

Demolition Application Form

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Property Owner:							
Mailing Address:	G(DO.D.						
Owner Information	Street/PO Box	City			State	Zip	
Phone #'s:							
	Home	Work				Cell	
Contractor:		License Number:					
Mailing Address:							
Contractor Information	Street/PO Box	City	ý			State	Zip
Phone #'s:							
	Work	Alternate Work					Cell
Property Information: Tax Assessors Identification Number:			L	ot(s):		_Block:	
_	lities been located by calling 80 the following utilities? <i>A copy</i>			YES		NO	al au
Town of Palr		_	rea jron YES	n e n n n	ies iisiea t NO	eiow.	
	719-481-2902		YES		NO		
Town of Palmer Lake Police Department		719-481-2934		YES		NO	
Palmer Lake Sanitation District		719-481-2732		YES		NO	
IREA – Intermountain Rural Electric		800-332-9540		YES		NO	
Black Hills Energy (natural gas)		800-303-0752		YES		NO	
Qwest Phone Services		800-244-1111		YES		NO	
Comcast TV	888-683-1000		YES		NO		
Have you made arrangement for rubbish/debris removal? If yes, by what method and service?				YES		NO	



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Property Address:	
Describe any disruptions of traffic flow and you pla	an to minimize theses (attach a Traffic Control Plan)
Archival Information and Photo Documentation Include photograph(s) of all sides of the building. Information you can provide regarding this property	The Town of Palmer Lake would also appreciate any historical
accurate to the best of his knowledge. "I certify that	of perjury that the information found in the application is true and at I understand the demolition to be in accordance with this ake's Zoning Regulations, other applicable Town regulations, and it."
Applicant Signature:	Date:
Property Owner Signature:	Date:
•	ne year from the date of approval and is subject to the conditions nenced during this period, the permit must be renewed.
Authorized by:Zoning	Date of approval:
Zoning	
Authorized by:Zoning	Date of approval:
Authorized by:Zoning	Date of approval:
Conditions:	