

## **IREDELL COUNTY DEVELOPMENT SERVICES**

PO BOX 788 - STATESVILLE NC 28687

## 349 N CENTER ST / BUILDING STANDARDS CENTER

Central Permitting: 704-878-3113 Commercial Plans: 704-928-2021

Fax: 704-878-3171 www.co.iredell.nc.us Fax: 704-878-3122

DEMOLITION PERMIT APPLICATION		
Application / Project #:	CID/EFT #	Date:
Property Owner:		Contact #
Project Address:		
Parcel Identification #:		
General Contractor:	Contractor name / Company name MUST b	pe exactly as listed with the license board.
Contractor License #:	Contact #:	
Email address:	Fax #:	
Contractor Address:		
Brief Description of Work:		
Estimated Cost of Project:		•
Square footage of area		
being demolished:		sq ft
Are you performing the		
demolition?	Yes / No	(circle one)
Do you own the property?	Yes / No	(circle one)
Other:		_
I hereby certify that all information in the and all other applicable state and loc be notified of any changes in the application becomes a permit only where application are applications and the application becomes a permit only where application are applications and the application and the application are applications and the application applications are applications and the application are applications and the applications are applications are applications and the applications are applications and the applications are applications and the applications are applications are applications are applications and the applications are applications are applications are applications are applications and applications are applications	al laws, ordinances and regulat roved plans and specifications t	ions. The inspection department will
SIGNATURE OF CONTRACTOR		

A non-refundable application fee of \$77.25 is included in the charges on all permits.