Place received stamp here

Permit and Licensing Division

City of Daytona Beach

Post Office Box 311, Daytona Beach, Florida 32115-2451

Current Florida Building Code

Phone (386) 671-8140

Fax (386) 671-8149

DEMOLITION PERMIT APPLICATION

Date _____ Parcel No. _____ Permit No. _____

Job Address _____ Contact Email _____

Owner _____ Phone _____ Fax _____

Address _____ City _____ State ____ Zip _____

Contractor _____ Phone _____ Fax _____

Address _____ City _____ State ____ Zip _____

Contractors License No. _____ **Date To Remove Water Meter(s)** _____ Initials ____

Type of Building or Structure to Be Demolished

Frame Concrete Block Steel Other) _____ Commercial Residential

Value of Work: _____ No. of Buildings/Structures _____ No. of Stories _____ No. of Units _____

Previous use of Building(s) _____ Impervious Area Remaining (sf) _____

Proposed use of site _____ Date to be developed _____

Gas company disconnect # _____ Gas company person issuing # _____

Note: Gas company section must be completed before demolition permit will be issued.

REBUILDING WITHIN 60 DAYS? YES_ (*DO NOT REMOVE TAPS*) No _ __ (*REMOVE TAPS*)

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.

Before commencing work, the removal of water service by the City shall be completed.

Please read the attached: Notice of City Utilities Removal Declaration

Demolition Permits are good for sixty (60) days after date of issuance. For a justifiable cause, a one time extension of thirty (30) days may be allowed. Such request shall be in writing to the building official.

Application is hereby made to obtain a permit to do the work as indicated. I certify that no work has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNER'S/PERMIT APPLICANT 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.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

I hereby affirm that I have complied with the provisions of Florida Statutes 469, Chapter 62-297 F.A.C. and I have notified the Florida Department of Environmental Protection (FDEP) of my intention to remove asbestos, if applicable.

STATE OF FLORIDA – COUNTY OF VOLUSIA Signature _____

Sworn to and subscribed this _____ day of _____ 20 ____ by _____

Who is personally known to me (check if true) **OR** has produced _____

_____

Notary Public, State of Florida

place Notary seal here