

# Letter of Clearance in Reference to the Application for Permit to Move Used Buildings on Kings Highway

<b>Owner of Building</b>			Telephone Number
Street Number	Unit/Suit/Apt.	Street Name	Street Type
P.O.Box	Rural Route	Lot/Concession	
City/Town/Municipality		Province	Postal Code

**Moving Contractor**

CVOR Number			Telephone Number
Street Number	Unit/Suit/Apt.	Street Name	Street Type
P.O.Box	Rural Route	Lot/Concession	
City/Town/Municipality		Province	Postal Code

**Description of building and move (Check appropriate response)**

A. Building is the property of Applicant  Yes  No

**B. Dimension and weight information (Not loaded on vehicle)**

Length	Width - with eaves	Height	Weight - Approximate
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**C. Dimension and weight information (Loaded on vehicle)**

Length	Width - with eaves	Height	Weight - Approximate
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**D. Present location of building**

Address - Street Name and Number

County/Township	City/Town	Lot/Concession (if applicable)
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**E. Proposed destination of building**

Address - Street Name and Number

County/Township	City/Town	Lot/Concession (if applicable)
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<b>F. Building permit number</b> (**This information must be completed if building is to be placed adjacent to Kings HWY**)	<b>Entrance permit number</b>
<b>G. Exact route</b> (**Complete list of all Kings highways and Municipal Roads**)	<b>Distance (km)</b>

H. Vehicle information

Commercial motor vehicle	# of Axles	Plate #	RGW
Trailer	# of Axles	Plate #	RGW

I. Proposed date of Move (yyyy/mm/dd)	Proposed time of Move
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J. Insurance information: I hereby certify that I carry Liability Insurance under a Contract of Automobile Insurance with:

Name of Insurance Company \_\_\_\_\_

Insurance Policy Number \_\_\_\_\_

This will verify that the undersigned are in agreement to the insurance of a "Permit to move used buildings on Kings Highways" as indicated in the attached application and we agree to take the necessary precautions to protect our interests as required to facilitate the move.

<b>Bell Telephone</b>	Print name		Signature	Telephone Number
	Staff will attend <input type="checkbox"/> Yes <input type="checkbox"/> No	Address		
<b>Ontario Hydro</b>	Print name		Signature	Telephone Number
	Staff will attend <input type="checkbox"/> Yes <input type="checkbox"/> No	Address		
<b>Municipal Hydro</b>	Print name		Signature	Telephone Number
	Staff will attend <input type="checkbox"/> Yes <input type="checkbox"/> No	Address		
<b>Cable Television</b>	Print name		Signature	Telephone Number
	Staff will attend <input type="checkbox"/> Yes <input type="checkbox"/> No	Address		
<b>Town Municipality of</b> _____	Print name		Signature	Telephone Number
	Staff will attend <input type="checkbox"/> Yes <input type="checkbox"/> No	Address		
<b>Ontario Provincial Police</b>	Print name		Signature	Telephone Number
	Staff will attend <input type="checkbox"/> Yes <input type="checkbox"/> No	Address		

Date and time the O.P.P. agree to complete the move (yyyy/mm/dd) \_\_\_\_\_ at \_\_\_\_\_ .

Conditions

- A. All fees must be paid prior to this permit being issued
- B. The Ministry reserves the right to cancel this permit at any time without notice.
- C. It is the responsibility of the applicant to obtain all necessary approvals.
- D. Moves are restricted to daylight hours on weekdays only.  
Permits are NOT issued for weekends or statutory holidays.
- E. It is responsibility of the applicant (or mover) to arrange police escort.  
Time of move at the discretion of the police
- F. The applicant is **responsible to notify** all emergency response units (such as ambulance, fire department) in the area of intended travel and must provide the date of the proposed move and the planned route.

We, the applicant(s) understand that under the provisions of subsection 5 of section 110 of *The Highway Traffic Act* of Ontario, the owner, operator or mover of any vehicle, object or structure who has obtained a permit is nevertheless responsible for all damages that may be caused to the highway and/or structures by reason of the driving, operating or moving of any such vehicle, object or structure.

Signature of Applicant

Date (yyyy/mm/dd)

Permit to be dispatched by (Check appropriate response)

Pick up       Mail       Fax \$5 long distance fax fee may be applicable       e-mail

**Note: The owner of the building is responsible for contacting all parties concerned in the event of a change of date, time or information of the intended move. See attached list providing names and addresses of contact people for the above required signatures.**

**Note: The above application must be Fully completed and all signatures obtained before the application can be processed. Fourteen (14) working days notice is required for the issuance of this permit.**

**Note: All Municipal Permits and OPP confirmation must be submitted prior to Ontario Permit being issued.**