



STATE OF NEVADA
DEPARTMENT OF TRANSPORTATION
 1263 SOUTH STEWART STREET, CARSON CITY, NEVADA 89712
 TELEPHONE: (775) 888-7410 / FAX: (775) 888-7103

Specialty Trailer Application

This application must be filled out in its entirety prior to a permit being issued.
 Please attach a drawing of the configuration with this form
 Fax Application to: 775-888-7103

| | |
|--------------------------|--|
| Reviewed Date: | |
| NDOT Reviewed By: | |
| Axle Loads Meet: | |
| Tire Loads: | |
| Approved/ Denied: | |

| | | | | | |
|-------------------------|---------------|----------------|----------------|------------------------|-----------------------|
| Contact Name: | | | | | |
| Name of Company: | | | | | |
| Telephone: | | | Fax: | | |
| Email Address: | | | | | |
| Unit # | Width: | Height: | Length: | Front Overhang: | Rear Overhang: |

| Axle # | Steer Axle (Yes/No) | Tires/Axle | Tire Size | Axle Width (feet & inches) | Dolly Width (feet & inches) | Requested Axle Weight (lbs) | Axle Spacing | | |
|--------|---------------------|------------|-----------|----------------------------|-----------------------------|-----------------------------|--------------|------|--------|
| | | | | | | | Number | Feet | Inches |
| 1 | | | | | | | 1 to 2 | | |
| 2 | | | | | | | 2 to 3 | | |
| 3 | | | | | | | 3 to 4 | | |
| 4 | | | | | | | 4 to 5 | | |
| 5 | | | | | | | 5 to 6 | | |
| 6 | | | | | | | 6 to 7 | | |
| 7 | | | | | | | 7 to 8 | | |
| 8 | | | | | | | 8 to 9 | | |
| 9 | | | | | | | 9 to 10 | | |
| 10 | | | | | | | 10 to 11 | | |
| 11 | | | | | | | 11 to 12 | | |
| 12 | | | | | | | 12 to 13 | | |
| 13 | | | | | | | | | |



STATE OF NEVADA
DEPARTMENT OF TRANSPORTATION
 1263 SOUTH STEWART STREET, CARSON CITY, NEVADA 89712
 TELEPHONE: (775) 888-7410 / FAX: (775) 888-7103

Specialty Trailer Application

This application must be filled out in its entirety prior to a permit being issued.
 Please attach a drawing of the configuration with this form
 Fax Application to: 775-888-7103

| | |
|--------------------------|--|
| Reviewed Date: | |
| NDOT Reviewed By: | |
| Axle Loads Meet: | |
| Tire Loads: | |
| Approved/ Denied: | |

| | | | | | |
|-------------------------|---------------|----------------|----------------|------------------------|-----------------------|
| Contact Name: | | | | | |
| Name of Company: | | | | | |
| Telephone: | | | Fax: | | |
| Email Address: | | | | | |
| Unit # | Width: | Height: | Length: | Front Overhang: | Rear Overhang: |

| Axle # | Steer Axle (Yes/No) | Tires/Axle | Tire Size | Axle Width (feet & inches) | Dolly Width (feet & inches) | Requested Axle Weight (lbs) | Axle Spacing | | |
|--------|---------------------|------------|-----------|----------------------------|-----------------------------|-----------------------------|--------------|------|--------|
| | | | | | | | Number | Feet | Inches |
| 14 | | | | | | | 13 to 14 | | |
| 15 | | | | | | | 14 to 15 | | |
| 16 | | | | | | | 15 to 16 | | |
| 17 | | | | | | | 16 to 17 | | |
| 18 | | | | | | | 17 to 18 | | |
| 19 | | | | | | | 18 to 19 | | |
| 20 | | | | | | | 19 to 20 | | |
| 21 | | | | | | | 20 to 21 | | |
| 22 | | | | | | | 21 to 22 | | |
| 23 | | | | | | | 22 to 23 | | |
| 24 | | | | | | | 23 to 24 | | |
| 25 | | | | | | | 24 to 25 | | |



STATE OF NEVADA
DEPARTMENT OF TRANSPORTATION
 1263 SOUTH STEWART STREET, CARSON CITY, NEVADA 89712
 TELEPHONE: (775) 888-7410 / FAX: (775) 888-7103

Specialty Trailer Application

This application must be filled out in its entirety prior to a permit being issued.
 Please attach a drawing of the configuration with this form
 Fax Application to: 775-888-7103

| | |
|--------------------------|--|
| Reviewed Date: | |
| NDOT Reviewed By: | |
| Axle Loads Meet: | |
| Tire Loads: | |
| Approved/ Denied: | |

| | | | | | |
|-------------------------|---------------|----------------|----------------|------------------------|-----------------------|
| Contact Name: | | | | | |
| Name of Company: | | | | | |
| Telephone: | | | Fax: | | |
| Email Address: | | | | | |
| Unit # | Width: | Height: | Length: | Front Overhang: | Rear Overhang: |

| Axle # | Steer Axle (Yes/No) | Tires/Axle | Tire Size | Axle Width (feet & inches) | Dolly Width (feet & inches) | Requested Axle Weight (lbs) | Axle Spacing | | |
|--------|---------------------|------------|-----------|----------------------------|-----------------------------|-----------------------------|--------------|------|--------|
| | | | | | | | Number | Feet | Inches |
| 26 | | | | | | | 25 to 26 | | |
| 27 | | | | | | | 26 to 27 | | |
| 28 | | | | | | | 27 to 28 | | |
| 29 | | | | | | | 28 to 29 | | |
| 30 | | | | | | | 29 to 30 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |