

APPLICATION FOR DEMOLITION PERMIT

All areas must be completed on the application below:

JOB LOCATION: _____	Date: _____
All permit requests must have an address to be processed	
_____	_____
Property I.D. Number	Subdivision Zoning

<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Airport	Contractor Information: _____ Contractor's Name License No. _____ Address City State Zip Code _____ Telephone Number Federal I.D. Number _____ Worker's Compensation Carrier MESC Employer Number _____
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Owner of Property Information:			
_____		_____	
Owner's Name		Telephone Number	
_____		_____	
Address	City	State	Zip Code

Mechanical Contractor Information:			
_____		_____	
Contractor's Name		Telephone Number	
_____		_____	
Address	City	State	Zip Code
_____		_____	
Mechanical License Number		Federal I.D. Number	
_____		_____	
Worker's Compensation Carrier		MESC Employer Number	
_____		_____	

EPA regulations require establishments that service or dispose of refrigeration or air conditioning equipment to certify (by ninety (90) days publication of the final rule) that they have acquired recovery or recycling devices that meet EPA standards for such devices.

I certify that the establishment is in compliance with section 608 regulations, and that the information given is true & correct.

Mechanical Contractor's Signature Name Printed

<p><u>Type of Demolition</u> - this permit application is submitted to demolish the following building and/or items</p> <p style="text-align: center;">Note: square footage of each item must be indicated</p> <p>_____</p> <p>_____</p>

Asbestos Contractor Information:			
Federal and State of Michigan guidelines and regulations must be complied with during the removal of all asbestos items during demolition of building and building sites. The following regulations and laws may apply: OSHA 3047, 2056, 3088, 3077, 3069, 3079, Code of Federal Regulations – Title 29, parts 1900-1910, Public Acts: 135 of 1986, House Bills: 5722, 4839. There may be other regulations and laws that may apply and that are in effect.			
_____		_____	
Asbestos Contractor Name:		Telephone Number	
_____		_____	
Address	City	State	Zip Code

