

## VILLAGE OF WOODMERE

## **BUILDING DEPARTMENT**

27899 Chagrin Boulevard Woodmere Village. OH 44122 Phone: 216.831.1234 X1233 Fax: 216.292.4109

## RESIDENTIAL DEMOLITION PERMIT APPLICATION

(ALL buildings or structures and tenant spaces)

Permit#:	'FEE:		Date:	
Permanent Parcel #:				
Address of Structure:				
Description of Structur	re:			
Square feet of gross fl	oor area in all stories being dem	olished:		
FEE: \$0.05 <sub>1</sub>	oer sq. ft. (Minimum \$150.00) C	Commercial propert	ies add 1% \$	
Property Owner's Nam	ne:			
Property Owner's Add	ress:			
			Zip:	
Phone:		Fax:		
City:		State:	Zip:	
Phone:		Fax:		
			Certificate of Insurance REQUIRED)	
accompanying paperw with all applicable cod adhere to plans and spe voids the permit. The that the filing of an app	ork/drawings which are part of es, ordinances of the Village and cifications as submitted with any undersigned swears and affirms	this application. The l laws of the State, ar corrections, and under that the information her rrect information wit	re as described in this application and all undersigned agrees to build in accordance and to request inspections as required, and to erstand that any violation of these conditions erein is true and accurate and acknowledges the intent to avoid the licensing, permit or mit.	
Contractor's Signature		Print	Print Contractor's Name	