

1. PROPERTY OWNER CONTACT INFORMATION:

OWNER NAME: _____ PHONE 1: _____
PHONE 2: _____ FAX #: _____
E-MAIL: _____
MAILING ADDRESS: _____

2. AGENT/CONTRACTOR REPRESENTING PROPERTY OWNER (If Applicable):

AGENT / CONTRACTOR COMPANY NAME: _____
PHONE 1: _____ PHONE 2: _____
E-MAIL: _____ FAX: _____
MAILING ADDRESS: _____
CONTACT PERSON'S NAME: _____ PHONE #: _____

3. PROPERTY DESCRIPTION:

PARCEL NO(s) (13-digit HCAD Tax ID #): _____
SUBJECT PROPERTY ADDRESS (If existing): _____
SUBJECT PROPERTY LEGAL DESCRIPTION: _____
FLOOD ZONE: _____ USE ZONE (ZONING DISTRICT): _____

4. PROJECT INFORMATION:

DATE OF SUBMITTAL: _____

DESCRIPTION OF WORK: DEMOLITION OF BUILDING(S) RESIDENTIAL – TYPE _____ COMMERCIAL – TYPE _____

5. APPLICATION CHECKLIST & SUPPORTING DOCUMENTATION (Check applicable boxes):

- COMPLETE ITEMS 1 THRU 4 OF PERMIT APPLICATION
- *SUBMIT ASBESTOS SURVEY (as of 1/1/2002, S.B. 509 requires municipalities to verify an asbestos survey has been conducted)

NOTES TO APPLICANT:

1. CONTRACTOR MUST BE REGISTERED WITH THE CITY
2. TO REGISTER WITH THE CITY, SUBMIT CURRENT CERTIFICATE OF INSURANCE WITH CITY OF LA PORTE AND CITY'S ADDRESS AS CERTIFICATE HOLDER
3. **NOT A VALID PERMIT UNTIL OWNER/CONTRACTOR IS NOTIFIED OF APPROVAL AND ALL APPLICABLE FEES ARE PAID IN FULL**

APPLICANT PRINTED NAME: _____ AUTHORIZED SIGNATURE: _____

(FOR STAFF USE ONLY)

PERMIT NO: _____

FEES: \$75.00 \$150 (CE) – MUST COMPLETE ALL WORK & PASS FINAL INSPECTION WITHIN 10 DAYS OF PERMIT ISSUANCE

CASH BOND: \$250 (HOMEOWNER) \$500 (CONTRACTOR)

ASBESTOS SURVEY RECEIVED? YES NO N/A

SPECIAL CONDITIONS:

OWNER/CONTRACTOR IS RESPONSIBLE FOR UTILITY DISCONNECTS; DEMO SHALL INCLUDE BUILDING & SLAB (Unless otherwise authorized by City); OWNER/CONTRACTOR IS RESPONSIBLE FOR DISPOSAL OF ALL DEMOLITION DEBRIS/MATERIALS; WATER AND SANITARY SEWER LINES SHALL BE CAPPED AT GROUND LEVEL; ADD FILL & GRADE PROPERTY AT WORK LOCATION & OTHER DAMAGED AREAS TO ENSURE PROPER SITE DRAINAGE (rear to street frontage); UPON DEMO COMPLETION, PROPERTY MUST BE MOWABLE & LEVEL AS TO NOT POOL WATER; OWNER/CONTRACTOR IS RESPONSIBLE FOR COMPLYING WITH ALL RULES & REGULATIONS REGARDING ASBESTOS; UPON COMPLETION, CALL 281.470.5130 FOR FINAL INSPECTION (cash bond is refundable upon City approval of final inspection).