



STATE OF MAINE  
DEPARTMENT OF TRANSPORTATION  
MAINE STATE FERRY SERVICE  
P.O. BOX 645  
ROCKLAND, MAINE 04841-0645

Janet T. Mills  
GOVERNOR

Bruce A. Van Note  
COMMISSIONER

STANDARD APPLICATION AND PERMIT FORM

Authorized Transport of Overlength Vehicles on Vessels of the M.S.F.S.

**Requests for Trucks longer than 60' must be made at least three (3) days in advance of the travel date.**

Date of Request: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Truck State: \_\_\_\_\_ License Plate #: \_\_\_\_\_ Trailer State: \_\_\_\_\_ License Plate#: \_\_\_\_\_

Date and Time of Move: \_\_\_\_\_

Ferry Terminal Origin of Move: \_\_\_\_\_

Ferry Terminal Destination of Move: \_\_\_\_\_

Ferry Capt. Authorizing Permit: \_\_\_\_\_

Date Approved: \_\_\_\_\_

For M.S.F.S. Vessel: \_\_\_\_\_

Tides on Date of Travel: High \_\_\_\_\_ Low: \_\_\_\_\_

Ferry Terminal Destination of Move: \_\_\_\_\_

Return Date and Time of Travel: \_\_\_\_\_

For M.S.F.S. Vessel: \_\_\_\_\_

Product to Be Transferred: \_\_\_\_\_

Vehicle Width: \_\_\_\_\_ Height: \_\_\_\_\_

Vehicle Gross Weight: \_\_\_\_\_