

WEIGHT SHEET

Please complete this form and return to sender. This information is required **prior to initiating a crossing agreement**. Please ensure the form is completed accurately. Incomplete information will result in a delay in issuing the crossing agreement.

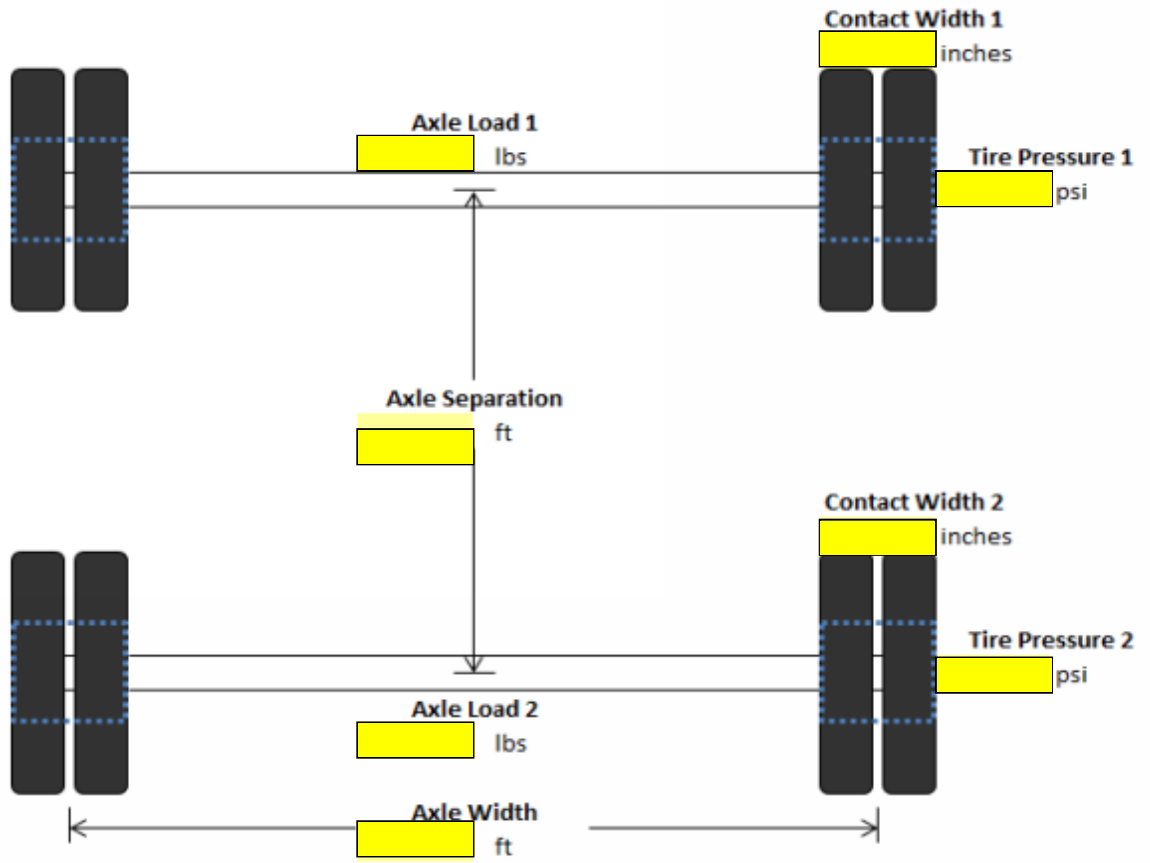
Requesting Company:	
Legal Location:	
Requesting Company File #:	
Temporary Crossing Date Required/Duration:	

Please complete all yellow boxes on the following diagrams for vehicles you will be crossing with:

TIRED VEHICLES
Vehicle Name, Make & Model
TRACKED VEHICLES
Vehicle Name, Make & Model

