

Date Received at City Hall

Application for Demolition Permit City of Le Center

Permit Number

Name: _____ Telephone #: _____

Applicant Address: _____

Demolition Property Address: _____

Type of Structure: _____

Approx Date to Begin: _____ Estimated Completion Date: _____

Utilities On Site: Mark (X) all that apply
Sewer _____ Water _____ Electric _____
Cable _____ Gas _____ Telephone _____

Note: It is the Owner's or Contractor's responsibility to contact **Gopher State One Call** at 811 to mark any underground lines.

Will Utilities be used for a new structure? Yes _____ No _____

Note: If water and sewer are never to be reused, the Owner or Contractor must abandon service per the MN State Plumbing Code and be inspected by City of Le Center Building Official or Public Works Department.

Is there a well on site? Yes _____ No _____

Is there any underground tanks? Yes _____ No _____

Demolition Contractor: _____ Telephone #: _____

Address: _____

Liability Insurance Co.: _____ Telephone #: _____

Policy #: _____

Policy Period-From: _____ To: _____ Coverage and Limits: _____

IF ASBESTOS IS PRESENT IN THE STRUCTURE, STATE APPROVED METHODS MUST BE FOLLOWED.

I hereby disclaim that I am the owner of the property or the demolition contractor of the above described property. I agree to comply with all state regulations and all materials will be taken to a state approved demolition dumpsite. All the foregoing information contained on this permit is a true and correct statement of my intentions.

Signature of Applicant: _____ Date: _____

The Following Section To Be Completed By City Officials

Permit Approved By: _____ Total Fee: _____

Title: _____ Receipt #: _____

Date Issued: _____ Issued By: _____

The Following Section To Be Completed By Building Official or Public Works

Water Service.....Disconnected _____ Abandoned _____ Sealed _____ Signed _____

Sewer Service.....Disconnected _____ Abandoned _____ Sealed _____ Signed _____