

For Office Use Only:  
 Permit #: \_\_\_\_\_  
 Date Town Rec'd.: \_\_\_\_\_  
 Date CEO Rec'd.: \_\_\_\_\_  
 Issue Date: \_\_\_\_\_  
 Fee Amt.: \_\_\_\_\_

## Town of Portage Lake Building Demolition Application

In order that your permit application can be processed as quickly as possible, please be sure to answer every question. If the question does not apply, record N/A in the space. Applications that are incomplete can not be processed.

1.Applicant Name	2.Address	3. Home Tel. # Work #: Cell #:
4. Property Owner	5. Owner's address	6. Owner's Home tel. # Work #: Cell #
7. Contractor (if applicable)	8. Contractor's address	9. Contractor's tel. # Work #: Cell #
10. Physical Address of Property	12 . SHORELAND <input type="checkbox"/> Limited Residential <input type="checkbox"/> Stream Protection <input type="checkbox"/> Resource Protection	13. NON-SHORELAND <input type="checkbox"/> Village <input type="checkbox"/> Growth <input type="checkbox"/> Rural <input type="checkbox"/> Industrial
11. Map & Lot #		

Description of Property: Detail size of building being demolished and where it is located on your property.

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**I certify that all information given in this application is accurate. I agree to further inspections by the Building Inspector at reasonable hours.**

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

Asbestos Building Demolition Notification Form D: Town received \_\_\_\_\_

Sent to State: \_\_\_\_\_

Code Enforcement Officer Signature: \_\_\_\_\_