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NEW YORK STATE OF OPPORTUNITY. Authority

Department of Maintenance and Operations
Office of Traffic Management
P.O. Box 189
Albany, NY 12201-0189



LCV/TANDEM EQUIPMENT APPLICATION/CERTIFICATION LEAD TRAILER

INSTRUCTIONS: Complete Sections I through III and mail to the address above in accordance with the LONGER COMBINATION VEHICLE (LCV)/TANDEM PROVISIONS (TAP-602).

(LCV)/TAND	EM PROV	ISIONS (TAP-602).											
Section 1		plicant Information	1										
Applicant Name (Corporation or Business)								Phone No.			Federal ID No.		
								()	-				
Street Address/P.O. Box No.					City			<u> </u>	State	State Zip Coo		de	
												-	
Section 1	III Tr	ailer Information							1				
Year	Make				Model			VIN No.				Company No.	
Trailer is	-1		1										
New Used - must be thoroughly inspectification. This also incommounting structure.			ected before			Original Manufacturer					ercial Fabricator		
Overall Len	gth	Body Type			No. of Axles	Lie	cens	se Plate No.		State		Tare Weight	
		n NYS HUT No.	٦	Гуре	e of Cargo				I		Ax	le Placement	
Yes No If Yes, Legal Length												Set	
ii res, Lega	ii Lengui											Adjustable	
Lead trai	lers hav	ring identical specification	ns may	be	included if	indivi	dua	lly identifi	ed below:	l			
Trailer Serial or Identification No.			Company No.					License Plate No. and State					
ı													

CERTIFICATION OF LCV/TANDEM EQUIPMENT LEAD TRAILER

Section III Trailer Certifications								
Applicant Certification								
Application is hereby made for approval to use the lead trailer(s) identification Thruway System. I certify that the trailers identified herein are equipp TANDEM PROVISIONS (TAP-602), and will not be modified or used in L while in violation of these Provisions.	ed in accordance with the LONGER COMBINATION VEHICLE (LCV)/							
Authorized Applicant Representative Name (print or type)	Title							
Authorized Applicant Representative Signature	Date							
Company Certification								
New Lead Trailer(s): Original manufacturer of trailer.								
Used* Lead Trailer(s): Pintle hook mounting structure inspected, refurbished, or reconditioned by a commercial fabricator or trucking company's maintenance department before recertification of trailer.								
* An Applicant operating LCVs/tandems may have it own maintena commercial truck garage to perform the required work on its beh								
I am an authorized representative of the company which manufact I certify that these trailers are of sufficient structural strength to pe hook or its equivalent) at the rear of the trailer. I further certify th a dolly and second semitrailer the gross weight not exceeding 63,0	ermit the satisfactory attachment of the coupling device (pintle at each coupling device will sustain the simultaneous towing of							
I further certify that the trailer(s) identified herein, whether new or used, has been thoroughly inspected within the last seven (7) days. Such inspection included, but was not limited to, a thorough examination of the following items: general condition and appearance of trailer; all components of the air brake system; electric and lighting system; suspension system including wheels and tires; and general structure, and that, in these respects and all others, the trailers described herein are structurally and mechanically sound.								
I further certify that these trailers will meet all other requirements PROVISIONS (TAP-602).	outlined in the LONGER COMBINATION VEHICLE (LCV)/TANDEM							
Authorized Company Representative Name (print or type)	Title							
Authorized Company Representative Signature	Date							
Company Name								
Section IV Thruway Authority Use Only								
Approved Disapproved								
	f Communications, Date ergency Management							