

**Pennsylvania State Police  
Commercial Vehicle Safety Division**

**2025 Municipal Police Vehicle Size  
& Weight Enforcement Training**



**Pennsylvania State Police Commercial Vehicle  
Safety Division 1800 Herr Street (Tent Building)  
Harrisburg, PA 17103  
717-346-7347**

# **Pennsylvania Vehicle Size & Weight Enforcement Training**

This training certifies officers to conduct size & weight enforcement as required by the Pennsylvania Vehicle Code (Title 75 Pa.C.S. § 4981(a)).

## **Objectives**

- Provide officers the basic information needed to weigh & measure vehicles.
- Familiarize officers with Title 75 Pa.C.S., Chapter 49, Size, Weight, & Load.
- Familiarize officers with Title 67 Pa. Code, Chapter 179, Oversize/ Overweight Permitting.
- Familiarize officers with the proper procedures in weighing a vehicle.
- Familiarize officers with case law considering size, weight, & load.
- Provide officers the proper course of action for enforcement.

## **Program Requirements**

- Full attendance for the entire 32 hours of training. Failure to attend all 32 hours disqualifies the applicant from becoming certified. No exceptions.
- Successful completion of the training course, to include passage of one test, by a score of 80% on each test.
- Compliance with all Department inspection policies and procedures to maintain certification.

## **2025 Pennsylvania Vehicle Size & Weight Enforcement Training**

**June 10th thru June 12th**

Location: Broughton Fire Department - 1030 Cochran's Mill Road, Pittsburgh, PA, 15236

## **Class Selection Criteria**

- Class size is limited to 25 participants.
- Priority selection is placed on policing agencies in municipalities located in counties with higher occurrences of commercial motor vehicle (CMV) crashes.
- CMV traffic volume on highways & roads within the police agency's primary jurisdiction is considered.
- Agency must participate in annual FHWA weighing data reporting to PSP with regards to each Agency's vehicle weighing activities. Explained in class.
- Participants shall bring to each class: writing utensils, highlighters, note paper, calculator.
- Copies of applicable laws, regulations, & other printed training materials, will be provided.

## **Enrollment Procedure**

- The attached application shall be filled out, in totality, to be considered for training.
- Applications not entirely filled out will be removed from consideration.
- Applications are to be submitted via email to: [RA-SPMCSAPTRNCOORD@pa.gov](mailto:RA-SPMCSAPTRNCOORD@pa.gov).
- Applications will be accepted from February 1st, 2025 to March 31st, 2025.
- Applications received before or after this period will not be considered for selection.
- Applicants will receive notification of acceptance or denial to training by April 4th, 2025.
- A confirmation email will be sent for the receipt of the application.
- Questions should be directed to the training coordinator, Motor Carrier Enforcement Specialist Daulton J. Leonard: [dauleonard@pa.gov](mailto:dauleonard@pa.gov).



**Pennsylvania State Police  
Commercial Vehicle Safety Division  
Training Application Form**  
This Form to be TYPED only, no handwritten  
forms will be accepted



**COURSE NAME:**

**COURSE DATE:**

**STUDENT INFORMATION:**

**Name:**

**Agency:**

**Address:**

**County:**

**Agency Email:**

**Work Phone:**

**Cell Phone:**

**Full or Part-time Officer:**

**Agency Full or Part-time:**

**OTHER INFORMATION:**

**Previously MCSAP Certified? Yes No Where/When:**

**Previously applied for MCSAP? Yes No When:**

**Names of all currently MCSAP certified staff within your agency:**

**Hours to be dedicated to commercial vehicle enforcement:**

**MCSAP hours per month:**

**Please acknowledge Agency has a safe location to weigh/measure/inspect commercial vehicles:**

**Yes No**

**Please acknowledge Agency has a safe location to place commercial vehicles out-of-service, or there is a contingency plan in place:**

**Yes No**

**List major roadway/commercial vehicle routes upon which your agency has primary jurisdiction:**

**Approval by Chief or Head of Agency/Department:**

*My signature certifies that the agency is a full-service police agency providing 24/7/365 coverage, and the agency will submit vehicle weighing data to the CVSD as requested.*

**Name (typed):**

**Title:**

**Signature: \_\_\_\_\_**

**Fully completed applications shall be submitted via email to: [RA-SPMCSAPTRNCOORD@pa.gov](mailto:RA-SPMCSAPTRNCOORD@pa.gov)**