



City of Dickinson Community Development

Demolition Application

Property Information

Address: _____

County Appraisal District No.: _____

Legal Description: _____

Acres: _____ Floodplain: _____

Property Owner Information

Owner: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

Contractor Information

Contractor Type: _____

Company: _____

Contact: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

**** Separate Contractor Registration required ****

Applicant / Agent Information

Applicant: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

Details of Request

Describe current **structure use**:

Describe proposed **property use**:

Describe **scope of work**:

Number of Structures: _____

Commercial Property Sites Only: An Asbestos Survey has been conducted in accordance with the Texas Asbestos Health protection Rules (TAHPR) and the National Emission Standards for Hazardous Air Pollutants (NESHAP) for areas being renovated and or demolished. The owner/operator of the renovation/demolition site must have this survey conducted before issuance of a demolition permit by the City of Dickinson.

- Yes No N/A

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge. By my signature, I hereby affirm that I am the **property owner** of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is **complete and accurate**, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's Fee Schedule. This (FEE) is **non-refundable** even in the event of application withdrawal. I have the power to authorize and hereby grant permission for **City of Dickinson Officials** to enter the property on official business as part of the application process.*

Signature: _____ Date: _____

Printed Name: _____

Staff Use Only

Date Received: _____ Permit Number: _____

Plan Review Fee: _____ Date Paid: _____

Permit Fee: _____ Date Paid: _____

Plan Review Use Only

Zoning _____ APPROVED: DENIED

Fire: _____ APPROVED DENIED

Building: _____ APPROVED DENIED