



City of Desert Hot Springs

11999 Palm Drive • Desert Hot Springs, CA 92240
www.cityofdhs.org • 760-329-6411 • Fax: 760-288-0639

WIDE LOAD TRANSPORTATION PERMIT APPLICATION

This document must be completed and uploaded to the online application

Online completion of Transportation Permit Application

To access online application, click on the link below, navigate to Miscellaneous Permits, choose the Transportation Permit Application. If you haven't already done so, you will need to create a login and password.

<https://deserthotspringsca.viewpointcloud.com/>

Pilot Car Requirements

One Pilot Car Required

A. Length:

- Any vehicle with a single kingpin combination between 75' to 100'.
- Any vehicle combination of truck, tractor and jeep/semi-trailers coupled together (multi-kingpin), exceeding 120'.
- Any vehicle combination of truck, tractor, jeep and semi-trailers coupled together (multi-kingpin), **with articulating rear steering** on the rear semi-trailer exceeding 125' to 135'.

B. Width: Loads exceeding 12' to 15'.

C. Height: Front Pilot Car with vertical measuring device on loads exceeding 17'.

D. Overhang:

- **Rear:** When the rear load projection exceeds 25' when measured from the rear extremity of the hauling equipment.
- **Front:** When the front overhang exceeds 25'.

One Pilot Car Required

A. Length:

- Any vehicle with a single kingpin combination exceeding 100'.
- Any vehicle combination of truck, tractor, jeep and semi-trailers coupled together (multi-kingpin), with articulating rear steering on the rear semi-trailer exceeding 135'.

B. Width: Loads exceeding 15'.

C. Combination: A combination of the following:

- 1C (Height) and 1A (length) or,
- 1C (Height) and 1B (width).



**City of Desert Hot Springs
WIDE LOAD TRANSPORTATION PERMIT**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE
TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND IN
THE ACCOMPANIMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP _____

OFFICE PHONE NUMBER *(Including Area Code)* _____

OFFICE FAX NUMBER *(Including Area Code)*: _____

DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.: _____

HAUL DRIVE TOW

DIMENSIONS OF LOAD: _____

DESCRIPTION OF HAULING EQUIPMENT: _____

VEHICLE WIDTH:	SEMI-TRAILER LENGTH:			KINGPIN TO LAST AXLE:			COMB. VEHICLE LENGTH:		
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER OF TIRES PER AXLE									
DISTANCE BETWEEN AXLES									
WIDTH OF AXLES AT TIRE SIDEWALL									
MAXIMUM ALLOWABLE WEIGHT									

NOT TO EXCEED DIMENSIONS SHOWN BELOW OR AXLE WEIGHTS SHOWN ABOVE

LOADED HEIGHT: _____ LOADED WIDTH: _____ LOADED OVERALL LENGTH: _____ LOADED OVERHANG: _____ WEIGHT CLASS: _____

ORIGIN: _____ DESTINATION: _____

<p>AUTHORIZED CITY ROUTES - STATE AND/OR COUNTY PERMITS MAY BE REQUIRED</p>	<p>PERMIT VALID FOR POSTED TRUCK ROUTES ONLY with local access for pickup/delivery according to Section 35703 of the CVC</p>
<p>PILOT CAR YES NO ***PILOT CAR REQUIRED ON LOADS EXCEEDING 12' WIDE</p>	
<p>Pursuant to California Vehicle Code, Section 35780, this permit does NOT exempt the permittee from meeting the requirements set forth by the California Department of Transportation to operate extra-legal loads within the state right-of-way.</p>	

CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION _____ APPLICANT SIGNATURE _____ DATE _____

CREDIT CARD EXP. DATE _____ FEE \$ _____ NUMBER OF TRIPS _____ AUTHORIZED CITY AGENT _____ DATE _____

REQUESTED ROUTE: _____

APPLICANT CONTACT PERSON *(PRINT)* _____

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