

Town of Taylor

Demolition Permit Application

❖ This is a \$25 permit fee for the purpose of structure demolition ONLY

Date: _____

Applicants Name: _____

Phone Number: _____ Cell: _____

TAX ID # _____

Applicants Address: _____

Address of Demo: _____

Type of Structure: _____

Size: _____ Height: _____

Electrical Disconnected: Yes _____ Date _____ No _____

Water Disconnected: Yes _____ Date _____ No _____

Gas Service Disconnected: Yes _____ Date _____ No _____

❖ If Contracted out: Proof of Workers Compensation & Liability is required

Contractor Name: _____

Phone: _____ Cell: _____

❖ This is a six (6) month Demolition Permit from date of application

Expiration Date: _____

Applicants Signature: _____

Town Official Signature: _____

Any questions or concerns contact the Town office at (607) 863-3008
You may also contact Code Officer,

Fee Paid \$ _____
Cash \$ _____
Check Number _____