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	INFRASTRUCTURE COMMISSION <u>CONVOY - REQUEST FOR TRAVEL</u>				
			E FILLED OUT IN ITS ENTIRE	<u>TY</u>	
SUBMIT	BY E-MAIL:	otcpermits@ol	nioturnpike.org OR BY FAX:	440-234-4582	
Company Name					
Contact Name Address					
City, State, Zip	, State, Zip    Number:				
All Toll Fees m transponder.	ust be pai	d on Exit b	y cash, credit card or a	n E-ZPass compatible	
0			a transponder or you must (11 numbers)		
If stopping at an of for a rest stop a	-		aza you need to let us know	the location and if it is	
IS A MESSAGE BO	OARD PRIOF	R TO THE SEF	RVICE PLAZA REQUIRED?	YES NO	
ENTRY DAY:		DATE:	TIME:		
NUMBER OF VEH	ICLES:		ENTERING INTERCHANGE	L:	
(Marl REST STOP:	x boxes below wi	ith an 'X') NO at	SERVICE PLAZA:		
<b>REFUELING:</b>	YES	NO at	SERVICE PLAZA:		
			EXITING INTERCHANGE	2:	
ENTRY DAY:		DATE:	TIME:		
NUMBER OF VEH	ICLES:		ENTERING INTERCHANGE	l:	
	k boxes below wi				
<b>REST STOP:</b>	YES	NOat	SERVICE PLAZA:		
<b>REFUELING:</b>	YES	NO at	SERVICE PLAZA:		
			EXITING INTERCHANGE	):	
ENTRY DAY:		DATE:	TIME:		
NUMBER OF VEH	ICLES:		ENTERING INTERCHANGE	C:	
(Marl) REST STOP:	x boxes below wi	ith an 'X') NO 🗌 at	SERVICE PLAZA:		
REFUELING:	YES	NO at	SERVICE PLAZA:		
			EXITING INTERCHANGE	2:	

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ENTRY DAY:	DATE:	TIME:			
NUMBER OF VEHICLES:					
(Mark boxes below with an 'X')					
<b>REST STOP:</b>	YES NO at	SERVICE PLAZA:			
<b>REFUELING:</b>	YES NO at	SERVICE PLAZA:			
		EXITING INTERCHANGE:			
ENTRY DAY:	DATE:	TIME:			
		ENTERING INTERCHANGE:			
(Mark boxes below with an 'X')					
<b>REST STOP:</b>	YES NO at	SERVICE PLAZA:			
<b>REFUELING:</b>	YES NO at	SERVICE PLAZA:			
		EXITING INTERCHANGE:			
ENTRY DAY:	DATE:	TIME:			
		ENTERING INTERCHANGE:			
(Mark boxes below with an 'X')					
REST STOP:	YES NO at	SERVICE PLAZA:			
<b>REFUELING:</b>	YES NO at	SERVICE PLAZA:			
		EXITING INTERCHANGE:			
ENTRY DAY:	DATE:	TIME:			
NUMBER OF VEH		ENTERING INTERCHANGE:			
(Mark boxes below with an 'X')					
REST STOP:		SERVICE PLAZA:			
<b>REFUELING:</b>	YES NO at	SERVICE PLAZA:			
		EXITING INTERCHANGE:			
ENTRY DAY:	DATE:	TIME:			
	ICLES:	ENTERING INTERCHANGE:			
(Mark boxes below with an 'X')					
-		SERVICE PLAZA:			
<b>REFUELING:</b>	YES NO at	SERVICE PLAZA:			
		EXITING INTERCHANGE:			