

**FOSTER TOWNSHIP  
DEMOLITION PERMIT APPLICATION**

Owner's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_ Contractor's Phone #: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_

Contractor's License Number: \_\_\_\_\_

Property Address: \_\_\_\_\_

Parcel #: \_\_\_\_\_ Zoning District (select one): A-1 / B-3 / C-1 / R-1 / R-2

Description of Demolition: \_\_\_\_\_  
\_\_\_\_\_

Method of Demolition: \_\_\_\_\_

Please Describe How the Demolished Materials Will Be Disposed Of: \_\_\_\_\_  
\_\_\_\_\_

IT IS UNDERSTOOD THAT UPON COMPLETEION OF DEMOLITION, NOTICE SHALL BE GIVEN TO THE FOSTER TOWNSHIP CODE ENFORCEMENT OFFICER. ALSO, IT IS AGREED THAT CONTRACTOR AND OR PROPERTY OWNER WILL TAKE FULL RESPONSIBILITY FOR ANY AND ALL DAMAGE TO ANY ADJACENT OR SURROUNDING PORPERTIES THAT MAY RECEIVED DAMAMGE IN ANY FASHION FROM THE DEMOLITION OF STATED STRUCTURE. WHEN DEMOLITION IS COMPLETE, THE AREA IS TO BE A SMOOTH AREA OF DIRT COVERED BY GRASS SEED AND MOISTURE COVER, i.e. STRAW, SEEDED MATTING, ETC.

Applicant Signature

Date

\_\_\_\_\_

\_\_\_\_\_

Township Use Only

Permit Fee: \$ \_\_\_\_\_ Permit Number: \_\_\_\_\_ Approved  Denied

Final Area Inspection: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Approved: \_\_\_\_ Yes \_\_\_\_ No

Building Code Official: \_\_\_\_\_ Date: \_\_\_\_\_

Fire Chief: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Officer: \_\_\_\_\_ Date: \_\_\_\_\_