

| ORIGIN | DESTINATION | # OF TRUCKS COVERED BY THIS PERMIT |
|---|---|---|
| | | |

OTHER AGENCY(S) PERMIT(S) REQUIRED: [FREEWAY TRAVEL INCLUDING ON/OFF RAMPS REQUIRES STATE TRANSPORTATION PERMITS]

AUTHORIZED ROUTE:

## Approved City Truck Routes ONLY.

Permittee shall maintain during the life of this permit, (1) comprehensive general liability insurance or commercial general liability insurance written on an occurrence basis providing for a combined single limit of $1 million, and (2) automotive liability insurance on a comprehensive form covering all owned, non-owned and hired automobiles providing for a combined single limit of $1 million. Prior and as a condition precedent to the issuance of this permit and exercising any rights under this permit, Permittee shall furnish certificates of insurance and endorsements, as required by City, evidencing general liability and automotive liability insurance coverage on forms acceptable to the City. Each policy of general liability and automotive liability shall provide that the City, its officials, officers, agents, employees and volunteers are declared to be additional insureds under the terms of the policy, but only with respect to the operations performed by Permittee under this permit. A policy endorsement to that effect shall be provided to the City along with the certificate of insurance, showing that the insurance in force will not be canceled, modified or allowed to lapse without thirty (30) days prior written notice to City, on Insurance Services Office, Inc. Form CG 20 10 11 85. All insurance maintained by Permittee shall be issued by companies admitted to conduct the pertinent line of insurance business in the State of California and having a rating of Grade A or better and Class VII or better by the latest edition of Best's Key Rating Guide.

14 FT. IS THE MAXIMUM VEHICLE HEIGHT ALLOWED4 FT. IS THE MAXIMUM ALLOWABLE HEIGHT – IF THE HEIGHT OF THE VEHICLE EXCEEDS 14 FT. APPLICANT IS RESPONSIBLE FOR ANY DAMAGE TO THE STREET NAME SIGNS WHICH HANG FROM THE SIGNAL MAST ARMS. TWO PILOT CARS ARE REQUIRED FOR ANY VEHICLE EXCEEDING 14 FT. IN HEIGHT

VEHICLES 80 FT. OR GREATER IN LENGTH AND/OR 10 FT. OR WIDER REQUIRE A PILOT CAR
VEHICLES EXCEEDING 100 FT. IN LENGTH AND/OR 12 FT. IN WIDTH WILL REQUIRE TWO PILOT CARS)

PILOT CAR: YES ☐ NONE REQUIRED ☐ PERMIT CONDITIONS ☐

AUTHORIZED CITY AGENT SIGNATURE DATE

**DEPOSIT/FEES**

TRANSPORTATION PERMIT FEE

___ PERMITS X FEE $ 20.60

PAID CHECK # _____ CASH ☐

☐ SINGLE TRIP PERMIT ☐ ANNUAL PERMIT