# TOWN OF FAIRPLAY BUILDING PERMIT APPLICATION
# FOR DEMOLITION OF AN EXISTING BUILDING OR STRUCTURE

**Fairplay Building Department**
**PO Box 267 Fairplay, CO 80440**            **Application No.:** _____
**719-836-2622  fax 719-836-3279**

*Please Type or Print Legibly*            **Date Received:** _____

**Tax Schedule No:** _____ **Project Address:** _____


**Legal Description: Subdivision:** _____ **Lot:** ___ **Block:** ___ **Filing:** ___ **Unit:** ___


**Applicant/Contractor:** _____ **Park County License No:** _____

**Mailing Address:** _____ **Phone:** _____

**City:** _____ **State:** _____ **Zip:** _____

**Owner:** _____ **Phone:** _____

**Mailing Address:** _____

**City:** _____ **State:** _____ **Zip:** _____

## CHECKLIST OF REQUIRED INFORMATION FOR A DEMOLITION PERMIT

____    1. **Completed Demolition Permit Application from the Building Department.**
____    2. **Tax Schedule Number from the Park County Assessor's Office.**
____    3. **Copy of the recorded deed showing current owner.**
____    4. **A plot plan indicating the location, dimensions and distance of existing and proposed structures from the property lines and from each other, a north arrow, roads or streets, driveway, stream beds or drainage ways, easements, and property lines**
____    5. **Submit in writing the method of disposal for the materials resulting from the demolition. All waste materials must be removed from the property within 14 (fourteen) days of the date of demolition**


I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give the authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Occupancy of the structure prior to final inspection and issuance of a Certificate of Occupancy is a violation of the Building Code and may cause delays in the completion of the project.

_____            _____
**Applicant/Contractor**            **Date**            **Owner**            **Date**

## *This page is for Building Department Use Only*

**Date Received:** ____/____/____ **By:** _____    **Date Reviewed:** ____/____/____ **By:** _____

**Date Approved:** ____/____/____**By:** _____         **Zoning:** _____

**Permit # issued:** _____         **Date Issued:** _____

**Fee received by:** _____ **Date:**_____

**Notes:** _____

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**Special Conditions (if any):** _____

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