

ORDER

Transport Company: _____

Address: _____

Contact person, phone number: _____

We order:

- Special Permit
- Organization of escort

TRANSPORT DETAILS

Date of validity / Transport: _____

Route : _____

Truck plate number: _____

Axle numbers – Truck : _____

Trailer plate number : _____

Axle number - Trailer: _____

Total dimensions: _____ Length(m)

 _____ Width(m)

 _____ High(m)

 _____ Weight(to)

Distance between the axles(m): _____

Weight/Axles(to): _____

Description of the cargo: _____

Invoicing : _____

Date

Signature/Stamp