

## DEMOLITION PERMIT

ALL TRASH, DEBRIS, AND SOLID WASTE GENERATED IN THE CITY OF FREMONT MUST BE DELIVERED TO THE TRANSFER STATION SITED BY FREMONT.

Date \_\_\_\_\_ Permit Number \_\_\_\_\_

Full Demolition     Interior Demolition    Cost of Permit: \$ \_\_\_\_\_

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

Property Owner: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Description of building/structure to be demolished: \_\_\_\_\_

Previous Use(s): \_\_\_\_\_

Demo Start Date: \_\_\_\_\_ Demo Finish Date: \_\_\_\_\_

Method of Demolition: \_\_\_\_\_

Debris Disposal Location: \_\_\_\_\_

I hereby state that the information submitted on this application is accurate and correct. I have verified that there are no environmental hazards to be encountered upon demolition of said premises. I recognize that the issuance of this building permit shall not grant approval to violate any of the provisions of the building codes or zoning ordinances enforced by this jurisdiction, state or federal law, and that this permit shall not prevent the building official from requiring construction to be in compliance with all applicable code provisions during field inspections. This building permit is issued for the express purpose of work state on this application. Any changes to the construction plans that effect area or scope of work shall be approved by the building official's prior to construction and may require another permit application. The city is not responsible to determine actual locations of property lines and the property owner or person doing the work is responsible to find locations of property lines.

Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Demolition Contractors Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Utilities Disconnected:**

	Date	Initial
<b>Electrical</b> (402-727-2613)	_____	_____
<b>Gas</b> (402-727-2613)	_____	_____
<b>Water</b> (402-727-2613)	_____	_____
<b>Sewer</b> (402-727-2613)	_____	_____

**OFFICIAL USE ONLY**

Building Official: \_\_\_\_\_

Date: \_\_\_\_\_

Notes: