

APPLICATION FOR DEVELOPMENT PERMIT

MOVE PERMIT
OF A BUILDING OR STRUCTURE

Estimated travel time on city streets: _____ hours.
Start Time: _____ on _____ day of _____, 20____ to approximately _____
On _____ day of _____, 20 _____. **(CONFIRM 24 HOURS PRIOR TO MOVE)**

Travel route from present address to proposed address: _____

Copy of Tax Receipt to be attached to this application.

Signature of Moving Contractor **Date**

Signature of Planning Department Official **Date**

Signature of Building Official **Date**

Applicant is responsible for obtaining **signatures** indicating notification and receipt of a copy of this application:

Chief of Fire Department _____

Chief of Police Department _____

Public Works Director _____

LCEC (Lee County Electric Coop, Inc) _____

Centurylink _____

Comcast _____

Other _____