

**Town of Liberty Grove
Building Transport Application**

Permit number (from building inspector): _____ Date: _____

Date of transport: _____ Number of anticipated trips: _____

Person completing this application: _____ Phone: _____

Company completing the transport: _____

Company Mailing address: _____ Phone: _____

Building start address: _____

Building end address: _____

Route (list EACH Town road to be traveled between the start address and the end address):

All building transports must be done in accordance with current Town guidelines any special conditions stated herein. The refund of the road bond shall be sent upon final inspection of the building transport. **It is the responsibility of the applicant to notify the Town of completion for final inspection or if any changes to the information documented above.**

Return this form and the \$5,000.00 road bond fee to:

Town of Liberty Grove, 11161 Old Stage Road, Sister Bay, WI 54234

Phone (920) 854-2934 Fax (920) 854-7366

This section to be completed by Town Office

Road bond received by: _____ Check number: _____ Date: _____

Date of preliminary inspection: _____ Initials of inspector: _____

Date of final inspection: _____ Initials of inspector: _____

Damage reported during inspection: _____

Refund/Return bond: Yes () No () Date: _____