



P.O. Box 505  
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## Manufactured and Mobile Home Moving Permit Application

DATE OF APPLICATION \_\_\_\_\_ PERMIT # \_\_\_\_\_ PAID \_\_\_\_\_ RECEIPT # \_\_\_\_\_

I, the undersigned contractor, do hereby apply for a moving permit pursuant to Ordinance No. 544 of this City and understand that the following requirements must be met before a permit is issued:

- Secure approval from the Chief of Police as to the route to be followed.
- Make the application at least 24 hours prior to each job.
- Post a \$50.00 Cash Bond or \$1000.00 Indemnity Bond for each job.
- File a letter or other evidence with the City that a Public Liability Insurance Policy is in effect on trucks and equipment being used.
- Pay a fee of \$25.00 a day.
- Comply with the weight and lighting regulations of the State of Arkansas.
- Not cause any street or alley to be blocked so as to hinder the movement of traffic for more than four (4) hours.
- Provide one or more flagmen for traffic control where necessary.
- Not remove signs, utility wires or cables, bridge railings, or other stationary objects without first obtaining permission from the City or utility company.
- Not remove any tree limbs or shrubs without first obtaining permission from the City or property owner.
- Be responsible for any damage and if no damage is evidenced after City Inspection, the \$50.00 Cash Bond will be refunded to me.

### Proposed Route

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Size of the Structure

Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

Date to Start Moving \_\_\_\_\_ Number of Days to Move \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Police Department # 367-3411 or 911 to report a problem

**Moving Permit**

The City of Monticello, Arkansas hereby grants a permit to \_\_\_\_\_,  
moving contractor, for moving houses, heavy objects, and bulky objects over, upon or through the  
streets or alleys of the City of Monticello and for other purposes on (Time and Date) \_\_\_\_\_.

Approved \_\_\_\_\_, Chief of Police

Date \_\_\_\_\_