

# RECREATIONAL 3-VEHICLE COMBINATION PERMIT APPLICATION

Wisconsin Department of Transportation  
[www.dot.wisconsin.gov/business/carriers/osowgeneral.htm](http://www.dot.wisconsin.gov/business/carriers/osowgeneral.htm)  
MV2742 7/2005 s.348.27(7m) Wis. Stats.

Please Print or Type.

Applicant Name

Address

City

State

ZIP Code

Area Code - Telephone Number

E-Mail Address

Towing Vehicle Year, Make

Vehicle Type

Truck

Auto

Vehicle Identification Number

Transfer - Give previous permit number

Permit Effective Date - Desired Start Date

When application received at Wisconsin Department of Transportation

List other date in future: \_\_\_\_\_ (Not to exceed 60 days in the future)

Number of Months  
Desired

The permit is issued for a minimum of 3 months and a maximum of 12 months.

## Fee Schedule

# of Months	Amount
8 - 12	\$40.00
7	38.33
6	35.00
5	31.67
4	28.33
3	25.00

Make check payable to: **Registration Fee Trust**

Mail to: Wisconsin Department of Transportation

OS/OW Permit Unit

PO Box 7980

Madison, WI 53707-7980

If questions, telephone 608-266-7320

I accept and will comply with the 3-vehicle combination permit conditions on form MV2743.

**X** \_\_\_\_\_

(Applicant)

FOR DEPARTMENT USE ONLY - Permit/Renewal Numbers/Transfer From - To

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