

**APPLICATION FOR HOUSEMOVER LICENSE
CITY OF MAQUOKETA, IOWA**

APPLICANT: _____

APPLICANT'S ADDRESS: _____

APPLICANT'S TELEPHONE NUMBER: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE NUMBER: _____

NATURE OF BUSINESS: _____

I. GENERAL INFORMATION

(a) Proposed Date for the Move: _____

(b) Proposed Time for the Move: _____

(c) Building to be moved: _____

(d) Dimensions & height of the building or structure to be moved:

(e) Overall travel height: _____

(f) Address of building to be moved: _____

(g) Address the building or structure will be moved to:

(h) Legal description of the parcel the building or structure will be moved to:

(i) Attach a diagram or drawing showing the dimensions of the parcel to which the building will be moved and the location of the building or structure on that parcel.

- (j) Attach a photograph of the building or structure to be moved, sufficient to demonstrate its length, width and height

II. INSURANCE REQUIREMENTS

The applicant shall provide proof of workers compensation insurance covering his or her employees in compliance with Iowa law, and also public liability insurance issued in an amount and by a company or companies satisfactory to city covering personal injury, death or property damage suffered by anyone other than his or her employees during the course of the activities covered by the permit. The applicant shall furnish the city with a certificate or certificates of insurance of the insurance company or companies issuing the above-specified policy or policies of insurance at the time of the pre-moving conference and again on the date of the scheduled move, certifying that the applicant has such insurance in force.

- (a) Name of Applicant's Insurance Agent: _____
- (b) Address of Applicant's Insurance Agent: _____
- (c) Name of Applicant's Insurance Company: _____
- (d) Address of Applicant's Insurance Company: _____

To be completed by City staff

- (e) Insurance Certificate Attached? (at time of conference) () yes () no
- (f) Insurance Certificate Attached? (at time of move) () yes () no
- (g) Insurance covers any damages that may occur from moving a building within the City of Maquoketa () yes () no

III. PRE-MOVING CONFERENCE

Before issuance of a permit, a pre-moving conference shall be held. The pre-moving conference may include, but not be limited to, the Maquoketa Public Safety Committee, the City Manager, the Public Works Director, a representative from the Maquoketa Police Department, and any of these invited parties; a representative from each affected utility, a representative from each affected business, and any interested State or County representatives. All such representatives shall submit in writing, at or prior to the pre-moving conference, the conditions and requirements of their agencies. A general strategy for the move shall be planned and a date for the move shall be finalized at or following the pre-moving conference.

(a) Attach a map showing the proposed route of the move

To be completed by City staff

(b) Date held: _____ Time held: _____

Representatives Attending Meeting:

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Name: _____ Company: _____
Conditions/Requirements Attached: () yes () no

Others Attending: _____

IV. FEES:

The applicant shall pay a fee in the sum of \$25.00 to the City Clerk at the time the application is submitted. No application shall be processed until this fee shall be paid in

full by the applicant. The fee shall be non refundable. The permit shall expire six (6) months following the date of issuance.

To be completed by City staff

(a) Fee Paid: Receipt #: _____ Check #: _____

V. REIMBURSEMENT OF CITY COSTS

An applicant to whom a permit is granted shall reimburse the city for all costs and expenses for materials and labor related to moving the building or structure that are incurred by the city. This obligation to reimburse shall include, but not be limited to, the cost of city staff and labor billed at an hourly rate, the cost of the city engineer incurred in connection with the project, any relocation costs incurred by the city, and the costs of labor and material to repair or replace any damaged public property or public improvements. The city may require the applicant to post a bond or letter or credit in a sum sufficient to cover these anticipate expenses.

To be completed by City staff

(a) Bond or letter of credit: () yes () no

(b) Amount of bond or letter of credit: _____

VI. REFERENCES AND PREVIOUS EXPERIENCE

(a) Please list any previous moving experience and/or references we may contact:

I HEREBY CERTIFY receipt of a copy of Title III Community Protection, Chapter 10 Permits for Moving Buildings or Structures, of the Maquoketa City Code of Ordinances.

Signed this _____ day of _____, 20_____.

Signature of Applicant

I HEREBY CERTIFY that the above applicant has complied with the provisions of Title III, Chapter 10, of the Maquoketa City Code of Ordinances. This application is hereby approved and accepted this _____ day of _____, 20____.

CITY OF MAQUOKETA

City Manager