

### COLORADO ROUTE SURVEY

\*This Route Survey must accompany a Colorado Transport Permit Application

**Date Survey conducted:**

Month / Day / Year

Applicant and/or Company Name (print):	Telephone:
Applicant Address (print Street/PO Box, City, State, Zip):	Person submitting application:
Company performing survey (print):	Contact name (Survey company):
Company performing survey address (print Street/PO Box, City, State, Zip):	Telephone:

Shipment consists of:

Gross weight:	No. of axles	Distance first to last axle:	Overall length:	Trailer length:
Front overhang:	Rear overhang:	Height (actual):	Width:	

**The CGVW and/or axle group weights cannot exceed the limits indicated on the Bridge Weight Limit Restriction map.**

lbs.									
Ft'-in"	○	○	○	○	○	○	○	○	○
Axles	1	2	3	4	5	6	7	8	9

lbs.									
Ft'-in"	○	○	○	○	○	○	○	○	○
Axles	10	11	12	13	14	15	16	17	18

Starting point in Colorado:	Ending point in Colorado:
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**REQUESTED ROUTE with Mile point references (attach additional sheets, as necessary)**

(The routing must be complete, including all city streets and/or county roads for the proposed line of travel.)

Route verified to the latest Restrictions report for limitations that may affect the movement of this vehicle/load - [www.dot.state.co.us/truckpermits/Restrictions.htm](http://www.dot.state.co.us/truckpermits/Restrictions.htm)

<b>POTENTIAL GRADE CONFLICTS</b> (i.e. railroad crossing, speed bumps, etc)	<b>CLEARANCE CONCERNS</b> (attach Utility clearance letters, as needed)
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**EMERGENCY CONTACT NUMBERS (keep available in case an incident occurs)**

LAW ENFORCEMENT	RAILROAD	UTILITIES

I declare under penalty of perjury in the second degree, and any other applicable state or federal laws, that the statements made on this document are true and complete to the best of my knowledge.

Applicant Signature (Required):	Date:
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