DEMOLITION PERMIT APPLICATION

Site Information: [ ] Residential [ ] Non-Residential

Demolition of: [ ] entire structure [ ] part of structure only

*Any building over one story in height shall require a pre-inspection and post inspection.

Site Address ____________________________________________________________

Lot_________ Block_________ Cost of Demolition: $____________________

Type of Structure: (wood, stucco, etc.) _____________________________________________

No. of Units______ No. of Stories______ No. of Rooms______ Total Square Footage_______

Which utilities will be disconnected: Gas [ ] Sewer [ ] Septic Tank [ ] Electrical [ ] Water [ ]

Proposed Date of Demolition: ___________________________

Equipment used to demolish structure: _______________________________________________

Will this project involve the removal or encapsulation of asbestos? Yes[ ] No[ ] If yes, this permit may not be issued until you have presented this office with your Asbestos Contracting License and the Notification of Asbestos Renovation, Encapsulation, or Demolition from the Georgia Department of Natural Resources, Asbestos Licensing and Certification Unit, Environmental Protection Division.

Asbestos Contracting License Number#__________________

Owner Name _____________________________________________________________________

Owner Mailing Address _______________________________ City __________ State ______ Zip Code ____________

Phone (Home) ______________________ Phone (Cell) _____________________ Fax ____________________ E-Mail ________________

Business Name ___________________________________________________________________

Business Mailing Address _______________________________ City __________ State ______ Zip Code ____________

Business License No. __________________________ Phone ______________________ Fax ____________________ E-Mail ________________

I hereby certify that the site described herein will be constructed and/or used in accordance with all applicable zoning ordinances and laws governing Community Development for the City of Sandy Springs.

Applicant Signature __________________________________________________________________ Date __________________________

City of Sandy Springs, 7840 Roswell Road, Building 500, Sandy Springs, Georgia 30350 - 770-730-5600 www.sandyspringsga.org

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