

## OSWEGO CODE ENFORCEMENT DEPARTMENT WILLIAM J. BARLOW, JR. MAYOR

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## **APPLICATION FOR DEMOLITION PERMIT**

Date:		F	Permit #:		
Property Owner:					
Address:		City/St/Zip:			
Phone:		+			
Property to be Demolished:					
Type of Demolition: Interior _	Sq Ft F	Exterior Sq Ft	Full Demo _	Sq Ft	
Type of Structure:			21		
Current Structure Use:					
Demolition by:		Phone:			
Address:		City/St/Zip:			
Demolition Cost:		Fee:			
Start Date:		Completion Dat	e:		
I hereby agree to abide by the Chapter 126 of the Ordinances of			result in a fine	as prescribed in	
Signature		Code Enforcement	Code Enforcement Officer		
Print Name	Date	Date			