

# SINGLE TRIP APPLICATION

Do not use this form for mobile homes/modular building sections.

Telephone: 719-336-8025

Mail To: Prowers County Courthouse  
301 South Main Suite 215  
Lamar, CO 81052

Fax 719-336-2255

**Section A - Customer** Please print clearly or type.

1. Permit Customer No. - If Available PC-	Desired Effective Date	Multiple Trip Permit No. to Suspend-if Applicable
2. Legal Name - Vehicle Owner or Lessee	Doing Business As (D/B/A)	
Mailing Address	Federal Employer Identification No.	U.S. DOT Number
City State Zip Code	Contact Name for DOT to call if questions / Area Code - Telephone No.	

**Section B - Insurance** - The customer has sufficient insurance coverage in full force and effect. Check Group A or Group B.

- Group A** - Combined Single Limit \$750,000  
 **Group B** - Combined Single Limit \$1,000,000

**Section C - Load - Describe Article(s) Transported**

Required: Is your load radioactive?  Yes  No

**Section D - Vehicles**

Power Unit - Both Plate/State and VIN must be identified

Plate	State	Vehicle Identification Number (VIN)	Truck-tractor Truck Other:	Year	Make	Axles	Unit
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Towed Vehicles - Either Plate/State or VIN must be identified

Plate	State	Vehicle Identification Number (VIN)	Semi-trailer	Full trailer	Dollies	Other	Year	Make	Axles	Unit

**Section E - Size**

	Power Unit		Towed Vehicle		Load		Front Overhang		Overall	
	Ft.	in.	Ft.	in.	Ft.	in.	Ft.	in.	Ft.	in.
Length										
Width					Ft.	in.			Ft.	in.
Height									Ft.	in.

Are Gross Vehicle Weight and Axle Weight both legal?  Yes - Skip Section F

No - Complete Section F - Give overall weight:

**Section F - Axle Weight/Spacing - Tires - by axle, front to rear**

Axle Number	1 (front)	2	3	4	5	6	7	8	9
Number of Pneumatic Tires									
Requested Gross Axle Weight When Loaded (lbs.)									
Spacing Between Axles (Ft. in.)									
Axle Number	10	11	12	13	14	15	16	17	18
Number of Pneumatic Tires									
Requested Gross Axle Weight When Loaded (lbs.)									
Spacing Between Axles (Ft. in.)									

**Section G - Trip:**

Original Trip	From City, Village, Township	To City, Village Township	Via Highways
	Via Highways - continued		
Return Trip	Are the return dimensions and route the same as the "Original Trip"? <input type="checkbox"/> Yes <input type="checkbox"/> No, On a second application, complete Sections A 1, A 2, B, E, F, and G.		

Permit Number
Revised / Amended Permit Number

Acceptance of Conditions: I certify that the statements contained in the application are true and correct and I will comply with all terms and conditions.

X

(Customer or Authorized Agent)

(Date)