

HANDWRITTEN PERMITS

HANDWRITTEN PERMITS

Will only be issued when...

- Commercial Vehicle Services (CVS) approval is given
- A customer is paying by cash or check
- eSNOOPI is down state wide for an extended period of time
- An office has no power

HANDWRITTEN PERMITS

Will always be...

- Secured at all times
- Issued on Form 560-045 Revised 7-08
- Entered into eSNOOPI as soon as possible
- Sent to CVS (yellow copy)

HANDWRITTEN PERMITS

Will NOT be...

- Faxed or copied before completed
- Issued to customers paying by credit card (except CVS)
- Given to customers before receiving payment
- Issued for Trip or Fuel permits

SPECIAL MOTOR VEHICLE PERMIT



AT LOCATION: _____ VENDOR NO. _____
DATE ISSUED: _____ REPORT NUMBER: _____ HQ APPROVAL: _____
NAME _____
ADDRESS: _____

POWER UNIT NO. AXLES: _____ TRAILING UNIT / UNITS NO. AXLES: _____
LICENSE OR VIN NO: _____ LICENSE OR VIN NO: _____
TRANSPORTING (ITEM): _____ UNIT NUMBER: _____
DATES (FROM): _____ (THRU): _____ MILES: _____
FROM: _____ TO: _____

ON STATE HIGHWAYS:
GROSS WEIGHT: _____ MAXIMUM WIDTH: _____ FT. _____ IN. FRONT OVERHANG: _____ FT. _____ IN.
LEGAL CAPACITY: _____ MAXIMUM HEIGHT: _____ FT. _____ IN. REAR OVERHANG: _____ FT. _____ IN.
EXCESS GROSS WEIGHT: _____ MAXIMUM LENGTH: _____ FT. _____ IN.

GARBAGE TRUCK OVER AXLE WEIGHT: _____ OTHER: _____
SUSPENSE NUMBER: _____ TRANSFER NUMBER: _____

TRUE AXLE WEIGHTS IF OVERWEIGHT OR AXLE SPACING:
#1: _____ #6: _____ #11: _____ PERMIT FEE: _____
#2: _____ #7: _____ #12: _____ FAX FEE: _____
#3: _____ #8: _____ #13: _____ ADMIN. FEE: _____
#4: _____ #9: _____ #14: _____ TOTAL FEE: _____
#5: _____ #10: _____ #15: _____

BRIDGE RESTRICTIONS: _____

SPECIAL CONDITIONS: _____

FORM 560-002 ATTACHED

READ THIS BEFORE SIGNING

This combined application/permit issued in accordance with RCW 46.44.090 with the specific understanding that all applicable Washington State laws, administrative codes; regulations and conditions, including those not listed hereon will be complied with. I, the undersigned permittee or agent thereof, certify that the information shown hereon is known by me and is true and correct and understand that the permittee shall be liable as set forth in RCW 46.44.110 for all damages to any public highway, bridge, or elevated structure resulting from the movement of equipment authorized by this permit on the public highways of this state. The permittee shall further hold blameless and harmless and indemnify the state, its officers, agents and employees against any accident, liability, loss, injury, action, and the costs thereof arising from the conduct or operations of the permittee in connection with this permit. I further understand that prior to movement the permittee shall establish a routing to safely detour all structures having a limited clearance less than the permitted height. I further affirm that the permitted vehicle is insured in compliance with WAC 480-12-350.

SIGNED _____ BY: _____
PERMIT NOT VALID UNLESS SIGNED BY PERMITEE AGENT THEREOF SIGNATURE OF AUTHORIZED DEPT. OF TRANSPORTATION EMPLOYEE OR AGENT VALIDATES THIS PERMIT AND ACKNOWLEDGES RECEIPT OF FEE PAID

VIOLATION OF SPECIAL PERMITS - PENALTY

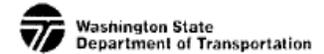
For failure to obtain, misrepresentation, or violation of special permits, state law provides for a fine, confiscation, and suspension of permit without refund. No refunds after the start of the effective dates.

