



# CITY OF BRYAN, OHIO BUILDING DEPARTMENT

1399 E. High St.  
P.O. Box 190  
Bryan, Ohio 43506  
Phone: 419-633-6013  
Fax: 419-633-6015

## WORK PERMIT APPLICATION MOVING A BUILDING

*NO WORK SHALL BE STARTED PRIOR TO THE APPROVAL OF THIS APPLICATION. ALL CONTRACTORS MUST BE ON FILE WITH THE CITY OF BRYAN INCOME TAX DEPARTMENT BEFORE A PERMIT WILL BE ISSUED. CONTACT KAY REYNOLDS AT 419-636-0772 FOR TAXES.*

DATE: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

### PROPERTY INFORMATION:

OWNER NAME: \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

### CONTRACTOR INFORMATION:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

### MOVING INFORMATION:

TYPE OF BUILDING: \_\_\_\_\_ SIZE OF BUILDING \_\_\_\_\_ TO BE MOVED TO: \_\_\_\_\_

MOVING ROUTE: \_\_\_\_\_ MOVING DATE: \_\_\_\_\_ MOVING TIME: \_\_\_\_\_

ADDITIONAL INFORMATION: \_\_\_\_\_

### OFFICE USE:

\_\_\_\_\_ Bond Posted with Clerk

\_\_\_\_\_ Date

\_\_\_\_\_ Bond Approved by City Attorney

\_\_\_\_\_ Date

***AFTER COMPLETING THE ABOVE PORTION OF THE PERMIT, THE APPLICANT MUST SECURE THE APPROVAL WITH SIGNATURES OF THE FOLLOWING:***

_____ Building Inspector	_____ Date	_____ Street Commissioner	_____ Date
_____ Utilities Director	_____ Date	_____ Chief of Police	_____ Date
_____ Fire Chief	_____ Date	_____ Wastewater Superintendent	_____ Date
_____ Telephone Company	_____ Date	_____ Cable Company	_____ Date

SIGNATURE OF CITY COUNCIL MEMBERS (3 Required by Ordinance)

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