

MISSISSIPPI DEPARTMENT OF TRANSPORTATION  
HOUSE MOVE INFORMATION FORM

**Applicant Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Permit Fee \$ 10.00      Please Bill To: \_\_\_\_\_      Charge Acct \_\_\_\_\_

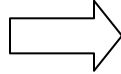
Credit Card \_\_\_\_\_      Enclosed Check/Money Order \_\_\_\_\_

Email Address: \_\_\_\_\_

**Contact Person:** \_\_\_\_\_      **Phone:** \_\_\_\_\_

Load Description: \_\_\_\_\_

CHECK ALL  
THAT APPLY



- Conventional with Sheetrock       Conventional with Plaster
- Concrete Slab with Frame and Sheetrock       Brick Exterior

**Estimated Weight:** \_\_\_\_\_ (based upon the Department's Standard Weight Chart)

**Width:** \_\_\_\_\_ Ft \_\_\_\_ Inches (Wall to Wall)      \_\_\_\_\_ Ft \_\_\_\_ Inches (Eave to Eave)

**Height:** \_\_\_\_\_ Ft \_\_\_\_ Inches

**Overall Length:** \_\_\_\_\_ Ft \_\_\_\_\_ Inches      (Truck, Trailer, and Load)

Truck Make: \_\_\_\_\_ Tag # \_\_\_\_\_ State \_\_\_\_\_ No. of Axles \_\_\_\_\_

Axle Spacing:      1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_

No. of Tires per Axle:      1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_

Tire Sizes:      1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_

Weight Per Axle \*:      1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_

\* Office of Enforcement will weigh axes upon request.

**Origin:** \_\_\_\_\_

**Destination:** \_\_\_\_\_

**Routing:** \_\_\_\_\_

Mileage:      4 Lane \_\_\_\_\_ 2 Lane \_\_\_\_\_ Total \_\_\_\_\_

**Beginning Date:** \_\_\_\_\_      **Ending Date** \_\_\_\_\_

**City Notification:** \_\_\_ Yes \_\_\_ No \_\_\_ N/A      **Utility Co Notification:** \_\_\_ Yes \_\_\_ No \_\_\_ N/A

(If you checked YES to any of the above, a copy of all such notifications or approvals must be attached to this form)

Remarks: \_\_\_\_\_

\_\_\_\_\_  
House Movers Signature

**OFFICIAL USE ONLY:**

**Approved Permit Number:** \_\_\_\_\_

Authorization Number: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Bridge Division:      Accept \_\_\_\_\_ Deny \_\_\_\_\_ Contact Person \_\_\_\_\_

Maintenance Office:      Accept \_\_\_\_\_ Deny \_\_\_\_\_ Contact Person \_\_\_\_\_

Construction Office:      Accept \_\_\_\_\_ Deny \_\_\_\_\_ Contact Person \_\_\_\_\_

Special Instructions: \_\_\_\_\_

I hereby acknowledge MDOT's changes or additions to this request: \_\_\_\_\_

House Movers Signature