



CITY OF CRETE APPLICATION FOR MOVING PERMIT

FEE: \$ 75.00 NUMBER: _____ DATE: _____

OWNER'S NAME: _____ PHONE: _____

OWNER'S ADDRESS: _____ E-MAIL: _____

PRESENT LOCATION OF BUILDING: _____

INTENDED LOCATION OF BUILDING: _____

TYPE OF STRUCTURE: _____

SIZE OF STRUCTURE: LENGTH _____ WIDTH _____ HEIGHT _____

NUMBER OF STORIES: _____ TRAILERING HEIGHT: _____

MOVING CONTRACTOR NAME: _____ PHONE: _____

MOVING CONTRACTOR ADDRESS: _____

FOUNDATION REMOVAL CONTRACTOR NAME: _____ PHONE: _____

PLUMBING CONTRACTOR NAME: _____ PHONE: _____

INTENDED DATE OF MOVE: _____

REQUIREMENTS

You must get prior approval from the Director of Public Works. All utilities must be abandoned, capped and locations recorded. You must contact the Director before the services are buried. Call 402-826-4312 for the Director.

Moving contractor must provide a \$5000.00 "Hold Harmless Bond" to the City of Crete; (Ord. #9-304).

Certificate of Insurance \$100,000 B.I. \$300,000 P.D. minimums to the City of Crete required from the moving contractor.

Provide a map showing intended route, and Call Digger's Hotline of Nebraska at 1-800-331-5666.

All work required to be done in accordance with Crete Municipal Code. The structure is required to be placed on its permanent foundation within 30 days of arrival at the local site; (Ord. #11-518.01). I assume complete responsibility for any liability from the moving of the above structure.

Applicant Name: _____ Date: _____

=====

Official use below:

Building Inspector: _____ Date: _____

Director of Public Works: _____ Date: _____

Chief of Police: _____ Date: _____

***PERMIT VALID FOR FOLLOWING TIME FRAME:** _____