

DATE RECEIVED

(DCRD	OFFICE	IISF	ONI Y)

RESIDENTIAL	DEMOLITION	PERMIT	NIIMRER

(DCBD OFFICE USE ONLY)

Public Works Engineering, BUILDING DIVISION 100 Third Street, Castle Rock, CO 80104 (303) 660-7497 Fax: (303) 479-7271 www.douglas.co.us

COMMERCIAL DEMOLITION APPLICATION AND PERMIT

SITE ADDRESS		Exterior Building Demolition (Core & Shell)		
LEGAL		 I understand that it is my/our responsibility to confident and all water, sewer, sanitary sewer, gas and electrical 		
OWNER	Name	 I understand that it is my/our responsibility to supermit to the Colorado Department of Public Heat 	ubmit an application for a "Demolition Notification" alth Air Quality Control Division (303)692-3150 and	
	Address	provide proof of submittal upon request. • A site plan must be provided identifying the structure to be demolished. A GESC Permit shall be		
	City Zip		ercial building demolition which will result in one	
	Phone # Cell #	Land Disturbance		
	Email	Disturbance Area (sq. ft.)	yds. of soil moved (est.)	
CONTRACTOR	Name Address	OFFICE USE ONLY: GESC Permit Required? Yes No hold on the issuance of the Demolition Permit until a GESC Permit is issued		
	<u>City</u> Zip	Interior Building Demolition (Tenant)	i Citilic is issued	
	Phone # Cell #	<u> </u>		
	Email	 I understand that it is my/our responsibility to contact the utility providers prior to any demolition. All water, sewer, sanitary sewer, gas and electric shall be disconnected and properly terminated. 		
List the service providers for the following:		 I understand that it is my/our responsibility to submit an application for a "Demolition Notification" Permit to the Colorado Department of Public Health Air Quality Control Division (303)692-3150 and 		
Electrical	Gas	provide proof of submittal upon request.		
Water	Sewer	Electrical Disconnect*	\$	
Fire District		Plumbing/Mechanical Disconnect*	\$	
Fire District Approval Received? (circle one) Yes No Before any work may commence, you shall have approval from the Douglas County Historic Preservation Board Chair. Demolition Application Review Form Demolition Permit Evaluation Requirement Waived		Other Inspection*	\$	
		* Inspection Fee = \$94 per inspection		
		PERMIT FEES		
	<u> </u>	Demolition Permit Fee	ş 47.00	
Waived by	Date:	Demolition Review Fee (if required)	\$	
Applicant Name Applicant Signature Date:		Reviewed and Approved By		
CBO Signature	Date:	TOTAL DUE (Inspection & Per	rmit Fees) <u>\$</u>	