



BUILDING INSPECTION

DEMOLITION INTERIOR PERMIT

385 Kimbark Street, Longmont, CO 80501
 T 303-651-8332 F 303-651-8930
 building.inspection@longmontcolorado.gov

PERMIT # _____

Permit fee: \$50.00 Paid

Demolition Information		Valuation \$ _____		
Property Address	_____			
Property Owner	Name _____			
	Phone _____			
	Mailing Address	City	State	Zip
Contractor	Name _____			
	Phone	Email _____		
	License # _____			
Contact	Name _____			
	Phone	Email _____		
State Demo Permit	<input type="checkbox"/> Yes <input type="checkbox"/> No	Permit # _____		
Asbestos	Were building materials tested for Asbestos? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach a copy of report			
Historical Preservation	Is the building 50 years or older in the Original Town Site? <input type="checkbox"/> Yes <input type="checkbox"/> No (Ord. 0-94-83) If yes - Planning/Historical Preservation signature: _____			
Scope of Work	_____			

I hereby acknowledge that I have read this application and completed the information required. I state that all of the information required is correct and agree to demolish this structure according to the conditions stipulated.

Applicant signature _____ Date _____
 (Licensed Qualified Individual)

Final Approval
 Building Inspection _____ Date _____
 (Signature)