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 Including Site Preparation:
 \$______

Certification:

Applicant:

I hereby certify and attest that I have reviewed this application, and that to the best of my knowledge and abilities, the information provided in this application is true and accurate.

Applicants Signature

Date

Property Owner:

I hereby certify and attest that I have reviewed this application, and that, to the best of my knowledge and abilities, the information provided in this application is true and accurate.

Property Owners Signature

Date

CITY OF VALLEY USE ONLY

Zoning Official's Information:

Date Filed: Received By:	
Application Fee Received: \$ [] C	Cash [] Check #
Date Received: Reviewed By:	
Decision: [] Application Approved [] Application	tion Denied
Zoning Official Signature:	Date:
Comments:	