

PERMIT NO. _____
PERMIT CHARGE: _____

APPLICATION FOR DEMOLITION PERMIT

TOWN OF PRESTON, MARYLAND

STREET ADDRESS OF LOCATION TO BE
DEMOLISHED _____

OWNERS NAME _____ OWNERS ADDRESS AND PHONE NUMBER _____

CONTRACTOR DOING THE DEMOLITION _____

CONTRACTORS ADDRESS AND PHONE NUMBER _____

CONTRACTORS LICENSE NUMBER _____

OF UNITS FOR DEMO _____ SIZE OF LOT _____ SIZE OF FOOTING _____

TYPE OF HEATING _____ IS THERE A BASEMENT _____

UTILITIES _____
WATER SEWER ELECTRIC WELL SEPTIC GAS

HAVE ALL UTILITIES BEEN DISCONNECTED YES _____ NO _____

ESTIMATED COST _____

OWNER/AGENT _____
SIGNATURE

START DATE _____ COMPLETION DATE _____

NOT TO EXCEED 30 DAYS – EXSTENTIONS BY WRITTEN REQUEST

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APPROVED BY INSPECTOR _____ DATE _____
APPROVED BY COMMISSION _____ DATE _____
DENIED _____ REASON FOR DENIAL: _____
DATE: _____