



DEMOLITION PERMIT
CITY OF MARION ILLINOIS

1102 Tower Square Plaza Marion, IL 62959
BUILDING & CODE SERVICES
Phone 618-993-2422 Fax 618-997-9577

Deposit: \$450.00 (refundable)
Permit Fee: \$50.00 (non-refundable)

Check _____ Card Cash

PERMIT# _____

OFFICE USE ONLY

DATE _____

PERMIT EXPIRES 6 MONTHS FROM APPROVAL DATE

PROPERTY OWNER NAME: _____

MAILING ADDRESS: _____ PHONE: _____

CONTRACTOR NAME: _____

MAILING ADDRESS: _____ PHONE: _____

ADDRESS OF STRUCTURE: _____

TYPE OF STRUCTURE: _____

DESCRIPTION: _____

BASEMENT CRAWL CELLAR

UTILITIES: (CALL JULIE BEFORE YOU DIG 811 OR 888-892-0123)

REASON FOR REMOVAL: _____

METHOD OF REMOVAL: DEMOLISH MOVE

DATE TO BEGIN: _____ DATE TO COMPLETE: _____

TO ARRANGE SEWER LATER AND WATER PIPE INSPECTION CALL: MIKE ABNEY 618-364-6568

PRIOR TO ANY OTHER DIGGING OR DEMOLITION, CONTRACTOR MUST DIG ON CUSTOMER SIDE OF WATER METER WELL OR CURB STOP AND CUT PIPE IN TWO.

FOR PRE-BACKFILL INSPECTION (REMOVAL OF ALL CONCRETE, DEBRIS, TRASH, ETC.) AND FINAL INSPECTION WHEN ALL WORK IS COMPLETED, PLEASE CALL 618-993-2422.

BACK FILL BASEMENT/CRAWL SPACE NO HIGHER THAN EXISTING YARD ELEVATION.

Visit www.cityofmarionil.gov for online ordinances, section 10-7-2, 5-11-1

NO STRUCTURE WILL BE DEMOLISHED OR REMOVED WITHOUT OBTAINING A PERMIT AND APPROVAL BY THE CITY OF MARION ILLINOIS.

Any person failing to comply with any provisions of the demolition permit ordinance shall be subject to a fine up to \$750.00.

Applicant Signature: _____ **Date:** _____

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OFFICE USE ONLY

APPROVED DISAPPROVED

AUTHORIZED SIGNATURE: _____ **DATE:** _____