CITY OF CASSELTON

Application for Moving Permit

(This is only an application, not a permit. Permit will be issued when application is signed and all fees and bonds have been presented to the City Auditor.)

DATE:	APPLICANT NAME:
APPLICANT ADDRESS:	
	APPLICANT EMAIL:
OWNER OF BUILDING:	
OWNER'S ADDRESS:	
MOVER ADDRESS:	
MOVER'S STATE CONTRACTOR I	ICENSE NUMBER:
ADDRESS BUILDING IS TO BE MO	OVED FROM:
ADDRESS BUILDING IS TO BE MO	OVED TO:
NEW LOCATION LEGAL DESCRIP	TION:
	IMITS:
NEW BUILDING:YES	NO IF NO, AGE OF BUILDING: Square Footage:
TYPE OF BUILDING:	TYPE OF CONSTRUCTION MATERIAL:
LENGTH OF TIME TO MOVE BUI	LDING: PROJECTED MOVING DATE:
 That the applicant will continued to, the following a. Provide the City Audional Casselton. Housemovers bond c. Proof of Liability Institute 	ng will conform to the city ordinance. omply with the City Moving Ordinance #334 which includes, but is not g. ditor with the route the building will be moved on in the city of of no less than \$50,000 filed with City Auditor. urance provided by owner or mover filed with City Auditor. ted in City Moving Ordinance #334 filed with City Auditor.
Date Approved: If not approved, state reason:	Applicant