

DEMOLITION



1313 Main St * Vancouver, WA 98660 * www.cityofvancouver.us * (360) 696-8105

Applicant: _____

Mailing Address: _____

Phone: _____ ext. _____ Fax: _____

Property Owner: _____

Mailing Address: _____

Phone: _____ ext. _____ Fax: _____

Contractor: _____

Mailing Address: _____

Phone: _____ ext. _____ Fax: _____

Contact Name: _____ **Company:** _____

Contact E-mail Address: _____

Property Address: *(tax assessor serial number or nearest intersection if no address)*

Commercial **Residential** **Interior Demo** **Underground Tank** = **PUMP/FILL** **REMOVE**

Number of buildings/structures to be removed: _____ **Value of Demolition: \$** _____

Types of buildings/structures to be removed: _____

Size/Capacity of Tank: _____ **Type of Liquid Stored in Tank:** _____

Description of interior demolition to be done: _____

*If it is determined that the application is not complete, the City shall immediately reject and return the application and identify in writing what is needed to make the application counter complete. It is the responsibility of the applicant/owner to comply with all private conditions, covenants and restrictions (CC&R's) associated with this property.
I/we agree that City of Vancouver staff may enter upon the subject property at any reasonable time to consider the merits of the application, to take photographs and to post public notices.*

Signature of Applicant: _____ Date: _____

Signature of Property Owner: _____ Date: _____
(REQUIRED)