



## Demolition Permit

Owner of premises: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Lot Number: \_\_\_\_\_

Address of Demolition: \_\_\_\_\_

Structure Demolished: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Permission Granted by

\_\_\_\_\_  
Date

Permit Number: \_\_\_\_\_

Fee: \_\_\_\_\_ (\$15)

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_