



PLANNING & ZONING DEPARTMENT
TOWN OF STALLINGS
315 STALLINGS ROAD
STALLINGS, NC 28104
704-821-8557

| APPLICATION INFORMATION | |
|-------------------------|--|
| Date Filed: | |
| Application #: | |
| Fee Paid: | |

DEMOLITION PERMIT

*Please reference the Fee Schedule for cost.

| Property Information | | | |
|---|--|--------|--|
| Property Owner(s): | | | |
| Address/Location: | | | |
| Parcel #: | | | |
| Applicant Name (if different from owner): | | | |
| Phone: | | Email: | |

***Disclaimer:** All zoning applications are public records and by providing the above information, you agree that said information can be released to the public by request.

The owner/applicant acknowledges the following:

- All debris on the site will be removed by the owner / applicant at no expense to the Town of Stallings
- All power lines are turned off and disconnected from the structure
- Water / Sewer service has been discontinued and disconnected from the structure
- All other utility lines have been disconnected from the structure
- Disruption of utility services of any type will not occur on adjacent or nearby properties

Owner/Applicant Statement:

I hereby certify that all information provided in this application is accurate to the best of my knowledge, and I acknowledge compliance with all requirements of the Town of Stallings Ordinances.

Signature (Owner or Owner Representative):

Date:

Signature of Zoning Official:

Date:

Approved

Denied