

DEMOLITION WORKSHEET

(Please type or print clearly – Attach to permit application)

JOB SITE NAME: _____ Parcel ID# _____

JOB SITE ADDRESS: _____ City _____

County _____ Zip _____ Telephone # _____

Directions to Property (Physical location): _____

TYPE OF BUILDING OR STRUCTURE TO BE DEMOLISHED: Frame Concrete Block Steel

Other _____ Value of Work: \$ _____ .00 _____

No. of Buildings/Structures _____ No. of Stories _____ No. of Units _____

Previous use of Building(s) _____ Impervious Area Remaining (sq. ft.) _____

Proposed use of site _____ Date to be developed _____

Asbestos Notification Statement: Refer to Florida Statutes 469 which provides licensing, training and surveying requirements for asbestos abatement.

Please contact the Florida Department of Environmental Protection at 407-893- 3333 for information on Chapter 62-297 F.A.C. which provides requirements for demolition and asbestos renovation.

Well on Property? Yes ___ No ___ Well to be abandoned? Yes ___ No ___ Well used for irrigation? Yes ___ No ___

Well Abandonment Permit # _____

Septic Tank on Property? Yes ___ No ___ Septic tank to be abandoned? Yes ___ No ___

Septic Tank Abandonment Permit # _____

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning. ** I hereby declare that all information contained in this demolition worksheet is true and correct**

Signature of Applicant _____ Date _____

STATE OF FLORIDA

COUNTY OF _____

Affirmed and subscribed before me this _____ day of _____ 20_____

by _____ Personally known _____ or Produced

Identification _____ Type of Identification Produced _____

Signature of Notary Public State of Florida

Print, Type or Stamp Name of Notary