CITY OF NEWAYGO

Application for Demolition / Removal Permit

	Date:	Permit #:		Fee: \$50.00	
1.	Applicant info	rmation: (if not individual, list business)	Owner Information: (if d	ifferent than applicant)	
	Name:		Name:		
	Address:		Address:		
	Phone:		Phone:		
2.	Address of premises	worked on:			
3.	Description of struc	Description of structure being demolished or removed:			
4.	Date(s) during which work will be executed:				
5.	Describe procedure and safety precautions:				
7.					
8.	I do solemnly swear that the above information is true and complete to the best of my knowledge. I also understand that withholding any information that is both pertinent and necessary for the health and safety of others is an offense in the City of Newaygo and will be used as such.				
Ap	pplicant	Date	Applicant	Date	
:	****	***********	********	*****	
() Granted	Reasons/Conditions:			
() Denied	Reasons:			
Da	ite:				
		Zoning Admi	nistrator, City of Newaygo		
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