



Catch the Spirit...

Live the Dream!

Application For Residential

Demolition Permit

Permit # _____

Date: _____

Note: This Application is for the demolition of a residential building of less than 4 units. Future use of this site for other than residential must use the commercial application.

The Undersigned agrees to remove the building from the lot and to clear the lots of all obstructions, rubble, debris and to fill all basements, excavations or other depressions, leaving the lot in a clean and safe condition within 30 days from the issuance of the permit. Site must be re-vegetated if not redeveloped. The undersigned agrees to indemnify and hold harmless the City of Newton, IL for and from any and all liability, loss, damage and/or expense arising from in any way related to the issuance of this demolition permit.

The Undersigned agrees to complete the following for demolition:

- ✓ Water, Waste Water and electric service connections and pertinent equipment shall be capped off and removed with written approval and verification made by the appropriate utility department.
- ✓ Gas lines shall be located and removed by the appropriate utility department.
- ✓ Basement floor (if any) shall be broken up to prevent trapping of water.
- ✓ All adjacent property owners shall be notified in writing in advanced of the building being demolished. Copies of all written notifications must be accompanied with this application.
- ✓ Do You want the water service line to remain. Yes No

Demolition Address: _____ Type Of Structure _____

Property Tax ID: _____ Type of Building Principle Secondary Approx Sq. Ft. _____

Future use of this property _____

Property Owners Name _____ Address _____

Property Owners Signature _____ Phone # _____ Email _____

Contractors Name _____ Address _____

Contractors Signature _____ Phone # _____ Email _____

Permit Date _____ Permit Expires _____

Official Use: Release

1. Elec Dept: Sign: _____ Title: _____ Date _____
2. Water Dept: Sign: _____ Title: _____ Date _____
3. Waste Water Dept Sign: _____ Title: _____ Date _____

Approved By: _____ Date: _____
(Inspection Department)