



MISSOURI DEPARTMENT OF TRANSPORTATION  
 MOTOR CARRIER SERVICES  
 1320 CREEK TRAIL DRIVE, P.O. BOX 893  
 JEFFERSON CITY, MO 65102-0893  
 PHONE: (800) 877-8499  
 WEB ADDRESS: www.modot.org/mcs

## APPLICATION FOR SINGLE TRIP OVERDIMENSION AND/OR OVERWEIGHT PERMIT

General Information										
USDOT#			Contact Person							
Customer Account Number			Payment Type - <input type="checkbox"/> Escrow Account <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> MasterCard* <input type="checkbox"/> Visa* <input type="checkbox"/> Discover* <input type="checkbox"/> American Express*							
Legal Name of Applicant					Federal Identification Number					
DBA Name					Social Security Number					
Customer Type (check one) <input type="checkbox"/> Sole Proprietorship - <b>you must provide a Federal ID number or SSN above</b>					Date Organized/Incorporated		Missouri Registration Number			
<input type="checkbox"/> Partnership - <b>you must provide Federal ID number above</b>										
<input type="checkbox"/> Limited Partnership – <b>you must provide Federal ID number above</b>										
<input type="checkbox"/> Corporation – What state? _____ – <b>you must provide Federal ID number above</b>										
<input type="checkbox"/> Limited Liability Corporation – What state? _____ – <b>you must provide Federal ID number above</b>										
<input type="checkbox"/> Limited Liability Partnership - <b>you must provide Federal ID number above</b>										
Physical Address					City		State	Zip Code		
Mailing Address					City		State	Zip Code		
E-mail Address				Telephone Number			Fax Number			
Start Date		Send Permit How?		Fax Number		E-Mail		Mail		
Load Information					Enter dimensions before loaded					
Description		Serial Number		Make		Dimensions of Load <small>enter in feet &amp; inches</small>	Width	Length	Height	
Mobile Home <input type="checkbox"/> Single <input type="checkbox"/> Sectional		Serial Number		Make		Year	Dimensions of Home <small>enter in feet &amp; inches</small>	Width	Length	Height
Vehicle Information										
Power Unit	License Number		State	VIN		<input type="checkbox"/> Toter <input type="checkbox"/> Truck <input type="checkbox"/> Truck-Tractor <input type="checkbox"/> Self-Propelled		Year	Make	
Unit Two	License Number		State	VIN		<input type="checkbox"/> Jeep <input type="checkbox"/> Double Drop <input type="checkbox"/> Flatbed <input type="checkbox"/> Single Drop		Year	Make	
Unit Three	License Number		State	VIN		<input type="checkbox"/> Jeep <input type="checkbox"/> Double Drop <input type="checkbox"/> Flatbed <input type="checkbox"/> Single Drop <input type="checkbox"/> Booster		Year	Make	
Unit Four	License Number		State	VIN		<input type="checkbox"/> Jeep <input type="checkbox"/> Double Drop <input type="checkbox"/> Flatbed <input type="checkbox"/> Single Drop <input type="checkbox"/> Booster		Year	Make	

**Please do not fax this application to MoDOT Motor Carrier Services**

**APPLICATION FOR SINGLE TRIP OVERDIMENSION AND/OR OVERWEIGHT PERMIT - CONTINUED**

Overall Dimensions – when loaded								
Overall Width		Overall Length		Overall Height		Trailer & Load Length (if towing leave blank)		<b>If trailer and load length exceeds 53' complete the following:</b>  <b>Is Trailer Extended?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	

Weight Information – Required for all Permits				Overhang		Deck Space			
If over 80,000 lbs or Specialized Equipment enter individual axle weights				Feet	Inches	Feet	Inches	Feet	Inches
If under 80,000 lbs enter Gross Vehicle Weight and total number of axles.				<b>Front</b>		<b>Used</b>		<b>Unused</b>	
				<b>Rear</b>		<b>Used</b>		<b>Unused</b>	
Axle Weight	Spacings -		Feet	Inches	<b>Well/Trailer Used</b>		Feet	<b>Well/Trailer Unused</b>	
1)									
2)									
3)									

Route Information			
4)	Coming from (if starting on a lettered route provide the county):		
5)	Going to (if ending on a lettered route provide the county):		
6)	Directions:		
7)			
8)			
9)			
10)			
11)			
12)			
Total Gross Vehicle Weight	Total Spacings or axles		

Certification	
I DECLARE UNDER THE PENALTY OF PERJURY under the laws of the State of Missouri and the United States of America that the foregoing information in the application is true and correct, that I am authorized to sign this application on behalf of applicant and that the signature below is my own true and correct signature made by me and no other person.	
Name (printed)	Date
Signature	Title

**\* Please do not provide your credit card number – you will be contacted.**



## INSTRUCTIONS FOR COMPLETING A SINGLE TRIP OVERDIMENSION AND/OR OVERWEIGHT PERMIT APPLICATION

### General Information

**USDOT #:** Enter your US Department of Transportation Number. If no USDOT number is required for your operation, enter XX. To determine if you are required to have a USDOT number, visit the web site [www.safersvs.org](http://www.safersvs.org) or call 573-636-3246.

