



Department of Public Safety

Motor Carrier Compliance Division

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*Colonel W. W. Hitchens
Commissioner*

*Lt. Colonel Kendrick Lowe
Deputy Commissioner*

*Major Andrew Montgomery
MCCD Adjutant*

*Lieutenant Jonathon Huff
MCCD Executive Officer*

APPLICATION FOR GEORGIA OVERSIZE/OVERWEIGHT LOAD ESCORT VEHICLE OPERATOR CERTIFICATION PROGRAM

NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

DRIVER'S LICENSE NO.: _____ STATE: _____

Date of Birth: _____

EMAIL ADDRESS: _____

PLEASE ENCLOSE THE FOLLOWING INFORMATION:

- . COPY OF THE APPLICANT'S CERTIFIED DRIVING RECORD FOR THE PREVIOUS 12 MONTHS
- . COPY OF DOCUMENTATION OF COMPLETION OF A DEFENSIVE DRIVING COURSE APPROVED BY THE NATIONAL SAFETY COUNCIL, OR AN EQUIVALENT COURSE.
- . SPONSORSHIP FROM AN EMPLOYER, IF UNDER 21 YEARS OF AGE BUT AT LEAST 18 YEARS OF AGE, WITHOUT A CLASS A COMMERCIAL DRIVER'S LICENSE.

THIS APPLICATION ALONG WITH THE ABOVE LISTED INFORMATION SHOULD BE EMAILED TO:

MSPURLOCK@GSP.NET

GEORGIA DEPARTMENT OF PUBLIC SAFETY
OVERSIZE PERMIT UNIT
ATTN: CERTIFIED ESCORT VEHICLE PROGRAM
P.O. BOX 1456
ATLANTA, GEORGIA 30371

Telephone: 404-635-8176

Website: <http://www.gamccd.net/OSPermit/OSPMMain.aspx>