



Date Completed: \_\_\_\_\_

PERMIT # \_\_\_\_\_

### APPLICATION FOR: **DEMOLITION PERMIT**

Mail: City of Live Oak - 101 White Ave. S.E. - Live Oak, FL 32064  
Office: City Hall Annex - 416 Howard Street E - Live Oak, FL 32064  
Phone: 386.362.2276 ofc. - 386.330.6507 fax

Date Stamp: \_\_\_\_\_  
  
Received by: \_\_\_\_\_

- **NOTE: Demolition.** For the purposes of permit issuance, Code Enforcement/Magistrate order, or other related actions by property owners, City officials or related parties; shall mean the complete removal of all building components, that there is nothing preserved for reuse in place and the improved construction area is to look as if nothing was ever there, once demolition is complete.

### THIS SECTION TO BE COMPLETED BY APPLICANT

#### 1) Title Holder/ Property Owner Information *(Considered applicant unless a contractor is named)*

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Do any other persons have any ownership/ interest in the subject property? YES NO**  
**If YES, please list such persons.**

1. Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
2. Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

#### 2) Contractor Information

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### 3) Property Information Location and Use:

All / Part *(Circle One)* of Tax Parcel Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Legal Description (Please give Lot #, Block, Sub-division): \_\_\_\_\_  
*\*or attach a parcel info. sheet from the Property Appraiser site [http://www.suwanneepa.com/GIS/Search\\_F.asp](http://www.suwanneepa.com/GIS/Search_F.asp)*

Acreage/Size of Property (use fractions thereof if applies): \_\_\_\_\_

Present Use: \_\_\_\_\_

Intended Use: \_\_\_\_\_  
*(Commercial, Industrial, Residential, Agricultural, Undeveloped, Vacant Building, etc.)*

Does any portion of the property flood after heavy rains or is any portion of the property in a Flood Prone Area or in a FEMA Flood Zone? YES NO

Who will be performing the demolition work? \_\_\_\_\_

Who will be hauling off the materials? \_\_\_\_\_

Date Completed: \_\_\_\_\_

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How long will your demolition and removal take? \_\_\_\_\_

Are there any hazardous materials being demolished? YES NO

If yes, please explain what type: \_\_\_\_\_

Nature of Demolition Work: \_\_\_\_\_

Job Valuation (materials + labor): \$ \_\_\_\_\_

I/We do hereby certify that to the best of my/our knowledge and belief, that all of the above statements and information, and the statements contained in any papers or plans submitted herewith, are true and correct. I/We authorize the Building Official, Fire Chief, Public Works Director and/or City Development Manager or their designee(s) to enter and inspect the site and premises which is the subject of this application.

I/We do also certify that I/we have read and agree to abide by the below referenced information pertaining to Asbestos and any other local, state or federal requirements pertaining to hazardous materials which may apply.

**ASBESTOS:**

It is the owner's or operator's responsibility to comply with the provisions of Section 469.003, Florida Statutes, and to notify the Department of Environmental Protection of his or her intentions to remove asbestos, when applicable, in accordance with state and federal law for each building permit for the demolition or renovation of an existing structure.

**OWNER/BUILDER EXEMPTION:**

Disclosure statement: State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within one (1) year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

Printed Name	Signature	Date
Printed Name	Signature	Date
Printed Name	Signature	Date

**OFFICIAL CITY OF LIVE OAK USE ONLY**

**ZONING DEPARTMENT:**

Land Use Map Category: \_\_\_\_\_  
Zoning: \_\_\_\_\_  
Flood Zone:  AE  A  N/A  
Address verified as correct? YES NO

**PRE-DEMOLITION ACTIONS:**

Water Disconnected: \_\_\_\_\_  
Sewer Disconnected: \_\_\_\_\_  
Gas Disconnected: \_\_\_\_\_  
Electricity Disconnected: \_\_\_\_\_  
811 Call Approval: \_\_\_\_\_

**BUILDING DEPARTMENT:**

Permit(s) Issued? YES NO Describe: \_\_\_\_\_

Building Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Building Official Print Name: \_\_\_\_\_

**Follow-up Notes:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_