



DEMOLITION PERMIT APPLICATION

Date:		Permit #:	
Permit Address:			
Current Legal Description:	Block/Abstract:	Lot/Tract:	Addition/Survey:

PROPERTY OWNER INFORMATION

First Name:		Middle:		Last Name:	
Address:			City:		State: Zip:
Phone:		Fax:		Email:	

CONTRACTOR INFORMATION

First Name:		Middle:		Last Name:	
Company Name:					
Address:			City:		State: Zip:
Phone:		Fax:		Email: Mobile:	

PERMIT INFORMATION

Property Use: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Construction Value:
I have the owner's consent to perform this work? <input type="checkbox"/> YES <input type="checkbox"/> NO	Briefly describe work to be done:

PERMIT REQUIREMENTS

The following guidelines apply for this permit: 1) Owner's authorization form has been signed and notarized. 2) Contract between owner and contractor has been provided. 3) Applicant must provide a letter stating how and where debris will be disposed of. 4) Asbestos survey required for commercial properties. 5) Permit and inspection fee is \$100.00-residential and \$200.00-commercial (reinspection fees may be assessed as necessary)
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This permit, once issued, expires by limitation 180 days from the date of issuance unless construction is commenced and inspection approval is obtained within 180 days of issuance. The authority having jurisdiction shall be permitted to grant an extension of the permit time period for an additional 180 days upon written documentation by the permittee of a satisfactory reason for failure to start or complete the work or activity authorized by the permit. **Only one extension will be allowed.**

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 of the performance of construction.

Owner Signature:	Date:
Printed Name:	Application Received By:

OFFICE USE ONLY

Fee: \$100.00/ \$200.00		Date Paid:	Receipt #:
Property Zoning:	Ownership Verified: <input type="checkbox"/> YES <input type="checkbox"/> NO	Taxes Paid: <input type="checkbox"/> YES <input type="checkbox"/> NO	Liens Paid: <input type="checkbox"/> YES <input type="checkbox"/> NO
Property Platted: <input type="checkbox"/> YES <input type="checkbox"/> NO	Site Plan Submitted: <input type="checkbox"/> YES <input type="checkbox"/> NO	Permit Expiration Date:	

Permit application has been reviewed and is released for construction.

DEPARTMENT	SIGNATURE	APPROVAL DATE
BUILDING DEPARTMENT		
BUILDING DEPARTMENT		

1st submittal date:	2nd submittal date:
3rd submittal date:	submittal date:

Permit approved and released for construction.	Released by:	Date:
Permit Filing Date:	Permit Expiration Date:	Completion Date:

Comments/Notes:
