



# Commercial House/Building Move Request Form

Central Services Division-Overweight & Overdimensional Permits  
 Suite 800, James K. Polk Building  
 505 Deaderick Street  
 Nashville, Tennessee 37243  
 (615)741-3821 [TDOT.Permits@tn.gov](mailto:TDOT.Permits@tn.gov)

*Due to unexpected construction on routes, this application is only valid for fourteen (14) days from the submitted date to TDOT. After fourteen (14) days, this application must be resubmitted through the region office.*

*For faster processing please type information.*

Region/District Requesting Permit:		Submitted Date:	
Regional Office Staff Contact Information Name:	Phone Number:	Email:	
Regional Office Approval of Route Signature:			

Company Name:		FEIN/TIN:	
Address:	City:	State:	Zip:
DBA( if applicable):		USDOT (if applicable):	
Companies Contact Person:		Contact Phone Number:	
		Contact E-mail:	

Dimensions of Load	Width:	Height:	Length:	Weight (if applicable):
Truck VIN:	License:		State:	
Origin Address:		City & County:		
Destination Address:		City & County:		
Proposed Route:				
Route Survey Summited: Yes		No		
Is Route Modification Require: Yes      No		If a Route Modification is required please indicate below. Removal of: Signs      Signals      Guardrails Tree Trimming      Other: _____		
If a route modification is required contact your local Utility District. Once this is done <b>attach proof of Utility</b> contact to this form.				

Check Number:	Check Amount:		
Credit Card Type:	Name on Card:		
Card Number:	Expiration Date:	Verification Code:	

**\*Credit/Debit card transactions have a 2.35% service charge.**

\*All Permit Fees are Non- Refundable\*

# STATEMENT OF LIABILITY

The undersigned hereby advises the Department of Transportation that an official of the Cities and/or counties affected on the proposed route have been notified of this proposed move.

The undersigned hereby advises the Department of Transportation that \_\_\_\_\_ is the applicant for a permit that would be issued by the Department of Transportation; authorizing the movement of a house that could require adjustment of the overhead wire conductor facilities of some utility companies. \_\_\_\_\_ has personally inspected the roadway(s) that would be used for the movement and identified all overhead wire conductor facilities that would be adjusted if such permit is issued; that he/she has contact all of the owners of the facilities that would be required to be adjusted and made arrangements with them for the adjustments of their facilities if the permit is issued.

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Applicants Printed Name 2