



**STATE OF NEVADA**  
**DEPARTMENT OF TRANSPORTATION**  
 1263 SOUTH STEWART STREET, CARSON CITY, NEVADA 89712  
 TELEPHONE: (775) 888-7410 / FAX: (775) 888-710

## Self-Propelled Vehicle Application

This application must be filled out in its entirety prior to a permit being issued  
 Fax Application to: 775-888-7103

<b>Reviewed Date:</b>	
<b>NDOT Reviewed By:</b>	
<b>Axle Loads Meet:</b>	
<b>Tire Loads:</b>	
<b>Approved/ Denied:</b>	

<b>Contact Name:</b>					
<b>Name of Company:</b>					
<b>Telephone:</b>			<b>Fax:</b>		
<b>Email Address:</b>					
<b>Unit #</b>	<b>Width:</b>	<b>Height:</b>	<b>Length:</b>	<b>Front Overhang:</b>	<b>Rear Overhang:</b>

Axle #	Steer Axle (Yes/No)	Tires/Axle	Tire Size	Axle Width (feet)	Axle Load (lbs)	Green Load (lbs)	Max Purple Load (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										