

# PRE-APPLICATION FOR MOVING A BUILDING

(TO BE SUBMITTED BY APPLICANT WHEN PREPARING TO MOVE  
A BUILDING WITHIN THE CITY OF TWIN FALLS OR ITS AREA OF IMPACT)

MOVER: _____
ADDRESS: _____
CITY: _____ STATE: _____
PHONE: _____

ADDRESS TO: _____
CITY: _____ STATE: _____

ADDRESS FROM: _____
CITY: _____ STATE: _____

**IDAHO POWER COMPANY CONTRACT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
AUTHORIZED SIGNATURE

*PLEASE PRINT NAME:* \_\_\_\_\_

**TWIN FALLS POLICE DEPARTMENT CONTACT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
AUTHORIZED SIGNATURE

*PLEASE PRINT NAME:* \_\_\_\_\_

**UTILITY SERVICES DEPARTMENT CONTACT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
AUTHORIZED SIGNATURE

*PLEASE PRINT NAME:* \_\_\_\_\_

Date Stamp
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**BUILDING DEPARTMENT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

FILE THIS FORM WITH PERMIT

A FOUNDATION PERMIT MUST BE OBTAINED BEFORE THE HOUSE IS PLACED ON THE SITE.