APPLICATION FOR HOUSE MOVING PERMIT

15 N 6th St * P.O. Box 185 * Clear Lake, IA 50428 * 641-357-5267 (P) * 641-357-8711 (F) * www.cityofclearlake.com

FEE: $50.00 DATE: _____

Applicant Name: _____ Telephone: _____

Home Address: _____

If Applicable, Building Permit No.: _____ License Expiration Date: _____

Present Location of Building to be Moved: _____

Building to be Moved to: _____

Route: _____

BOND REQUIREMENTS: (Sec. 123.04 Clear Lake Municipal Code)
The Applicant shall post a penal bond in the minimum sum of $5,000 issued by a surety company authorized to issue such bonds in the State.

INSURANCE REQUIREMENTS: (Sec. 123.05 Clear Lake Municipal Code)
The Applicant shall have public liability insurance in effect for the duration of the permit covering the Applicant and all agents and employees for the following minimum amounts: (1) Bodily Injury - $250,000 per person; $500,000 per accident; and (2) Property Damage - $100,000 per accident.

INSURANCE CERTIFICATE AND BOND MUST BE ON FILE IN THE OFFICE OF THE CITY CLERK BEFORE THE PERMIT SHALL BE ISSUED.

Approved: Public Works Director: _____ Date: _____

Approved: Cable TV: _____ Date: _____

Approved: Alliant Energy: _____ Date: _____

Approved: Chief of Police: _____ Date: _____

_____
Signature of Applicant

Return Application To: City Clerk's Office
15 N. 6th Street
Clear Lake, Iowa 50428
(641) 357-5267

OFFICE USE ONLY

Fee Paid: _____ Insurance Received: _____ Bond Received: _____