

**Village of Fayette**  
**Application for Demolition Permit**

APPLICATION FEE OF \$20.00 MUST BE RECEIVED BEFORE APPLICATION MAY BE PROCESSED.

Property Owner \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Property Address \_\_\_\_\_  
Subdivision \_\_\_\_\_ Parcel Number \_\_\_\_\_  
Existing Use \_\_\_\_\_ Zoned As \_\_\_\_\_  
Application Date \_\_\_\_\_

Building/Structure to be Demolished:

- |   |   |                                      |
|---|---|--------------------------------------|
| <input type="checkbox"/> Single Family Residence        | <input type="checkbox"/> Multi-Unit Residential | <input type="checkbox"/> Commercial  |
| <input type="checkbox"/> Two Family Residence           | <input type="checkbox"/> Private Pool           | <input type="checkbox"/> Industrial  |
| <input type="checkbox"/> Residential Accessory Building | <input type="checkbox"/> Fence                  | <input type="checkbox"/> Other _____ |

Building Construction Type

- ☐ Wood Frame    ☐ Pole / Metal    ☐ Block    ☐ Other \_\_\_\_\_

Total Square Feet of Building \_\_\_\_\_ (Sum of Sq. Ft. of each floor using outside dimensions)

Work Dates: From \_\_\_\_\_ To \_\_\_\_\_ Hours of Work \_\_\_\_\_

Will any barriers or safety devices be needed to protect neighboring persons, property or traffic? Yes / No

Demolition Contractor:

Contractor Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Contractor Address \_\_\_\_\_ Contractor Phone \_\_\_\_\_

Waste Disposal Location \_\_\_\_\_

**Application must include the following attachments: Statements from each utility provider that service has been disconnected; a copy of the notification of demolition filed with Ohio EPA if required by OAC 3745-20-03 (form available at <http://epa.ohio.gov/dapc/atu/asbestos.aspx>); and if a commercial or industrial building, a listing of the contractor's bond/insurance.**

**The Applicant hereby certifies that all information on this form and attachments are true and accurate.**

Signature of Applicant \_\_\_\_\_

Office Use Only

- ☐ \$20.00 Fee Paid  
☐ EPA Notification (If Required)  
☐ Water/Sewer Disconnected  
☐ Gas Disconnected  
☐ Electric Disconnected  
☐ Bond / Insurance (If Commercial/Industrial)

☐ APPROVED  
☐ DENIED  
Reason for Denial \_\_\_\_\_

\_\_\_\_\_  
Zoning Inspector Signature