

GILPIN TOWNSHIP ZONING DEMOLITION PERMIT APPLICATION

Applicant/Property Owner Name _____

Applicant Address _____

Applicant Phone Number (____)____ - _____

Contractor Name _____

Contractor Address _____

Contractor Phone Number (____)____ - _____

Location of Demolition: _____

Total SqFt of Demolition: _____

Please attach the following:

- A. A description of the proposed demolition plan and a plan to remove or seal any utilities to the building.
- B. A **site plan** shall be to scale showing **the boundary lines of the property** in which the demolition is to take place indicating bearing and distances of each line, area of the property and name of owner of record.
- C. The building to be demolished shall be shown on the site plan, **with dimensions and height noted** and distance indicated between it and adjacent roads and property lines.
- E. Existing buildings already on the property and topographical features such as steep slopes, swamps and streams shall be shown within five hundred (500) feet of the proposed construction.

Please complete this application and its required attachments and return to the Gilpin Township
Zoning Officer with payment.

I hereby certify that the information provided above is true and correct to the best of my knowledge, information, and belief.

Applicant Signature _____ Date _____

Office Use Only:

Permit Fee Amount \$ _____ Cash [] Check [] Check Number: _____

Zoning Officer: [] Approved [] Declined Reason: _____

Zoning Officer Signature _____ Date _____