



CORPORATION OF THE CITY OF VERNON
 3001 32 Ave, Vernon BC V1T 2L8
 Phone: 250-550-3634 Fax: 250-545-5309
 Email: buildingcounter@vernon.ca
 www.vernon.ca

MOVING PERMIT APPLICATION

DATE OF APPLICATION: _____

PERMIT NO: _____

FOLIO NO: _____

FEE: **\$250.00 (+\$500.00 Bond)**

Section 8.3 of Bylaw #4900 states an application for a moving permit to move a building shall be made in the form established and prescribed by the City and shall contain sufficient information to satisfy a building official that the proposed work will comply with the requirements of section 17 of this bylaw.

NAME OF APPLICANT	PHONE:
ADDRESS OF APPLICANT	EMAIL:
NAME OF OWNER(S) <i>(if different from applicant)</i>	PHONE:
ADDRESS OF OWNER	EMAIL:
BUILDING TYPE	RESIDENTIAL: ___ COMMERCIAL: ___ OTHER: ___ AGE: _____ HEIGHT: _____
OTHER PERMITS REQUIRED	<input type="checkbox"/> TREE REMOVAL <input type="checkbox"/> NEW BUILDING <input type="checkbox"/> SERVICE CONNECTION
DAMAGE TO MUNICIPAL WORKS	<input type="checkbox"/> OWNER OR AGENT SIGNATURE REQUIRED ON ATTACHED DOCUMENT
MOVING FROM	
LEGAL DESCRIPTION	
MOVING TO	
LEGAL DESCRIPTION	
DATE OF MOVE	
DETAILS	TO BE MOVED IN PIECE(S) HEIGHT CLEARANCE REQUIRED:
SITE PLAN	SHOWING LOCATION OF BUILDING ON NEW PROPERTY
	I/WE PROPOSE TO MOVE THE SUBJECT BUILDING ON _____, BETWEEN THE HOURS OF _____ AM/PM AND _____ AM/PM. I/WE HAVE ATTACHED A MAP SHOWING THE ROUTE UPON WHICH THE MOVE WILL TAKE PLACE, AND HAVE PRESENTED A BOND IN THE AMOUNT OF \$500.00 TO COVER ALL COSTS INCURRED BY THE CITY OF VERNON AS A RESULT OF THE RELOCATION OF THE SUBJECT BUILDING. I/WE ACCEPT FULL RESPONSIBILITY FOR ANY AND ALL LIABILITY AND/OR DAMAGE WHICH MAY RESULT DIRECTLY OR INDIRECTLY FROM THE RELOCATION OF THE SUBJECT BUILDING.
	_____ APPLICANT SIGNATURE DATE
	SEE PAGE TWO FOR APPROVALS

***IF THE APPLICANT IS NOT THE PROPERTY OWNER, OWNER AUTHORIZATION MUST BE ATTACHED**

PAGE 2
CITY OF VERNON - MOVING PERMIT APPLICATION

PERMIT NUMBER: _____

AS A CONDITION OF THIS PERMIT, THE APPLICANT IS RESPONSIBLE FOR OBTAINING APPROVAL OF THE FOLLOWING AGENCIES AND RETURNING SAME TO CITY OF VERNON:

APPROVED BY :

DATE:

- | | |
|---|-------|
| <input type="checkbox"/> CITY OF VERNON-UTILITIES
(250) 549-3620 | _____ |
| <input type="checkbox"/> CITY OF VERNON-ROADS
(250) 549-6757 | _____ |
| <input type="checkbox"/> VERNON WEIGH SCALE
(250) 549-4728 | _____ |
| <input type="checkbox"/> TERASEN GAS
1-888-224-2710 | _____ |
| <input type="checkbox"/> BC HYDRO
(250) 549-8614 OR (250) 306-2949 | _____ |
| <input type="checkbox"/> TELUS
1-800-663-3330 | _____ |
| <input type="checkbox"/> SHAW CABLE
(250) 260-4660 | _____ |
| <input type="checkbox"/> RCMP | _____ |
| <input type="checkbox"/> FIRE DEPT. | _____ |
| <input type="checkbox"/> AMBULANCE | _____ |

COMMENTS:

ISSUE DATE:

APPROVED BY
BUILDING MANAGER:



CORPORATION OF THE CITY OF VERNON
 3001 – 32 Ave, Vernon, B.C., V1T 2L8
 Phone: 250-550-3634 Fax: 250-545-5309
 buildingcounter@vernon.ca
 www.vernon.ca

SCHEDULE “3” APPOINTMENT OF AN AGENT

SUBJECT PROPERTY ADDRESS:		
LOT#	PLAN#	FOLIO:

REGISTERED PROPERTY OWNER	NAME:		PHONE:
	ADDRESS:		FAX:
	POSTAL CODE:	E-MAIL:	CELL:
OWNER’S AGENT	NAME:		PHONE:
	ADDRESS:		FAX:
	POSTAL CODE:	E-MAIL:	CELL:

I, the registered owner of the property identified above, hereby appoint the person identified above as my agent with authority to endorse on my behalf, applications, documents and permits and to represent me in all discussions with the City of Vernon staff in this regard.

As the registered property owner, please initial beside applicable permit (s):

APPLICATION TYPE	INITIAL	APPLICATION TYPE	INITIAL
Building		ALR	
Plumbing		Rezoning	
Demolition		OCP Amendment	
Development		Sign	
Development Variance		Access	
Subdivision		Tree Pruning / Removal	
Strata Conversion		Soil Removal/Deposition	
Site Profile		OTHER	

DATE: _____ **PRINT NAME:** _____ **OWNER’S SIGNATURE** _____

Rev: JAN2015



DAMAGE TO PUBLIC WORKS

NOTICE TO CONTRACTORS/OWNERS

CORPORATION OF THE CITY OF VERNON
3001 – 32 Ave, Vernon, B.C., V1T 2L8
Phone: 250-550-3634 Fax: 250-545-5309
buildingcounter@vernon.ca
www.vernon.ca

BUILDING PERMIT NUMBER:		
ADDRESS:	Lot:	Plan:
<p>Section 14.2 of Building Bylaw No. 4900 states every owner to whom a permit is issued shall be responsible for the cost of repair of any damage to municipal works that occurs in the course of work authorized by the permit. As part of the permit application the applicant must inspect and declare any existing damage to municipal works. This information can be in the form of drawings, digital images, or photographs. Upon completion of the work and prior to occupancy, the City will inspect the municipal works and assign value to damage resulting from the work. This cost must be paid before an occupancy permit will be issued and will be used at some time in the future to repair the damage.</p>		
DECLARED DAMAGE:		

I hereby acknowledge that I personally inspected the Municipal works immediately adjacent to the above noted property and have accurately stated the damage to Municipal works.

Dated in Vernon, BC this _____ day of _____, 20 ____.

Signature of Owner or Authorized Agent

Print Name

OFFICE USE ONLY:	
_____ sections of sidewalk damage X _____ meters X unit cost / meter \$ _____ = \$ _____	
_____ sections of curb damage X _____ meters X unit cost / meter \$ _____ = \$ _____	
Other damage _____ = \$ _____	
TOTAL:	\$ _____