



## DEMOLITION PERMIT APPLICATION

Date:

Address of Project:

Legal Description of Property:    Lot            Block            Subdivision

Description of the Project:

Applicant:

Applicant's Address

Phone:

Property Owner:

Property Owner's Address:

Phone:

Type of Building:     Wood Frame     Brick Veneer     Metal     Masonry     Other

General Contractor or Project Manager:

General Contractor's or Project Manager's Address:

General Contractor's or Project Manager's Phone:

E-mail:

Date to Start Demolition:

Date to Complete Demolition:

Please include the following with your application:

- |  |   |
|--|---|
| <input type="checkbox"/> Copy of demolition contract ( <i>if any</i> )           | <input type="checkbox"/> Copy of permits required by federal or state laws  |
| <input type="checkbox"/> Copy of asbestos survey                                 | <input type="checkbox"/> Copy of public liability insurance                 |
| <input type="checkbox"/> Copy of Notification Form                               | <input type="checkbox"/> Bond (to be determined by the Building Official)   |
| <input type="checkbox"/> Copy of survey of hazardous materials ( <i>if any</i> ) | <input type="checkbox"/> A detailed plan of action describing the manner of |
| <input type="checkbox"/> Copy of require licenses and certifications             | demolition, clearing the property, removal and disposal                     |
|  | of all waste materials  |

**THE OWNER IS RESPONSIBLE FOR CONTAINMENT AND DISPOSAL OF ASBESTOS AND OTHER CONTAMINANTS IN ACCORDANCE WITH STATE OR FEDERAL REGULATIONS**

### NOTICE TO APPLICANT:

I have carefully read the complete application and know the same is true and correct. I understand the ordinances governing the activity described in this application, and agree to comply with all provisions of the City ordinances, State laws, and all property restrictions, whether herein specified or not

**X**

(Owner or Authorized Agent)