

Utah Department of Transportation, Special Truck Equipment Profile Sheet

Profile Sheet Must Be Carried In Vehicle and Permit Weights Must Match

Requested Weight: Group 1 _____ Group 2 _____ Group 3 _____ Group 4 _____ Group 5 _____

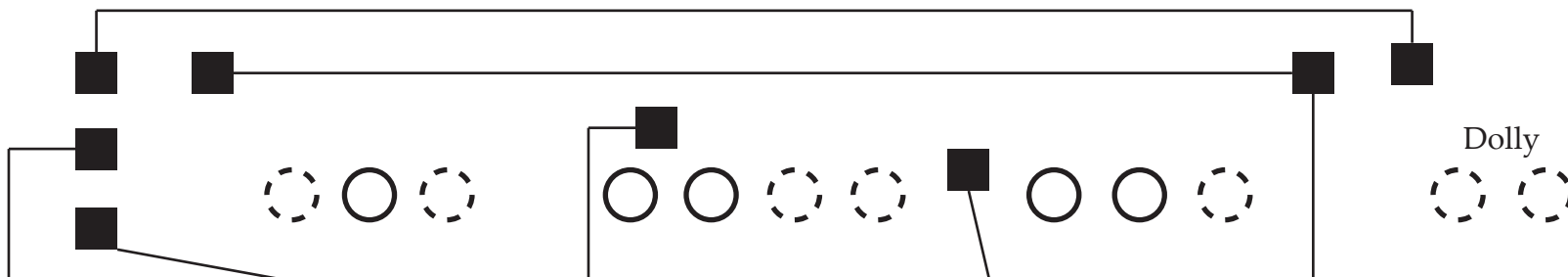
Dimensions: Overall Length _____ Width _____ Front Overhang _____ Rear Overhang _____

Axle Spacing: 1 to 2 _____ 2 to 3 _____ 3 to 4 _____ 4 to 5 _____ 5 to 6 _____ 6 to 7 _____

Tire Rating: Group 1 _____ Group 2 _____ Group 3 _____ Group 4 _____ Group 5 _____

Tire Size: Group 1 _____ Group 2 _____ Group 3 _____ Group 4 _____ Group 5 _____

Axle Width: Group 1 _____ Group 2 _____ Group 3 _____ Group 4 _____ Group 5 _____



FIRST COUNTERWEIGHT <input type="checkbox"/> Attached <input type="checkbox"/> Removed <input type="checkbox"/> N/A	FIRST OUTRIGGER <input type="checkbox"/> Attached <input type="checkbox"/> Removed <input type="checkbox"/> N/A	SECOND COUNTERWEIGHT <input type="checkbox"/> Attached <input type="checkbox"/> Removed <input type="checkbox"/> N/A	SECOND OUTRIGGER <input type="checkbox"/> Attached <input type="checkbox"/> Removed <input type="checkbox"/> N/A	BLOCK <input type="checkbox"/> Attached <input type="checkbox"/> Removed <input type="checkbox"/> N/A	TENSION BALL <input type="checkbox"/> Attached <input type="checkbox"/> Removed <input type="checkbox"/> N/A
Company Name	USDOT Number		Today's Date		
Company Address	Unit Number & License Plate		Motor Carrier Specialist		
Company Contact	Year & Make		Permit Type	Trip Permit <input type="checkbox"/>	Annual Permit <input type="checkbox"/>
Company Phone Number	VIN		Approved	Y <input type="checkbox"/>	N <input type="checkbox"/>