



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

DEMOLITION PERMIT APPLICATION COMMERCIAL / RESIDENTIAL

Return form by: Fax Email Pickup Call

PROPERTY INFORMATION

Address _____ Grove City, OH 43123 Lot _____
 Parcel I.D. _____ Subdivision _____ Zoning _____

OWNER INFORMATION

Name _____ Phone _____
 Address _____ Email _____

Note: No permit to raze a building or structure shall be granted until notice of the application has been given to the owners of lots adjoining the lot upon which the building or structure is to be razed, to the owners of wires or other impediments, the removal of which will be necessary, and an opportunity has been given 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 to indemnify the City for damages.

PROJECT INFORMATION

Description of Work _____
 No. of Structures _____ No. of Units _____ Acreage _____ Flood Zone _____
 Total Construction Sq. Ft. _____ Ownership 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

Building < 400 sf \$ _____ 0.00
 Building 401-1,000 sf \$ _____ 50.00
 Building 1,001 > sf \$ _____ 150.00

Total Fees Due \$ _____

APPLICATION CHECKLIST

- Owner's Affidavit Utilities Statement Sewer Cap COA
- 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.

OFFICE USE

Receipt No. _____
 Check No. _____
 Date Entered _____
 Date Issued _____
APPROVALS
 Area Commission _____
 Date _____
 Approving Authority _____
 Date _____
 Worksheet Adequacy _____
 Date _____

CONTRACTOR INFORMATION

Registration No. _____

Contractor _____ Contact _____
 Address _____ City/State/Zip _____
 Phone _____ Fax _____ Email _____
 Signature _____ Owner Agent

24-Hour Inspection Line: 614-277-1815

For next business day inspections, requests must be called in before noon or contractors may use the online inspection service as late as 8 p.m., seven days a week.



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DEMOLITION APPLICATION OWNER'S STATEMENT

I (We), _____, property owner(s), state that I (we) own the property located at address _____, for which a demolition permit application is being made to the City of Grove City Building Division.

Name of Demolition Contractor _____ is acting as my (our) agent and will demolish the structure on the property 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.

NOTARIZED SIGNATURE

Printed name of applicant/owner _____

Signature of applicant/owner _____ Date _____

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.**

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