

APPLICATION FOR PERMIT TO DEMOLISH A BUILDING

JEFFERSON COUNTY
INSPECTION SERVICES DEPARTMENT

208 COURTHOUSE
BIRMINGHAM, ALABAMA 35263-0045

PHONE 325-5321

- 1. BUILDING ADDRESS: \_\_\_\_\_ ZIP \_\_\_\_\_
2. LEGAL DESCRIPTION: LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ SURVEY \_\_\_\_\_
PARCEL I.D. \_\_\_\_\_ CENSUS TRACT. \_\_\_\_\_

(Use Additional Sheet if Necessary)

- 3. TYPE CONSTRUCTION: [ ] I [ ] II [ ] III [ ] PROTECTED
[ ] IV [ ] V [ ] VI [ ] UNPROTECTED
4. TYPE OCCUPANCY: [ ] ASSEMBLY [ ] BUSINESS [ ] EDUCATIONAL [ ] FACTORY/INDUSTRIAL [ ] HAZARDOUS
[ ] INSTITUTIONAL [ ] MERCANTILE [ ] RESIDENTIAL [ ] STORAGE

5. DIMENSIONS OF BUILDING: WIDTH, \_\_\_\_\_ LENGTH, \_\_\_\_\_ HEIGHT, \_\_\_\_\_ NO. STORIES \_\_\_\_\_

6. A DETAILED PLAN SHOWING THE BUILDING TO BE DEMOLISHED WITH RELATION TO ALL ADJACENT STREETS, SIDEWALKS, ALLEYS AND PUBLIC WAYS MUST ACCOMPANY THIS APPLICATION.

— For this Purpose The Reverse Side Of This Application May Be Used —

7. ARE ANY OTHER BUILDINGS OR PORTIONS THEREOF DEPENDENT ON THIS STRUCTURE FOR SUPPORT OR STABILITY?
[ ] YES, [ ] NO. IF YES, WHAT STEPS HAVE BEEN TAKEN TO INSURE ADEQUATE STRUCTURAL STABILITY IN THE REMAINING BUILDING, BUILDINGS OR PORTIONS THEREOF?

— Attach Detailed Statement And/Or Drawings And Specifications —

8. IF THE BUILDING TO BE DEMOLISHED EXCEEDS ONE STORY IN HEIGHT AND IS LOCATED LESS THAN 10 FEET, OR LESS THAN 1/4 OF THE HEIGHT OF THE BUILDING FROM ANY STREET OR ALLEY, OR WHEN THE DISTANCE FROM A ONE STORY BUILDING TO ANY STREET OR ALLEY IS LESS THAN 1/2 THE HEIGHT OF THE BUILDING, A SCALED AND DETAILED PLAN INDICATING THE METHOD OF PROTECTION TO SAID PUBLIC PROPERTY SHALL ACCOMPANY THIS APPLICATION.

9. PLUMBING PERMIT FOR CAPPING OF SEWER: PERMIT NO. \_\_\_\_\_

10. HAVE ALL UTILITY SERVICES BEEN DISCONNECTED BY THE RESPECTIVE UTILITY COMPANIES? [ ] YES, [ ] NO. IF NO, WILL UTILITY SERVICES BE DISCONNECTED PRIOR TO START OF DEMOLITION WORK? \_\_\_\_\_

11. NAME OF CORPORATE SURETY FURNISHING DEMOLITION BOND \_\_\_\_\_

- A. [ ] THE DEMOLITION OF THIS STRUCTURE IS COVERED BY A \$1000.00 SURETY BOND FOR THIS DEMOLITION ONLY.
B. [ ] THE DEMOLITION OF THIS STRUCTURE IS COVERED BY AN ANNUAL OR BLANKET BOND IN THE AMOUNT OF \$ \_\_\_\_\_ IF BOX "B" IS CHECKED COMPLETE ITEM "C"
C. DATE OF BOND \_\_\_\_\_ DATE OF BOND RENEWAL \_\_\_\_\_ DATE BOND EXPIRES \_\_\_\_\_

12. LIABILITY AND PROPERTY DAMAGE INSURANCE: \_\_\_\_\_ NAME OF INSURANCE COMPANY WRITING POLICY \_\_\_\_\_ POLICY NO. \_\_\_\_\_

13. PROPERTY DAMAGE \$ \_\_\_\_\_ PERSONAL INJURY OR DEATH OF ONE PERSON \$ \_\_\_\_\_ TOTAL LIABILITY COVERAGE RESULTING FROM ONE ACCIDENT \$ \_\_\_\_\_

14. EFFECTIVE DATE OF INSURANCE COVERAGE \_\_\_\_\_ EXPIRATION DATE OF INSURANCE COVERAGE \_\_\_\_\_

15. NOTE: A CERTIFICATE OF INSURANCE SHOWING THE EXISTENCE OF THE HEREIN DESCRIBED INSURANCE COVERAGE MUST BE DELIVERED TO THE BUILDING OFFICIAL PRIOR TO THE ISSUANCE OF THE PERMIT FOR THE DEMOLITION OR REMOVAL OF THIS STRUCTURE.

Table with columns: Owner, HOW IS BLDG. TO BE DEMOLISHED, BY DAY LABOR, BY CONTRACTOR, BY OWNER. Rows: NAME, ADDRESS, PHONE.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION AND ALL ACCOMPANYING DATA IS TRUE AND CORRECT AND I AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING THE DEMOLITION OF BUILDINGS.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ OWNER OF AUTHORIZED AGENT

DO NOT WRITE BELOW THIS LINE

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED BUILDING HAS BEEN SATISFACTORILY DEMOLISHED; THAT ALL BASEMENT OR CELLARS HAVE BEEN FILLED AND THE PREMISES CLEARED OF ALL DEBRIS.

NOTES: \_\_\_\_\_

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_