



Plant your family here.

215 North West Street
Perryville, MO 63775-1327
Phone: 573-547-2594

E-Mail: buildinginspectors@perryvillemo.gov

OFFICE USE ONLY

SUBMITTAL DATE _____

APPROVAL DATE _____

PERMIT # _____

FEES PAID _____

BUILDING DEMOLITION PERMIT APPLICATION

BUILDING ADDRESS: _____ DATE: _____

BUILDING OWNER: _____ ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

(REQUIRED)

CONTRACTOR: _____ ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

(REQUIRED)

TYPE OF STRUCTURE:

RESIDENTIAL SIZE _____

MOBILE HOME SIZE _____

COMMERCIAL * SIZE _____ ASBESTOS ABATEMENT SUBMITTED _____

* ALL COMMERCIAL PROPERTIES SHALL HAVE ASBESTOS TESTING PERFORMED AND RESULTS SHALL BE SUBMITTED BEFORE A DEMOLITION PERMIT WILL BE ISSUED.

COST INFORMATION:

DEMOLITION COST \$ _____

PERMIT FEE \$ _____ (\$1/ \$1000)

PERMIT FEE PAID YES NO

UTILITIES:

UTILITY CUT OFF APPLICATION SUBMITTED BY APPLICANT: YES NO

UTILITY CUT OFF APPLICATION SUBMITTED TO PUBLIC WORKS: YES NO

UTILITY CUT OFF APPLICATION RETURNED FROM PUBLIC WORKS: YES NO

INSPECTIONS:

DEMOLITION SITE FREE OF DEBRIS YES NO

DISPOSAL LADING BILL SUBMITTED BY CONTRACTOR YES NO

SEWER LINE PROPERLY CAPPED AND COVERED WITH QUICK CRETE YES NO

SIGNATURE OF APPLICANT

APPLICATION DATE

SIGNATURE OF INSPECTOR

INSPECTION DATE

SEE CITY ORDINANCE FOR TRACER WIRE REQUIREMENTS. ANY MO ONE CALL VIOLATIONS WILL BE ISSUED A CITATION FOR MUNICIPAL COURT, AND THE DIGGER IS LIABLE FOR DAMAGES.

