

PERMIT
Village of Mount Gilead
Building Demolition

Location of Building to be demolished _____

NOTE: IF LOCATION IS IN DOWNTOWN REVITALIZATION AREA, D.R.B. MUST REVIEW AS WELL

Owner of Building and

Address _____

Telephone No _____

Person, Firm, or Corporation to Perform Demolition and Removal of Debris and Address

Telephone No. _____

.....
Square Feet (each floor if 2 or 3 story) of Building to be Demolished _____

(Permit Fee is \$100.00 minimum or \$25.00 per 1000 total square feet which ever is greater)

Bond or Insurance requirement met (See Section 1321.03) Insurance _____ Bond _____

(Check one) Clerk-Treasurer holds.

Cash _____

Service Connections Notified **(Release from Utilities Required-Section 1321.04)**

Attach copy of release to permit.

Date work is to commence and finish **(estimated as closely as possible)**

I have received a copy of Chapter 1321 of the Codified Ordinances and understand its provisions.

Applicant's Signature _____

OFFICE USE ONLY

APPROVED _____ NOT APPROVED _____

Reasons: _____

Village Administrator, Village of Mount Gilead