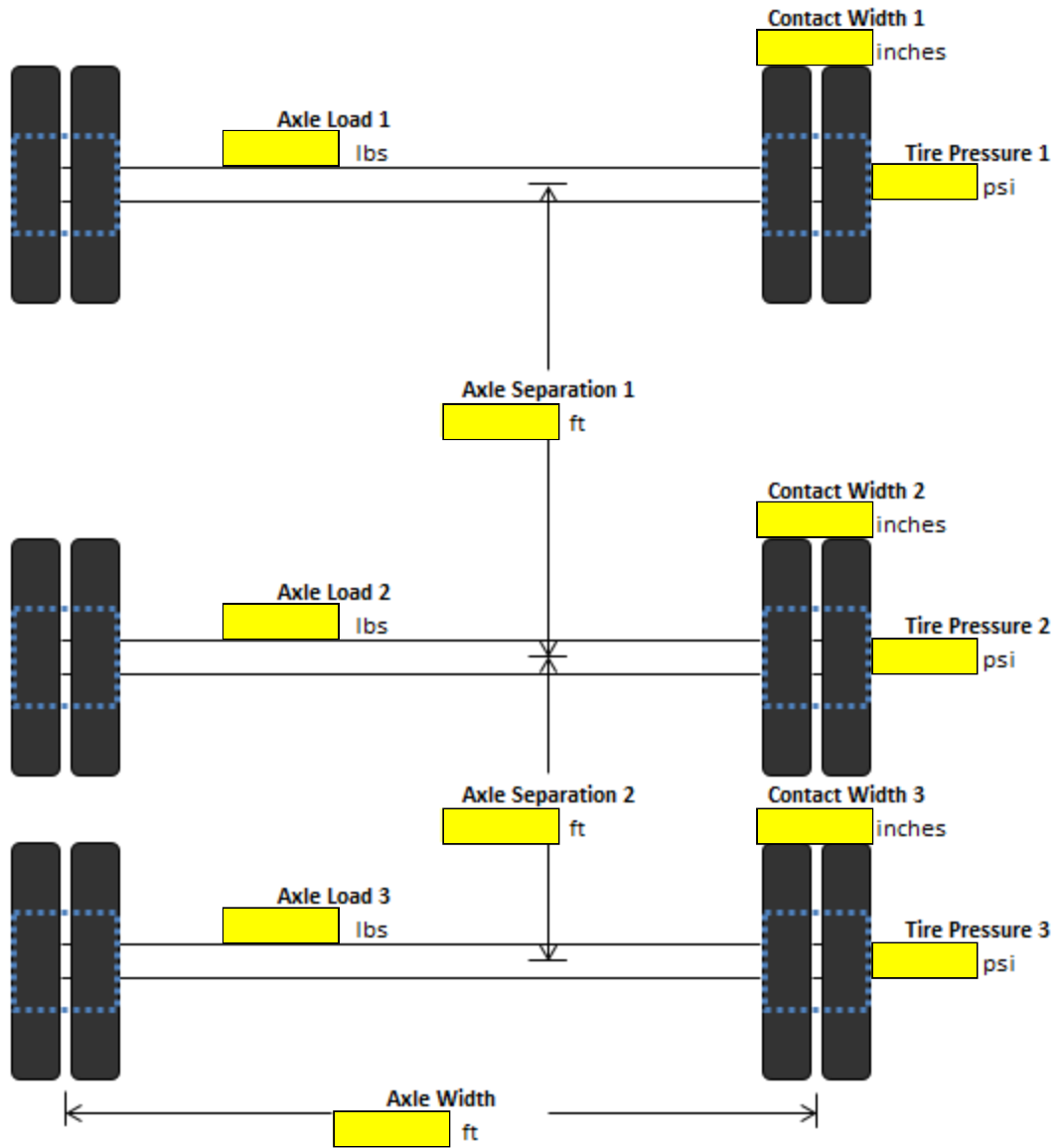
Input for Surface Vehicle Live Load

VEHICLE INFORMATION:	
VEHICLE TYPE:	Wheel: 2-Axles, 4-Wheels

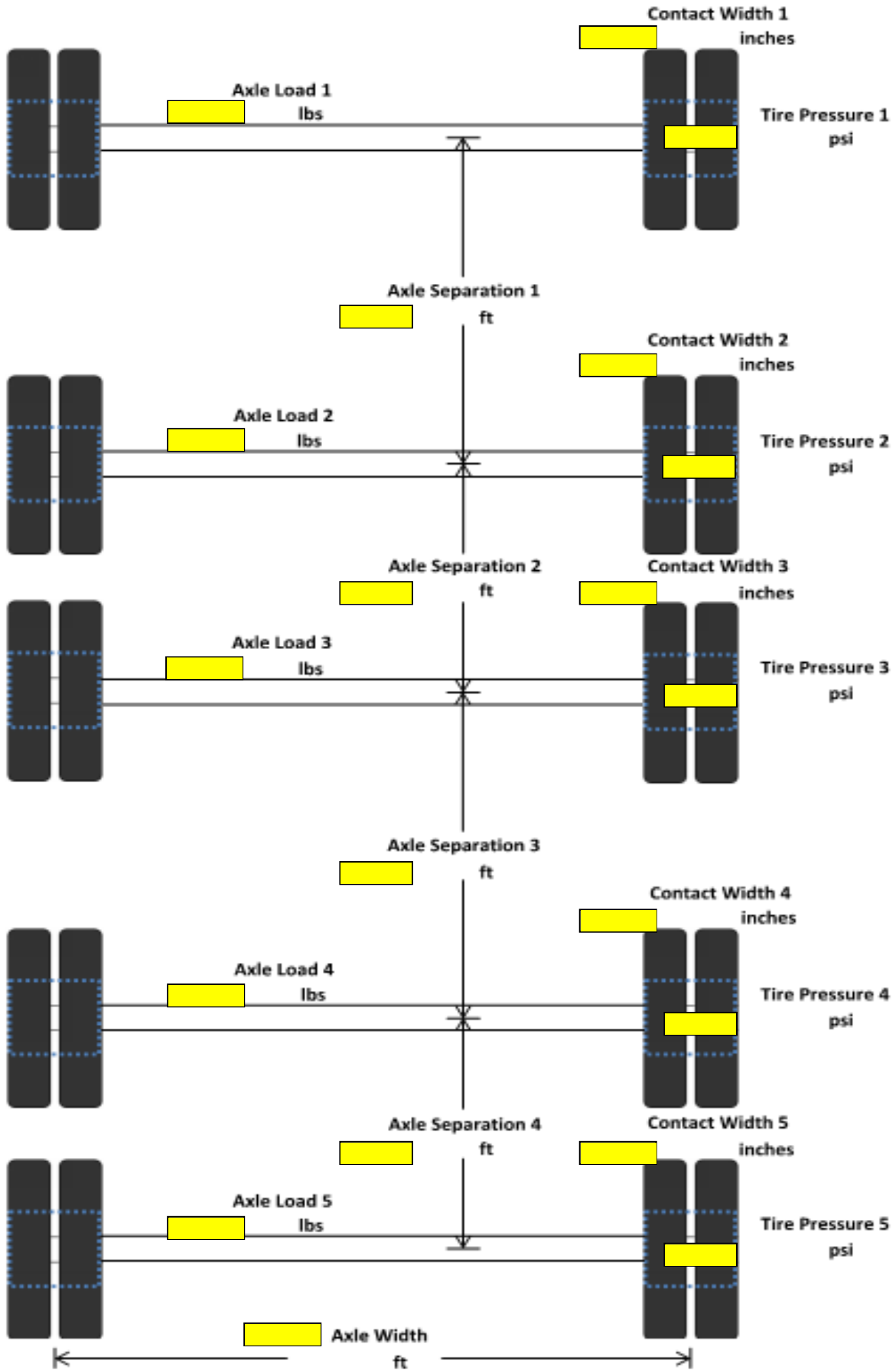


