ROUTE APPROVAL FORM

INSTRUCTIONS

This form must be filled out and presented with an application for moving permit. Applications will be rejected if this form is not completed and attached.

1. Present location of structure to be moved:

   Address __________________________________________________________

   Block No. __________________________ Lot No. _______________________

   ☐ Check here if move is through the city and not confined to state or federal highway.

2. Location where structure is being moved to:

   Address __________________________________________________________

   Block No. __________________________ Lot No. _______________________

3. Description of structure:

   A. Use (SFD, Duplex, MFD, Commercial, etc.) __________________________

   B. Height______ Length_______ Width_______ Sq.Ft._______

4. Use of structure at new location ________________________________

5. Route to be followed during move (attach separate sheet if needed). List all streets within Dallas city limits to be used for the move.

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6. Structure will be moved in: (check one)

   □  One portion
   □  #________ portions in one move (within 24 hour period)
   □  #________ portions in more than one move (separate permits required).

7. Proposed date(s) __________________ time(s) ____________________ of move(s).

8. Insurance: A policy of public liability and property damage insurance is in full force
   and effect and a copy is on file with the Building Official. This policy includes the city and its officers, agents, and
   employees as insured and is in limits of not less than:

   General Liability $500,000 per accident and per person
   Automobile $500,000 for each occurrence

9. Name of owner of structure ______________________________________________

   Address ______________________________________________________________

   Phone No. __________________________

10. House/Structure Moving Company Name

    Address ______________________________________________________________

    Phone No. __________________________   License No. _________________

I hereby certify that the foregoing statements are true and correct to the best of my knowledge.

Signature _______________________________________________________________