

**RESIDENTIAL DEMOLITION PERMIT APPLICATION
CITY OF ASH FLAT**

911 Address (If you don't have a 911 Address, please call 994-2211 to obtain an address)

Lot/Section	Block/Twp	Addition/Range
Owner	Mailing Address	Phone #
Contractor		License Number

This permit is for: **DEMOLITION PURPOSES ONLY**

Description of work:

NOTICE: ALL work must be in Accordance with Ordinance 98-9-1	Valuation of Work	Permit Fee
	\$	\$

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAWS REGULATING CONSTRUCTION OR THE PERFORMANCE OF ANY AND ALL CONSTRUCTION.

Circle One: COUNTY: Sharp or Fulton

Permit Issued By

NOTICE TO CONTRACTOR/BUILDER: Contractor/Builder will dispose of all waste material from the construction site at a State licensed and Environmental Protection Agency (EPA) approved landfill. Contractor will furnish receipt from a landfill to Ash Flat City Hall as evidence of compliance. **Failure to comply with this disposal requirement may result in revocation of the Demolition Permit, and/or fines per Ordinance 98-9-1. Placing my initials below indicates that I have read and will comply with this notice.**

Initials Date

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE

SIGNATURE OF OWNER DATE

PERMIT NUMBER WHEN ISSUED