



Town of Aberdeen Planning & Inspections Department

Office: (910) 944-7024 | Email: Aberdeen.Building@gmail.com



DEMOLITION - APPLICATION

ALL sections of this application *MUST* be filled out, or will be deemed incomplete and rejected by the Planning & Inspections Department.

APPLICATION DATE : ___/___/___ **LOCATION / ADDRESS :** _____

PROPERTY OWNER : _____

Phone Number : _____ Email Address : _____

APPLICANT : _____

Phone Number : _____ Email Address : _____

Status of Applicant : Property Owner Legal Representative Other : _____

License Number : _____ Classification : _____

SCOPE OF WORK (detailed description of work including location and equipment size) : _____

TYPE OF WORK : Non-residential Residential Storage Tank Removal Other : _____

Any AST, UST or LPG Tanks? Yes No If yes, provide/attach documentation of proper removal

Is this request associated with a Town Code Enforcement Action? Yes No

VALUE OF WORK : \$ _____

Please list the name and license # of the contractor(s) who will be performing the work for this project. If the work will be performed by the owner just write "owner" in the GENERAL CONTRACTOR field. If any contractor field is left blank, that indicates that trade will not be utilized with this permit; otherwise the information needs to be provided with this application.

GENERAL CONTRACTOR : _____ License Number : _____

Phone Number : _____ Email Address : _____

ACKNOWLEDGEMENT : I hereby certify that all information in this application is correct and all work will comply with the State Building Code and other applicable State and local laws, ordinances and regulations. The Planning & Inspections Department will be notified of any changes in the approved plans and specifications for the project permitted herein. I understand if this application is incomplete, a permit will not be issued and no inspections will be performed on the project. By signing below I attest that I have obtained all property owners permission and subcontractors permission to obtain these permits.

APPLICANT NAME : _____ DATE : ___/___/___

APPLICANT SIGNATURE : _____

OWNER NAME : _____ DATE : ___/___/___

OWNER SIGNATURE : _____