

**CITY OF SALEM
PERMIT APPLICATION CENTER
555 LIBERTY STREET SE, ROOM 320
SALEM, OR 97301
(503) 588-6256**

**Demolition of Structure
12570.107**

Application needs to be filled out completely.

Site Address: _____

Name of Property Owner: _____

Owner's Mailing Address: _____

City/State/Zip: _____ Phone #: _____

Contractor: _____

CCB #: _____ Expiration Date: _____

Contractor's Mailing Address: _____

City/State/Zip: _____ Phone #: _____

Contact Person: _____ Phone #: _____

Occupancy/Use of Building: _____ Business Name: _____

Square footage of building: _____

Sewer cap required? Yes **G** No **G**

Proof of ownership verified by staff? Yes **G** No **G** Must attach kiosk plot map

Wells on property? Yes **G** No **G** It is applicant's responsibility to notify State of Oregon, Water Resources Division (503) 378-3739, when wells are present on a property where the structure is going to be removed.

Asbestos on property? It is the applicant's responsibility to notify Dottie Boyd of the State of Oregon, Department of Environmental Quality (503) 378-8240 ext. 272 when a structure is going to be removed.

I am responsible for the demolition of the above mentioned structure and will make all notifications required.

Applicant

Date