ATTACHMENT “C”

TRUCK ROUTE APPROVAL FORM

City of Ridgeland

1. Destination (Physical Address)_____________________
2. Building Permit #_____________________
3. Number and Type of Trucks________________________________________
4. Number of estimate loads_________________________________________
5. Purpose of Loads________________________________________________
6. Gross Vehicle Weight Rating and Classification_______________________________________
7. Trucking Company_________________________ Phone #______________________
8. Trucking Company Address_______________________________________________
9. Start Point(Physical Address)_____________________________________________
10. Start Time__________________________
11. Expiration Date_________________________
12. Approved Truck Route______________________________________________________________________

John M. McCollum or Designee
Public Works Director
City of Ridgeland

Date_____________________________