



House Movers License Application

All applications, licenses, and permits are subject to approval.

Name of Applicant: _____

Address: _____

Phone Number: _____ Email: _____

Date of Bond: _____ Certificate of Insurance: _____

What are you removing? Metal Wood Frame Non-Combustible

Building Residence Structure

What address is this being moved from? _____

What address is this being moved to? _____

Is this outside the corporate limits of Mt. Vernon? Yes No

What route will you be taking? _____

I certify that all utility companies will be notified of the dates and route of the moving; that all damage will be replaced, repaired, or renewed under the specifications and supervision of authorized personnel.

Signature: _____ Date: _____

For Office Use Only

Subscribed and sworn to me this _____ day of _____, 20_____

Notary Public: _____

City Manager: _____ Date: _____

Date of Issue: _____ License Number: _____

Effective Date: _____ Cost: \$100.00 per Annum