ORIGINAL PERMIT MUST BE Carried on vehicle described
Checked By WSP: _____ Date: _____

Blank
Handwritten
Permit

Example of a Complete Handwritten Permit

SPECIAL MOTOR VEHICLE PERMIT



NAME OF OFFICE ISSUING THE PERMIT (LE, CVS)
 DATE ISSUED: **5/12/08** REPORT NUMBER: **10411** VENDOR NO. _____
 NAME: **ABC TRUCKING, INC** HQ APPROVAL _____
 ADDRESS: **12 N. STREET**
OLYMPIA, WA 98516

POWER UNIT TRAILING UNIT / UNITS
 NO. AXLES: **3** NO. AXLES: **4**
 LICENSE OR VIN NO.: **15468 PR** LICENSE OR VIN NO.: **4V458956628852315**

TRANSPORTING ITEM: **EXCAVATOR W/ BLADE DETACHED** UNIT NUMBER _____
 DATES (FROM) **5/15/08** (THRU) **5/17/08** MILES: **288**
 FROM: **OR/WA BORDER** TO: **WA/BC BORDER**

ON STATE HIGHWAYS: **I-205; I-5 (SEE SPECIAL CONDITIONS FOR MILEPOST)**

GROSS WEIGHT: 135,000 LBS	MAXIMUM WIDTH: 14 FT. 2 IN.	FRONT OVERHANG: _____ FT. _____ IN.
LEGAL CAPACITY: 97500 LBS	MAXIMUM HEIGHT: 15 FT. _____ IN.	REAR OVERHANG: _____ FT. _____ IN.
EXCESS GROSS WEIGHT: 37,500 LBS	MAXIMUM LENGTH: 120 FT. _____ IN.	

GARBAGE TRUCK OVER AXLE WEIGHT: _____ OTHER: _____
 SUSPENSE NUMBER: _____ TRANSFER NUMBER: _____

TRUE AXLE WEIGHTS IF OVERWEIGHT OR AXLE SPACING:
 #1: **15,000 LBS** #6: **20,000 LBS** #11: _____
 #2: **20,000 LBS** #7: **20,000 LBS** #12: _____
 #3: **20,000 LBS** #8: _____ #13: _____
 #4: **20,000 LBS** #9: _____ #14: _____
 #5: **20,000 LBS** #10: _____ #15: _____

PERMIT FEE: **181.00**
 FAX FEE: _____
 ADMIN. FEE: _____
 TOTAL FEE: **181.00**

SPECIAL CONDITIONS: **PLEASE REFER TO THE WEBSITE [WWW.WSDOT.WA.GOV/COMMERCIALVEHICLE](http://www.wsdot.wa.gov/commercialvehicle) FOR ROAD AND BRIDGE RESTRICTIONS. AXLES NTE EXCEED 20,000 LBS; TANDEM AXLES NTE 43,000 LBS; AXLES 2-4 OR 5-7 NTE 65,000 LBS**

*FORM 56000 ATTACHED

READ THIS BEFORE SIGNING

This combined application/permit issued in accordance with RCW 46-44-090 with the specific understanding that all applicable Washington State laws, administrative codes, regulations and conditions, including those not listed herein will be complied with. I, the undersigned permittee or agent thereof, certify that the information shown herein is known by me and is true and correct and understand that the permittee shall be liable as set forth in RCW 46-44-119 for all damages to any public highway, bridge, or elevated structure resulting from the movement of equipment authorized by this permit on the public highways of this state. The permittee shall further hold harmless and indemnify the state, its officers, agents and employees against any accident, liability, loss, injury, action, and the costs thereof arising from the conduct or operations of the permittee in connection with this permit. I further understand that prior to movement the permittee shall establish a routing to safely detour all structures having a limited clearance less than the permitted height. I further affirm that the permitted vehicle is insured in compliance with WAC 480-12-350.

SIGNED _____
 PERMIT NOT VALID UNLESS SIGNED BY PERMITTEE AGENT THEREOF

BY: 
 SIGNATURE OF AUTHORIZED DEPT. OF TRANSPORTATION
 EMPLOYEE OR AGENT VALIDATES THIS PERMIT AND

VIOLATION OF SPECIAL PERMITS - PENALTY

For failure to obtain, misrepresentation, or violation of special permits, state law provides for a fine, confiscation, and suspension of permit without refund. No refunds after the start of the effective dates.

ORIGINAL PERMIT MUST BE _____ Checked
 CARRIED ON VEHICLE DESCRIBED By WSP: _____ Date: _____
 DOT Form 560 040 Revised 6/06