

## **Specified Journey (Single Trip) Permit Application**

In order to apply for a Permit, you must be a registered Operator with Main Roads Western Australia. If you do not have an Operator Number, please complete the Restricted Access Vehicle Operator Registration form available on our website. Prior to submitting your application, refer to Main Roads Movement of High Risk OSOM Vehicles Policy and if applicable Guidelines for Preparing a Transport Management Plan for an Oversize Overmass Movement on our website.

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A Operator Detai	<u>ls</u>								
Operator Number (Leave blank if new applicant)  Operator Name									
Registered Business Name									
<b>B</b> Permit Details									
Permit Type:   Over	size	Complete	sections A, B, C	, D, E, F, J, K and L	. Complete sec	tions H & I if r	equired. Answer questions i	i) and ii) below.	
		•	-	1 Low Loader Pe		No	Yes, Permit Number:		
		•	•	ing any Restricte	•	∐No	Yes		
	ii) Are you using an AMMS Period Permit? No Yes, Permit Number:								
	Overmass Complete sections A, B, C, D, F, G, J, K and L. Complete section I if required.								
		nass Complete							
	ssment Only						may take up to 4 weeks to b	e assessed. 	
<b>Note:</b> Where using a Class 1 If a restricted bridge is to be							lete section G.		
Movement Start Date:									
	Day Move	Night №	Move						
	,		7.070						
Number of Permits Req	uirea:								
Permit Cost Oversize Only - \$25 Overmass - the greater of \$2	5 or 1 cent per	r tonne per kilom	etre (rounded	to the nearest 5	cents) of the	vehicle and it	ts permitted load.		
C Vehicle Details									
		Nover / Rigid V	ehicle		Dolly		Trailer / P	latform	
Vehicle Registration									
Number(s) 									
<b>Ground Contact</b>	Steer Axle	Drive A	xle	Dolly	Trailer	$\neg$			
Width (m)									
Block Truck (if required)									
Block Truck Registration Number(s):		Combination Length including Block Truck (metres)							
<b>D</b> Load Details									
Load Description									
Load Description									
Make and Model					Mass	of the Load	only (tonnes)		
Plus or Minus Equipment:									
<b>E</b> Loaded Combi	nation Di	mensions	Enter N/A where m	easurements are not a	oplicable to your co	ombination.			
Total Length (m)		Forward		Rea			Rear		
		Projection (m)		Projecti 	on (m)		Overhang (m)		
Total Height (m)		Height when Raised (m)		Height Lowere					
Total Width (m)									
Ground Clearance	 rmal (m)								
			65		, . [				
Wh	en raised (m)	1	OR	Ground clear	ance (m)	Once	e the width exceeds (m)	í I	

