

TOWN OF BRIDGETON

Demolition Permit Application

Office Use Only: Assigned Permit Number ______

Site Address:	
Please note: The Site Address n	nust be visible from the street.
Classification of Work:	
Type of demolition: Residential: Com	nmercial:
If this is a partial demolition, list area(s):	
Total square footage of building:	Number of Stories: Total Cost: \$
APPLICANT INFORMATION:	
Contractor or Owner:	License Number:
Project Contact:	
Phone Number:	Email:
PROPERTY OWNER INFORMATION: Name:	
	nail:
Appalia and an Orona as St	
Applicant or Owner Signature:	Date:

202 North B Street - Bridgeton, NC 28519 Phone: 252 637-3697 Email: <u>planningandzoning@townofbridgeton.gov</u>

TOWN OF BRIDGETON INSPECTION DEPARTMENT

202 B Street, PO Box 570, Bridgeton, NC 28519

Telephone (252) 637-3697 Fax (252) 637 9844

AGENCY APPROVALS FOR DEMOLITION

All Applicable Agencies Must Sign and Complete This Form Prior to a Demolition Permit Being Issued.

Please have the following releases comple	eted by an employee or ag	ent of the associated utility.
NORTH CAROLINA NATURAL GAS CO	ORPORATION (See attach	nment).
ELECTRICAL UTILITY Electrical utility company We certify that all electrical utilities Service Address:	ies have been removed from	m:
	Title:	Date:
Service Address:		
Signature:	Title:	Date:
SEWER UTILITY We certify that all sewer ser service		
Service Address:		
Signature: If a septic tank will be abandoned, it is no	Title: ecessary to pump it and d	Date:ispose of its contents properly.
UNDERGROUND STORAGE TANKS Are underground fuel tanks located Are they to be removed? NOTE: A SEPARATE PERMIT IS REQU	() YE	ES () NO
Is this demolition pursuant to a demolition of Officer or Building Inspector? () YES () N		Housing Code Enforcement