



Mecosta
TOWNSHIP

19729 11 Mile Road, Big Rapids, MI 49307

Phone: 231-796-8935

Fax: 231-796-9185

Email: building@mecostatwp.org

DEMO _____

Demolition Application/Affidavit Mecosta Township Building Department

Authority: PA 230 of 1972, as amended
Completion: Mandatory to obtain permit
Penalty: Permit cannot be issued

Owner:

Job Location:

Parcel # 54-09- _____ - _____ - _____	Site Address
Owner name	Contractor Name
Mailing Address	Mailing Address
City, State, Zip	City, State, Zip
Phone	Phone
Email	Email

Affidavit:

1. The proposed demolition is authorized by the owner stated above.
2. A release has been obtained from all utilities connected to the structure at the above property address.
3. All equipment such as meters and regulators have been removed or sealed and plugged in a safe manner and "MISS DIG" will be contacted before any excavation is undertaken.
4. Demolition Permit must be posted where visible to all passers-by.
5. I will comply with the Health Department's requirements to:
 - a. Have any on-site potable water well(s) properly abandoned by a license well drilling contractor
 - b. Submit a "water well abandonment log" to the Health Department
6. The premises shall be maintained free from all unsafe and/or hazardous conditions by the proper regulation of the lot, restoration of established grades and the erection of the necessary retaining walls and fences in accordance with the provisions of the State Construction Code.
7. No debris (construction materials) will be buried on the site. (Concrete & masonry are the only exceptions).
8. Information was given in regards to Asbestos Notice, Standards on Asbestos, and DEQ application for Renovate/Demolition.
9. The homeowner or a licensed residential builder or maintenance and alteration contractor in house wrecking can pull this permit.

I UNDERSTAND THAT FAILURE TO DO ANY OF THE ABOVE WILL VOID THIS DEMOLITION PERMIT

Signature of Owner or Agent: _____ Date: _____

Building Official: _____ Date: _____

I hereby certify that the information contained on this application is correct, and that all used for which this application is made conform to the Mecosta Township Zoning Ordinance. I further certify that this permit is subject to the terms and conditions of the Zoning Ordinance, and that violation of these terms will be sufficient evidence for the revocation of this permit.

The department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap, or Political beliefs.

Make Check Payable to
Mecosta Township
19729 11 Mile Rd.
Big Rapids, MI 49307