
Query for permit and escort for abnormal transport

1. Company information

Company name: _____
Address: _____
Contact person: _____
E-mail: _____
Phone: _____

2. Measures

Dimensions	Truck	Trailer	Load	Total
Length (m)				
Width (m)				
Height (m)				
Weight (t)				
Number of axles				
Axle distances (m)				
Axle pressures (t)				

3. Route

Start point: _____
End point: _____
Additional point: _____
(e.g. Custom place, if it is different from start/end point)

4. Planned date of transport _____

Date of query
