



**CITY OF PEACHTREE CORNERS
BUILDING DEPARTMENT**

310 Technology Parkway, Peachtree Corners, GA, 30092
Tel: 678-691-1200 | www.peachtreecornersga.gov

Demolition Permit Application

Site/Project Information	Date: _____		ePlan #: _____		
	Site Information: Residential Commercial		Permit Number: _____		
	Demolition of: *Entire Structure Part of Structure Only Interior Only				
	*Any building over one story in height shall require a pre-inspection and post inspection.				
	Site Address: _____				
	Subdivision:	Block:	Lot:	Parcel ID:	Cost of Demolition:
	Type of Structure (wood, stucco, etc.): _____				
	Number of Units:	Number of Stories:	Number of Rooms:	Total Square Footage:	
	All utilities must be disconnected: Gas Sewer Septic Tank Electrical Water				
	Proposed Date of Demolition:		Equipment Used to Demolish Structure:		
I understand that I must call for a post inspection and must provide inspector with a copy of the landfill tickets (receipts:) _____					
Will this project involve the removal or encapsulation of asbestos? Yes No					
If yes , this permit may not be issued until you have presented this office with your <u>Asbestos Contracting License</u> and the <u>Notification of Asbestos Renovation, Encapsulation, or Demolition</u> from the Georgia Department of Natural Resources, Asbestos Licensing and Certification Unit, Environmental Protection Division .					
Asbestos Contracting License Number: _____					
For a list of common questions on Asbestos visit: https://www.epa.gov/asbestos			For additional information about Georgia requirements: http://www.epd.georgia.gov/asbestos		
Owner	Owner Name:		Owner Phone Number:		
	Owner Mailing Address:		City:	State:	ZIP Code:
Contractor	Business Name:		Email:		
	Business Mailing Address:		City:	State:	ZIP Code:
	Occupation Tax License Number:	State Certification Number:	Phone Number:	Cell Phone Number:	
<p><i>I hereby certify that the information provided above is true and accurate. All demolition work is to be performed in accordance with Georgia EPD and all applicable zoning ordinances and laws governing Community Development for the City of Peachtree Corners, GA.</i></p> <p>Applicant Signature: _____ Date: _____</p>					
For Office Use Only					
Total Permit Fee: \$ _____ Date Issued: _____ Issued By: _____					