

## **Demolition Permit Application**

All applications, licenses and permits are subject to approval.

## **Owner Information** Name **Address** City **Phone Number** State **Email Address Contractor Information Phone Number** Name **Property Information Address** Lot **Block Subdivision Parcel PIN Number** Size of Lot **Number of Stories** Describe which building(s) are to be demolished, if more than one structure exists on lot.

If this property is regulated under Part 61 of Title 40 of the Code of Federal Regulations (NESHAP), be advised that the owner or contractor must file a NESHAP notification form with Illinois EPA, as required by Section 61.145(b) of Title 40 of the Code of Federal Regulations. For notifications forms and additional guidance please vist www.epa.state.il.us/air/asbestos.

Capping Utilities: The property owner/contractor shall notify all utility owners before demolition begins, so the utilities may be removed. The sanitary sewer service lateral shall be capped by the property owner/contractor at the point the sanitary sewer service lateral leaves the property. The property owner/contractor shall contact the City of Mt. Vernon Sewer Department at the time of capping so that an inspection can be made as to the location and method used to cap the service lateral. Failure to have the required inspection will be in violation of City Ordinances and action will be taken under the ordinances of the city.

I have read the above and ag	ree to fulfill the re	equirements s	tated. *	
Applicant Name and Title				
For Office Use Only				
Zoning:	Fee: \$_			
Inspector		Date:	Permit #:	