18111 Buddy Riley Blvd.
Magnolia, Texas 77354
Phone: 281-356-2266 Option 2
http://www.cityofmagnolia.com

# MOVING OF BUILDINGS OR OTHER STRUCTURES PERMIT APPLICATION

Date: _____

Permit No._____

1. Name of building owner: _____ Phone No.:_____
2. Mailing address: _____
3. Name of moving company:_____ Address:_____

   Phone No.: _____
4. In receipt of insurance or bond in amount of $1,000,000.00 ___ Yes ___ No
5. Address of building's new location (*only required within city limits*):

   _____

   The owner of any building moved into the City of Magnolia, Texas, under Ordinance 190 shall insure that the structure complies with all local Building, Electrical, and Plumbing Ordinances within 90 days from the date the building is removed from its transport vehicle or the moving permit is issued, whichever is later.
6. Type of structure to be moved: (*check one):*

   ___ House

   ___ Other, please describe: _____

   ___ Manufactured home HUD Code compliant double or single wide built after 1976 (skip to #11)

   ___ Modular Building (skip to #11)

   The term building or structure shall mean that which contains more than 144 sq. ft. of floor space, or, being more than 10 ft. wide at the widest portion of such building.
7. Date/time of move: _____
8. Route to be taken: _____

   _____

   (If only transporting building on FM 1774 and/or FM 1488 ONLY, please skip to #11)

   No building on a transport vehicle or trailer shall be allowed to remain on the streets or alleys of the City of Magnolia, Texas for more than 48 hours
9. Name of authorized and Certified Peace Officer accompanying the building through the City:_____
10. Fee: $50.00
11. Permit not required. Ordinance 275 removed the fees associated with HUD manufactured homes, commercial buildings and residential structures consisting of more than one component.

FOR OFFICE USE:

Amount paid: $_____

PD notification date:

I, the undersigned have reviewed all applicable City of Magnolia Ordinances, and understand in consideration of the City of Magnolia issuing the following permit to me, do herewith state that I have provided true and correct information to the best of my knowledge.

Date:_____ Signed: _____

NO REFUNDS

24-48 hrs notice for inspections

Schedule Inspection: Public Works Director (281) 356-2266