



G O D F R E Y

ILLINOIS

You can see your future from here

BUILDING & ZONING

DEMO PERMIT

DATE: _____

PARCEL ID: _____

ADDRESS OF DEMOLITION: _____

OWNER NAME: _____

ADDRESS: _____

PHONE: _____

COMPANY DOING DEMOLITION: _____

ADDRESS: _____

PHONE: _____

PROJECTED DATE OF DEMOLITION: _____

ATTACH PHOTO OF DEMOLITION SITE _____

ATTACH DEMO SPECIFICATIONS SUMMARY SHEET _____

THIS SUMMARY SHEET IS HEREBY INCORPORATED INTO THE OFFICIAL DEMOLITION SPECIFICATIONS FOR THIS PROJECT. THIS SUMMARY SHEET IS INTENDED ONLY FOR A QUICK OVERVIEW OF BASIC INFORMATION.

BUILDING TYPE: _____

CONSTRUCTION TYPE: _____

NUMBER OR STORIES: _____



G O D F R E Y

ILLINOIS

You can see your future from here

BUILDING & ZONING

OTHER STRUCTURES TO BE REMOVED: _____

SPECIAL NOTES/ INSTRUCTIONS: _____

1. ALL STRUCTURES ON THE PROPERTY _____
2. BASEMENT/ FOUNDATION REMOVAL _____
3. RE-SEED AND GRADE AREA TO RE-ESTABLISH TURF _____
4. DRIVEWAY REMOVAL _____
5. ASBESTOS REMOVAL _____
6. HAULING SITE _____

FOR SEWER CAP OFF, CONTACT ILLINOIS AMERICAN WATER AT 800-422-2782

FOR FINAL INSPECTION, CONTACT THE BUILDING AND ZONING DEPARTMENT AT 618-466-1206

TAKE FINAL TO ASSESSOR'S OFFICE TO HAVE DEMOLISHED STRUCTURE REMOVED FROM TAX BILL



G O D F R E Y

ILLINOIS

You can see your future from here

BUILDING & ZONING

SIGNATURE OF APPLICANT: _____

PERMIT COST: \$50.00

FOR OFFICE USE ONLY:

APPROVED BY: _____ DATE: _____

PERMIT # _____

COST OF PERMIT: _____

PAID: _____

DATE OF DEMOLITION: _____