

# Application For Special Hauling Permit For Self-Propelled Crane



Authorizing movement, within the City of New York, of self-propelled cranes whose weights and dimensions exceed those specified in Chapter 4 of the NYC Traffic Rules

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Crane information

Model: \_\_\_\_\_

*A separate application should be filed for each model*

LICENSE NO.	YEAR MFD.	CRANE SERIAL NO.	DOB CD#	DIMENSIONS (FEET/INCHES)			AXLE WEIGHTS (LBS.)						
				L	W	H	AXLE #1	AXLE #2	AXLE #3	AXLE #4	AXLE #5	GROSS	

### Insurance information

INSURANCE	COMPANY NAME	POLICY NUMBER	EXPIRATION DATE
PROTECTIVE LIABILITY			
PROPERTY DAMAGE			
WORKER'S COMP.			
DISABILITY BENEFIT			

Special Instructions:

Print Name & Title: \_\_\_\_\_

DOT Representative: \_\_\_\_\_

Signature: \_\_\_\_\_

*Authorized Representative of Applicant*

