

DEMOLITION PERMIT

CITY OF BARTLESVILLE (05-2008)

STREET ADDRESS:

DATE RECD:

TIME RECD:

I. LAND USE INFORMATION:

PLAN REVIEW FEE PAID:

PLAN REVIEW FEE OWED:

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D
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E
G
S
A
C
L

LOT	BLOCK	ADDITION			FLOOD ZONE: ____ No ____ Yes	
SECTION	TWP	RANGE	ZONING DIST:	SUPPLEMENTAL PUD DESIGNATION Yes No	PUD CASE NO.	

DESCRIPTION OF DEMOLITION

TYPE OF SEWAGE DISPOSAL:

____ City sanitary sewer service
 ____ Private sewerage system (ODEQ Permit Required)

TYPE OF WATER SUPPLY:

____ City water service
 ____ Rural water service (Documentation from RWD)

ELECTRIC DISCONNECT

GAS DISCONNECT

WATER CAPPED

SEWER CAPPED

NOTICE GIVEN _____	NOTICE GIVEN _____	NOTICE GIVEN _____	NOTICE GIVEN _____
BY _____	BY _____	BY _____	BY _____
DATE _____	DATE _____	DATE _____	DATE _____

EROSION CONTROL

PROPERTY TYPE

DEQ

DISPOSIAL SITE

TEMP _____	COMMERICAL _____	DEQ PERMIT _____	X _____
PERMANENT _____	RESIDENTIAL _____	ASBESTOS _____	RECEIPTS PROVIDED ____ YES ____ NO
	SOILS REPLACED _____	DATE _____	DATE _____

PEDESTRIAN WALKWAYS PROTECTED

PROJECT START DATE _____

BY _____ DATE _____

PROJECT END DATE _____

III. IDENTIFICATION OF OWNER, CONTRACTOR, ARCHITECT

Property Owner:

Contractor:

Architect:

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction. I further state that I have researched and examined or caused to be researched and examined all recorded documents and instruments relating to said property, that all recorded easements, dedications, and rights-of-way are known to me and are delineated on the site plan which is a part of the application for a building permit. It is understood that issuance of such building permit does not authorize or permit construction of a permanent structure over or upon any easement, dedication or right-of-way.

Signature of Applicant:

Address of Applicant:

Daytime Telephone No:

E-mail Address:

DEMOLITION PERMIT: ____ Approved ____ Denied

Signature and date:

FEES:

TOTAL:

\$