

**UNIFORM CONSTRUCTION CODE (UCC)
DEMOLITION PERMIT APPLICATION**

PROPOSED DEMOLITION INFORMATION: (POLITICAL SUBDIVISION & COUNTY NAMES ARE REQUIRED)

LOCATION OF PROPOSED DEMOLITION WORK

OWNER

ADDRESS: _____

CITY: _____ ZIP CODE: _____ POLITICAL SUBDIVISION: _____

COUNTY: _____

BRIEF DESCRIPTION OF BUILDING OR STRUCTURE TO BE DEMOLISHED (USE, NUMBER OF STORIES)

Basement floor-Please check one- Concrete _____ Stone _____ Dirt _____

DEMOLITION CONTRACTOR

NAME: _____ ADDRESS: _____

PHONE: _____ EMAIL: _____

SITE PLAN REQUIREMENTS

***ONE COPY OF A SITE PLAN SHOWING THE PROPOSED DEMOLITION MUST ACCOMPANY THIS APPLICATION. ALL PERTINENT DIMENSIONS MUST BE INDICATED ON THE PLAN.**

- * SIZE AND LOCATION OF ALL BUILDINGS OR STRUCTURES TO BE DEMOLISHED, DISTANCES TO PROPERTY LINES AND DISTANCES TO SIDEWALKS, PAVEMENT AND CURBS WHERE THEY ABUT PROPERTY LINES.
- * SIZE AND LOCATION OF ANY EXISTING BUILDINGS OR STRUCTURES THAT WILL REMAIN ON THE SITE.
- * AREA TO BE FILLED TO EXISTING GRADE AND SEEDED OR TO BE FENCED AND OTHERWISE PROTECTED IN ANTICIPATION OF NEW CONSTRUCTION
- * IF APPLICABLE, LOCATION, DIMENSIONS AND CONSTRUCTION DETAILS FOR PEDESTRIAN PROTECTIONS REQUIED INSECTION 3306 OF THE INTERNATIONAL BUILDING CODE.

OWNER APPLICANT INFORMATION

IF APPLICANT IS SOMEONE OTHER THAN OWNER, LIST OWNER INFORMATION TOO.

APPLICANT IF OTHER THAN OWNER (PLEASE PRINT)

NAME _____

ADDRESS _____

PHONE _____

EMAIL _____

OWNER INFORMATION (PLEASE PRINT)

NAME _____

ADDRESS _____

PHONE _____

EMAIL _____

OWNER STATEMENT:

I/WE, _____ (SIGNATURES) CERTIFY THAT I/WE OWN THE PROPERTY DESCRIBED ABOVE FOR WHICH THIS APPLICATION IS MADE FOR A UCC DEMOLITION PERMIT AND THAT THE APPLICANT HAS MY/OUR APPROVAL TO DEMOLISH THIS PROPERTY OR ACT AS OUR AGENT IN THE DEMOLITION OF THIS PROPERTY.

DATE: _____

SIGNATURE: _____