



# DEMOLITION PERMIT APPLICATION

JURISDICTION: \_\_\_\_\_

DEMOLITION PERMIT NUMBER: D \_\_\_\_\_ - \_\_\_\_\_

DATE OF ISSUE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

PARCEL I.D. NUMBER: \_\_\_\_\_

SCHEDULE NUMBER: R \_\_\_\_\_

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

CONTACT PHONE: \_\_\_\_\_

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

**REQUIRED WITH SUBMISSION OF APPLICATION:**

- CONTRACTOR VERIFICATION FORM
- OR**
- ACKNOWLEDGEMENT OF CONTRACTOR INSURANCE

1. \_\_\_\_\_  
OWNER NAME MAILING ADDRESS

2. \_\_\_\_\_  
CITY STATE ZIP CODE OWNER PHONE NUMBER

**LEGAL DESCRIPTION:** \_\_\_\_\_  
LOT NUMBER BLOCK NUMBER SUBDIVISION NAME  
 OR **METES AND BOUNDS** \_\_\_\_\_  
SECTION TOWNSHIP RANGE

3. **JOB ADDRESS:** \_\_\_\_\_

4. **DEMOLITION CONTRACTOR:** \_\_\_\_\_

5. **CONTRACTOR EMAIL:** \_\_\_\_\_  
 6. **PROPERTY OWNER'S EMAIL:** \_\_\_\_\_  
 7. **TYPE OF STRUCTURE:** \_\_\_\_\_  
 8. **UTILITIES TO BE DISCONNECTED:** \_\_\_\_\_

**NOTICE:** This permit becomes null and void if work or construction is not commenced within 180 days, or if construction or work is Suspended or abandoned for a period of 365 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to Violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

9. \_\_\_\_\_  
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE SIGNATURE OF OWNER (IF OWNER BUILDER) DATE

**DO NOT WRITE BELOW THIS LINE** **DO NOT WRITE BELOW THIS LINE**

	DEMOLITION PERMIT FEE	TOTAL FEE		
	TYPE OF CONSTRUCTION	OCCUPANCY GROUP	DIVISION	
ZONING APPROVAL	SIZE OF BUILDING TOTAL SF	No. of Stories	Max Occ Load	USE ZONE
	SET BACKS	FRONT	SIDE	BACK
	SPECIAL APPROVAL		STATE NOTIFIED	APPROVED
	STATE COMPLIANCE			
	ASBESTOS TESTING			
SPECIAL CONDITIONS:				
APPLICATION ACCEPTED BY	SUBMITTALS CHECKED BY	ISSUED BY		
DATE	DATE	DATE	APPLICATION #	