## CITY OF VALLEY PLANNING AND DEVELOPMENT P. O. BOX 186 VALLEY, ALABAMA 36854

## **DEMOLITION PERMIT APPLICATION**

Name of Applicant:	
Mailing Address:	
Business Phone No.:	Fax No.:
Name of Property Owner:	
Street Address:	
Name of Contractor:	
Mailing Address (if different):	
Business Phone No. (if different):	
Total Cost of Project Inclu	ding Site Preparation: \$

<u>Certification:</u>	
<u>Applicant:</u>	
I hereby certify and attest that I have best of my knowledge and abilities, the info and accurate.	ve reviewed this application, and that to the provided in this application is true
Applicants Signature	
Property Owner:	
I hereby certify and attest that I have best of my knowledge and abilities, the informal accurate.	re reviewed this application, and that, to the ormation provided in this application is true
Property Owners Signature	 Date
CITY OF VAL	LLEY USE ONLY
Zoning Official's Information:	
Date Filed: Received By	7:
Application Fee Received: \$	[ ] Cash [ ] Check #
Date Received: Revi	ewed By:
Decision: [ ] Application Approved	[ ] Application Denied
Zoning Official Signature:	Date:
Comments:	