

APPLICATION for DEMOLITION PERMIT

Owner's Name: _____ Phone #: _____

Address: _____

Name of Company Doing Work: _____ Phone #: _____

Exact Location of Property: _____

Type of Building: _____ Zoning Classification: _____

Size of Building: _____ sq. ft. Front _____ Depth _____ Height _____

Type of Construction: _____

Application Made by -- Name: _____

Please Check if Public Utilities Have Been Disconnected:

Electric: _____ Phone: _____ Water: _____ Gas: _____ Cable: _____

(Signature of Applicant)

Fee: _____

Date Paid: _____

Approved by: _____

Date: _____

Title: _____