

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

PROJECT I	NFORMATIO	ON							
Description	of Structure								
Width		Length		Height		Height Include	ding Moving Vehi	icle	
Foundation ¹	Туре		Basement/ (Crawlspace		Slab			Other
Moving From	Land Owne	r							
	Address								
	Legal Description								
	Land Owne	r							
Moving To	Address								
	Legal Desci	ription							
Movement D	ate				Movement H	lours			
MOVING CONTRACTOR/ APPLICANT									
Buildi	ng Movers I	icense req	uired for struc	tures excee	ding 16' wid	e, 20' in leng	th, or 14' in hei	ght. (4.06	of City Ordinance)
Applicant is;				tractor		Other			
Company N	Company Name License #								
Contact Per	son				Email				
Address									
Cell Phone				Phone			Fax	<	
REQUIRED	APPROVAL	S OF TRA	VEL ROUTE						
Redwood Falls Police Dept; Date									
Redwood Falls Public Utilities;						Date			
Redwood Fa	Redwood Falls Public Works; Date								
Additional approvals may be required from Redwood County Highway Department when moving on County Highways and from Minnesota Department of Transportation when moving on State Highways.									
			APPL	ICATION - N	IOT VALID U	NTIL PROCE	SSED		
Applicant: The undersigned hereby agrees that if this permit is granted, all work performed shall be in accordance with the City of Redwood Falls specifications for moving a structure. The undersigned further agrees to save the City of Redwood Falls harmless from any and all damage suits which may arise from the above work and carries Liability Insurance to maintain this protective coverage. The undersigned agrees to repair at their expense and to the satisfaction of the City Engineer, any damage to streets, structures, signs, etc. which are caused as a result of this structure move. The work of repair may be done by the City of Redwood Falls and costs charged to and paid by applicant.									
Applicant Signature						Dat	te		
ADDITIONAL SUBMITTALS FOR OFFICE USE ONLY									
☐ Certificate of Liability Insurance for all Licensed Movers					Pe	ermit Fee			
	Detailed Tra	avel Route	of moved struct	ure through t	the City		Damage	e Deposit	\$1,000
	Building Pe	rmit for con	struction of fou	ndation of mo	oved in buildi	ng		Other	
	Demoltion F	Permit for a	ny remaining fo	undation fror	m a moved o	ut building	To	tal Fees	



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 L	Jtilities.	
Authorized Signature	Date	
■ Not Applicable		<u> </u>
Water & Sewer		
Water and sewer must be capped below grade. T	erminations must be witnessed	and inspected by Water/ Wastewater Department.
Authorized Signature	Date	
■ Not Applicable		
Wells		
Provide location of any wells on property. If well is	abandoned, provide Certificate	of Abandonment to the City.
Authorized Signature		Date
☐ Not Applicable		
Septic		
Remove or pump and fill any septic tank or cessp	ool on the property. Provide the	pumping certificate to the City.
Authorized Signature		Date
■ Not Applicable		
Building Inspection		
Remove all footings and foundations associated v	with demolition. Removal must b	be inspected by Building Official prior to backfill.
Authorized Signature		Date
■ Not Applicable		
Public Works		
The excavation must be backfilled in lifts and pass	s all compaction tests.	
The demolition site must be seeded and with tem	porary or permanent vegatation	prior to mobilizing off site.
Authorized Signature		Date
■ Not Applicable		•
Travel Route		
The travel route must be inspected to insure no da	amage has been done to public	or private property in the move.
Authorized Signature		Date
■ Not Applicable		•
SITE COMPLIANCE		
Approved By		Date
Refund Amount	Notes	•