

Compare Transport LLC

Phone Number: 630-222-5770/630-800-3474 | Email: comparetransport@gmail.com

Permittee Name:*			Account #:		
Address: *			Cell Phone:*		
Contact Name: *		USDOT#:	FEIN Number:*		Work Phone Extension:
Email:*					Home Phone:
					Fax #:

Vehicle*	Unit No*	Year & Make*	V.I.N. or Serial #*		License # & State*	Axles*	Reg. Weight.
Tractor*							
Trailer*							

Size/Weight*	Load*	Overall*	Tractor*	Trailer*	Load Info*				Misc. Info. *	
					Description				Trailer King Pin Length:	
					Serial #					
					Make				Overhang:	
					Model #				Front: Rear:	

Axle Info*	1	2	3	4	5	6	7	8	9	10
Axle Weight*										
Axle Weight*										
Tire Size*										
Number of Tires*										

Spacing*										
Spacing*										

State Info*	State	Start Date	Origin for State Ordered				Destination for State Ordered			
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Loads with an origin or destination indicate town/city, physical address, nearest cross street or intersection where the load originates or ends.

Start/End*				
Routes*				
Start/End				
Routes				
Start/End				
Routes				

Start/End				
Routes				
Start/End				
Routes				

The information provided by the customer regarding oversize and overweight permits is solely their responsibility. By using our services and providing information for oversize and overweight permits, the customer acknowledges that they have read, understood, and agreed to these terms and conditions. The Permit is Non-exchangeable, Non-Refundable at any cost and once the Permits is Issued it will not cancelled by city/county/state or any other government agency. Tucking company is responsible to provide us routes travel jurisdiction and request us to apply permit for those travel jurisdiction. *

Please Fill the Form and Email Us at comparetransport@gmail.com



Compare Transport LL

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Credit Card Authorization Form

There is a 5% processing fee for all credit card transactions.

Credit Card Number: _____

Top portion will be destroyed after entering in our PCL compliant database

CVV Number: _____

Expiration Date: _____

Company Name: _____

DOT #: _____

Cardholder Name: _____

Billing Address: _____

Credit Card Type: VISA MasterCard AMEX

Phone Number: _____

Email Address: _____

I understand that by signing this form, I am authorizing Compare **Transport LL**
To automatically charge the indicated credit card for future services provided. There is a 5% processing
fee for all credit card transactions. **Compare Transport LL** may place small preauthorization hold on this
card to verify account information. This charge will not resolve and will not show up on my
statement.

Signed: _____ Date: _____