

CITY OF MILLERSVILLE

DEMOLITION APPLICATION

DATE: _____

Instructions: Complete all information that is not highlighted with tan. (Tan is for office use only.)

Lender Information:	PERMIT NUMBER:	ZONING:
Flood Plain Yes No Flood Map#	JOB TYPE: (Choose One)	
COUNTY Sumner Robertson	Home	Multiple Dwelling
BUILDING USE: (Choose one) Residential	Nominal	Job Trailer
Commercial Industrial	Commercial	Mobile Home (used / new)
Explanation of demolition process/device:	LEGAL DESCRIPTION	
	Map	Group
	Parcel	Subdivision
# of Accessory Structures to be demolished:	Sq. Footage of accessory structure to be demolished:	

Square Footage of Principal Structure (Only if requesting demolition): _____

JOB LOCATION	Owner	Tenant	MAILING INFORMATION		
Name:	Street Address				
Street Address:	Lot Number	City	State	Zip	
Home Phone Number	Mobile Phone Number	Work Phone Number	Fax Number		

DEMOLITION CONTRACTOR INFORMATION

Name:	Mailing Address/ Street				
City	State	Zip	Work Phone Number	Mobile Phone Number	
Contractor's License Number	Occupancy Group	Fax Number			

RECONSTRUCTION PLANS (A separate application must be completed for reconstruction; this application will not be sufficient for the required building permit.)

Size of Proposed Building (Total Square Feet)	Number of Stories	Number of Dwelling Units				
Class of Work:	New	Addition	Alteration	Repair	Moving	Swimming Pool

DEMOLITION

Size of Building (Total Square Feet)	Number of Stories	Number of Dwelling Units
Does this structure have gas/electricity/water/sewer connections	Start Date of Demolition / Completion Date for Demolition:	
Gas Electricity Water Sewer		
List Hazardous Materials:	Material disposal: Dumpster, etc.	

WILL YOU BE DISTURBING 1/2 ACRE OF LAND OR MORE?	YES	NO
AREA TO BE DISTURBED (ACRES) _____		
HAVE YOU FILED AN NOI AND SWPPP WITH THE STATE?	YES	NO

PLEASE READ

The City of Millersville does not charge for Demolition Permits.

This permit becomes null and void if work or construction has not commenced within **six months**, or if work is suspended or abandoned for a period of **six months** at any time after work is commenced.

The issuance of a demolition permit does not verify compliance with utility companies that require services to be disconnected.

You are responsible to contact ALL utility companies for compliance prior to demolition.

YOUR SIGNATURE ACKNOWLEDGES THE FOLLOWING:

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT; I AGREE TO COMPLY WITH ALL CITY ORDINANCES, STATE LAWS OR REGULATIONS REGARDING DEMOLITION AND RECONSTRUCTION. I AGREE TO CONTACT ALL UTILITY COMPANIES PRIOR TO DEMOLITION.

Authorized Signature: _____ Owner Contractor Tenant

Building Department Approval: _____
Signature Date

This application is not your Demolition Permit.

Please allow no less than 3 business days for processing this application prior to the issuance/denial of Demolition Permit.

The following must be attached to this application:
 Plot Plan of structure chosen for demolition (clearly identified) with location, distance and type of each surrounding structure. Copy of written notice and names and addresses of recipients (when required)

Please Notice:
 The State of TN requires a Home Improvement Contractor's License for all work over \$3,000, and a Contractor's License for all work over \$25,000.