

STATE OF MAINE
BUREAU OF MOTOR VEHICLES

Canadian Weight Limit Permit Application



From Start Date _____ to End Date _____

All Permits expire on the last day of the month.

PLEASE CHECK ONE: BAILEYVILLE VAN BUREN BOTH

Permitee Information:

| | |
|------------------------|----------------------|
| Legal Name: _____ | US DOT #: _____ |
| _____ | IRP Account #: _____ |
| Legal Address: _____ | IFTA Account#: _____ |
| _____ | Contact Name: _____ |
| Mailing Address: _____ | Telephone: _____ |
| _____ | Fax: _____ |

Vehicle Information:

| Registrant | Plate # & Jurisdiction | Yr | Make | VIN | Configuration | Est # of Trips |
|------------|------------------------|----|------|-----|---------------|----------------|
| | | | | | | |

Transfer: check only if transferring permit to a new vehicle and fill in information below. Include \$8.00 transfer fee.

| Registrant | Old Plate # & Jurisdiction | New Plate # & Jurisdiction | Yr | Make | VIN | Configuration | Est # of Trips |
|------------|----------------------------|----------------------------|----|------|-----|---------------|----------------|
| | | | | | | | |

Maine Registered Weight must be 100,000 lbs. Fines for the violation of the gross weight limits of this permit are calculated from 100,000 lbs., and can be substantial.

Configurations & Fees:

- 6 axle combination - \$10 per month/\$120 for one year maximum
- 8 axle combination/B-train double - \$40 per month/\$480 for one year maximum
- Dual Permit - \$40 per month/\$480 for one year maximum

NOTE: FEE IS CHARGED FOR EACH LOCATION

Check if you would like your permit faxed. Add \$3.00 fax fee.

Total Fee Included \$ _____

Credit Card # _____ Exp Date _____

Name on Card _____

Signature _____ Date _____

MAIL TO:

**Bureau of Motor Vehicles – Motor Carrier Services
Overlimit Permit Unit, 29 State House Station, Augusta, Me 04333-0029
Phone: (207) 624-9000 ext. 52134 Fax: (207) 622-5332**

For Office Use Only:

| | |
|-------------|--------------------|
| DOT# _____ | SEA<75 _____ |
| IRP# _____ | SAFESTAT<250 _____ |
| IFTA# _____ | UMCAMS OK _____ |
| INTLS _____ | UCR OK _____ |