

# Demolition Application



## King William County

180 Horse Landing Road #4

King William, Virginia 23086

Phone: 804-769-4969 Fax Number: 804-769-2235

Email: [building@kingwilliamcounty.us](mailto:building@kingwilliamcounty.us)

Owner: \_\_\_\_\_ Contractor: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Tax Map # \_\_\_\_\_ Subdivision Name: \_\_\_\_\_

Directions To Site \_\_\_\_\_

Utility Company: \_\_\_\_\_ Type of Structure: \_\_\_\_\_

Haul Away: \_\_\_\_\_ Burn: \_\_\_\_\_

**NOTE: Method of Removal Must Be Selected; A Burn Permit May Also Be Required.**

Other Type of Demolition: \_\_\_\_\_

Other Work: \_\_\_\_\_

Cost of Demolition \$ \_\_\_\_\_

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### Office Use Only

Use Group \_\_\_\_ Use Code \_\_\_\_ Fed Use Code \_\_\_\_ Const. Type \_\_\_\_ Zoning \_\_\_\_ Area \_\_\_\_

Building Fee \$ \_\_\_\_\_ + State Levy \$ \_\_\_\_\_ = Total \$ \_\_\_\_\_

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**ISSUANCE OF THIS PERMIT SHALL NOT BE HELD TO PERMIT OR TO BE AN APPROVAL OF A VIOLATION OF ANY PROVISION OF COUNTY ORDINANCES OR STATE LAWS. I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION AND USE.**

**APPLICANT/AUTHORIZED AGENT \_\_\_\_\_ DATE \_\_\_\_\_**