

APPLICATION FOR PERMIT WATER & SEWER ABANDONMENT



Application Date: ____/____/____ Permit No.: _____

DEMOLISHED PROPERTY INFORMATION

Property Address: _____
 City/State/Zip Code: _____
 Date Demolition to Begin: _____ Demolition Cost Estimate: \$ _____
 Description of Demolition (Please Attach a Drawing): _____

OWNER INFORMATION

Owner's Name (Printed): _____
 Owner's Address: _____
 City/State/Zip Code: _____
 Telephone Number: (_____) _____
 Owner's Signature (if available) _____

CONTRACTOR INFORMATION

Company Name _____ Phone No. _____
 Contact Person (Please Print Name) _____ Alternate Phone No. _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Contractor's Signature _____

FOR OFFICE USE ONLY

Permit Fee: \$5.00 - Water \$5.00 - Sewer \$50.00 - Refundable Deposit Cash Check,
 Check No. _____
 Insurance Bond: On File Expiration Date: _____
 Received By (Signature) _____ Date _____
 Approved By (Signature) _____ Date _____
 Pre-Inspection Comments: _____
 Final Inspection Approved By (Signature) _____ Date _____