

# CITY OF BELL

6330 Pine Avenue, Bell, California 90201  
Telephone: (323) 588-6211

## MOVING AND LOAD PERMIT

PERMIT NUMBER
DATE ISSUED
DATE EXPIRES

APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

OBJECT TO BE MOVED \_\_\_\_\_

TOTAL HEIGHT \_\_\_\_\_ TOTAL WIDTH \_\_\_\_\_ TOTAL LENGTH \_\_\_\_\_

OBJECT WEIGHT \_\_\_\_\_ GROSS WEIGHT \_\_\_\_\_

EQUIPMENT TO BE USED \_\_\_\_\_

NUMBER OF AXLES \_\_\_\_\_ NUMBER OF WHEELS \_\_\_\_\_

DATE AND TIME ENTERING CITY \_\_\_\_\_

DATE AND TIME LEAVING THE CITY \_\_\_\_\_

STATE THE STREETS TO BE USED, THE DIRECTION OF TRAVEL, THE DESTINATION AND OTHER PERTINENT ITEMS OF INFORMATION.

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

This permit is issued subject to all applicable provisions of the Bell Municipal Code, the attachments hereon, and any requirements indicated hereon, in consideration of the granting of this permit, it is agreed by the applicant that the City of Bell, its officers and employees shall be saved harmless by the applicant from any liability or responsibility for any accident, loss or damage to persons or property, happening or occurring as the proximate result of any of the work undertaken pursuant to this permit, and that all said liabilities are hereby assumed by the applicant.

It is further agreed by the applicant that in case of damage to the streets by reason of the operations authorized by this permit, they will be repaired or restored, as designated by the Public Works Director, at the expense of the permittee.

SIGNATURE OF APPLICANT OR AUTHORIZED AGENT \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**THIS PERMIT IS INVALID UNLESS SIGNED BY AN APPROPRIATE CITY OFFICIAL AND VALIDATED**

**FOR CITY USE ONLY BELOW THIS LINE**

COMMENTS: \_\_\_\_\_

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

APPROVED:

BY \_\_\_\_\_ DATE \_\_\_\_\_

**VALIDATION - THIS PERMIT IS YOUR RECEIPT WHEN VALIDATED.**

R # \_\_\_\_\_ CK # \_\_\_\_\_

CASHIER \_\_\_\_\_ DATE \_\_\_\_\_

FEES	
ISSUANCE FEE	_____
INSPECTION FEE	_____
OTHER FEES	_____
SPECIAL DEPOSIT	_____
<b>TOTAL</b>	_____