



APPLICATION FOR DEMO PERMIT
CITY OF ALAMOSA- BUILDING DEPARTMENT

Date of Application: _____

PROJECT ADDRESS: _____

Property Owner:	Contractor Name and Contractor License #:
Mailing Address:	Mailing Address:
City/State/Zip:	City/State/Zip:
Phone Number:	Phone Number:
Email:	Email:

Description of Alteration: _____ **Hazardous Materials Testing:** _____

ConstructionType: I II III IV V(A) V(B)
Occupancy Group: A B C D E F G H I J M R **Description of Materials Being Removed:** _____

Please Provide: * Hazaderous Materials Testing * Copy of Approved State Demo Permit
 * List of Materials Being Removed

Project Cost \$ _____

Area being Demoad: _____

NOTICE: READ BEFORE SIGNING

By signing this application form, I hereby certify that all answers contained herein are true and accurate to the best of my knowledge, and further agree to comply with all applicable statutes, rules, and regulations of this jurisdiction, and agree that any violations of said statutes, rules, and regulations may result in the revocation of this permit.

 Signature of Owner/Contractor (Date)

I understand that I am required to notify the City of Alamosa Building Department within 10 working days of job completion.

Approved **Denied** _____ **Date**