

**TWIN STEER PERMANENTLY MOUNTED  
EQUIPMENT  
PERMIT APPLICATION  
TRUCK OR TRACTOR SPECIFICATION  
(ONE SHEET PER UNIT)**

Company Name: \_\_\_\_\_ MVID: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Unit No.: \_\_\_\_\_ Make: \_\_\_\_\_ Year: \_\_\_\_\_ License Number: \_\_\_\_\_

Serial Number: \_\_\_\_\_ Registered Weight: \_\_\_\_\_ kg Fuel Capacity: \_\_\_\_\_

TYPE: Bed \_\_\_\_\_ Picker \_\_\_\_\_ Winch \_\_\_\_\_ kg Other \_\_\_\_\_  
(Choose only one) (Winch Capacity)

Does Truck have a Sleeper?: \_\_\_\_\_ (Y/N) Does Truck have a Planetary Drive Axle?: \_\_\_\_\_ (Y/N)

**AT TIME OF WEIGHING;**

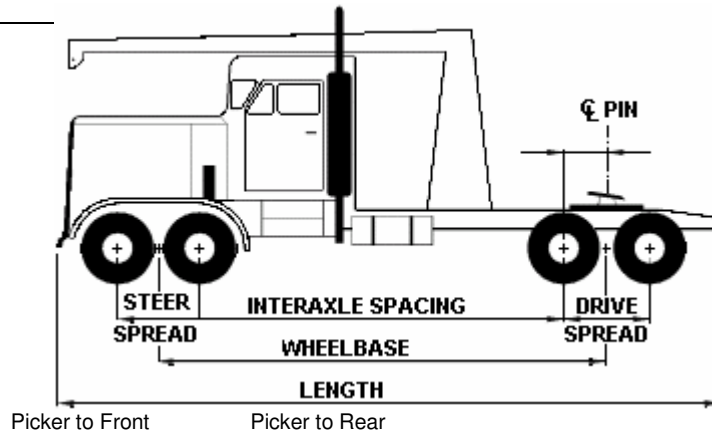
Amount of Fuel: \_\_\_\_\_

Poles Included?: \_\_\_\_\_

Number of Chains & Boomers: \_\_\_\_\_

Does Truck have a 5<sup>th</sup> Wheel?: \_\_\_\_\_

Trailer Attached?: \_\_\_\_\_



Twin Steer Axle Weight: \_\_\_\_\_ kg \_\_\_\_\_ kg

Wheelbase: \_\_\_\_\_ m

Drive Axle Weight: \_\_\_\_\_ kg \_\_\_\_\_ kg

Length: \_\_\_\_\_ m

Tire Size: \_\_\_\_\_

5<sup>th</sup> Wheel Location: \_\_\_\_\_ m

Steer Axle Spread: \_\_\_\_\_ m

Interaxle Spacing: \_\_\_\_\_ m

**WIDTH:**

Drive Axle Tire Size: \_\_\_\_\_

Truck: \_\_\_\_\_ m

Drive Axle Spread: \_\_\_\_\_ m

Trailer: \_\_\_\_\_ m

Date

Authorized Client Signature

**Note: Government Weigh Ticket Required**