

**Village of Mt. Horeb
Building & Zoning
138 East Main Street
Mt. Horeb Wisconsin 53572
608-437-6884 ext 116 / 608-437-3190 Fax**

APPLICATION FOR DEMOLITION PERMIT

Date: _____

APPLICANT: Name: _____
Address: _____
City ST Zip: _____
Phone: _____

OWNER: Name: _____
Address: _____
City ST Zip: _____
Phone: _____

PROPERTY LOCATION: _____

PROJECT DESCRIPTION: _____

ALL DEMOLITION ACTIVITIES SHALL BE IN ACCORDANCE WITH THE VILLAGE OF MT. HOREB MUNICIPAL CODE AND ALL STATE AND FEDERAL REGULATIONS.

- *ASBESTOS ABATEMENT AND REMOVAL OF ANY OTHER HAZARDOUS MATERIALS, WHEN REQUIRED, MUST BE DOCUMENTED BEFORE ANY DEMOLITON ACTIVITIES TAKE PLACE.*
- *APPLICANT SHALL PROVIDE BUILDING INSPECTOR **PROOF OF LIABILITY INSURANCE AS REQUIRED BY CHAPTERS 8 & 14 OF THE MT. HOREB MUNICIPAL CODE; PROOF OF PROPER ABANDONMENT OF ALL UTILITIES; AND PROOF OF NOTIFICATON OF POLICE AND PUBLIC WORKS AS REQUIRED.***
- *APPLICANT SHALL NOTIFY DIGGERS HOTLINE (1-800-242-8511) PRIOR TO COMMENCING ANY SCRAPING, EXCAVATING, OR BORING.*

I, the undersigned owner (agent) of the property herein described agree to comply with the above conditions and restrictions upon issuance of the requested permit.

Signed: _____ Date: _____