

**APPLICATION FOR DEMOLITION PERMIT
CITY OF LOUISVILLE**

Fee _____ Permit Number _____

Date _____

Name of Applicant _____ Phone # _____

Name of Owner (if different) _____

Demolition Location Address _____

Name of Licensed Contractor _____ Phone # _____

Address of Contractor _____

City, State, Zip Code _____

Contractor's Federal I.D. Number _____

Date of Demolition _____

Supporting information:

Permit fees:

1. Garage or outbuilding - - \$50
2. Single-family, duplex, or triplex - - \$100
3. Four-unit or greater residential - - \$200
4. Commercial or industrial structure - - \$200

The Building Inspector shall be given at least 72 hours after an application has been filed excluding Saturdays, Sundays and holidays to inspect such buildings and structures. If it is found that work can be executed safely in the manner proposed, a permit shall be issued thereof.

I certify that the information contained in this application and its supplements is true and correct.

Applicant's Signature