



BUILDING MOVING & ROUTING PERMIT APPLICATION

- INSTRUCTIONS: PLEASE TYPE OR PRINT (IN INK) ALL REQUESTED DATA -

CURRENT LOCATION _____

BLOCK: _____ LOT: _____ TAX MAP #: _____

RELOCATING TO ADDRESS (IF WITHIN THE CITY LIMITS: _____

BLOCK: _____ LOT: _____ TAX MAP #: _____ FLOOD ZONE: _____

LOT: (CHECK ONE) CORNER _____ INTERIOR _____ SETBACKS: FRONT _____ REAR _____ SIDES _____ + _____

BUILDING OWNER: _____ ADDRESS: _____ PHONE: _____

APPLICANT: _____ CONTACT #: _____

COMPANY NAME: _____

GIVE A BRIEF DESCRIPTION AND THE SIZE OF THE BUILDING: _____

SAID BUILDING WILL BE MOVED OVER THE FOLLOWING ROUTE: _____

HEIGHT OF BUILDING LOADED: _____ WEIGHT OF BUILDING LOADED: _____

We, the undersigned, have inspected said route for our respective companies and have reached an agreement with the above named Moving Company on any and all conflicts that may be encountered over the above described route. Any change in routing must be cleared through our agencies.

COMPANY NAME	TELEPHONE	PRINT NAME	SIGNATURE	DATE
Atlanta Gas Light	912-338-8760			
Georgia Power	912-287-5469			
Bell South	912-283-9080			
CSX Transportation	912-287-4524			
Waycross Cable	912-283-2332			
Waycross Fire	912-287-2937			
Waycross Police	912-287-2921			
Waycross Traffic	912-287-2915			

I HEREBY CERTIFY THAT STATE CLEARANCE HAS BEEN RECEIVED TO MOVE THIS BUILDING, AND I AM PROVIDING THE CITY WITH A COPY OF THE STATE CLEARANCE PAPERWORK. UPON PAYMENT OF ALL FEES, THIS APPLICATION BECOMES PART OF THE ACTUAL PERMIT. THE PERMIT BECOMES NULL AND VOID IF THE AUTHORIZED WORK IS NOT COMMENCED AND COMPLETED WITHIN 30 DAYS.

BUILDING OWNER'S SIGNATURE: _____ DATE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY

Accepted by: _____ Date: _____ Approved by: _____ Date: _____
 Issued By: _____ Date: _____ Permit Fee: \$75.00 Permit #: _____

AFTER COMPLETION, MAKE ONE COPY FOR THE APPLICANT, AND A YELLOW COPY FOR THE TAX ASSESSOR. ORIGINAL STAYS IN FILE.