

NEW YORK STATE
DEPARTMENT OF TRANSPORTATION
EXCESS BANKED WEIGHT CREDIT OR WITHDRAWAL REQUEST

50 WOLF ROAD, 1ST FLOOR
ALBANY, NEW YORK, 12232
1-888-783-1685

Visit our website @ www.nypermits.org

Complete all applicable sections.

Customer Number _____

SECTION MUST BE COMPLETED BY CUSTOMER OR AUTHORIZED REPRESENTATIVE

Name _____ Federal ID Number _____
(Company or Qualified Individual)

Address _____
(Street) (City) (State) (Zip)

Phone (____) _____ Attention _____
(Individual Responsible For This Certification)

EXCESS BANKED WEIGHT CREDIT REQUEST

I hereby relinquish all Divisible Load Overweight Permit rights for the following vehicle:

Year & Make of Vehicle: _____ VIN: _____

Please credit _____ pounds as excess banked weight to this Divisible Load Overweight Permit account.

**I understand that this vehicle is no longer eligible to again be permitted in this account.
Submit Grandfather Rights Certificate and active permit certificates with this request. If lost or destroyed,
submit Perm 18/Statement of Lost/Destroyed Grandfather Rights Certificate or Divisible Load Overweight
Permit.**

EXCESS BANKED WEIGHT WITHDRAWAL REQUEST

I hereby request to withdraw the necessary weight from this Divisible Load Overweight Permit account to permit the following vehicle:

Year & Make of Vehicle: _____ VIN: _____

AFFIRMATION

FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE AS A CRIME UNDER PENAL LAW 210.45.

(Print Name and Title of Applicant or Authorized Representative)

(Signature)