



CITY OF IOLA, KANSAS
DEMOLITION PERMIT APPLICATION
 Applications Will Not Be Processed Until All Requested Information Has Been Provided

Permit Number: _____

Description of Work:

Job Address: _____

Description of the property to be demolished:

In the next two years, do you plan to rebuild upon the described property? Yes No

If yes, what is to be built? _____

Utility Information:

- | | | |
|--------------------------------|--|--------------------|
| Plug gas line (by City) | <input type="checkbox"/> Yes <input type="checkbox"/> No | Work Order # _____ |
| Remove electric line (by City) | <input type="checkbox"/> Yes <input type="checkbox"/> No | Work Order # _____ |
| Remove water service (by City) | <input type="checkbox"/> Yes <input type="checkbox"/> No | Work Order # _____ |
| Plug sewer line (by Owner) | <input type="checkbox"/> Yes <input type="checkbox"/> No | Work Order # _____ |

Owner Information:

Address: _____

Telephone: _____

Proof of ownership: _____
(Copy filed with permit)

Contractor Information:

Name: _____

Phone: _____

Address: _____

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT STARTED WITHIN 180 DAYS, OR IF WORK OR CONSTRUCTION IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS STARTED. PERMITS SHALL BE RENEWED ANNUALLY.

 Applicant Signature

 Date

\$15 Permit Fee Paid? Yes No

 Building Inspector Signature

 Date