



OKLAHOMA DEPARTMENT OF PUBLIC SAFETY

SIZE & WEIGHT PERMIT DIVISION

2401 N.W. 23 RD. STREET #45

OKLAHOMA CITY, OK 73107

Permit Line (405) 425-7012 Fax Number (405) 522-9006

Email: swpermits@dps.ok.gov



SPECIAL MOVEMENT APPLICATION

MOVEMENT OF MANUFACTURED ITEMS EXCEEDING (16) SIXTEEN FEET IN WIDTH.

(TITLE 47, 14-120)

(Manufactured Homes, Buildings & Industrial Housing are excluded)

Please print, must be legible.

Owner/Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax No. \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Description of Manufactured Item to be Moved: \_\_\_\_\_

Serial Number of Item: \_\_\_\_\_

Is The Item Listed NEW \_\_\_\_\_ or USED? \_\_\_\_\_

Width of Item: \_\_\_\_\_ Height: \_\_\_\_\_ Length of Trailer & Load: \_\_\_\_\_ Overall Length: \_\_\_\_\_

Truck Make, Model & Year: \_\_\_\_\_ License: \_\_\_\_\_ State: \_\_\_\_\_

Trailer Make & Year: \_\_\_\_\_ License: \_\_\_\_\_ State: \_\_\_\_\_

Axle Spacings:

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_ 11 \_\_\_\_\_ 12 \_\_\_\_\_ 13 \_\_\_\_\_ 14 \_\_\_\_\_

Weight Per Axle:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Gross Weight: \_\_\_\_\_ Registered Weight: \_\_\_\_\_

(Exact Locations Required)

Movement From: \_\_\_\_\_

Movement To: \_\_\_\_\_

Route Requested: \_\_\_\_\_

Trip Dates Requested: \_\_\_\_\_

Under penalty of perjury, pursuant to Title 12, Section 426 of the Oklahoma State Statute and subject to penalty under applicable laws of the State of Oklahoma, that the information provided in this Application is true and correct. I further state that I understand and agree to abide by the provisions of Title 47, Section 14-120 of the Oklahoma Statutes as a condition for receiving this Permit for the transportation of the item listed above and that the failure to abide by this Permit as issued by the Department of Public Safety will result in appropriate enforcement action and penalties by the agency or other proper law enforcement agency.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please Fax or E-mail your completed application to the Size & Weight Permit Office. You will be contacted by telephone after your Application has been reviewed and approved.

NOTE: This load may require an inspection by the Oklahoma Highway Patrol Commercial Vehicle Enforcement Division before a Permit can be issued.

PERMIT # \_\_\_\_\_