

CITY OF CHILLICOTHE
DEMOLITION PERMIT
APPLICATION

Date: _____

Permit #: _____

I. GENERAL INFORMATION

Name of Owner: _____

Contractor: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

II. LEGAL DESCRIPTION OF PROPERTY

Property Address: _____

Subdivision: _____

Lot Number: _____

Parcel ID #: _____

III. CHARACTERISTICS OF BUILDING TO BE DEMOLISHED

A. Type of Frame

1. Wood
2. Masonry
3. Steel
4. Concrete
5. Other:

B. Structure to be Demolished

1. House
2. Accessory Building
3. Office
4. Other:

IV. Total cost of Demolition:

Have the utilities been disconnected: Yes No

All debris from the demolition must be removed from the site and any other requirements
From State or other entities is the responsibility of the property owner.

V. CERTIFICATION

I certify the above information is true and correct.

Signed: _____

Print: _____

Start Date: _____

FEE: \$25.00