

# CITY OF ALEXANDRIA - MOVING / PLACEMENT PERMIT APPLICATION

625 Murray St., Ste 8 Alexandria, La 71301 Permits@cityofalex.com Office (318) 473-1372 Fax (318) 619-3403

## A. Project Location Information **IMPORTANT: Applicant must complete Sections A - J**

Structure Location: Current	
Structure Location: Proposed	(In-Office Only) MPN Project #

## A. Permit Type and Utilities Requested

<input type="checkbox"/> Moving Only (physical relocation of building from one site to another)	<input type="checkbox"/> Placement Only (placing the building on a specific site location)	<input type="checkbox"/> Moving & Placement Combo
Utilities to be connected after placement: <input type="checkbox"/> Gas <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Electricity		

## B. Permit Type and Proposed Use

<input type="checkbox"/> Single Wide Residential Trailer (Residential) <input type="checkbox"/> Double Wide Residential Trailer (Residential) <input type="checkbox"/> Number of bedrooms = _____ <input type="checkbox"/> Number of bathrooms = _____ <input type="checkbox"/> Prefab Storage Building (Residential) <input type="checkbox"/> Industrialized Portable Building (Commercial)	If Commercial: Designed Occupancy Classification per IBC: _____ <input type="checkbox"/> Assembly (A1 - A5) <input type="checkbox"/> Institutional (I1-I4) <input type="checkbox"/> Business (B) <input type="checkbox"/> Mercantile (M) <input type="checkbox"/> Education (E) <input type="checkbox"/> Residential (R1-R4) <input type="checkbox"/> Factory / Industry (F1, F2) <input type="checkbox"/> Storage (S1, S2) <input type="checkbox"/> High Hazard (H1-H5) <input type="checkbox"/> Utility and Misc. (U)
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## C. Use Description (Example: Residence, Office, Restaurant, Snow Cone Stand, Service Station, etc.)

<input type="checkbox"/> Private Ownership	<input type="checkbox"/> Public Ownership
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## D. Description of Work to be Performed

<input type="checkbox"/> Proposed Moving Date = _____
<input type="checkbox"/> Number of Hauls = _____
<input type="checkbox"/> Amount of Bond Secured = _____

## E. Building Information

(If no Construction Cost is given, the ICC Building Valuation calculation method will be used).

<input type="checkbox"/> Total Sq. Ft. = _____ (Required)
<input type="checkbox"/> Overall Height = _____ (Required)
<input type="checkbox"/> Overall Cost = _____ (Required)

## F. Describe Travel Route AND attach a street map highlighting the exact route of travel for review

## G. Building Information & Characteristics for Portable Manufactured Buildings & Trailer Houses

<input type="checkbox"/> Serial Number _____	<input type="checkbox"/> Size (Length x Width) _____
<input type="checkbox"/> Year Built _____ (Required)	<input type="checkbox"/> Color _____
<input type="checkbox"/> Model _____	<input type="checkbox"/> SFM Sticker # (Commercial) _____
<input type="checkbox"/> Make _____	<input type="checkbox"/> HUD Sticker # (Residential) _____

## H. Identification - Owner, Contractor, Designer (all correspondence sent through email)

Property Owner	Entity Name	Email Address	Phone
			Contact
Building Mover	Entity Name	Email Address	Phone
			Contact
Electrician	Entity Name	Email Address	Phone
			Contact
Plumber	Entity Name	Email Address	Phone
			Contact

# COA - MOVING NOTIFICATION TO DEPARTMENTS

625 Murray St., Ste 8 Alexandria, La 71301 Permits@cityofalex.com

Office (318) 473-1372

Fax (318) 619-3403

## A. Project Location Information (Repeated) IMPORTANT: Applicant must complete Sections A & B

Structure Location: Current

Structure Location: Proposed

(In-Office Only)

MPN Project #

☐ Proposed Moving Date and Time =

(Allow minimum of 10 days after application submittal)

## J. Departmental Signature Required

1. Before a Moving Permit can be issued, the Applicant is responsible to get signatures from all Departments listed below. This is to ensure that they have been notified of the proposed moving date and time and are prepared to make the necessary provisions to allow this move with regards to City functions. Failure to secure the appropriate signatures shall result in the non-issuance of a permit. Allow a minimum of 10 business days after submittal for a permit to be issued. Plan accordingly.
2. A COA Moving Permit is NOT required if the structure (loaded on a vehicle) has overall dimensions less than 13'-6" high from ground to top of load x 8'-6" wide from side to side x 65' long from front bumper to rear of load. If overall dimensions are greater, the applicant must also secure a DOTD permit separately.

Electrical Distribution Department  
318-473-1301

Superintendent Signature

Date

Traffic Signal Department  
318-441-6126

Superintendent Signature

Date

Police Department  
318-441-6408

Traffic Police Signature

Date

Fire Department  
318-441-6600

Chief of Fire Signature

Date

Bellsouth Telephone Company  
318-449-1984

Authorized Signature

Date

## I. Signature of Applicant for Terms of Permit Issuance

1. I acknowledge that this permit becomes null and void if work or construction authorized is not commenced within 180 days at any time after work is commenced. I have read and examined this application in its entirety and have completed the appropriate sections of this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation construction or the performance of construction. The proposed work is authorized by the owner of record and that I am or have been authorized by the owner to make this application as the authorized agent and agree to conform to all applicable laws of this jurisdiction.
2. I acknowledge that no moving or placement can be done until a Permit is issued. Minimum review time for permitting is 7 business days. I also acknowledge that if this is a moving permit application and if the structure will be relocated within the Alexandria City Limits, a Placement Permit shall also be required for an additional fee.
3. I acknowledge that any fill material brought onto this site cannot be placed in such a manner to adversely affect the adjoining properties with drainage from this subject property. All drainage discharge from this site shall be by an approved method by the City of Alexandria's Engineering Department. Call 318-473-1170 for information.
4. I acknowledge that Stormwater Pollution Prevention methods and Best Management practices will be required to be in place for any soil disturbances at either side location until it has achieved final, permanent stabilization. A separate SWPPP application may also be required to be completed. Call 318-473-1184 for information.
  - a. I specifically acknowledge that no one leaving this site shall be allowed to track dirt, mud or other debris onto the public street. Fines and penalties may apply if such is not immediately removed. Best Management practices shall be practiced on-site to minimize tracking debris onto the public street.
5. I acknowledge that minimum skirting and anchoring, tie-downs that secure the stability of the structure with a minimum of one device per each corner.
6. I acknowledge that if this structure is to be placed in a Flood Zone, the bottom of the supporting beam shall be above the Base Flood Elevation and all services (water, sewer, gas & mechanical) which run under the structure shall be located between the bottom of the supporting beam and the floor or shall be waterproofed.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## INTER-CITY OFFICE USE ONLY



## COA - UTILITY DISCONNECTION CONFIRMATION



Gas Utility Department

Authorized Signature

Date

Electrical Distribution Department

Authorized Signature

Date

Water Utility Department

Authorized Signature

Date

Sewer Utility Department

Authorized Signature

Date

Utility Customer Service Department

Authorized Signature

Date