



## Services De Convoi, Breizh

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### AUTHORIZATION APPLICATION FOR CONVOI EXCEPTIONNEL PERMIT

#### Applicant

<b>Compagnie/ Company</b>		<b>Tele No</b>	
<b>Adresse/Address</b>		<b>Fax No</b>	
		<b>Mobile</b>	
		<b>E-mail</b>	
		<b>V.A.T.</b>	
<b>Code Postal/ Postcode</b>			

#### Description of Shipment

<i>Please give dimensions in metres</i>	Dimensions of the item to be transported
<b>Length</b>	
<b>Width</b>	
<b>Height</b>	
<b>Weight</b>	
<b>Load</b>	
<b>Quantity</b>	

#### Proposed journey *(Please give full addresses and telephone numbers)*

<b>Departure</b>			
<b>Destination</b>			
<b>Date of Movement</b>		<b>No. of Trips</b>	
<b>Signature</b>		<b>Dates</b>	
<b>Name: PLEASE PRINT</b>			

**Vehicle Data Sheet**

<b>Lorry or Tractor Unit</b>		<b>Trailer or Semi-Trailer</b>	
<b>Registration No *</b>		<b>Chassis No.*</b>	
		<b>Type of Trailer *</b>	
<b>Make &amp; Model*</b>		<b>Make *</b>	
<b>Unladen Weight *</b>		<b>Body *</b>	
<b>Gross Weight (GVW) *</b>		<b>Floor Height *</b>	
<b>Max. Weight (GTW) *</b>		<b>Unladen Weight *</b>	
<b>No. of Axles *</b>		<b>Maximum Weight *</b>	
<b>Length *</b>		<b>No. of Axles *</b>	
<b>Width *</b>		<b>Wheels per Axle *</b>	
<b>MOT Test Date</b>		<b>Suspension type *</b>	
		<b>Length *</b>	
		<b>Width *</b>	
		<b>MOT Test Date</b>	

**TOTAL DIMENSIONS: Vehicle and Load.**

<b>Height *</b>		<b>Total Weight Axles (Empty)</b>	
<b>Length *</b>		<b>Total Weight on Axles</b>	
<b>Overhang *</b>		<b>Width *</b>	
<b>Total Vehicle length (Empty) *</b>		<b>Weight *</b>	
<b>Axle Spacing *</b>		<b>Overback *</b>	

Please Note: ALL boxes marked with (\*) are MANDATORY