

SILVER CREEK TOWNSHIP

PHONE: 269-424-3125

DEMO PERMIT APPLICATION

Job location _____ Date _____

Property tax ID # _____

Property Owner _____ phone _____

Property owner address _____

Contractor Name _____ Phone _____

Contractor address _____

Contractor License # _____

Insurance Provider _____

Is contractor Bonded? Y N

Is property served by _____ sewer _____ Septic

Sewer Disconnect/Reconnect Permit Required

Permit # _____ Date _____

If sewer, contractor MUST call DPW for inspection of sewer cap PRIOR to backfill!!

Type of structure to be demolished:

____ S/F residence ____ M/F residence ____ commercial bldg. ____ garage/pole bldg.

Estimated start date: _____

Estimated completion date: _____

Date _____

Signature of property owner

Date _____

Signature of contractor