



DEMOLITION PERMIT APPLICATION

| Date of Application: | Permit Number: |
|--|---|
| Address of Structure to be Demolished: | |
| Name of Owner: | Owner Address: |
| Owner Phone Number: | |
| Structure Type: | Parcel Number: |
| Owner Signature: | |
| | ovisions in the City of Coshocton's Codified Ordinances the Demolition Permit if one is required Demolition Permit |
| Fees to be submitted with application Residential Fees \$50.00 - Commercial Fees \$2 | 200.00 - Industrial Fees (over 50k SF) \$1,000.00 |
| A bond will be required and the amount of sadetermined by the administration | aid bond shall be appropriate to said project and |
| Please add a detailed description of the scope | e of the project on page 2 |
| Contractor: | Contractor Phone: |
| Contractor Address: | Contractor Registered: |
| | Contractor Signature: |
| Permit Fee: | Received By: |
| Permit Issue Date: | Permit Expiration Date: |
| E&S Permit needed Yes No | Service Director Initial: |
| Approved By: Service Director | Approval Date: |

Upon approval this application becomes the formal Demolition Permit





DEMOLITION PERMIT APPLICATION PAGE 2

| Detailed Description of the Scope of the Project | | |
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