



City of Anoka

2015 First Avenue, Anoka, MN 55303

Email applications to: Comdev@ci.anoka.mn.us Phone: 763-576-2720 Website: http://www.AnokaMinnesota.com

BUILDING RELOCATION APPLICATION

BUILDING BEING MOVED \_\_\_ IN TO THE CITY OF ANOKA OR \_\_\_ OUT OF THE CITY OF ANOKA

REGARDING SITE ADDRESS IN THE CITY OF ANOKA: \_\_\_\_\_

PROPERTY OWNER

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

TYPE OF BUILDING STRUCTURE TO BE MOVED: \_\_\_\_\_

CURRENT LOCATION OF BUILDING

ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

DESTINATION SITE

ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

MOVING COMPANY

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ CELL#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_ POLICY #: \_\_\_\_\_

DETAILED DESCRIPTION OF THE PLANNED MOVING ROUTE AND WHEN THE MOVING WILL OCCUR:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_ DATE \_\_\_\_\_

APPROVALS:

BUILDING DEPT \_\_\_\_\_ DATE \_\_\_\_\_

ELECTRIC DEPT \_\_\_\_\_ DATE \_\_\_\_\_

FIRE DEPT \_\_\_\_\_ DATE \_\_\_\_\_

POLICE DEPT \_\_\_\_\_ DATE \_\_\_\_\_

STREETS DEPT \_\_\_\_\_ DATE \_\_\_\_\_

ZONING DEPT \_\_\_\_\_ DATE \_\_\_\_\_

VISA, MC, DSC, CHECK, OR EXACT CASH  
IF PAYING WITH CC VIA PHONE ADD \$3.25  
IF PAYING FOR MORE THAN 1 APPLICATION AT THE SAME  
TIME VIA PHONE, ONLY ONE CC FEE WILL BE ASSESSED

PERMIT FEE \$ 100.00

(If paying with credit card

via phone, add \$3.25) \$ \_\_\_\_\_

TOTAL PERMIT FEE \$ \_\_\_\_\_