Millie Youngquist, Mayor Joe Gaa, City Administrator Kelsey Brown, Finance Director Kathy Kron, City Clerk Kevin Olson, City Attorney



## City of Washington

215 East Washington Street Washington, Iowa 52353 (319) 653-6584 Phone (319) 653-5273 Fax

## **HOUSE MOVERS APPLICATION**

Business Name:	Email:
Business Address:	Phone:
Date of Move	
Current Location of the Building to be Moved _	
Future Location of the Building to be Moved	
Size of structure being moved (please provide Length, Width, and Height)	
No parking Signs (check only if needed) $\ \Box$	
Bond Provided (Minimum sum of \$1,000) $\square$	
<ul> <li>Insurance Required (please provide copies to City Clerk) □</li> <li>a. Public liability Insurance \$250,000 per person, \$500,000 per accident.</li> <li>b. Motor Vehicle Bodily Injury Liability Insurance \$250,000 per person, \$500,000 per accident.</li> <li>c. Property Damage Insurance \$100,000 per accident.</li> </ul>	
Utility Companies have been contacted: $\Box$	
Permit Fee; \$50 per day (for 1 day only) $\Box$	
Routing Plan Provided: $\Box$	
Approvals needed (For office use only):	
☐ Police ☐ City Administrator	☐ Building Official ☐ City Clerk
Signature of Applicant	Date of Application
City Clerk	Date of Approval