



Enforcement and Compliance

96-0289 R08/22 azdot.gov

Commercial Permits
14370 W Van Buren Street
Goodyear AZ 85338
Phone 602-771-2960

ENVELOPE PERMIT APPLICATION

Permit Type
[] 30 Day Oversize
[] 30 Day Modified
[] 30 Day Oversize/Overweight
[] Annual Oversize
[] Annual Modified
[] Annual Oversize/Overweight
[] Annual Oversize/Overweight Tridem

Permit Effective Date

US DOT Number IFTA Number (If applicable) IRP Number
Applicant Name (individual, company) Doing Business As (DBA)
Phone () Fax () Insurance Company
Street Address City State Zip
Mailing Address (if different from above) City State Zip
Contact Person Name

"Envelope" has the same meaning as prescribed under A.R.S. § 28-1141 encompassing the outermost dimensions of a load or vehicle as prescribed under A.R.S. § 28-1144, without exceeding the maximum permitted weight computations for overweight axle group weight distribution as provided under R17-6-411 or R17-6-212.

Authorized Power Units (to be listed on permit)
A vehicle for which an envelope permit is issued shall have at least 3 axles.

Table with 8 columns: # Axles, Unit #, Plate Number, State, Year, Make, Body Style, Vehicle Identification Number. Multiple rows for listing units.

Number of Original Permits Requested Envelope Permit Renewal? [] Yes [] No If Yes, indicate Permit Number: Permit Number

I certify that the information contained on this application is true and correct and that I am in compliance with all applicable rules and laws of Arizona. I understand that any misrepresentation or misstatement on this application to conceal any matter, may cause the application to be denied. If denied, I will not be eligible to reapply for an envelope permit for 24 months.

Applicant Signature ADOT Agent Date