



# Demolition Permit Application

Date of Submission: \_\_\_\_\_

Application type:                      **Commercial**                      **Residential**

Property Information	Demolition Type
Address: _____ City / Zip: _____ Current Use: _____	Total Partial – identify the exterior wall(s), roof or portion of wall(s) and roof to be demolished. _____ _____
Applicant	Owner
Name: _____ Address: _____ City / Zip: _____ Phone: _____ Email: _____	Name: _____ Address: _____ City / Zip: _____ Phone: _____ Email: _____
Demolition Contractor Information	Structural Information
Company: _____ Address: _____ City / Zip: _____ Phone: _____	Square Feet: _____ Building Materials: _____ Foundation Type: _____ Estimated Cost of Demolition: _____

**IMPORTANT:**

This permit is valid for 90 calendar days from the date of approval. A final inspection is required upon completion of all demolition projects. Contact the City Manager’s Office for a final inspection close-out.

This property may/may not contain asbestos material. Certification of asbestos inspection and DNR notification of asbestos abatement must be provided prior to commencement of the demolition project.

**Submittal Requirements**

- 1. Owner authorization / signature, **NOTARIZED** at the bottom of this page – **OR** – a **NOTARIZED** letter of authorization from the owner giving the applicant permission to apply.
- 2. Proof of ownership (tax document / deed / etc.)

**Consent, Authorization and Signatures**

I understand and will adhere to the following rules or regulations:

- 1. No work may begin prior to issuance of this permit
- 2. If the structure to be demolished is currently tied into water / sewer / electric services provided by the City of Marceline, you must contact Marceline Public Utility at (660) 376-3528 for utility service removal.
- 3. The Applicant is responsible for any damage to sidewalks, driveway aprons or property in the City’s right of way caused during the course of the demolition work, and may be noted during the close-out inspection.
- 4. The applicant has One (1) year to commence construction of a new or replacement structure from the permit issue date to meet the zoning requirement exception per Marceline Municipal Zoning Ordinance (Ord #6.420).

I, the undersigned, hereby swear or affirm that the information provided in this application is true and correct to the best of my knowledge and is an accurate reflection of my intentions for the above structure and/or property. I understand that any omission or incorrect information herein will render this application and any permit obtained invalid.

As owner(s) of the property described in this application, I/we hereby authorize the Applicant listed on this application to act on my/our behalf during the processing and presentation of this request. They shall be the principal contact with the City of Marceline in processing this application.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(if different from owner)

**Signature of Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

**Permit Issuance Information**

The information on this form has been presented to, and reviewed by, the City of Marceline. The signature below constitutes approval and issuance of the demolition permit and is valid for a period of 90 days, to expire

\_\_\_\_\_.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title