



STATE OF NEW YORK  
DEPARTMENT OF TRANSPORTATION

APPLICATION FOR SPECIAL HAULING PERMIT  
AMENDMENT  
www.nypermits.org

THIS DOCUMENT IS VALID ONLY

WITH A NYS VALIDATION STAMP

PERM 39-3G (12/08)

SERVICE COMPANY INFORMATION (IF APPLICABLE)

SERVICE CO. NAME:		Co#	LOG #
<b>CARRIER INFORMATION</b>		<b>EXISTING PERMIT INFORMATION</b>	
NAME:		CUSTOMER #	
STREET:		USDOT #	
CITY:		EXISTING PERMIT NUMBER	
STATE:	ZIP CODE:		

AMENDED INFORMATION (CHECK BOXES TO INDICATE CHANGES)

<b>LICENSE PLATE</b> <input type="checkbox"/> POWER UNIT _____ <input type="checkbox"/> TRAILER _____		<b>DIMENSIONS</b> <input type="checkbox"/> OVERALL LENGTH _____ <input type="checkbox"/> OVERALL WIDTH _____ <input type="checkbox"/> OVERALL HEIGHT _____ <input type="checkbox"/> FRONT OVERHANG _____ <input type="checkbox"/> REAR OVERHANG _____		<b>ADDITIONAL TRAILERS/CONFIGURATIONS</b> <input type="checkbox"/> ADD ADDITIONAL TRAILERS. INCLUDE PERM 99 AND/OR PERM 39-4 SHEET(S) LISTING ADDITIONAL TRAILERS.	
<b>EFFECTIVE DATES</b> <input type="checkbox"/> DATE EXTENSION (EXPIRATION DATE WILL BE EXTENDED 5 DAYS)					

ROUTES

ORIGIN: \_\_\_\_\_  DESTINATION: \_\_\_\_\_

ROUTE: \_\_\_\_\_

WEIGHTS / SPACINGS

IF CHANGING ANY ITEM OTHER THAN REGISTERED GROSS VEHICLE WEIGHT, ALL AXLE WEIGHTS, TIRE RATINGS, AND SPACINGS MUST BE NOTED BELOW.

PERMITTED GROSS WEIGHT: \_\_\_\_\_  REGISTERED GROSS VEHICLE WEIGHT: \_\_\_\_\_

NUMBER OF TRACTOR AXLES: \_\_\_\_\_  NUMBER OF TRAILER AXLES: \_\_\_\_\_

AXLE NO.	STEER	2	3	4	5	6	7	8	9	10
AXLE WEIGHTS										
MAN. TIRE RATINGS										
AXLE SPACINGS FEET (') / INCHES (")	1 - 2	2 - 3	3 - 4	4 - 5	5 - 6	6 - 7	7 - 8	8 - 9	9 - 10	

SPECIAL TRAVEL REQUESTS

CONTINUOUS TRAVEL  OTHER: \_\_\_\_\_

NIGHT TRAVEL

FOR OFFICIAL USE ONLY

APPLICATION ID #		NEW PERMIT EFFECTIVE DATES – FROM:	TO:
DATE:	TIME:	(If new dates are not noted, the dates on the original permit apply. Updated requirements pages are not needed if only effective dates have changed)	
FEE:	CHECK #:	REVIEWED BY:	TIME REVIEW COMPLETED:

Requirements Same as Original Permit  Requirements Per Attached Pages Page \_\_\_\_\_ of \_\_\_\_\_

## INSTRUCTIONS

**GENERAL:** The form PERM 39-3 is used in connection with Amending a Special Hauling Permit. This form may be typed or hand printed. An Amendment form must be submitted if there are changes to the original permit and must be carried with the original on the vehicle to which it pertains. The special requirements on the Amendment will supersede the original special requirements, in addition to any other requirements stated on either the original or amended permit.

**SERVICE COMPANY INFORMATION:** (if applicable) This section is ONLY required when a NYSDOT Licensed Permit Service Company (PSC) applies for a carrier on their behalf.

**Company Name:** Name of Service Company submitting the application.

**Company Number (Co#):** This is the number assigned to the PSC by the NYSDOT Permit Office once a license agreement is signed.

**Log No:** If you are a Permit Service Company (PSC), list your application number. For individuals applying, leave this blank.

**CUSTOMER NO:** List your account number assigned to you by DOT Permit Office.

**EXISTING PERMIT NUMBER:** List the existing permit number of the permit which is to be amended.

**CARRIER INFORMATION & ADDRESS:** The name and address as shown on the existing permit which is to be amended.

**AMENDED INFORMATION:** Check the appropriate information which is to be amended from the original permit; i.e., if you are changing the origin of your trip, check this box and list the new origin. A change such as in origin or destination could change your routes. For a change in routes, all routes must be shown from origin to destination within this State.

**FOR OFFICIAL USE ONLY:** DO NOT WRITE IN THIS SPACE. This space is used to approve your Amendment and let you know if there are any additional special requirements necessary to move the load.