

**CITY OF NEWPORT
DEMOLITION PERMIT APPLICATION**



Property Location of Work: _____

Owner Name: _____

Address/Phone: _____

Current Use:

_____ Single Family _____ Two Family _____ Multi-Family
_____ Garage _____ Business _____ Industrial

<p>Contractor: _____</p> <p>Address/Phone: _____</p> <p>Occupational License # _____</p>

<p>Sub Contractor: _____</p> <p>Address/Phone: _____</p> <p>Occupational License # _____</p>

Estimated cost of improvement: _____

NOTE:

- 1) **All contractors are required to hold an occupational license with the City of Newport, Kentucky.**
- 2) **Work must begin within fifteen (15) calendar days and be completed within thirty (30) days.**
- 3) **Please provide sufficient information on the work you are proposing. Inadequate information will cause a delay in the issuance of the permit.**
- 4) **The contractor is responsible to follow demolition specifications and the mandatory inspection list. Also, proof of insurance needs to be filed with our office before permit may be issued.**
- 5) **Contractor is responsible to notify and comply with STATE EPA regulations. They can be reached at 525-4923.**

The Owner of this building and undersigned do hereby certify that the information and statements given on this application, drawings and specifications are to the best of their knowledge true and correct. The Owner and undersigned further understand that no work can begin until this application has been reviewed and approved by the building inspector, and the appropriate fees have been paid. Any work that is done that has not been approved by this Department will be in violation with the City of Newport's Building Codes.

Signature of Applicant: _____ **Date:** _____

For office use only

Approved: _____ Disapproved: _____ Fee: _____
Zone: _____

Use: Single Family _____ Two Family _____ Multi Family _____
 Business _____ Industrial _____ Garage _____