



# Demolition Permit Application

Community Development Department

Building Inspections Division

5200 85<sup>th</sup> Avenue North / Brooklyn Park, MN 55443

Phone: (763) 488-6379

4/23 permits@brooklynpark.org

GOVERNMENT DATA PRACTICES ACT - TENNESSON WARNING:

The data you supply on this form will be used to process the permit you are applying for. You are not legally required to provide this data, but we will not be able to process the permit without it. The data will constitute a public record if and when the permit is granted.

Site Address: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor/Applicant Name: \_\_\_\_\_ License # \_\_\_\_\_

Applicant: Owner \_\_\_\_\_ Contractor \_\_\_\_\_ Other \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

**Utility Cut Offs:** All applicable **must** be signed prior to permit issuance. Estimated Completion Date: \_\_\_\_\_

Gas: \_\_\_\_\_ Date: \_\_\_\_\_

Power: \_\_\_\_\_ Date: \_\_\_\_\_

Sewer: \_\_\_\_\_ Date: \_\_\_\_\_

Water: \_\_\_\_\_ Date: \_\_\_\_\_

Septic: \_\_\_\_\_ Date: \_\_\_\_\_

Well Sealing: \_\_\_\_\_ Date: \_\_\_\_\_

Underground Tanks: \_\_\_\_\_ Date: \_\_\_\_\_

<u>Computation of Fees:</u>	<u>\$Amount / Fee</u>	<u>Subtotal</u>
Residential Structure	\$225.00	\$ _____
Commercial Structure	\$225.00	\$ _____
Accessory Structure	\$225.00	\$ _____
State Surcharge:	\$1.00	\$ 1.00
<b>Total</b>		\$ _____

Payment method:  Cash  Check  Credit Card

I hereby apply for a demolition permit and I acknowledge that the information above is complete and accurate; that the work will be done in accordance with the ordinances of the City of Brooklyn Park and with the Minnesota State Building Code; that I understand this is not a permit but an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plans, specifications and codes.

Applicant email address (required): \_\_\_\_\_

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Email application to [permits@brooklynpark.org](mailto:permits@brooklynpark.org)

Office Use only: Required Inspections: Site \_\_\_\_\_ Final \_\_\_\_\_ Investigation Fee \$ \_\_\_\_\_

Approvals:

Fire \_\_\_\_\_ Health \_\_\_\_\_ O&M \_\_\_\_\_ Planning \_\_\_\_\_ Engineering \_\_\_\_\_ Utility Billing \_\_\_\_\_ Assessing \_\_\_\_\_

Permit Approved By: \_\_\_\_\_ Date: \_\_\_\_\_ Permit # \_\_\_\_\_