



STATE OF NORTH CAROLINA  
DEPARTMENT OF TRANSPORTATION

PAT MCCRORY  
GOVERNOR

NICHOLAS J. TENNYSON  
SECRETARY

### Route Survey Form

I, \_\_\_\_\_, certify that the below route of travel over which a 16-foot wide mobile/modular home is to be transported has been physically surveyed and will allow for the safe passage of the mobile/modular home combination, taking into account the overall dimensions, the highway alignments and other obstacles along the roadway.

Mobile/modular home serial number: \_\_\_\_\_ Number of Sections: \_\_\_\_\_

Mobile/modular home dimensions: Width \_\_\_\_\_, Length \_\_\_\_\_, Height \_\_\_\_\_

Origin: \_\_\_\_\_ Destination: \_\_\_\_\_

Route: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that the Department of Transportation has the authority to suspend the permittee's privilege to obtain permits and the escort vehicle operator's certification if company/person is found performing the duties, at the time of movement, in a manner to cause an accident, personal injury, or damage to property or if the unit becomes a major impedance to traffic due to conditions that should have been known by the transporter and/or escort drivers.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Company/Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires: \_\_\_\_\_