

**CITY OF FOREST CITY, IOWA
MOVING PERMIT APPLICATION**

Name of Mover: _____ Date: _____

Address: _____

Cost of Moving: _____ Tele: _____

		D.O.T. Permit No.:	
Power Unit Year & Make:		Power Unit License No. & State:	
Power Unit License Class:		Object or Load:	Overall Length:
Width:	Height:	Total Weight:	Load Length:
Axle Weights: Single Tandem Triple Quad			
Axle Spacing:			
Trip From:		Trip To:	
Routes:			

NOTICE:

The following requirements must be met before a moving permit will be issued:

- You are required to present a verification that you have obtained liability insurance in the sum of not less than one hundred thousand dollars (\$100,000) per individual, and three hundred thousand dollars (\$300,000) for each occurrence. Please submit certificate of insurance with this form.
- Attach a map of the route that will be used for moving.
- If moving an oversized load, a copy of your Iowa DOT permit for oversize loads must be submitted.
- Please submit your completed forms via email to administrator@forestcityia.com; fax to 641-585-4502; or mail to City of Forest City, Attn: City Administrator, 305 North Clark St, P.O. Box 346, Forest City, IA 50436.
- If you have any questions, please call City Administrator Daisy Huffman at 641-585-3574.

Mover Signature: _____

For office use only:

Permit No.: _____

The mover listed above, appearing to the general satisfaction of the undersigned that the proposed plans, materials, and location complies with current City ordinances and regulation; is hereby granted a moving permit for the work proposed on this application.

DATED at Forest City, Iowa, this _____ day of _____, 202__

City Administrator