

# MOVING BUILDING STANDARD FORM

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Type of Building: \_\_\_\_\_ Size of Building: \_\_\_\_\_

Size of Lot: \_\_\_\_\_ Zoned: \_\_\_\_\_

Date & Time of Transport: \_\_\_\_\_ Moving Company: \_\_\_\_\_

Legal Description & Physical Address moving building from (Route of Travel):

Legal Description of Property & Physical Address moving building to (Route of Travel):

I understand by signing this application that if it later can be found that any false or misleading statements are made by me in applying for and securing this license that such statements shall be sufficient grounds for immediate cancellation and revocation of such license and all rights and privileges thereunder. I also assume full responsibility of notifying the City Office at least 48 hours prior to the date of moving.

\_\_\_\_\_  
(date) (signature of applicant)

\*\*\*\*\*FOR OFFICE USE\*\*\*\*\*

The license fee, required bonds or legal description must be attached to the application prior to Council approval.

### Payment of Fees:

Transportation of Buildings \$25.00 \_\_\_\_\_  
*Amount Date paid*

**Insurance Policy:** On File (Y/N): \_\_\_\_\_ Received (Y/N): \_\_\_\_\_

#### *If more than 500 total square feet:*

Proof of Workmen's compensation: (Y/N):

Employers Liability Insurance: (Y/N):

Comprehensive general liability: (Y/N):

Comprehensive automobile liability insurance coverage:  
with a minimum limit of \$1,000,000 signed by an insurance  
carrier licensed to do business in the state of South Dakota: (Y/N):

#### *If more than 1,500 total square feet in floor space, considering all floors:*

Mover provide and maintain a Performance Bond or  
Letter of Credit in favor of the City in the amount of  
\$25,000.00 throughout the term of the license. (Y/N):

### Conditions:

Receipt #	Mayor :
Amount	
Date Approved	Finance Officer :
License #	