

House Move and Oversized Equipment Permit Application



**DEVELOPMENT
SERVICES
DEPARTMENT**

Development Services Customer Service Center | 1 Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2495
Litchford Satellite Office | 8320 – 130 Litchford Road | Raleigh, NC 27615 | 919-996-4200

| For Office Use Only | | Transaction Number | | Group Number | |
|-----------------------------|--|-------------------------|--------------|----------------|--|
| Movers License Number | | | | | |
| Applicant | | | | Phone | |
| Address | | | Email | | |
| City | | State | | Zip | |
| License # | | Gross License Weight | | | |
| Make | | Serial # | | Total Axles | |
| Liability Insurance Company | | | Bond Company | | |
| Property Damage Amount \$ | | Bodily Injury Amount \$ | | Bond Amount \$ | |

Vehicle Information

| Gross Weight | Equipment | Building | Combined Gross Weight | |
|--------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Gross Weight | Axle 1 | Axle 2 | Axle 3 | Axle 4 |
| Gross Weight | Axle 5 | Axle 6 | Axle 7 | Axle 8 |
| Axle Spacing | 1 to 2 _____ ft _____ in | 2 to 3 _____ ft _____ in | 3 to 4 _____ ft _____ in | 4 to 5 _____ ft _____ in |
| Axle Spacing | 5 to 6 _____ ft _____ in | 6 to 7 _____ ft _____ in | 7 to 8 _____ ft _____ in | |

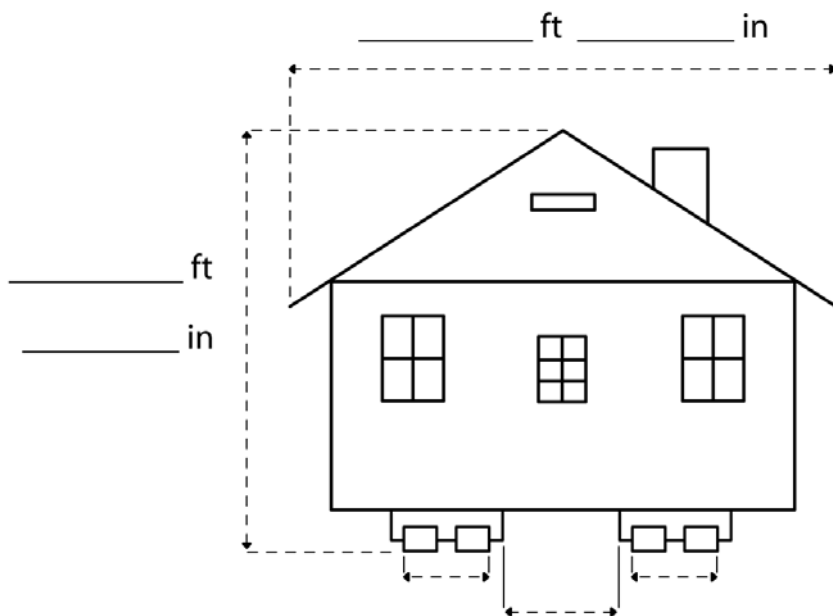
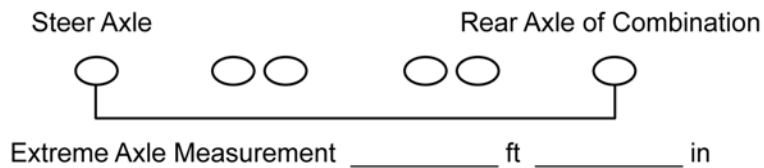
Load Dimensions

| Length | Overall of Comb _____ ft _____ in | Building Structure _____ ft _____ in |
|--------|--|---|
| Height | _____ ft _____ in | Rear Overhang _____ ft _____ in |
| Width | Overall including Overhang _____ ft _____ in | Building Structure w/o Overhang _____ ft _____ in |

Travel Information

| TRAFFIC CONTROL COMPANY | | | |
|--|--------------|--------------------------------|--------------|
| Name: | | Contact during move: | |
| Email: | | Phone: | |
| REQUESTED DATE AND TIME OF MOVE | | | |
| From (mm/dd/yy): | | To (mm/dd/yy): | |
| Time from: | | Time to: | |
| ELECTRICAL COMPANY FOR TRAFFIC SIGNALS | | | |
| Name: | | Contact during move: | |
| Email: | | Phone: | |
| ESCORT VEHICLES (list number of vehicles needed) | | | |
| Company Vehicle: YES | Total Number | Raleigh Police Department: YES | Total Number |
| Sheriff Department: YES | Total Number | State Highway Patrol: YES | Total Number |

Provide all appropriate information on drawings:



| House Code Measurements (feet and inches) | | Code 1 | Code 2 | Code 3 |
|---|---------------|-------------------|--------------------|-------------|
| Type Construction | Outside Walls | Inside Walls | Number of Chimneys | Floor |
| Roof | Furniture | Number of Stories | Origin | Destination |

Requested Route(s) of Travel (Include Map of route)

I will be traveling on State Roads and my permit number is _____

I will not be traveling on State Roads.

Please complete prior to submission

ParkLink (Parking spaces downtown Raleigh)

Date In: _____ Date Out: _____ Approved by: _____

Comments: _____

Raleigh Department of Transportation

Date In: _____ Date Out: _____ Approved by: _____

Comments: _____

Raleigh Police Department

Date In: _____ Date Out: _____ Approved by: _____

Comments: _____

Other Law Enforcement Agencies

Date In: _____ Date Out: _____ Approved by: _____

Comments: _____

| TO BE COMPLETED BY APPLICANT The following items are required to process the Permit | | | |
|--|-------|------|-----|
| | YES | NO | N/A |
| All Departments have signed off | | | |
| NCDOT approval is hereby included | | | |
| A map of the proposed route is attached (required) | | | |
| I understand that a plan review fee is required prior to processing the application and plans | | | |
| It is the applicants responsibility to adhere to all Local, State, and Federal regulations | | | |
| I certify the information given is correct; the vehicle(s) listed is properly licensed; the vehicle owner(s) has met all financial responsibility requirements; the operator is properly licensed to operate the vehicle in the State of North Carolina, and the mover is properly licensed in accordance with and is otherwise in compliance with G.S. Chapter 20-356 through 20-372. | | | |
| Signed | Title | Date | |