

# DEMOLITION PERMIT APPLICATION

## COMMERCIAL/RESIDENTIAL



### Property Information

Address \_\_\_\_\_ Lot \_\_\_\_\_  
 Parcel ID \_\_\_\_\_ Unit/Suite/Building \_\_\_\_\_ Zoning \_\_\_\_\_

No permit to raze a building or structure shall be granted until notice of the application therefore has been given to the owners of lots adjoining the lot upon which the building or structure is to be moved and to the owners of wires or other impediments, the removal of which will be necessary, and an opportunity has been given to the owners to be heard before the Building Inspector; nor until a bond of not less than \$50 and not more than \$500 as fixed by the Director of Public Safety has been filed with him to indemnify the City for damages.

### Owner Information

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

### Project Information

Project Name/Tenant \_\_\_\_\_ Description \_\_\_\_\_  
 Number of Structures \_\_\_\_\_ Number of Units \_\_\_\_\_ Acreage \_\_\_\_\_ Flood Zone \_\_\_\_\_  
 Total Construction Square Feet \_\_\_\_\_ Ownership Type Private  Public   
 Heating Fuel Gas  Electric  Other   
 Water Supply Private  Public  Water Contractor \_\_\_\_\_  
 Sewage Disposal Private  Public  Sewer Contractor \_\_\_\_\_  
Principal Construction Type  
 Masonry/Wall-Bearing  Reinforced Concrete  Structural Steel  Wood Frame

### Zoning Overlays

HPA  CBD

### Fees

Base Fee  
 Buildings under 400 sf = \$0  
 Buildings 401-1,000 sf = \$50  
 Buildings 1,001 sf and up = \$150

Total Fees Due \_\_\_\_\_

### Submission Checklist

Owner's Affidavit  Sewer Cap  Utilities Statement  COA

### Contractor Information

Name \_\_\_\_\_ DBA \_\_\_\_\_ Registration No. \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_  
 Signature \_\_\_\_\_ Owner  Authorized Agent

- All demolition shall proceed only on weekdays, Monday through Friday, between 7:30 a.m. and 6 p.m., unless specifically extended or altered by the Administrator.
- The Administrator may order an inspection at any time during the demolition to assure that all procedures are being followed.
- Asbestos report required. Asbestos will be handled and removed prior to any demolition in accordance with the Ohio Administrative Code Ordinance #3745-20, under penalty of law. For more information, contact the Ohio Environmental Protection Agency, Division of Air Pollution Control, 614-728-3816.
- The debris from any building shall be thoroughly dampened to prevent circulation of dust.
- The demolition contractor shall call for a final inspection upon completion of the demolition.  
**24-Hour Inspection Line: 614-277-1815, Inspections must be called in before noon for next-day service.**

### Office Use

Receipt/Trans. No. \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 Date Entered \_\_\_\_\_  
 Date Issued \_\_\_\_\_

APPROVALS

Area Commission \_\_\_\_\_  
 Date \_\_\_\_\_  
 Approving Authority \_\_\_\_\_  
 Date \_\_\_\_\_  
 Worksheet Adequacy \_\_\_\_\_  
 Date \_\_\_\_\_

Expires December 31, 2015



# DEMOLITION APPLICATION OWNER'S STATEMENT

Grove City Building Division  
4035 Broadway  
Grove City, OH 43123  
614-277-3075 (Phone)  
614-277-3090 (Fax)  
www.grovecityohio.gov

I (We), \_\_\_\_\_, state that I (we) own the property at \_\_\_\_\_,

**NAME(S)**

**ADDRESS**

for which a demolition permit application is being made to the City of Grove City Building Division.

\_\_\_\_\_ is acting as my (our) agent and will demolish the structure on the property

**NAME OF DEMOLITION CONTRACTOR**

with my (our) approval and permission after the City of Grove City issues a demolition permit.

Falsification of a public document is a violation of the Ohio Revised Code, Section 2921.13(a)(5), a misdemeanor of the first degree, punishable by up to six months imprisonment and a fine of \$1,000, or both.

## Notary

Date \_\_\_\_\_

Signature of property owner \_\_\_\_\_ Signature of property owner \_\_\_\_\_

Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

Notary Public \_\_\_\_\_ My commission expires \_\_\_\_\_

*NOTARY SEAL HERE*

## Sewer/Septic/Well Cap Information

Is the structure habitable? YES  NO

Does it have sewer/water service? YES  NO

- If YES, attach water capping permit obtained for the job site from City of Columbus Division of Sewerage and Drainage, 910 Dublin Road, Columbus, OH 43215, 614-645-7490, or well letter obtained from the Franklin County Board of Health.
- If YES, attach letter from Grove City Service Director, 3262 Ventura Blvd., Grove City, OH 43123, 614-277-1100, for Grove City sewer, well or private septic system.

## Utility Disconnection

The utilities at the above property have been or will be disconnected prior to demolition.

Gas \_\_\_\_\_ Electric \_\_\_\_\_ Water \_\_\_\_\_

INITIAL TO INDICATE EACH DISCONNECTION.

Submit original notarized statement.

If you have any questions regarding this form, please call 614-277-3075.

Incomplete information may result in rejection of this submittal.

Expires December 31, 2015