



**OVERSIZE LOAD PERMITS  
SUBMITTAL  
REQUIREMENTS  
E-26**

*Development Services*  
**Land Development Engineering**  
1635 Faraday Avenue  
442-339-2750  
[landdev@carlsbadca.gov](mailto:landdev@carlsbadca.gov)  
[www.carlsbadca.gov](http://www.carlsbadca.gov)

An Oversize Load or Overweight Load Permit is required any time a vehicle or object over the legal length, width, height, or weight, is moved through the City of Carlsbad.

Please submit the following:

- \_\_\_ 1. Completed application. This will become the permit upon approval.
- \_\_\_ 2. If the permit is for an extreme oversize greater than 14 feet wide or over weight load, special approval may be required. Contact the Land Development Engineering Division, (442) 339-2750, for more information.
- \_\_\_ 3. Certificate of Insurance. The Trucking Company shall provide a certificate of insurance for personal injury and property damage liability in the amount of at least \$1,000,000 (one million dollars) per incident. Certificates providing less than one month’s liability insurance coverage will not be accepted.

Certificate must specifically name the City of Carlsbad as “Additionally Insured”, as well as “Certificate Holder”. It is the responsibility of the **Trucking Company** to notify the city of any insurance policy changes or extensions.

INSURANCE CARRIER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

Oversize Load Permit fees:

\$16.00 – Single Trip

\$90.00 – Annual Permit (One year or insurance expiration, whichever occurs first)

**Request for permit must be filed at least two working days prior to proposed haul. Please email completed application along with insurance and method of payment to [landdev@carlsbadca.gov](mailto:landdev@carlsbadca.gov).**



# APPLICATION OVERSIZE OR OVERWEIGHT LOAD PERMIT E-26

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In compliance with your request and subject to all of the terms, conditions and restrictions written below and the attachments, permission is hereby granted to:	Permit Valid Between _____ AM _____  _____ PM _____ And Sunset _____  Moving Authorized <table style="width: 100%; border: none;"> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Yes</td> <td style="border: none; text-align: center;">No</td> </tr> <tr> <td style="border: none;">Saturday</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Sunday</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Sunset to</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> </table>		Yes	No	Saturday	<input type="checkbox"/>	<input type="checkbox"/>	Sunday	<input type="checkbox"/>	<input type="checkbox"/>	Sunset to	<input type="checkbox"/>	<input type="checkbox"/>	Permit Number: _____   _____ Authorized City Representative
	Yes	No												
Saturday	<input type="checkbox"/>	<input type="checkbox"/>												
Sunday	<input type="checkbox"/>	<input type="checkbox"/>												
Sunset to	<input type="checkbox"/>	<input type="checkbox"/>												
Transporter: _____														
Address: _____														
City/State/Zip _____														
Phone No. _____														
FAX No. _____														
<input type="checkbox"/> Haul <input type="checkbox"/> Drive <input type="checkbox"/> Tow	Loan or Equipment and Model No.: _____  Vehicle License No.: _____	Applicant shall deliver one copy of permit to the City of Carlsbad Police Department. 2560 Orion Way. (or FAX (760) 929-0243)												
Type of Vehicle: _____														
King Pin to Last Axle: _____	Combination Vehicle Length: _____	Sending Station: _____ Receiving Station: _____												
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>														
Maximum Height: _____	Maximum Width: _____	Maximum Overall Length: _____	Maximum Overhang: _____											
Pilot Car Required: _____	<input type="checkbox"/> One (for loads 12' to 14')		<input type="checkbox"/> Two (for loads over 14' wide)											
Axle No.	1	2	3	4	5	6	7	8	9					
Number of Tires														
Axle Spacing														
Axle Width														
Weight														
Origin: _____	Destination: _____	Trips: _____												
Authorized Roads and Streets: _____														
This permit covers only travel on streets maintained by the City of Carlsbad. No hauling permitted between 6:00 to 9:00 a.m. and 3:30 to 6:30 p.m. One approved copy of permit must be in vehicle at all times. Permittee shall indemnify, hold harmless and defend the City of Carlsbad or its officers or employees from all claims, damage, or liability to persons or property arising from or caused by any activity or work done pursuant to this permit unless the damage or liability was caused by the sole active negligence of the city or its officers or employees.								Attachments <input type="checkbox"/> Permits Conditions <input type="checkbox"/> Routing Map <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____						
<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Exempt	Fee: \$ _____	_____ Permittees Authorized Agent (signature)								_____ Date				