



AGRICULTURAL HAULERS EXEMPTION FORM
INITIAL EXEMPTION REQUEST

ATTN: AgHauler Program Officer
E-MAIL: AgHaulerProgram@chp.ca.gov
FAX: (916) 322-3154

DATE: _____

To whom it may concern:

I respectfully request permission to operate under the Agricultural Haulers Exemption for the 2017-18 harvest season. I am aware that I must file monthly reports (due on the 15th of each month) and the exemption expires on April 30, 2018.

My California Carrier (CA) Number is: _____

CONTACT INFORMATION:

Name: _____

Business Name (optional): _____

Address: _____

City, State, ZIP: _____

E-mail: _____

Telephone: _____

Fax: _____

Preferred Method of contact: _____ Fax: _____ E-mail: _____

I plan on hauling agricultural products using the following methods (please check all that apply):

- Bins of products, secured by corner, cables, and lateral straps.
- Tubs of products, secured by bolts, welds, and/or cables
- Boxes of products, secured by corner irons, cables, and lateral straps.
- Boxes or bins of products secured by longitudinal, unitizing straps or ropes, and lateral straps.
- Other (please describe): _____

Thank you for the consideration of this request. I look forward to hearing from you.

Sincerely,