



DEMOLITION PERMIT APPLICATION

OFFICE USE ONLY	
PERMIT NUMBER: PD _____	PERMIT FEE: \$75

ACCEPTANCE OF FEE DOES NOT CONSTITUTE APPROVAL OF PERMIT

JOB SITE INFORMATION

SELECT ONE:

SINGLE FAMILY RESIDENCE MULTI-FAMILY RESIDENCE COMMERCIAL OTHER

ADDRESS: _____

NAME OF BUSINESS OR SUBDIVISION: _____

DESCRIBE NATURE OF DEMO: _____

PROPERTY OWNER INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # : _____ EMAIL : _____

CONTRACTOR INFORMATION

COMPANY NAME: _____

COMPANY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

* BUSINESS LICENSE #: _____ EXPIRES: _____

JURISDICTION ISSUED: _____ * PHYSICAL COPY NEEDED

OWNER'S SIGNATURE: _____

(A SIGNED, NOTERIZED LETTER IS ACCEPTABLE IN LIEU OF SIGNATURE)

CONTRACTOR'S SIGNATURE: _____ **DATE** _____

*** PROOF OR OWNERSHIP REQUIRED PRIOR TO ISSUANCE OF PERMIT ***

*** INSPECTION TO VERIFY UTILIES ARE DISCONNECTED REQUIRED PRIOR TO DEMOLITION ***