Departing from:    Latitude   Longitude	Departure Add	ress					
Route Included all rows and contrallow movements of the journey in sequence from start to end separating each road with a comma.  Makes: Investiling on a freeway linchaling ramps) documentation from the worksite must accompany this application confirming the requirement for feeway access  Floreytling To:  Latitude  Longhude  Street Address:  Street Address:  Subautt:  Postcrade  Intermediate Return Trip Requires?  Intermediate Scheme (TGS) or Transport Management Plans  Tariffe Guideness cheme (TGS) or Transport Management Plans (TMP) is required for this movement and has not been previously approved, places attach to this application. The TGS or TMP has been previously approved by HVS for the purposes of facilitating bits coverage novement or a part of the approved TGS available on our website, places late the reference number provided. Please note that previous approveds are subject to review and may be revoked if found no lunger suitable.  G. Mass and Axie Details  Owing Vehicle Types:  Prime Mover   Rigid Vehicle  Number of Axies   Details  Number of Axies   Axies Spacings    Types and Axies Spacings	Departing From:			Latitude		Longitude	
Arrival Address  Fravelling To:	Street Address:			Suburb:		Postcode	
Arrival Address  Fravelling To:  Latitude  Longitude  Street Address:  Suburb:  Postcode  Immediate Return Trip Required?    Yes   No  Contraflow & Transport Management Plans  TMP or TGS Reference Numbers symplicable for this movement and has not been previously approved, please attach to this application. The TGS or TMP must be prepared by a person holding Main Roads accreditation in Advanced Worksite Traffic Management (AWTM). If a TGS or TMP has been previously approved, please attach to this application. The TGS or TMP must be prepared by a person holding Main Roads accreditation in Advanced Worksite Traffic Management (AWTM). If a TGS or TMP has been previously desired by the Yor for the purpose of Scalaring fits covertize moment, or is part of the approved TGS validation our website, please list the reference number provided. Please note that previous approvals are subject to review and may be revoked if found no longer suitable.  G Mass and Axie Details  owing Vehicle Type:    Prime Mover   Rigid Vehicle  vale Groups: Steer Axie Group   Drive Axie Group   Dolly Axie Group   Trailer Axie Group  Tyres and Axie Spacings  Tyres and Axie Spacings	Route						
Street Addrass: Street Addrass: Suburb: Postcode Street Addrass: Suburb: Postcode Street Addrass: Suburb: Postcode Suburb: Po	Include all roads and Note: If travelling on a	contraflow movements of the a freeway (including ramps) doe	journey in sequence from sta cumentation from the worksite i	rt to end separating eac must accompany this app	h road with a comma. Dication confirming the red	quirement for freeway o	access
Street Address: Street Address: Suburb: Postcode Suburb:							
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Contraflow & Transport Management Plans   Contraflow & Transport Management Plans							
Street Addrass: Street Addrass: Suburb: Postcode Suburb:							
Street Address:							
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Street Address:	Arrival Address	I					
Contraflow & Transport Management Plans  TMP or TGS Reference Numbers applicable for this move:  If a Traffic Guidance Scheme (TGS) or Transport Management Plan (TMP) is required for this movement and has not been previously approved, please attach to this application. The TGS or TMP must be prepared by a person holding Main Roads accreditation in Advanced Worksite Traffic Management (AWTM).  If a TGS or TMP has been previously approved by HVS for the purposes of facilitating this oversize movement, or is part of the approved TGS available on our website, please list the reference number provided. Please note that previous approvals are subject to review and may be revoked if found no longer suitable.  G Mass and Axle Details  Towing Vehicle Type: Prime Mover Rigid Vehicle  Axle Groups: Steer Axle Group Drive Axle Group Dolly Axle Group Trailer Axle Group  Trailer Axle Group  Tyres and Axle Spacings  Tyres and Axle Spacings  Tyres and Axle Spacings  Tyres and Axle Spacings  Tyres and Axle Spacing (m)	Travelling To:			Latitude		Longitude	
Contraflow & Transport Management Plans  TMP or TGS Reference Numbers applicable for this move:  If a Traffic Guidance Scheme (TGS) or Transport Management Plan (TMP) is required for this movement and has not been previously approved, please attach to this application. The TGS or TMP must be prepared by a person holding Main Roads accreditation in Advanced Worksite Traffic Management (AWTM).  If a TGS or TMP has been previously approved by HVS for the purposes of facilitating this oversize movement, or is part of the approved TGS available on our website, please list the reference number provided. Please note that previous approvals are subject to review and may be revoked if found no longer suitable.  G Mass and Axle Details  Towing Vehicle Type: Prime Mover Rigid Vehicle  Axle Groups: Steer Axle Group Drive Axle Group Dolly Axle Group Trailer Axle Group  Trailer Axle Group  Tyres and Axle Spacings  Number of Axles Axles Axles Axles Axles Axles Axles Spacings  Axles Spacing (m)  Axles Spacing (m)  Axles Spacing (m)  Axles Spacing (m)  Tyres and Axles Spacing (m)  Tyres and Axles Spacing (m)	Church Addunce			Cultural			
Contraflow & Transport Management Plans  TMP or TGS Reference Numbers applicable for this move:    If a Traffic Guidance Scheme (TGS) or Transport Management Plan (TMP) is required for this movement and has not been previously approved, please attach to this application. The TGS or TMP has been previously approved by HVS for the purposes of facilitating this oversize movement, or is part of the approved TGS available on our website, please list the reference number provided. Please note that previous approvals are subject to review and may be revoked if found no longer suitable.    G   Mass and Axle Details				Suburb:		Postcode	
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If a Traffic Guidance Scheme (TGS) or Transport Management Plan (TMP) is required for this movement and has not been previously approved, please attach to this application. The TGS or TMP must be prepared by a person holding Main Roads accreditation in Advanced Worksite Traffic Management (AVITM) if a TGS or TMP has been previously approved by HVS for the purposes of facilitating this oversize movement, or is part of the approved TGS available on our website, please list the reference number provided. Please note that previous approvals are subject to review and may be revoked if found no longer suitable.  G Mass and Axle Details  Towing Vehicle Type: Prime Mover Rigid Vehicle  Axle Groups: Steer Axle Group Drive Axle Group Dolly Axle Group Trailer Axle Group  Trailer Axle Group  Tyres and Axle Spacings  Tyres per Axle (Only complete Only complete Paylor of Axles Axle Spacing Must be paid of the paylor of Axles Axle Spacing Must be paid on the paylor of Axles Axle Spacing Must be paid on the paylor of Axles Axle Spacing Must be paid from Trailer  Number of Axles Axle Spacings  Tyres and Axles being lifted? Yes No If Yes, which Axles?	Contraflow & Tra	ansport Management	Plans				
If a Traffic Guidance Scheme (TGS) or Transport Management Plan (TMP) is required for this movement and has not been previously approved, please attach to this application. The TGS or TMP must be prepared by a person holding Main Roads accreditation in Advanced Worksite Traffic Management (AWTM).  If a TGS or TMP has been previously approved by HVS for the purposes of facilitating this oversize movement, or is part of the approved TGS available on our website, please list the reference number provided. Please note that previous approvals are subject to review and may be revoked if found no longer suitable.  G Mass and Axle Details  Towing Vehicle Type: Prime Mover Rigid Vehicle  Axle Groups: Steer Axle Group Drive Axle Group Dolly Axle Group Trailer Axle Group  Requested Mass (tonnes)  Tyres and Axle Spacings  Tyres per Axle (Only complete Clorky complete Mayles packing (m) Axle Spacing (m) Axl							
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Mass and Axle Details   Prime Mover   Rigid Vehicle	application. The TGS If a TGS or TMP has be	or TMP must be prepared by a een previously approved by H	ı person holding Main Roads a VS for the purposes of facilitat	ccreditation in Advance ing this oversize moven	ed Worksite Traffic Manage nent, or is part of the appr	ement (AWTM). oved TGS available or	
Axle Groups: Steer Axle Group Drive Axle Group Dolly Axle Group Trailer Axle Group  Requested Mass (tonnes)  Tyres and Axle Spacings  Tyres per Axle (Only complete Only c	please list the referen	ce number provided. Please r	ote that previous approvals a	e subject to review and	may be revoked if found	no longer suitable.	
Axle Groups: Steer Axle Group	G Mass and I	Axle Details					
Requested Mass (tonnes)  Tyres and Axle Spacings  Tyres per Axle (Only complete required axles)  Axle Spacing (m)	Towing Vehicle Ty	pe: Prime Mover	☐ Rigid Vehicle				
Tyres and Axle Spacings  Tyres per Axle (Only complete required axles)  Axle Spacing (m)	Axle Groups:	Steer Axle Group	Drive Axle Group	Dolly Axle G	roup Trailer	Axle Group	
Tyres and Axle Spacings  Tyres per Axle (Only complete required axles)  Axle Spacing (m)							
Tyres per Axle (Only complete required axles)  Axle Spacing (m)	-						
Tyres per Axle (Only complete required axles)  Axle Spacing (m)	Tyros and Aylo Sn						
Axle Spacing (m)	Tyres per Axle	acings					
Platform Trailer  Number of Axles  Axle Spacings  Are any Axles being lifted? Yes No If Yes, which Axles?							
Are any Axles being lifted? Yes No If Yes, which Axles?	Axle Spacing (m)	] +	_]+	]+ [_]+ [		]+	$+$ $\square$ $\square$ $\square$
	Platform Trailer	Number of Axles	Axle Spa	cings			
	re any Axles being	lifted? Yes No	If Yes, which Axles?				

