



Date: _____

North Country Inspection Service approves a demolition permit; this is for City Assessor records only

Demolition/Removal Permit

1. Applicant Information:
(if not individual, list business)

Owner Information:
(if different than applicant)

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

2. Address of premises worked on: _____

3. Description of structure being demolished or removed: _____

4. Date(s) during which work will be executed: _____

5. Describe procedure and safety precautions: _____

6. Are there any water meters or wells located on the property? If so, describe the location.
(Wells/Meters must be properly closed before demo)

7. Any heating oil tanks or other chemical/fuel tanks located on or under the property?

I do solemnly swear that the above information is true and complete to the best of my knowledge. I also understand that withholding any information that is both pertinent and necessary for the health and safety of others is an offence in the City of White Cloud and will be used as such.

Applicant

Date

Applicant

Date