

MOBILE HOME RELOCATION PERMIT

P.O. Box 295, Ozark, Missouri 65721 (417) 581-2407 Fax (417) 581-0353

Application Date:		Permit #:		
Property Information:				
Property Address:			Lot #:	
Owner Information:				
Name:	Business Name:			
Mailing Address:		Phone:	Cell:	
CONTRACTORS	NAME	ADDRESS		PHONE
General Contractor				
Others				

Project Description:

Issuance of a permit requires compliance with the following items:

- This Mobile Home relocation permit is required when any existing mobile home that was connected to the City
 of Ozark's water or sewer is to be removed from its existing site. The purpose of this permit is to ensure that
 existing water and sewer connections are properly capped to prevent potential water loss and/or storm-water
 inflow.
- 2. All removal shall be completed within thirty (30) days after the permit is issued.
- 3. The progress of the work shall be executed so as not to create a hazard to any occupancy or to the public.
- 4. The removal shall comply with all requirements of the City of Ozark's codes and ordinances applicable to the work.
- 5. All rubble and debris created by the removal shall be removed from the property to a certified landfill.

Procedure & Checklist for Removal:

Responsibility of the Applicant:

- 1. Complete the Relocation Application to include the following information:
 - a. The site address
 - b. The name and contact information of the licensed contractor
 - c. The name and contact information of the property owner

2. Sewer and Water Disconnect:

The applicant or owner is responsible for ensuring that the sewer and water connections are properly disconnected and the water and sewer services are properly capped as approved by the City Inspector. Notification shall be provided to the City of Ozark's Inspection when the utility disconnect is ready to be inspected by the city.

3. Damage:

Any damage to pavement or properties during removal shall be restored to original condition with identical material and construction.

I hereby certify that I am the owner or duly authorized agent, that I have read this application and that all information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.

Signature:	Date:	
Phone #:	e-mail:	
Address:		
	FOR OFFICE USE ONLY	
CITY INSPECTOR APPROVAI		
Signature:	Date:	
Building Permit Fee;	Inspection Fee	Total Fee;

CREATED 5/18/2022 UPDATED 8/02/2023