



Wrecking Permit Application

Date: _____

Permit Address _____ City _____ State _____ Zip _____

Contractor Name _____ Contractor License # _____ Phone _____ Email _____

Total Square Feet: _____ Basement: Yes No

Dangerous Building Case? Yes No Asbestos? Yes No Lead Paint? Yes No

Connections to the Structure:

Electrical? Yes No Water? Yes No

Gas? Yes No Sewer? Yes No

Propane? Yes No Septic? Yes No

Applicant Signature _____

Printed Name _____