

DEMOLITION PERMIT

PERMIT NO. _____ ZONE: _____

TYPE OF STRUCTURE: _____

LOCATED AT: _____

OWNER NAME: _____ PHONE: _____

OWNER MAILING ADDRESS: _____

EMAIL ADDRESS: _____

CONTRACTOR: _____ PHONE: _____

CONTRACTOR ADDRESS: _____

EMAIL ADDRESS: _____

No. of Building: _____ No. of Stories: _____

Foundation: _____ Occupied: _____ Vacant: _____

FEE PAID: **\$150.00** DATE: _____

SERVICES DISCONTINUED:

_____ Gas	_____ Water	_____ Sewer
_____ Electric	_____ Telephone	_____ Cable

CONDITIONS OF PERMIT:

- Demolition shall not begin for a period of FIVE (5) working days from the date of issuance.
- Permit is good for only 30 days.
- Adequate barricades must be provided before demolition can begin.
- Unsuitable fill material must be hauled away.
- Lot must be left in clean, smooth, and sanitary condition.
- Building(s) must be completely vacated before any activity under this permit is commenced.
- Use of lot(s) after wrecking is completed, must comply with all ordinances and codes.

I, _____, the undersigned do hereby certify that the above information is true and correct. I agree to comply with all the above conditions.

Owner's Signature

Date