

Washington State Dept of Transportation  
 Motor Carrier Services  
 921 Lakeridge Way SW

WTA Services Inc.  
 2102 Carriage Drive SW, Bldg. F  
 Olympia, WA 98502  
 Phone: 253-838-1650 \* permits@watrucking.org

OVERSIZE/OVERWEIGHT  
 VEHICLE PERMIT APPLICATION

Company name		Contract Name		E-mail	
Mailing Address		Phone (w/area code)		Permit Start Date	
City	State	Zip Code		Permit End Date	
License #	Transponder #	VIN			DOT #
Make	Year	Base State		Unit #	
Load Description (Make or Model)			<input type="checkbox"/> Tractor/Trailer (Connected by 5th wheel) <input type="checkbox"/> Truck/Trailer (connected by hitch) <input type="checkbox"/> Single Vehicle		
Origin (City)		Destination (City)			# of Miles
Power Unit # of Axels	Trailing Unit # of Axels	Gross Weight	Legal Weight Cap	Reg/License Weight-WA	Axle Spacing Report #
Width	Height	Total Overall Length	Trailer/Load Length	Front Overhang	Rear Overhang

Routes of Travel (State Highways with Mileposts for single trips oversize/overweight required)

Highways	Beginning Milepost	Ending Milepost	Highways	Beginning Milepost	Ending Milepost	Highways	Beginning Milepost	Ending Milepost

County Road Miles \_\_\_\_\_ Return Trip? Yes No

**Overweight only:** Give axle spacing measured from center of axle in feet and inches, number of tires per axle, gross axle weights.  
 Not required if you have an axle spacing report number.

**ALL TIRE SIZES**

Tire Size on Steer Axle _____	Lift Axles? Yes No	Which Axle?	Tire Size	<input type="checkbox"/> Single <input type="checkbox"/> Dual	Self Steering? Yes No
Print name as it Appears on Credit Card		Signature		Date	
Bank Card #		Expiration Date		V-Code	