

MOVING PERMIT APPLICATION

NOTE: DO NOT BEGIN TO MOVE STRUCTURE UNTIL PERMIT IS APPROVED

Date _____

Permit No: _____

Moving permit is hereby issued to: _____

Date of Move: _____ Time of Move: _____

Type of structure: _____

Move From Address: _____

Move To Address: _____

Total Height: _____ ft Width: _____ ft.

City Utility Lines Involved: **YES** or **NO**

NOTE: The applicant shall be responsible for providing a map of the proposed route through the city's streets for approval.

This moving permit shall be effective only for the above stated date.

Moving fee: \$ NO COST

Moving Contractor: _____

Contact Number: _____

NOTE: The applicant shall be responsible for providing all necessary information to insure conformance with the zoning regulations.

ANY EXPENSE INCURRED BY THE CITY SHALL BE PAID BY THE HOLDER OF THE MOVING PERMIT

A DRAWING WILL BE ATTACHED SHOWING THE PROPOSED ROUTE

THE CITY WILL REQUIRE FIFTEEN (15) DAYS FOR APPROVAL

All the above applicable items have been checked and the moving permit is hereby approved for the above stated date.

APPROVED: _____

Zoning Administrator