CITY OF OXFORD MOVING OF STRUCTURE APPLICATION

Owner's name.	
Address of property of structure to be moved:	
Address of destination of structure:	
Dimensions of structure to be moved: Width, Length	
Height	
Name of mover:	
Address of mover:	
Name of insurance company of mover:(Proof of insurance must be attached)	
Moving date and time: (Notice must be given to the Oxford Police Dept., Oxford Electric Dept., and Pl Dept. 5 days in advance)	anning
Estimate time from initial address to destination address:	
Exact Description of travel route:	
Contractor/Mover Signature	Date
By my signature, I certify that I will be held responsible for any damage do public or private property and all signs, mailboxes, ect. will be restored to condition.	
APPLICABLE SIGNATURES:	
City of Oxford Police Department:	
City of Oxford Electric Department:	
City of Oxford Fire Department:	
Mississippi Department of Transportation: (If a permit is required from MDOT, please attach a copy)	
City of Oxford Planning & Development Department:	
Fees: Permit Fee \$50.00 paid by Ck, Cash	
Moving Assistance Fee \$40.00 per man/per hour	
Minimum of 4 hours collected –Refund or overage accessed after mo	ve.
Hours Assessed Total Fee Collected \$	
Amt Refunded \$	