

## Demolition Permit

Company Name: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

Address of Contractor: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Address of Demolition Site(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cost Per Structure: \_\_\_\_\_

\_\_\_\_\_

Signature of Administrator: \_\_\_\_\_

### Demolition Fees

0-100,000 cubic feet \$50.00

100,000 cubic feet or more \$.50 per 1,000 cubic feet