



GROUND & TRANSPORTATION
TEMPORARY PERMIT APPLICATION

Application Contact Name: _____

Company Name: _____

Address: _____

Phone #: _____

Email: _____

Nature of Request: _____

Vehicle Plate, Year, VIN# _____

Name(s) & Driver's License # _____

State/ License Expiration _____

Method of Payment: Cash _____ Credit Card _____

Amount Paid: \$ _____ Receipt #: _____

*** A \$50.00 application fee per vehicle, per trip applies. Issuance of a Temporary Permit is at the discretion of the Authority. Please provide copies of each driver's license, vehicle registration, and proof of insurance with your application.

Applicant Signature/Date: _____

CRAA Representative Signature: _____

Date: _____