

City of Cleveland

Moving Permit Application

This form must be filled out completely in black or blue ink.

Date: _____ Manufactured Home: Yes or No _____

Moving Building INTO or OUT of City Limits: _____

Address Building is Currently At: _____

Address Building is Moving To: _____

Owner Name: _____

Owner Mailing Address: _____

Owner Phone Number: _____

Contractor Name: _____

Contractor Address: _____

Contractor Phone Number: _____ Contractor Fax Number: _____

Total Construction Cost: _____

Signature of Applicant: _____

Office Use Only

Permit Number: _____

Total: \$65.00 _____ **Signature of City Employee:** _____