

## **MOVING PERMIT APPLICATION**

333 S. Washington Street · PO Box 526 · Redwood Falls, MN 56283 Office: 507-616-7400 · Fax: 507-637-2417 inspections@ci.redwood-falls.mn.us

Other

**Total Fees** 

PROJECT I	NFORMATIC	<b>N</b>						
Description	of Structure							
Width		Length	Height		Height Including Moving Vehicle			
Foundation	Туре	Ba	asement/ Crawlspace		Slab			Other
Moving From	Land Owner	r						
	Address							
	Legal Descr	iption						
	Land Owner	r						
Moving To	Address							
	Legal Descr	iption						
Movement D	Date			Movement H	lours			
MOVING CO	ONTRACTOR	R/ APPLICANT						
Buildi	ng Movers I	icense require	d for structures excee	ding 16' wid	e, 20' in leng	th, or 14' in height. (	(4.06	of City Ordinance)
Applicant is;	3		wner		Moving Cont	ractor		Other
Company N	ame					License #		
Contact Per	son			Email				
Address								
Cell Phone			Phone			Fax		
REQUIRED	APPROVAL	S OF TRAVEL	ROUTE					
Redwood Fa	alls Police De	∍pt;				C	Date	
Redwood Fa	alls Public Uti	ilities;				D	Date	
Redwood Fa	alls Public Wo	orks;				C	Date	
			m Redwood County Hig ing on State Highways. APPLICATION - N				hways	s and from Minnesota
Falls specific damage suit agrees to re	cations for m ts which may pair at their e	oving a structure arise from the a expense and to t	e. The undersigned furt above work and carries he satisfaction of the C	her agrees to Liability Insur ity Engineer,	save the City ance to main any damage	v of Redwood Falls hat tain this protective conto to streets, structures,	armles overag , signs	
Applicant Si	gnature					Date		
ADDITIONA		ALS				FOR OF	FICE	USE ONLY
Certificate of Liability Insurance for all Licensed Movers			vers		Permit I	Fee		
	Detailed Tra	avel Route of mo	oved structure through the	he City	ľ	Damage Dep	oosit	\$1,000

Ш	Detailed	I ravel Route o	t moved structure	through the City

	Building Permit for	r construction	of foundation	of moved	l in building
--	---------------------	----------------	---------------	----------	---------------

Demoltion Permit for any remaining foundation from a moved out building



## **DEMOLITION/ MOVING COMPLIANCE FORM**

333 S. Washington Street · PO Box 526 · Redwood Falls, MN 56283 Office: 507-616-7400 · Fax: 507-637-2417

REQUIRED INSPECTIONS		
Public Utilities		
Electric service must be disconnected by Public Utilities.		
Authorized Signature		Date
Not Applicable		
Water & Sewer		
Water and sewer must be capped below grade. Terminatio	ns must be witnessed and inspected by W	ater/ Wastewater Department.
Authorized Signature		Date
Not Applicable		
Wells		
Provide location of any wells on property. If well is abandor	ned, provide Certificate of Abandonment to	the City.
Authorized Signature		Date
Not Applicable		
Septic		
Remove or pump and fill any septic tank or cesspool on the	e property. Provide the pumping certificate	to the City.
Authorized Signature		Date
Not Applicable		
Building Inspection		
Remove all footings and foundations associated with demo	lition. Removal must be inspected by Build	ling Official prior to backfill.
Authorized Signature		Date
Not Applicable		
Public Works		
The excavation must be backfilled in lifts and pass all comp	paction tests.	
The demolition site must be seeded and with temporary or	permanent vegatation prior to mobilizing o	ff site.
Authorized Signature	Date	
Not Applicable		
Travel Route		
The travel route must be inspected to insure no damage ha	as been done to public or private property i	n the move.
Authorized Signature		Date
Not Applicable		
SITE COMPLIANCE		
Approved By		Date
Refund Amount	Notes	
		· · · · · · · · · · · · · · · · · · ·