LOGANSPORT/CASS COUNTY/WALTON DEMOLITION PERMIT APPLICATION

200 Court Park, Room 306 - Logansport, Indiana - 46947 PH: (574) 753-7775 FAX: (574) 753-7401

Please print in ink - All completed application will be processed within 48 hours Site plan is required - Incomplete application will not be processed

Applicant Information					
Name	Phone #				
Address					
City		State	Zip Code		
Description of Building	g/Structure to be Demo				
Address of Demolition		Township			
Number and Type of Structures	res to be Demolished: Parcel #				
End Result after Demolition is C	Complete (grass, gravel, etc)				
Additional Project Info	rmation				
Estimated Cost		Estimated Completion Date			
Contractor's Name		Phone #			
The undersigned herel	by certifies the following	ng:			
1.) That all constuction requested by this application will comply with all City, State and Federal regulations.					
2.) That the completed project will conform to the site plan and application presented or legal action may be taken.					
3.) That inspections are required once demolition if complete.					
4.) That all information in this ap	oplication is true and accurate.				
Signature of Applicant / Repre	esentative:				
Please Print Name:			Date		
CALL 2 DAYS BEFORE YOU DIG: 811 or 1-800-382-5544 Tracking # Date:					
	TO BE COMPLETED	BY THE COMMUNITY DEVEL	OPMENT DEPARTMENT	STAFF	
Zoning Class	Does the project con	form to this zoning classification?	Yes	No	
Flood Zone	Elevation Certificate R	equired? Yes No			
Within an Overlay District?	Airport River	front Front Door	L.L.	None	
Approved: Denied: Date: Signature:					
Permit Fee:	ILP#:	Receipt #			

NOTES: