MOVING PERMIT APPLICATION



Proposed move date:/				
Property Owner	_ Phone ()		_
Address	_Email			
Contractor_	Phone ()		_
Business Address	_Email			
Relocation of Building:				
FromLot	Blk	_Sub		
ToLot	Blk	_Sub		
Transportation Route				
Loaded Height ft, in; Width ft, _	in;	Length	ft,	in
Type of Building: \square Residential \square Commercial \square Accessory	☐ Portable Sto	orage		
Approval of route to be verified by email if building exceeds 10' response is not received within 2 business days. (Attach copy of		ght. Route wi	ill be considere	ed approved if
Cleco Comments:				
AT&T Comments:				
Cox Com. Comments:				
Crowley PD Comments: Assigned Escorting Officer:				
Crowley City Inspector's Office		Date:/	·/	
Zoning Administrator		Date:/	//	
The contractor and owner obligate themselves to hold the City ardo hereby accept liability for damage caused to public and/or prinstructure. The owner of this building and the contractor do hereb Louisiana. The owner and contractor do also certify that all informations are contracted to the contractor do also certify that all informations.	vate property d by agree to all a	uring the relapplicable lav	ocation of the ws of the City	aforementioned of Crowley,
Contractor's Signature			Date/_	/
Owner's Signature:			Date/_	/

Review of moving permit application will require a minimum of 3 business days. Additional documentation may be required based on the information provided in this application.