**Contact Person:** Enter the name of the person to be contacted with questions regarding this application.

**Account Number:** Enter account number assigned to you by MoDOT Motor Carrier Services.

**Payment Type:** If not using escrow account, check one box for how you are paying for this permit. If you are paying by credit card, do not enter your credit card number. Someone will contact you.

**Legal Name:** Enter your legal name. If you have already been assigned an account number or have ordered a permit in the past six months skip to Start date?

**DBA Name:** If business entity is a sole proprietor and you are doing business with a fictitious name, enter your business name. If you are a Missouri based carrier, you must register this name with the Secretary of State office. You may contact the Missouri Secretary of State by calling 866-223-6535 or access the web site [www.sos.mo.gov](http://www.sos.mo.gov).

**Federal Identification/Social Security Number:** Enter your FEIN if one has been assigned to you. If not, enter your social security number. State law requires FEIN or Social Security Numbers of sole proprietorships. You must provide a FEIN or Social Security Number to obtain a permit.

**Customer Type:** Check one box. If you are a Missouri based carrier, enter the date organized or Incorporated and your Missouri registration number.

**Physical Address:** Enter your principal place of business address.

**Mailing Address:** Enter your mailing address if different from your physical address.

**Start Date:** Enter the date you want your permit to start. Single Trip permits are effective for seven days.

**Send Permit How?:** Enter the fax number you want your permit faxed to and/or your e-mail address or the address you want your permit mailed to.

### Load Information

**Description:** Enter the description of your load, i.e. excavator, portable building, cooling tower, farm tractor. If you are towing a manufactured home skip to *Mobile Home*.

**Serial Number:** Enter the serial number. If load is steel plates, steel beams, trusses, etc, a serial number is not required.

**Make:** Enter the manufacturer of the load. If load is steel plates, steel beams, trusses, etc, a load make is not required. Enter *homemade* if the load was made by you.

**Dimensions of Load:** Enter the width, length and height in feet and inches of your load.

**Mobile Home:** Check if it is a single wide or sectional.

**Serial Number:** Enter the serial number. This can be obtained from the title.

**Make:** Enter the manufacturer of the load.

**Year:** Enter the year of the Mobile Home.

**Dimensions of Load:** Enter the width, length and height in feet and inches of the Mobile Home.

## Vehicle Information

**Power Unit:** Enter the license number, state it is licensed in, complete vehicle identification number, year and make. Check one box for power unit type. Examples follow:



Toter



Truck



Truck-Tractor



Under Own Power

**Unit Two, Unit Three and Unit Four:** Enter the license number, state it is licensed in, complete vehicle identification number, year and make. Check one box for trailer type. Examples follow:



Jeep



Flatbed Trailer



Single Drop Trailer



Double Drop Trailer



Booster

## Overall Dimensions

**Overall Width:** Enter in feet and inches

**Overall Length:** Measure from the front bumper of the power unit to the end of the trailer *or* load. Enter in feet and inches.

**Overall Height:** Tallest point, either power unit or load. Enter in feet and inches.

**Trailer and Load Length:** Measure from the front of the trailer, or load if there is front overhang, to end of trailer or load, if there is rear overhang. Enter in feet and inches.

**Is trailer extended?:** If the trailer is extendable and measures more than 53', check yes. If yes, continue with length justification, otherwise skip to *Overweight Load Information*. Enter front and rear overhang, unused/used front deck space, unused/used rear deck space unused/used well space in feet and inches. All overhangs, used and unused spaces must equal trailer and load length.

## Weight Information – Required for all permits.

**If over 80,000 lbs or specialized equipment, enter individual axle weights. Otherwise, enter actual Gross Vehicle Weight number of axles in the fields provided.**

**Individual Axle Weights:** Enter weight for each axle in pounds.

**Total weight:** Add total weight.

**Axle Space:** Enter each individual axle spacing in feet and inches or if legal weight enter total number of axles.

**Total Spacings or axles:** Add total axle spacings and enter in feet and inches or the total number of axles.

## Route Information

**Coming From:** Enter the distance from the closest state maintained junction, (i.e. 1 mile south of junction Z and I-70 on route Z - Boone Co) or exit number you take from an interstate, if connecting route to the interstate is not a state highway. If the trip does not begin with a interstate, but begins within a city limit, you may use the name of the city i.e. Moberly.)

**Going To:** Enter the distance from the closest state maintained junction, (i.e. 1 mile south of junction T and 63 on route 63 - Osage Co) or exit number you take from an interstate, if connecting route to the interstate is not a state highway. If the trip does not end with a interstate, but ends within a city limit, you may use the name of the city i.e. Moberly.)

**Route:** Enter your desired route, (i.e. Z (Boone Co) – I-70 – 63).

**Certification:** Print your name and the date application is prepared. Sign form and enter title, (i.e. president, owner or partner).