



DEMOLITION PERMIT APPLICATION

Building Permit # _____

Division of Zoning & Development Services
Fauquier County Department of Community Development
29 Ashby Street, Suite 310, Warrenton, Virginia 20186

Building Phone: 540-422-8230
Zoning Phone: 540-422-8220
Facsimile: 540-422-8231

Fill out all relevant sections COMPLETELY - Incomplete applications cannot be processed and will be returned

OWNER/PROPERTY INFORMATION:

Owner's Full Name: _____ Phone: (Day) _____

Parcel Street Address: _____

Property Identification Number: _____ Email: _____

UTILITY INFORMATION:

Water:

Private Public _____
Name of Provider

Disconnect letter No Yes

Gas:

L.P. Natural
Disconnect letter No Yes

Septic/Sewer:

Private Public _____
Name of Provider

Disconnect letter No Yes

Asbestos:

letter No Yes

Electrical Service:

_____ _____
Amps Name of Provider

Disconnect letter No Yes

Scope of Work:

- Demolition
 - Residential
 - Commercial

DESCRIBE IN DETAIL THE DEMOLITION OF STRUCTURE: [Note: Describe the location on the property and list on Plat. How many buildings remain on the property?]

Construction Cost: \$ _____ (Contract amount OR real estate value after completion)

Type of Contractor:

- Building
- Electrical
- Plumbing
- Mechanical
- Gas Fitting
 - Outside Line
 - Inside Line
- Tank Installation

Name of Contractor: _____

Mailing Address: _____

Phone Number: _____ Cell Phone Number: _____

State Contractor's/Tradesman's License No: _____ Class: A B C

Classification: _____ Expiration Date: _____ Fauquier County Business License # _____

Description of Work: _____

OK Per _____

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