Traffic Escort Permi Complete this section only if your move	ts Only ement requires a Traffic Escort Warden.					
Movement Time: Daytime	e 🗌 Night 📗 Pilbara Pre-Dawn 📗 🛭	Perth Metro Pre-Day	wn			
Are you travelling in convoy?	Yes No					
If yes, please specify the nur	nber in convoy:					
Booking Reference Number						
<b>Note:</b> If a Traffic Escort Warden has n this requirement will result in your Si	not already been booked then a Traffic Escort Ward ingle Trip Application being denied.	len Booking Applicatio	on must accompany t	his applic	ation. Failure to comply with	
	ic Escort Warden must be submitted four (4) busing ication is submitted within four (4) business days o		nencement of the mo	ve. Main	Roads does not guarantee	
Further Details Please list any other details that may b	pe relevant to vour movement					
<b>J</b> Contact Details						
Contact Name						
Contact Phone Number		Fax Number				
Mobile Phone Number		Email Address				
<b>K</b> Payment Options						
• • • • • • •	ent method by ticking the appropriate box.					
	ard you will require a MOVES account. If you do not	t already have a MOVE	S account, please ref	er to our <u>v</u>	vebsite for further information	
about how to register.  Electronic Funds Transfer (E	·					
If you wish to pay by EFT HVS confirmed.	i will contact you when the permit is ready for payi	ment. Please note you	r permit will not be is	sued until	I the EFT payment has been	
Cash or EFTPOS  If you wish to pay by cash or	EFTPOS please visit Heavy Vehicle Services at 525 (	Great Eastern Highway	v. Redcliffe WA.			
Cheque  If you wish to pay by cheque please either post or pay directly to 525 Great Eastern Highway, Redcliffe WA. Please note your permit will not be issued until the						
cheque has cleared.	please either post or pay directly to 525 Great East	tern Highway, Redcliff	e WA. Please note you	ur permit v	will not be issued until the	
L Declaration	_					
	iently rated for this permit application and all infor	mation provided in th	is application is true a	and correc	t Tunderstand that if I have	
failed to disclose any relevant inform	ation or if any information that I have provided is f					
may be deemed invalid.						
Signature	Applicant Name			Date		

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