

## APPLICATION FOR A SPECIAL PERMIT TO OPERATE A TRUCK-TRACTOR - FOUR-AXLE SEMI-TRAILER COMBINATION

## **SEND TO: Special Permit Office** FAX: (506) 444-4488 **Transportation Policy Branch** email: **New Brunswick Department of Transportation** special.permits@gnb.ca P.O. Box 6000 Fredericton, NB E3B 5H1 Permit fee: \$50/year Registered owner: **Address:** City\_\_\_\_\_Prov.\_\_\_\_Postal Code\_\_\_\_\_ (\_\_\_\_\_)\_\_\_\_\_Fax: (\_\_\_\_\_\_)\_\_\_\_ Phone no: TRUCK TRACTOR: \_\_\_\_\_\_Year: \_\_\_\_\_\_ Make: Full serial number: Plate no.: \_\_\_\_\_ Province of registration: \_\_\_\_\_ Gross vehicle weight rating as indicated on the truck tractor compliance label required by Transport Canada: \_\_\_\_\_ kg. Manufacturer's rated capacity of tractor front axle: \_\_\_\_\_ kg **SEMI-TRAILER:** Full serial number: Plate no.: \_\_\_\_\_ Province of registration: \_\_\_\_\_ Body: Van □ Flat deck □ Tank □ Other □ (specify) Gross vehicle weight rating as indicated on the semi-trailer compliance label required by Transport Canada: \_\_\_\_\_ kg Please refer to the vehicle configuration (next page) 1. Indicate suspension type for axles 5, 6 and 7: Mechanical spring $\Box$ Air $\Box$ 2. Indicate if axle 4 is: fixed $\Box$ liftable\* $\Box$ self steering $\Box$ \*NOTE: If the semi-trailer is equipped with a lift axle:

- The air pressure for the lift axle must not be controlled from within the cab.
- The lift axle may be fully lifted or fully lowered from within the cab.
- The semi-trailer suspension for axles 4, 5, 6 and 7 must equalize the load between all adjacent axles to within 1000 kg.

## **NOTES:**

Four-axle semi-trailers may only have one liftable axle, or one self-steering axle.

Only axle 4 may be liftable or self-steering.

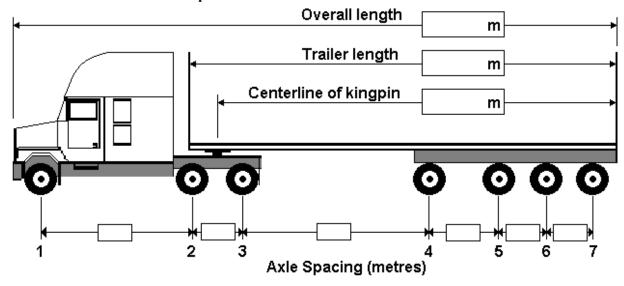
Axle group comprised of axles 5, 6, and 7 must be a tridem and must not contain a liftable axle.

ALL axles must be equipped with dual tires except the tractor steering axle.

Maximum trailer length is 16.2 metres (53' - 0").

Vehicles must be registered for the weights allowed on the permit.

Please fill in the information required below:



Axle	1	2	3	4	5	6	7
Tire size (as marked							
on tire)							
Number of tires	2	4	4	4	4	4	4
Brakes?							
(yes or no)							

Payment details (do not send of	ash by mail): cash □ cheque or money order □					
VISA □ Mastercard □						
Credit card number:	Expiry date (mm/yy):					
Send permit to: Company (provide fax number if different from above) □						
Scale District S	NB Office ☐ Location:					

I hereby apply for a special permit to operate a truck-tractor and a four-axle semi-trailer, as described above, for travel in the Province of New Brunswick.

I understand that the permit, if it is issued, shall expire one year from the date of issue. This vehicle may be inspected during the term of said permit, to evaluate its safety and weight distribution characteristics. I further understand that an unsatisfactory carrier safety rating may be grounds for not issuing a permit, or subsequent cancellation of a permit.

I acknowledge that I have read and understood the information and requirements contained in this application and I certify that the information provided on this application is true and correct.

Name (Print):_			
Signature:	Date:		