



# TRIP AND/OR FUEL

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Company:		DOT:	TX:
Address:		FID:	BC:
		NSC/ CVOR:	KYU:
☎:	Fax:	NEQ:	LA:
<b>PROMO CODE:</b>	<b>CREDIT CARD TYPE AND NUMBER:</b>	<b>EXPIRY:</b>	<b>CVV CODE:</b>
<b>EMAIL PERMITS TO:</b>			

**TRUCK** **JOB #:** \_\_\_\_\_

UNIT#:	YEAR:	MAKE:	PLATE#:	ST/PROV:
SERIAL #:	# AXLES	REGISTERED WITH IFTA : NO: <input type="checkbox"/> YES: <input type="checkbox"/> #		

**TRAILER**

UNIT #:	YEAR:	MAKE/TYPER:	PLATE #:	ST/PROV:
SERIAL #:	# AXLES:			

LOAD DESCRIPTION:	_____
LOAD WEIGHT:	_____
INSURANCE COMPANY:	_____
POLICY NUMBER:	_____ EXPIRY: (yyyy-mm-dd)
DRIVER'S NAME:	_____
REGISTERED WEIGHT:	OVERALL WEIGHT: _____
ORIGIN ADDRESS:	_____
DESTINATION ADDRESS:	_____

Date for permit (yyyy-mm-dd)	STATE/ PROV.	TRIP	FUEL	ROUTES/DESTINATION (ONE LINE for each change of state/prov.)	START TIME (US TRIPS ONLY)

ORDERED BY: \_\_\_\_\_

COMMENTS: \_\_\_\_\_