

DATE \_\_\_\_\_  
REC. NO. \_\_\_\_\_  
FEE \$ \_\_\_\_\_  
LIC. NO. \_\_\_\_\_  
APPROVED \_\_\_\_\_

**CITY OF EMPORIA  
SPECIAL HAULING LICENSE  
FEE \$10.00**

MAKE OF CAR \_\_\_\_\_

TYPE \_\_\_\_\_ LICENSE TAG NUMBER \_\_\_\_\_

MOTOR NO. \_\_\_\_\_ SERIAL NUMBER \_\_\_\_\_

NAME OF STATION  
\_\_\_\_\_

Attach copy of Certificate of Insurance as required by K. S. A. 40-3107 and 40-3118.

I affirm the above vehicle is in good mechanical condition.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date