



Illinois Department of Transportation

To apply online go to: www.illinoistruckpermits.com
 INSTRUCTIONS Complete this worksheet before calling.
 For general Permit information call 217/782-6271.
 If applying by telephone, call one of the following:
 From Springfield area and outside Illinois: 217/785-1477 ext. 1
 From Illinois (outside Springfield area): 800/252-8636 ext. 1

- For overweight moves, fill in blanks 1A-19A.
- For legal weight moves, omit blanks 6A, 10A, 11A, 12A & 13A.
- State law requires the Department to record conversations when receiving applications or issuing permits by telephone.
- This form is invalid if OPER 993 does not accompany it.

This form cannot be faxed in for a Permit.

(Type or Use Ink)

1A. VISA Exp. Date _____
 MasterCard Billing Zip Code _____
 Credit Card No. _____
 Name as it appears on CC _____
OR Permit Account _____

2A. Permittee (Owner or Lessee of vehicle) _____

3A. Applicant's Name or Work Order (Optional) _____	4A. USDOT Number (Optional) _____	5A. Type of Permit: <input type="checkbox"/> Single Trip <input type="checkbox"/> Round Trip
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6A. IDT Class (if registered with IDOT) _____ or License Plate No. _____	7A. Method of movement: <input type="checkbox"/> Loaded <input type="checkbox"/> Towed <input type="checkbox"/> Own Power
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8A. Description of object or vehicle to be moved (Include make and model or serial number and attachments)
 (overweight moves shall consist of a single object.) _____

9A. Housetrailer/Modular Section Serial No. _____	10A. No. of Axles _____	11A. Gross Weight _____
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12A. Axle Weights (beginning with steer axle) _____	13A. Axle Spacings (Distance from center to center begin with steer axle.) _____
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14A. Width _____	15A. Length _____	16A. Height _____	17A. From: (Specify origin within Illinois or State Line.) _____
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18A. Over Routes _____

19A. To: (Specific destination within Illinois or State Line) _____	Fax Permit to: Note: Additional \$1.00 Fee for Fax
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Permit – Do Not Detach – Type or Use Ink – Must be completed as directed by State Permit Office

Date _____	Permit No. _____	Authorizes one movement as described above with the following exceptions and conditions
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8P. Description of object or vehicle to be moved: _____

11P. Gross Weight _____	12P. Axle Weights <input type="checkbox"/> Legal or	Front Tandem (or Axle) _____	No Axle Exceeds _____	Rear Tandem (or Axle) _____	No Axle Exceeds _____
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14P. Width _____	15P. Length _____	16P. Height _____	17P. From _____
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18P. Over Routes _____

19P. To: _____	Effective: _____	Expires: _____	Fee: _____
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Permittee must comply with general provision on back or attached and special provision number(s): _____

Revision No. _____	Effective: _____	Expires: _____	Fee: _____
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Permit revised to read: _____

For Police Use Only	Ext. No. _____	Effective: _____	Expires: _____	Fee: _____
For verification of permit, call one of the above numbers. Checked by: Officer _____ Agency: _____ Date: _____ Remarks _____		PERMIT ENGINEER – ILLINOIS DEPARTMENT OF TRANSPORTATION This permit must be carried in the vehicle and must be available for inspection by police or Department officials. If you find this permit does not cover the move, the Permittee must contact the Department and have the permit corrected prior to starting the move.		

All movements must be made strictly in compliance with OPER 993 Special Vehicle Movement Permit Provisions Form applying as if fully written herein.

OPER 993 can be found online at www.dot.il.gov/road/trckpmts.html or www.illinoistruckpermits.com.

The permit and OPER 993 provision sheet must be carried in the vehicle and must be available for inspection by police or department officials.