

APPLICATION FOR DEMOLITION PERMIT

VILLAGE OF OKAWVILLE
304 N Front Street – PO Box 483
Okawville, IL 62271 Phone (618)243-5972

(Do not write in this space -- For office use only)

Date: _____ \$ 25 Zoning fee paid: cash ___ check # _____

() Permit issue No. _____

() Permit denied If denied, cause of denial: _____

() Application appealed No. _____

INSTRUCTIONS TO APPLICANTS: All information required by the application must be completed and submitted herewith. Applicants are encouraged to visit the Village Hall or call 618-243-5972 for any assistance needed in completing this form.

- 1. Address of building to be demolished: _____
Type of building: house ___ shed ___ commercial building ___ other _____
Type of construction: _____ Age of building _____
Permanent Parcel #: _____
- 2. Applicant's name: _____ Phone: _____
Complete mailing address: _____
- 3. Name of property owner(s): _____ Phone: _____
Complete mailing address: _____
- 4. Adjoining property owner(s): _____

- 5. Demolition contractor: _____
Address: _____ Phone: _____
- 6. Estimated cost of demolition: _____

Date: _____

Zoning Administrator, Village of Okawville

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