

## **APPLICATION FOR DEMOLITION PERMIT**

The undersigned hereby applies for a permit to demolish according to White Lake Township Ordinance and in accordance with the following statements:

| ADDRESS OF DEMOLITION:   |  | DEED HOLDER:  |
|--|--|---|
| PARCEL ID:   |  | BUILDING TYPE:  |
| BUILDING SIZE:   |  | MEANS OF DEMOLITION:  |
| COST OF DEMOLITION: \$   |  | APPLICATION DATE:   |
| ATTACH THE FOLLOWING:  |  |   |
| ☐ Proof of Ownership   |  | ☐ MIOSHA Compliant Asbestos Survey                          |
| ☐ Edison cut-off   |  | ☐ Consumer shut-off   |
| ☐ Soil Erosion Permit  |  | ☐ Restoration Plan  |
| ☐ Well Abandonment Permit from OCHD  |  | Septic tanks shall be properly abandoned per OCHD standards |
| (A license as a residential builder or maintenance and alteration contractor in house wrecking is required when conducting demolition on a residential or combination residential and commercial structure)  LICENSED CONTRACTOR |  |   |
|  |  | LICENSED CONTRACTOR   |
| COMPANY NAME   |  |   |
| CONTACT NAME   |  |   |
| LICENSE NUMBER   |  |   |
| STREET ADDRESS   |  |   |
| CITY/STATE/ZIP   |  |   |
| PHONE  |  |   |
| EMAIL  |  |   |
| FEDERAL I.D.   |  |   |
| MESC #   |  |   |
| WORKER'S COMP. INSURANCE   |  |   |
| DEED HOLDER SIGNATURE:   |  |   |
| APPLICANT SIGNATURE:   |  |   |
|  |  |   |
| WLT Building Dept. Approval:   |  | Date:   |