

TO:

Aegean Motorway S.A.
 Tel.: +30 2414 401010
 Fax: +30 2410 741435
 Email: mos@aegeanmotorway.gr

Date: / /

PASSAGE INFORMATION FORM FOR OVERWEIGHT / OVERSIZE VEHICLES

Company:	
Contact person:	
Tel.:	Fax:
Email:	

This form must be sent by email or fax to "Aegean Motorway S.A." - Monday to Friday (9:00 am - 03:00 pm).
 Forms that are received after 03:00 pm will be date stamped on the following working day.

Vehicle / tractor with license no.:
Trailer with license no.:
Owned by:
Overall length:
Overall width:
Overall height:
Weight of load:
Weight of vehicle:
Overall weight:
Date of passage: (one day only)

Time Period (Sunrise to Sunset):

Mobile telephone no. of accompanying vehicle:
Requested route on Aegean Motorway (Raches - Kleidi):
Type of load being transported:

Attached hereto is a sketch of the vehicle and the load (all dimensions).

THE COMPANY

Seal - Signature