



CITY OF PONTIAC BUILDING & ZONING 115 WEST HOWARD ST. PONTIAC, IL 61764	PHONE # 815-844-1038 FAX # 815-842-3885 E-MAIL: PONTIAC@PONTIAC.ORG
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MOVE BUILDING PERMIT APPLICATION

SITE ADDRESS	
LEGAL DESCRIPTION	
P.I.N. #	
APPLICATION DATE	MOVE DATE
DESCRIPTION OF BUILDING	
SIZE/HEIGHT OF BUILDING	
CONTRACTOR	PH.
CONTRACTOR'S REGISTRATION #	
DESTINATION OF BUILDING *	
ROUTE TO BE TAKEN	
THE FOLLOWING APPROVALS NEEDED	
<input type="checkbox"/> PONTIAC STREET DEPT.	
<input type="checkbox"/> PONTIAC POLICE DEPT.	
<input type="checkbox"/> CITY ENGINEER (BRIDGE CROSSINGS, SECONDARY STREETS)	

IT SHALL BE THE RESPONSIBILITY OF THE OWNER/CONTRACTOR TO CONTACT ALL UTILITY COMPANIES, RAILROAD COMPANIES AND THE CITY OF PONTIAC OF THE ROUTE, TIMES, HEIGHT AND APPROXIMATE WEIGHT OF ALL MOVES. DUE CARE MUST BE TAKEN TO AVOID INJURY TO ALL PUBLIC AND PRIVATE PROPERTIES.

A PERMIT SHALL NOT BE ISSUED UNTIL A GOOD AND SUFFICIENT **BOND** IS EXECUTED WITH ONE OR MORE SURETIES, CONDITIONED FOR THE FULL COMPLIANCE BY THE PERSON TO WHOM SUCH PERMISSION IS GIVEN WITH ALL THE PROVISIONS OF THIS ARTICLE, AND FOR THE PAYMENT BY HIM OF ALL DAMAGES OR EXPENSES OCCASSIONED TO PUBLIC AND PRIVATE PROPERTY OR INTERESTS FOR WHICH HE MAY BE FOUND GUILTY.

ALL UTILITIES ON THE VACATED LOT MUST BE SHUT OFF, TERMINATED, REMOVED, SEALED OR CAPPED IN THE PROPER MANNER. WRITTEN NOTICE MUST BE GIVEN TO ADJACENT LOT OWNERS AND OTHERS, WHICH MAY BE TEMPORARILY AFFECTED BY LOSS OF UTILITIES. THE VACATED LOT MUST BE FILLED TO CONFORM WITH STREET GRADES AT CURB LEVEL.

*IF THIS BUILDING IS TO BE LOCATED UPON ANOTHER PARCEL WITHIN THE CITY LIMITS, A BUILDING PERMIT MUST BE IN PLACE FOR THAT NEW SITE.

- THE ISSUANCE OF A MOVING PERMIT MAY BE SUBJECT TO CITY COUNCIL APPROVAL AND THE FILING OF SUFFICIENT BOND WITH THE CITY CLERK.

THE APPLICANT HEREBY AGREES THAT THE APPROVAL OF PLANS OR THE ISSUING OF PERMITS PROCURED BY MISREPRESENTATION OF FACTS OR CONDITIONS OR MISSTATEMENTS IN APPLICATION DOES NOT LEGALIZE AN ILLEGAL ARRANGEMENT OR CONDITION.

SIGNATURE OF APPLICANT

DATE

PERMIT #

PERMIT FEE