



# City of Ocala

## APPLICATION FOR DEMOLITION PERMIT

DATE \_\_\_\_\_

COMPLETE SITE ADDRESS: \_\_\_\_\_

PARCEL # \_\_\_\_\_ LOT \_\_\_\_\_ BLOCK \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE # \_\_\_\_\_

COMMENCEMENT DATE \_\_\_\_\_

PLEASE CHECK ONE: RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_

SITE ADDRESS SHALL BE HOUSE # W/QUADRANT AND STREET NAME.

**ALL OF THE ABOVE INFORMATION MUST BE COMPLETE AND CORRECT OR THE APPLICATION WILL NOT BE PROCESSED.**

I AGREE TO NOTIFY AND OBTAIN THE APPROVAL OF THE APPROPRIATE REPRESENTATIVES OF THE FOLLOWING UTILITIES: GAS, TELEPHONE, WATER AND ELECTRIC UTILITIES.

I FURTHER AGREE TO HAVE THE STRUCTURE EXTERMINATED FOR RODENTS BY A *LICENSED EXTERMINATOR* AND ASSUME TOTAL AND ABSOLUTE RESPONSIBLITILY FOR THE DEMOLITION OF THE IMPROVEMENTS UPON THE DESCRIBED LANDS AND FOR ANY DAMAGES TO UTILITIES AS A RESULT OF SAME, AND IF IN THE *HISTORIC DISTRICT*, A *CERTIFICATE OF APPROPRIATENESS MUST BE OBTAINED FROM THE OCALA HISTORIC PRESERVATION ADVISORY BOARD (OHPAB)*.

**\*\*ALL SIGNAGE ON PROPERTY MUST BE REMOVED AT THE TIME DEMOLITION\*\***

**\*\*IT IS THE OWNERS RESPONSIBILITY TO FOLLOW ALL FEDERAL AND STATE REQUIREMENTS (AS APPLICABLE) FOR ASBESTOS IDENTIFICATION AND REMOVAL\*\***

**\*\*THE BUILDING DEPARTMENT WILL ISSUE A BUILDING PERMIT 48 BUSINESS HOURS AFTER RECEIPT OF THIS COMPLETED FORM. \*\***

EFFECTIVE DATE OF EXTERMINATION: _____	FAX NUMBERS: _____
PLANNING DEPT (201 SE 3 ST) _____	(352-629-8308)
TECO PEOPLE GAS (316 SW 33 AVE) _____	(352-629-9733)
WATER & SEWER DEPT (2100 NE 30 AV# H) _____	(352-351-6718)
EMBARQ (302 SE BRY ST) _____	(352-368-8765)
LICENSED EXTERMINATOR _____	
OCALA ELECTRIC UTILITY (2100 NE 30 AV #B) _____	(352-401-6991)
COX CABLE (SW 27 AV) _____	(352-873-5624)
SITE INSPECTION/ENGINEERING (COMMERCIAL ONLY) _____	(352-629-8242)

\*\*\*FOR FURTHER INFORMATION CONTACT THE CITY OF OCALA BUILDING DEPARTMENT AT 352-629-8421 OR PLEASE FAX TO 629-8264

**I HEREBY CERTIFY THERE IS NO MORTGAGE ON THIS PROPERTY OR HAVE PROVIDED WRITTEN CONSENT TO DEMOLISH FROM THE MORTGAGE HOLDER.**

\_\_\_\_\_  
OWNER OR REPRESENTATIVE

\_\_\_\_\_  
DATE