

1 Provide your business information

Registered Carrier Name: _____ NS Master, NSC or DOT #: _____

Address: _____

2 Tell us who to contact if we have questions

Name: _____ Phone (XXX-XXX-XXXX): _____

Fax (XXX-XXX-XXXX): _____ Email: _____

3 Indicate what type of permit you require

- One-year over dimension
 One-year over-weight
 One-year boom only
 Single use over dimension
 Single use over-weight
 Single use over dimension and weight

4 Provide the vehicle information and configuration of the move

Year: _____ Make: _____ VIN: _____ Province/State: _____

Vehicle Plate: _____ Jeep Plate: _____ Trailer Plate #1: _____ Trailer Plate #2: _____

Reg. Weight (kg): _____ Width (m): _____ Height (m): _____ Length (m): _____ Front overhang (m): _____ Rear overhang (m): _____

Provide number of axles in each axle group

Steer: _____ Drive: _____ Jeep: _____ Trailer: _____ Dolly: _____

Provide weight of each axle group

Steer (kg): _____ Drive (kg): _____ Jeep (kg): _____ Trailer (kg): _____ Dolly (kg): _____

Provide total weight of the move

Total Weight (kg): _____

Provide inter-axle spacing

Axle	1 – 2	2 – 3	3 – 4	4 – 5	5 – 6	6 – 7	7 – 8	8 – 9	9 – 10	10 – 11	11 – 12	12 – 13
Spacing (m)												

5 Tell us the route you will be travelling

Return Trip: Yes No

Permit Start Date (DD/MM/YY): _____ Commodity: _____

Start address: _____ End address: _____

Detailed Route: _____

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6 Provide payment information

Transmission of unencrypted cardholder information by email is strictly prohibited by the Province of Nova Scotia. If application is returned by email, please call the number below to provide payment information.

Visa Visa Debit MasterCard American Express Cheque/Money Order Cash (in person only)

Card number: _____ Expiry date (mm/yy): _____ Name on card: _____

7 Return the form

Electronically

Email: SMP@novascotia.ca
Phone: 902-424-5536
Fax: 902-424-4633

In-Person

Service Nova Scotia & Internal Services
6N-1505 Barrington Street
Halifax, NS B3J 2Y3

Mail

Service Nova Scotia & Internal Services
P.O. Box 1529
Halifax, NS B3J 2Y3