

REQUEST FOR CONVOY CLEARANCE		1. CONVOY NUMBER	2. UIC	3. DATE (YYYYMMDD)	
SECTION I - GENERAL					
4. ORGANIZATION		5. STATION		6. CONVOY COMMANDER	
7. PERSONNEL STRENGTH		8. POINT OF ORIGIN		9. DESTINATION	
a. OFFICER	b. ENLISTED				
10. DATE AND TIME	a. DEPARTURE	b. ARRIVAL	11. RATE OF MARCH		
SECTION II - CONVOY COMPOSITION					
12. NUMBER OF EACH TYPE OF VEHICLE AND DESCRIPTION <i>(Include towed equipment)</i>					
13. TOTAL NUMBER OF VEHICLES	14. NUMBER OF OVERSIZE/ OVERWEIGHT VEHICLES	15a. NO. OF SERIALS	b. TIME INTERVAL	16a. NO. OF MARCH UNITS	b. TIME INTERVAL
SECTION III - ROUTE DATA					
17. PROPOSED ROUTING <i>(Indicate US Routes, State Routes, etc.)</i>					
18. ETA AND ETD AT STATE LINES, MAJOR ROAD JUNCTIONS, MAJOR BRIDGES AND TUNNELS, METROPOLITAN AREAS AND OVERNIGHT HALT SITES <i>(Continue on a separate sheet if additional space is required)</i>					
a. LOCATION		b. ETA	c. DATE (YYYYMMDD)	d. ETD	e. DATE (YYYYMMDD)
SECTION IV - LOGISTICAL DATA					
19. BRIEF GENERAL DESCRIPTION OF CARGO <i>(Brief general description; i.e., organizational impediments, etc.) (Within security limitations)</i>					

20. ARE EXPLOSIVES TO BE TRANSPORTED?		<input type="checkbox"/> YES	<input type="checkbox"/> NO <i>(If YES, describe below)</i>			
a. CLASS	b. AMOUNT	c. DESCRIPTION	d. VEHICLES TO BE USED			
			(1) NO.	(2) TYPE		
21. STATEMENT WHY EXPLOSIVES CANNOT BE TRANSPORTED COMMERCIALY <i>(Movements involving explosives and/or other dangerous articles are required to comply with all applicable regulations or directives)</i>						
22. LOGISTICAL SUPPORT REQUIRED AT OVERNIGHT HALT SITES? <input type="checkbox"/> YES <input type="checkbox"/> NO						
<i>(If YES, complete the following) (Use separate sheet if additional space is required)</i>						
a. DATE (YYYYMMDD)	b. INSTALLATION	c. GAS (gals)	d. OIL (gals)	e. RATIONS	f. BILLETS	g. OTHER
23. REMARKS						
24. REQUESTING AGENCY				25. APPROVING AGENCY		
26. REQUESTED BY				27. APPROVED BY		
a. NAME <i>(Last, First, Middle Initial)</i>				a. NAME <i>(Last, First, Middle Initial)</i>		
b. GRADE c. TITLE				b. GRADE c. TITLE		
d. SIGNATURE				e. DATE (YYYYMMDD)		d. SIGNATURE
INSTRUCTIONS: In cases where bona-fide emergencies exist, the information contained on DD Form 1265 and DD Form 1266 may be transmitted to the appropriate headquarters by telephone or electronic transmission. In this event, reference will be made to item numbers in the sequence in which they appear on the form. Items which do not apply will be so indicated.						