



Demolition Permit

PROJECT LOCATION	
Address: _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 20px;"> Street No. Street Name </div> _____ Lot/Block No.	
WORK DESCRIPTION	
Date of Demolition _____	Demoliton Type _____ No. of Stories _____
OWNER	
Person or Company _____	
Street No. _____ Street Name _____ Phone No. () _____	
City _____ State _____ Zip _____	
REASON FOR DEMOLITON	
<input type="checkbox"/>	1 An unsafe condition exists. A building is unsafe if the building is structurally inadequate or faulty for the purpose for which it is used or in a condition which could be hazardous to the health or safety of persons in the normal use of the building.
<input type="checkbox"/>	2 Replacement dwelling unit. An application has been submitted to the City to construct a replacement dwelling unit.
<input type="checkbox"/>	3 Redevelopment of land - plan of subdivision.
<input type="checkbox"/>	4 Redevelopment of land - site plan application.
ATTACHMENTS	
<input type="checkbox"/>	Copy of location plans designating the site area
<input type="checkbox"/>	Copy of site plans designating the dwelling unit to be demolished.
<input type="checkbox"/>	Recent photos of the dwelling unit to be demolished.
APPLICANT'S DECLARATION	
I, _____ (last name, first name) _____ (phone no.) of _____ (full address) do hereby declare the following:	
1 THAT I am	<input type="checkbox"/> the owner as stated above. <input type="checkbox"/> the owner's authorized agent <input type="checkbox"/> an officer/employee of _____ which is an authorized agent of the owner
2 THAT the statements made and the information provided herein are true and correct and are made and provided with full knowledge of the circumstances relating to this application.	
3 THAT I know of no reason why a permit should not be granted pursuant to this application.	
Applicant's Signature _____ Date _____	
Office Use Only	
Reviewed By: _____	Fees: _____
Issuance of Permit Authorized By: _____	Date: _____