

Moving Permit Application

Date:	Job/Project Name:		
Present Address of building to be moved:			
Building Relocation Address:			
Owner Name, Address, Phone:			
Contractor Name ¹ :		Lic #:	
Contractor Address:		Phone #:	
Contractor Company Name ¹ , Address:			
¹ Current license and insurance information must be registered with	th Permitting Service	ces or provided with this application.	
Digital Plans Applicant Name:	Co	mpany:	
ail: Phone #:			
For Contractor and Primary Contact, do we have current FA	X # and email add	ress?	
Work Description:			
GENER	RAL		
Subtype Type—select one box:			
☐ City to County ☐ County to City ☐ In Transit ☐ Within City			
Construction Type—select one box: ☐ Brick ☐ Concrete Block ☐ Other—describe above ☐ Tilt Wa	all DWood Frame		
			□ 4
Loaded Length: Ft Loaded Width:			
Related to Code Enforcement Action? (Y/N)		Estimated Move Date:	
ROUTE DES	CDIDTION		
		ional sheet if needed)	
(Include all turns and streets from starting loc			
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NOTICE TO APPLICANT

Destruction or removal of trees is NOT authorized by this application. Removal or destruction of trees requires a separate Tree Removal Permit from the Parks Bureau at 407.246.2283.

The firms and offices listed on the next page(s) shall certify this application to signify concurrence of the proposed move and to attest that their respective service connections, etc., have been removed or sealed and plugged in a safe manner and that all proper clearances have been obtained before moving is initiated. Upon completion of move a Site Inspection is required.

There may be additional concurrences required by other governmental agencies and utility companies. The applicant is responsible for obtaining all necessary permits and approvals where applicable; i.e. Florida Department of Transportation, P.O. Box 47, Deland, FL or other companies not listed below.

City employees are not authorized to handle other than City property during a move.

The cost of services is an estimate. Should actual cost for the move exceed your deposit, you will be billed for the balance. A refund will be made if actual cost is less than your deposit.

Moving Permit Application—Page 2 Application Address:
OUC ®
The Reliable One*
Orlando Utilities Commission (OUC) Service Disconnect Request for Moving
If you are moving a house or building within the OUC service territory, please provide the information requested below.
OUC engineers will determine if there is any OUC equipment along the proposed route that may have to be temporarily relocated in order to accomplish this move. OUC Development Services will notify you in writing of any charges for relocating equipment and/or providing an OUC escort during the move. OUC will not sign off any moving permit until these charges have been paid. After payment is received, OUC requires a minimum of 48 hours advance notice prior to the actual move.
Approximate time of move: am pm Horizontal Clearance Needed: Ft
Please ensure that all utilities have been turned off prior to sending your move information to OUC. If you need to turn of OUC water and electric services, contact OUC Commercial Services at 407.236.9625. In order to process your move request, OUC must remove all meters and sever all connections to the building, including disconnect at the transformer. Complete the section below to request the appropriate services be disconnected by OUC and forward it, along with the rest of this Moving Permit Application, to OUC Development Services.
Please check the appropriate utilities servicing this site and the actions needed: Overhead Electric Remove electric meters Disconnect at transformer Remove pad mount transformer Remove electric meters Remove electric meters Remove water meters Remove water meters Remove water meters Shut off at OUC valve and leave line intact Private Street Lights Turn off Meter numbers are required in order for OUC to process your request:
Electric Meter Numbers:
Water Meter Numbers:
Your request may take 20 working days or longer for OUC to complete.

OUC - The Reliable One, Development Services, 500 S Orange Av, P.O. Box 3193, Orlando, FL 32801

PHONE 407.236.9651 FAX 407.236.9628 e-mail developmentservices@ouc.com



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Application Address:	
prescribed by the Building Official. It shall indemnify the City again	ond shall be made payable to the City of Orlando and for the amount not any damage caused by the moving of such building to streets, hich may be affected by the moving of a building. Such surety terms to effect such removal and to repair or compensate for the repairing \$200.00 for each and every days delay in completing such
application and no portion of it shall be refunded. I further agree to additional charges estimated by the Building Official to be required completion of the move. In the event that such repair or services repair or services repair or services.	I for services and equipment that may be furnished by the City in required of me are not completed within 3 days after the move, the ge) is authorized to perform such work at my expense and charge me quipment or material furnished by the City. I further agree to
In the event the move is performed without a permit, the City is aut	thorized to assess me a \$500 penalty fee.
I hereby acknowledge that I have read and understand the foreagree to conform to all City Ordinances regulating moving, an for the herein described work.	egoing and state that the above information is correct. I also id that I am the owner or authorized to act as the owner's agent
Owner Contractor/Agent	Date
Print Name	

-	
The witnessed and notarized Owner signature is rec	quired.
OWNER:	WITNESSES:
Sign:	Sign:
Print Name:	Print Name:
Title:	
Company Name:	Sign:
Mailing Address:	Print Name:
Phone:	
State of	
County of	
The foregoing instrument was acknowledged before me this _ He/she is personally known to me or has produced	day of, 20, by as identification.
	Notary Public
	Commission Expires:

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