

Town of Holiday Lakes

TRUCK PERMIT APPLICATION

TRUCK REGULATION ORDINANCE 98-01

APPLICANT INFORMATION

Issued to Company: _____

Company Representative: _____ Phone Number: _____

Physical Location: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

VEHICLE INFORMATION

Year: _____ Make: _____ Model: _____

Vehicle Identification Number: _____

Description of Vehicle: _____

Gross Vehicle Weight: _____ License Plate: _____

PURPOSE OF PERMIT: _____

Bond Amount: _____ Bond Company: _____

Liability Insurance: _____ Amount: _____

Submitted Copy of: Proof of Liability Insurance __ Yes __ No, Driver's License: __ Yes __ No

OFFICIAL USE ONLY BELOW THIS LINE

Permit Number _____ Issue Date: _____ **Expiration Date:** _____

Police Department Approval

Issuing Official

Title

Title