CITY OF BELLE MEADE
BUILDING PERMIT APPLICATION

PERMIT # _____

DEMOLITION PERMIT

PROJECT ADDRESS: _____

OWNER NAME (LAST) _____ (FIRST)_____ PHONE #_____

CONTRACTOR: _____ PHONE #_____

APPLICANT'S E-MAIL ADDRESS: _____

CONTRACTOR LICENSE # _____ WORKERS COMP. # _____

DESCRIBEWORK_____

METHOD TO REMOVE

_____

Work Hours: Monday-Friday. 7:00-7:00 Saturday- 8:00-5:00 No work on Sunday or Federal Holidays

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DEMO PERMIT- **(☐) Main Structure** **$1,000**
(☐) Accessory Structure **$500**

(EPSC) as approved by CEC
Erosion Prevention Sediment Controls controls in place? **(☐) Yes** **(☐) No**

SIGNATURE: _____(Owner/Agent) **DATE**: _____

I will maintain the street and clean of all dirt and debris caused by this demolition on the same day.
INTL._____

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAW AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION. CONSTRUCTION SHALL BE STRICTLY ACCORDING TO THE PLANS ON FILE WITH THE APPLICATION FOR THE PERMIT. CONSTRUCTION IN ANY WAY AT VARIANCE WITH THE PLANS WILL BE TREATED AS JUSTIFICATION FOR A STOP WORK ORDER, AND \ OR ORDER FOR REMOVAL.