



BUILDING DEPARTMENT

CITY MOVING PERMIT APPLICATION

❖ **Prior to applying for a Moving Permit, both a Demolition and Foundation Permit must be obtained:**

- a. Demolition Permit for any building(s) or structure(s) to be demolished at the property where building(s) or structure(s) will be moved from: <https://southbendin.gov/departement/building/building-permits/>
- b. Demolition Permit for any building(s) or structure(s) to be demolished at the property where building(s) or structure(s) will be moved to: <https://southbendin.gov/departement/building/building-permits/>
- c. Foundation Permit for property that the building(s) or structure(s) will be moved to (Complete our New House/Accessory Structure Application(s) and provide all required documents. However, the fee will be a \$40 flat rate for foundation only, per building, and the contractor listed will be that who is doing the foundation work.): <https://southbendin.gov/wp-content/uploads/2019/02/newhome20192-1.pdf>

CITY PROPERTY MOVING PERMIT REQUIREMENTS:

1. Complete Moving Permit Application
2. Moving Contractor must provide a Certificate of Insurance naming the City of South Bend as co-insured, showing:
 - a. Property damage coverage in the amount of one million dollars (\$1,000,000.00)
 - b. Liability coverage in the amount of five million dollars (\$5,000,000.00)
3. Provide affidavits from such applicable companies with facilities along the proposed route, certifying that the applicant has deposited with such company or agency satisfactory surety to cover the cost of any damage or changes in facilities resulting from the moving of the structure over the proposed route:
 - a. All public utility companies
 - b. Railroads
 - c. Service companies
 - d. Cable television companies
4. Provide approval documentation from the following departments:
 - a. Bureau of Traffic and Lighting
 - b. Police Department
 - c. Park Department
 - d. Engineering Department
 - e. State Highway Department (if route includes any state highway)
5. All information shall immediately be forwarded to the Board of Public Works
 - ❖ Once all items and application have been completed and submitted to the Building Department, the Building Department will provide a letter to the Board of Public Works, along with a copy of all related documents, requesting application and all related documents to be reviewed at the next Board of Public Works meeting
 - ❖ After the Board of Public Works meeting, they will respond to our request, letter, application, and related documents with a stamp of approval, which will then allow the Building Department to issue this moving permit
 - ❖ In the event that the Department denies the moving permit, the applicant shall have the right to request a hearing to review such denial
6. City of South Bend Code of Ordinances (Sec. 6-6.3.- Moving permit.): https://library.municode.com/in/south_bend/codes/code_of_ordinances?nodeId=SUHITA_CH6BU_ART2BURUPR_S6-6.3MOPE
7. **Permit fee**
 - a. Any one or two story building: \$125
 - b. Any building greater than two stories in height: \$175

CITY MOVING PERMIT APPLICATION

ST. JOSEPH COUNTY | CITY OF SOUTH BEND | BUILDING DEPARTMENT

PAYMENT: _____
CHECK # _____
CARD _____
CASH _____

APPLICANT INFORMATION

DATE: _____

APPLICANT: _____ ORG/BUSINESS: _____
PHONE: _____ EMAIL: _____
ADDRESS: _____
Address City State Zip

PROPERTY OWNER: _____
PHONE: _____ EMAIL: _____
ADDRESS: _____
Address City State Zip

PROJECT INFORMATION

STRUCTURE BEING MOVED FROM: _____
TO: _____
OF STORIES OF STRUCTURE: _____

DIMENSIONS OF STRUCTURE WHEN MOUNTED (please note dimensions of ALL structures separately):

LENGTH: _____
WIDTH: _____
HEIGHT: _____
WEIGHT: _____
AXLE SPACING: _____

PROPOSED ROUTE:

FROM: _____ TO: _____
FROM: _____ TO: _____
FROM: _____ TO: _____
FROM: _____ TO: _____

DATE OF MOVE: _____ ALTERNATE DATE OF MOVE: _____

MOVING CONTRACTOR: _____

*Must provide Certificate of Insurance showing requirements as listed in the City or County Code or Ordinances

*Application can be emailed to us at building@southbendin.gov or provided to the address below for review.

*Application must be signed below.

*I certify the above to be a true and accurate to the best of my knowledge.

APPLICANT SIGNATURE

DATE

PRINT NAME

ORG/BUSINESS OR OWNER

PHONE

EMAIL