



## Demolition Permit

**Project Address:**

**Map/Lot:**

**Fee: \$50.00**

### Applicant/Owner Information

Applicant Name:	Owner Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Email:	Email:

### Contractor Information

Name:	Business Name:
Address:	City, State, Zip:
Email:	Phone:

Contractor disposing debris? Yes ☐ No ☐ If no, who:

I hereby certify that I am the owner of record of the named property, or that the owner of record authorizes the proposed work and I have been authorized by the owner to make this application as his/her agent. I agree to conform to the applicable laws and ordinances of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official/Inspector shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Owner/Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_