

MOBILE HOME MOVING STANDARD FORM

Name: _____ Phone Number: _____

Mailing Address: _____ City, State, Zip: _____

Mobile Home Park _____ Size of Home: _____

Size of Lot: _____ Year of Manufacture: _____

Date & Time of Transport: _____ Moving Company: _____

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

Legal Description of Property & Physical Address moving home 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 Home:	\$40.00	_____	_____
Resolution 2005-20		<i>Amount</i>	<i>Date paid</i>

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): _____

Conditions: _____

Receipt#: _____ Amount: _____
Date: _____
Public Works Director _____