## **DEMOLITION PERMIT APPLICATION**

## City of Oxford

## Office of Building Inspector

State Lisc. #			Date	
City Lisc.#			Exp. Date	
Owner Builder ID #			County: ( ) Calhoun ( ) Talladeg	
Job Address			_	
Contractor		_ Address		
Contractor Phone#		Property Owners Phone#	!	
Property Owner		Address		
Demolition Cost \$ \$	Permit Fee \$25.00	State Fee \$	_ (Commercial jobs only) Total Cost	t
Zone	Flood Area: ( ) Yes ( ) No			
Type of demolition:	Residential			
<del></del>	Mobile Home			
_	Commerical			
Email Address:				
	d Dumpster required on site of New Construction debris from the job site			
Office of Building Inspector		Applicant Print N	lame	
() Approved () Disa	pproved Initial	Applicant Signa	TIPO	
		Applicant olyna	uio	