

# Special Permits Office

TRANSPORTATION AND INFRASTRUCTURE  
PO Box 6000 FREDERICTON NB CANADA E3B 5H1  
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[permis.speciaux@gnb.ca](mailto:permis.speciaux@gnb.ca)

## Application to transport an indivisible oversize and/or overweight load

# SINGLE TRIP 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](http://www2.gnb.ca/content/gnb/en/services/services_renderer.3635.html)

<b>Permit type requested</b>	<input type="checkbox"/>	Oversize	<input type="checkbox"/>	Oversize/Overweight
If identical permit has previously been issued, provide permit number:				

<b>Choice of language</b>	<input type="checkbox"/>	English	<input type="checkbox"/>	French
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<b>Registered owner of the truck tractor or semi-trailer</b>	
Name:	Contact person:
Address:	Telephone:
City:	Fax:
Province or State:	E-Mail Address:
Postal Code:	

Start date requested:	____ / ____ / ____ <i>dd / mm / yy</i>	
<input type="checkbox"/>	Standard oversize permit 4.27 m wide, up to 30.0 m long and 4.50 m high, otherwise fill in below	
Overall Width:	Front Overhang:	
Overall Length:	Rear Overhang:	
Overall Height:		
Origin in N.B.*:	Load Description:	
Destination in N.B.*:	Requested Routing:	
*Be specific with Origin and Destination		

Single trip permit

**Select one**

- Truck only
- Truck and pony trailer
- Truck tractor and semi-trailer

**Power unit information**

Year:  
 Make:  
 Full Serial Number:  
 License Plate Number:  
 Province or State:  
 Number of Axles\*:  
 \*Required only if overweight

**Note: Overweight vehicles must fill in below**

**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

**Other trailer or jeep dolly details\***

Is a dolly or booster being used? Number of axles on dolly or booster:

\*Dollies and boosters shall not be used when empty

**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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