

DEMOLITION PERMIT APPLICATION

City of Beatrice
Community Planning & Building Inspection Department

(402) 228-5250

205 N. 4th Street
Beatrice, NE 68310

Job Address:		
Legal Description:	Lot #	Block
		Addition
Property Owners Name:		Phone:
Contractor's Name:		Phone:
Contractor's Address:		City/State/Zip Code
Type of Building: <input type="checkbox"/> Single Family <input type="checkbox"/> Duplex <input type="checkbox"/> Multi Units <input type="checkbox"/> Commercial <input type="checkbox"/> Garage		
Size of Building: Dimensions are:		Number of Stories: Height:
Building Has Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No if Yes, What Dimensions:		
DISPOSAL OF DEMOLITION MATERIALS		
<input type="checkbox"/> City Landfill <input type="checkbox"/> Private Landfill (needs an approval form from the City Council)		
Location of Proposed Private Landfill: Legal Description Required:		
UTILITIES INFORMATION		
Utilities: <input type="checkbox"/> Electrical <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Street <input type="checkbox"/> Gas <input type="checkbox"/> Telephone <input type="checkbox"/> Cable TV		
All City utilities shall be abandoned in accordance with City requirements and verified and/or inspected before Demolition Permit is issued and demolition begins.		
<i>I hereby certify that I have read and examined this application and affirm the above information as true and correct and also agree to comply with the provisions of the City of Beatrice Codes and any other applicable laws concerning the demolition process and/or disposal of demolition debris. I also certify that I am authorized to demolish this building as owner or agent of the owner and agree to assume complete responsibility for any liability arising from demolition of the above building. I also agree that no burning of materials shall be done except by the written authorization of the Fire Department.</i>		
APPLICANT'S SIGNATURE:		DATE:
OFFICE USE ONLY		
Demolition Permit Number:		Date Issued:
Demolition Permit Fee: \$(5.00)		Date Paid:
Zoning District:	Date All Utilities Were Disconnected:	
Building Office Approval:	Date Signed:	
Comments: Does the owner want to retain the Water Tap? <input type="checkbox"/> Yes <input type="checkbox"/> No		
It is the Responsibility of the <u>Permit Holder</u> to adhere to all Local, State And Federal Regulations regarding proper Inspections and Removal of Asbestos prior to any Demolition.		