

PRAIRIE SKY REGION SINGLE TRIP EXCEED SECONDARY WEIGHT PERMIT APPLICATION

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Single trip permit application to exceed secondary weights (Axle or gross) to primary weight

Date:	-	
Person completing application:		
Name of carrier:		
Address of carrier:		
Requested date of travel:		
	To:	
Make and year of vehicle:		
# of axles (Power unit)		
	Farm or Commercial:	
Phone:		
Signature:		
Approved by:		