

CODE DEPARTMENT DEMOLITION PERMIT APPLICATION

Phone: 770-207-4674 Email: permits@monroega.gov

OFFICE PERMITTING HOURS: 8:00 a.m. – 4:00 p.m.

Project Address:			
Type of Structure: Resi	dential	Commercial	
Is the project located in a Histori	c District? Yes	No No	
Properties located in a <mark>Historic District real of the letter approving the demolition fro</mark>			nission (HPC). Provide a copy
24 Hour Contact Name:			
Phone – Office:	C	ell:	
Email:			
General Contractor Name:			
Contractor Address:			
City:	State:	Zip Code	:
Phone – Office:	C	ell:	
Property Owner:			
Total square footage:	Value o	of Project: \$	

Please Note for Commercial & Residential Demolition Applications:

- All applications must include a written letter from the property owner requesting disconnection of all utilities for the purpose of demolition
- Provide proof of ownership
- If the owner **does not have a utility account** at the property address, a service application agreement must be included as part of the demolition application.
- It is the responsibility of the General Contractor to cap the sewer.

APPLICANT, PLEASE READ AND SIGN THE FOLLOWING:

Applicant must hold a valid business license for the type of construction to be permitted. Please include a copy of the state issued blue card for soil erosion control.

As the contractor, builder or authorized agent, I hereby apply for a permit to demolish structure as described herein. If the permit is granted, I shall raze it according to the laws of the City of Monroe. I also understand that the structure authorized by the permit shall have all power, sewer, gas and water disconnected and capped.

I hereby certify that the above information is true and correct.

Signature of Applicant	Print Name	Date
	215 N Broad Street • PO Box 725 • Mon	roe GA 30655
	770-207-4674 • permits@mongro	ega.gov