



# HOUSE- MOVING PERMIT APPLICATION

City of Lindale  
105 Ballard Dr.  
Lindale, TX 75771  
Phone: 903-882-6861 Fax: 903-881-8170  
Email: [communitydevelopment@lindaletx.gov](mailto:communitydevelopment@lindaletx.gov)

Application Date: \_\_\_\_\_

Permit # \_\_\_\_\_  
(Office Use Only)

The undersigned in accordance with the City of Lindale Code, hereby applies for a permit for the moving of a building/structure to be located at:

Address: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Building Use:  Residence  Commercial Total Sq. Footage: \_\_\_\_\_

If Commercial, Name of Business: \_\_\_\_\_

Owner: _____
Address: _____ Phone: _____
Fax: _____ Email: _____

Contractor/ Company: _____
Address: _____ Phone: _____
Fax: _____ Email: _____

House-moving Permit Fee: \$50.00

Applicant shall comply with the provisions of all building, zoning, fire and health laws governing the moving of the described building, whether specified herein or not.

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