Input for Surface Vehicle Live Load

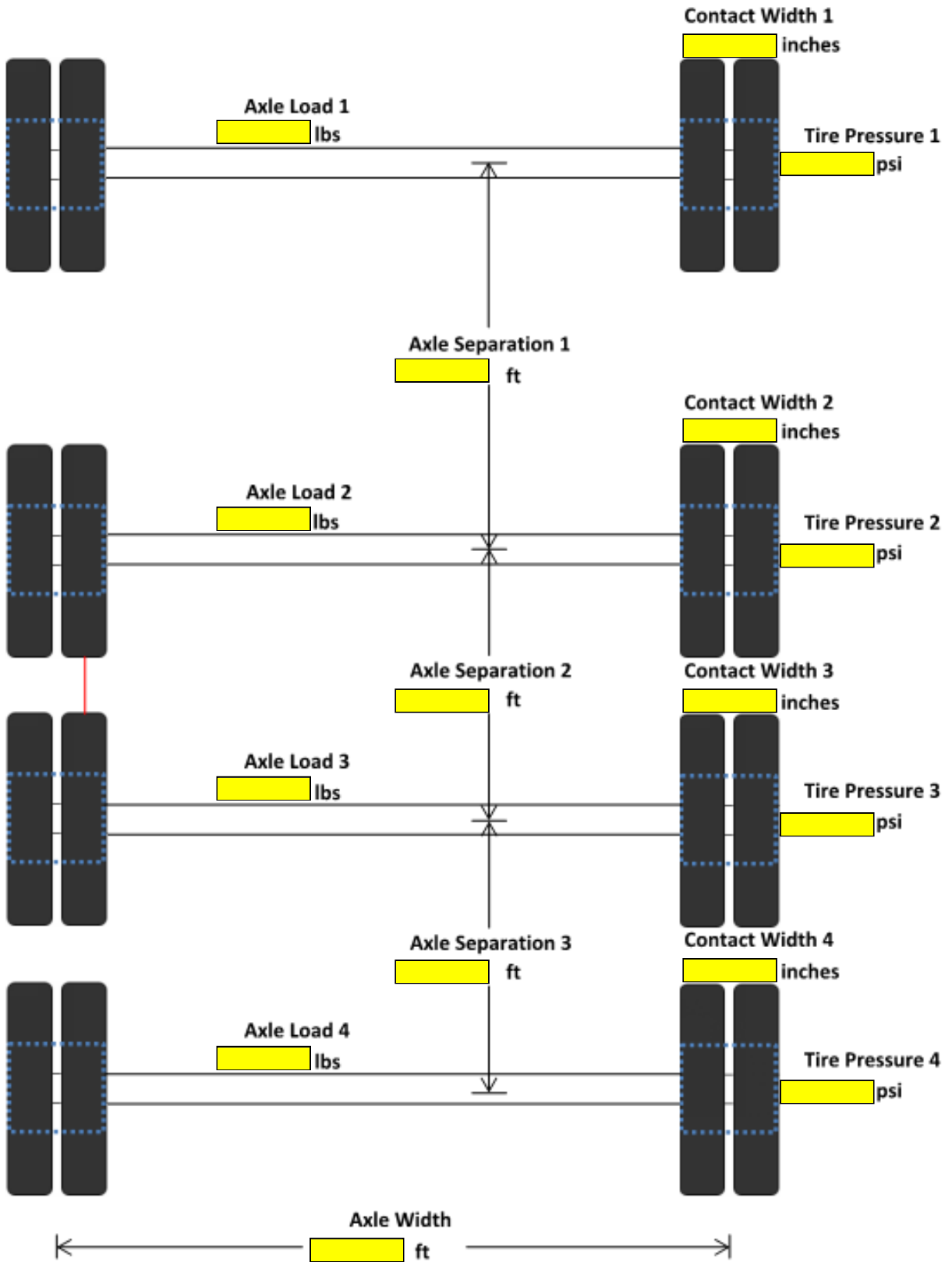
VEHICLE INFORMATION:	
VEHICLE TYPE:	Wheel: 3-Axles, 6-Wheels



VEHICLE INFORMATION:	
VEHICLE TYPE:	Wheel: 5-Axles, 20 Wheels



VEHICLE INFORMATION:	
VEHICLE TYPE:	Wheel: 4-Axles, 16 Wheels



Input for Surface Vehicle Live Load

VEHICLE INFORMATION:	
VEHICLE TYPE:	Track

