



# Town of Aberdeen Planning & Inspections Department

Office: (910) 944-7024



## DEMOLITION - APPLICATION

**ALL sections of this application *MUST* be filled out, or will be deemed incomplete and rejected by the Planning & Inspections Department.**

**APPLICATION DATE :** \_\_\_/\_\_\_/\_\_\_ **LOCATION / ADDRESS :** \_\_\_\_\_

**PROPERTY OWNER :** \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email Address : \_\_\_\_\_

**APPLICANT :** \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email Address : \_\_\_\_\_

Status of Applicant :  Property Owner  Legal Representative  Other : \_\_\_\_\_

License Number : \_\_\_\_\_ Classification : \_\_\_\_\_

**SCOPE OF WORK** (detailed description of work including location and equipment size) : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TYPE OF WORK :**  Non-residential  Residential  Storage Tank Removal  Other : \_\_\_\_\_

Any AST, UST or LPG Tanks?  Yes  No If yes, provide/attach documentation of proper removal

Is this request associated with a Town Code Enforcement Action?  Yes  No

**VALUE OF WORK :** \$ \_\_\_\_\_

Please list the name and license # of the contractor(s) who will be performing the work for this project. If the work will be performed by the owner just write "owner" in the GENERAL CONTRACTOR field. If any contractor field is left blank, that indicates that trade will not be utilized with this permit; otherwise the information needs to be provided with this application.

**GENERAL CONTRACTOR :** \_\_\_\_\_ License Number : \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email Address : \_\_\_\_\_

**ACKNOWLEDGEMENT :** I hereby certify that all information in this application is correct and all work will comply with the State Building Code and other applicable State and local laws, ordinances and regulations. The Planning & Inspections Department will be notified of any changes in the approved plans and specifications for the project permitted herein. I understand if this application is incomplete, a permit will not be issued and no inspections will be performed on the project. By signing below I attest that I have obtained all property owners permission and subcontractors permission to obtain these permits.

APPLICANT NAME : \_\_\_\_\_ DATE : \_\_\_/\_\_\_/\_\_\_

APPLICANT SIGNATURE : \_\_\_\_\_

OWNER NAME : \_\_\_\_\_ DATE : \_\_\_/\_\_\_/\_\_\_

OWNER SIGNATURE : \_\_\_\_\_