



Town of Wyoming

Demolition Permit Application

The undersigned applicant, as the owner, hereby makes an application in accordance with Ordinance #50-20 and all Amendments of the Town of Wyoming

PROPERTY INFORMATION:

Application Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Map # (PIDN): _____ Current Zoning: _____

Subdivision: _____ Lot Number: _____

IF THERE IS A HOME OWNER ASSOCIATION: PLEASE PROVIDE APPROVAL LETTER

OWNER INFORMATION:

Owner Name: _____

Signature: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: Office: _____ Cell: _____

PROJECT INFORMATION:

Full Building Demolition Total Cost of Demolition: \$_____

Selective Demolition

Commercial Demolition Building Area: _____

Residential Demolition No. of Stories: _____

Foundation Framing Current Use: _____

Slab on Grade Wood Date of Demolition: _____

Crawl Space Metal

Basement Masonry

Is a contractor being used? Yes No
If YES, fill in Contractor information below If NO, initial to confirm: _____

CONTRACTOR INFORMATION: (valid Town of Wyoming License required - reference Ordinance #55-20)

Contractor Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: Office: _____ Cell: _____

If more than one (1) contractor is being used, provide requested information on the back of this page for each additional contractor.

FOR OFFICE USE ONLY

Total Cost of Demolition: _____ Permit Fee: _____

Payment Method: _____ Date Payment Rcvd: _____ Rcvd by: _____

Permit #: _____ Date Issued: _____

Comments: