



CITY OF TRAVERSE CITY  
APPLICATION FOR HOUSE MOVING PERMIT  
(City Ordinance 1468)

Applicant's Name: \_\_\_\_\_  
(Last) (First) (Middle)

Driver's License Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

House Moving Business Name: \_\_\_\_\_  
\_\_\_\_ Proprietorship \_\_\_\_ Partnership \_\_\_\_ Corporation

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of house to be moved: \_\_\_\_\_ Size: \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

Describe route to be used: \_\_\_\_\_  
\_\_\_\_\_

Term of Permit - From: \_\_\_\_\_ To: \_\_\_\_\_ Time: \_\_\_\_\_

Does the item being moved meet the Michigan Legal load limit per axle? \_\_\_\_\_

Vehicle and Comprehensive General Liability Certificate in the amount of \$1million per occurrence along with an endorsement to the policy naming the City of Traverse City as additional insured attached? \_\_\_\_\_

**The undersigned, being duly sworn, deposes and says he wishes to be permitted to perform the operation, service, or act stated hereon and that the statements made above are true and correct to the best of his knowledge and belief. Deponent further says that he will comply with all provisions of the ordinances of the City of Traverse City and the laws of the State of Michigan relative to the operation, service, or act for which this permit is required during the period the permit is in effect. Deponent further agrees to hold the City of Traverse City free and harmless from all liability which may be imposed upon it, to reimburse the City of Traverse City for any legal liability that may be adjusted against it and to reimburse the City of Traverse City for all expenses of litigation in connection with the defense of claims as such liability and claims may arise because of negligence in the performance of the operation, service, or act for which the permit was issued. Deponent further says that he has contacted all utility companies (e.g. electric, phone, cable).**

**The applicant acknowledges that the City may be required from time to time to release records in its possession. The applicant hereby gives permission to the City to release any records or materials received by the City from the applicant as it may be requested to do so as permitted by the Freedom of Information Act, MCL 15.231 et seq.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Title

**Required Approvals – Completed by City Clerk’s Office (72 hour processing period)**

|                                     | Approved | Date | PC |
|-------------------------------------|----------|------|----|
| Police Department                   |          |      |    |
| Fire Department                     |          |      |    |
| Street Department                   |          |      |    |
| Engineering Department              |          |      |    |
| Light and Power (notification only) |          |      |    |
| Cable Michigan (notification only)  |          |      |    |

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**CITY OF TRAVERSE CITY HOUSE MOVING PERMIT**

\$180.00 Fee paid: \_\_\_\_\_ Above conditions approved: \_\_\_\_\_

Proof of vehicle and comprehensive general liability insurance approved: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Debbra A. Curtiss, City Clerk

Permit effective from \_\_\_\_\_ to \_\_\_\_\_.