



## TOWN OF MOREHEAD CITY DEMOLITION PERMIT APPLICATION

A good and sufficient bond in the sum of five hundred dollars (\$500.00) shall be posted by the property owner or contractor when the permit is picked up to ensure complete removal or demolition, including all rubble and debris. Failure on the part of the property owner or his contractor to completely demolish, remove and clear the premises after thirty (30) days' notice by the Building Inspector shall be cause for forfeiture of such bond.

Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Construction Site Address: \_\_\_\_\_

Contractor (Licensee): \_\_\_\_\_ Contractor Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ License #: \_\_\_\_\_

Email: \_\_\_\_\_

Total value of job: \$ \_\_\_\_\_

Square footage of structure to be demolished: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspections Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

Owner/Agent Signature: \_\_\_\_\_

\*\* Check box in lieu of signature to indicate agreement with the above statement if submitting electronically.

Typed Name \_\_\_\_\_

*\* Contact the Health Hazards Control Branch of NC DHHS-EPI at 919-707-5950 for Asbestos Permit and Notification\**

Zoning Officer's Approval: \_\_\_\_\_

Date: \_\_\_\_\_