Reset

New Nouveau Brunswick

Transportation Policy, Permit Office
P.O. Box 6000 Fredericton, New Brunswick Canada E3B 5H1
Phone (506) 453-2982 FAX: (506) 444-4488 E-Mail: special.permits@gnb.ca

Application to transport an indivisible oversize and/or overweight load

QUARTERLY OR ANNUAL PERMIT

To determine if a permit is required, refer to "Trucking Services - Special Permit"at:
http://www2.gnb.ca/content/gnb/en/services/services_renderer.3635.html

Permit type requested (check one)

- ☐ Renew permit (provide permit number)
- ☐ Quarterly Oversize (3 months)
- ☐ Quarterly Oversize /Overweight (3 months)
- ☐ Annual Oversize (12 months)
- ☐ Annual Oversize/Overweight (12 months)

Choice of language ☐ English ☐ French

Registered owner of the truck tractor

Name:
Address:
City:
Province or State:
Postal Code:

Contact person:
Telephone:
Fax:
E-Mail Address:

Truck tractor details

Year:
Make:
Full Serial Number:

License Plate Number:
Province or State:
Number of Axles*:
*Required only if overweight

Travel and Load details

Requested date: ____/____/____
dd / mm / yy

Load description:

Requested Routing: (Overmass vehicles exceeding GVW of 50,000 kg require list of routes)

Quarterly or annual permit

Oversize

Overall Height - All permits will be issued for a maximum height of 4.50 m

(Permit holder will be responsible for height clearances)

Overall Width:

- ☐ Maximum 4.27 m - General freight
- ☐ Maximum 4.72 m - mobile mini and modular housing
- ☐ Maximum 4.72 m - fishing boats commercially in use

Overall Length: (includes front and rear overhangs)

- ☐ Maximum 12.5 m Self-propelled Mobile Equipment or Straight Truck
- ☐ Maximum 23.0 m Straight Truck With Trailer
- ☐ Maximum 30.0 m Truck Tractor With Trailer(s) Note: A-, B- and C-Trains maximum 25.0 m

Overweight

- ☐ Maximum axle or axle group weight exceeded
- ☐ Maximum 50,000 kg G.V.W. (Self propelled mobile equipment)
- ☐ Maximum 59,000 kg G.V.W. (General freight - designated routes only)

Axle configuration details

(complete information below for all overweight applications, use additional sheets as required)

Axle	1	2	3	4	5	6	7	8	9
Weight (Kg)									
Tire width (mm)									
No. of Tires	2								
Spacing (m)									

Total weight (vehicles and load): kg

Payment details

- ☐ Cash (do not send cash by mail)
- ☐ Cheque or money order
- ☐ Credit Card (do not send credit card number by fax)

TO PAY BY CREDIT CARD PLEASE PROVIDE YOUR TELEPHONE NUMBER AND WE WILL CONTACT YOU

TELEPHONE # ( ) _____

Send permit to

- ☐ Company (provide fax number if different than above):
- ☐ Scale
- ☐ District
- ☐ SNB Office Location:

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