



# DEMOLITION PERMIT APPLICATION

Permit #: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Exp Date: \_\_\_\_\_

**DEMOLITION ADDRESS:** \_\_\_\_\_

**APPLICANT/CONTACT INFORMATION** (circle one)

**Applicant is:** Owner Contractor Other

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Does property qualify as Non-Profit / Tax Exempt? Yes No

**DEMOLITION CONTRACTOR INFORMATION**

**Is Contractor same as applicant?** Yes No

Business License #: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**OWNER OF RECORD:**

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**SCOPE OF DEMOLITION:** \_\_\_\_\_ (select one)

**1. Entire Structure**

- a. House
- b. Commercial Bldg
- c. Accessory Bldg
- d. Mobile Home
- e. Multi Family: No. of units \_\_\_\_\_
- f. Other \_\_\_\_\_

**DUMPSTER INFORMATION:**

*What company is placing the dumpster at the location?*

Name: \_\_\_\_\_

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

*Where will the dumpster be located?* \_\_\_\_\_

**STRUCTURE DETAILS:** (circle one)

Foundation Type: Basement Pad Crawl Space

Number of stories: 1 2 3 Other

**2. Partial Structure**

**3. Interior**

*If you answer YES to any of the following questions a Demolition Permit is required*

1. Will any load-bearing walls be removed? Yes No
2. Is there electric wiring in any of the walls to be demolished? Yes No
3. Is there plumbing pipe in any of the walls to be demolished? Yes No
4. Do you know of any lead-based paint in the structure? Yes No
5. Do you know of any asbestos used in the structure? Yes No



# REGULATION COMPLIANCE

**DEMOLITION ADDRESS:** \_\_\_\_\_

**LAND DISTURBANCE**

1. **Permit Required:** When soil disturbance is expected on a construction site, a Land Disturbance Permit may be required by the Missouri Department of Natural Resource. If your project will disturb the soils on the site, please visit <https://dnr.mo.gov> to determine if a permit is required. If you are required to obtain a Land Disturbance Permit, please attach a copy of it to this Demolition Permit Application.

2. **Cleanup:** After the demolition of the structure has occurred, the lot must be cleared of all debris, graded for drainage, have silt control in place and be seeded before a final inspection is performed and Certificate of Completion is issued.

**ASBESTOS**

The Missouri Department of Natural Resources regulates the property removal and disposal of asbestos material. To learn more about your responsibilities for compliance with these laws please visit <https://dnr.mo.gov> for a fact sheet on Asbestos Requirements for Demolition and Renovation Projects.

**DISPOSAL OF DEMOLITION RUBBLE**

The Missouri Department of Natural Resources advises that the disposal of demolition waste is regulated under Chapter 260, RSMo. Such waste, in types and quantities established by the Department, shall be taken to a demolition landfill or sanitary landfill for disposal. Additionally, persons engaged in building demolition are required to maintain records of sites used for disposal for a period of 1 year and present records upon request to DNR personnel. The state statutes further allow for county and city prosecution for illegal dumping in violation of RSMo Section 260.210.

**OPEN BURNING**

Open burning is allowed within the city limits of Knob Noster. Johnson County Non-Emergency Dispatch is to be notified prior to commencement of the burn.

**RIGHT OF ENTRY**

In the discharge of his/her duties, the Code Official or his/her designated representative shall have the authority to enter at any reasonable hour any building, structure or premise in this jurisdiction to enforce the provisions of the building codes adopted by the City of Knob Noster.

**PERMIT FEES FOR NOT FOR PROFIT CORPORATIONS**

The Board of Alderman approved the waiving of building permit, zoning and public works fees for demolition projects on property owned by any political subdivision or organization that has obtained an exemption for the payment of federal income taxes as provided in certain sections of the US Internal Revenue Code. If you are a tax exempt entity please provide a copy of your tax exempt letter to see if you qualify to have your permit fees waived.

**SIGNATURE OF APPLICANT/AGENT**

I hereby certify that the proposed demolition work is authorized by the Owner of Record and that I have been authorized by the Owner to make this application as her/her Authorized Agent and we agree to conform to all applicable local, state and federal laws. I understand and have complied with, where applicable, the following requirements:

1. Utility Disconnect Form - must be attached to all Entire Structure Demolition Permit Applications
2. Land Disturbance Permit - a copy must be attached if a permit is determined a requirement by the Missouri DNR
3. Proper Asbestos Removal and Disposal - per Missouri DNR regulations
4. Proper Disposal of Demolition Rubble - per Missouri DNR regulations
5. Open Burning within City Limits - prior notification given to Johnson County Non-Emergency Dispatch

_____ <b>Applicant/Agent Name</b>	_____ <b>Applicant/Agent Signature</b>	_____ <b>Date</b>
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**FOR CITY USE ONLY**

Signature _____	Date _____
<b>Required Documents:</b> <input type="checkbox"/> Tax Exemption <input type="checkbox"/> Utility Disconnect Form <input type="checkbox"/> Land Disturbance Permit	<b>Status:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Paid
<b>Permit Fee</b> _____	



## UTILITIES DISCONNECT FORM

**DEMOLITION ADDRESS:** \_\_\_\_\_

All Entire Structure Demolitions (including accessory buildings) are required to have the following utilities to the structure disconnected and signed-off by the utility provider. Service connections shall be discontinued and capped in accordance with the approved rules and requirements of the authority having jurisdiction.

**UTILITY DISCONNECTS:**

*Signatures are required from ALL companies listed below:*

<b>EVERGY ELECTRIC</b>	(888) 471-5275 720 E. Young Street Warrensburg, MO 64093	_____	<b>Date</b>	_____
<b>SPIRE GAS</b>	(800) 582-1234 1530 Corporate Drive Warrensburg, MO 64093	_____	<b>Date</b>	_____
<b>CITY OF KNOB NOSTER</b> Water Department	(660) 563-2595 201 N. State Street Knob Noster, MO 65336	_____	<b>Date</b>	_____
<b>CITY OF KNOB NOSTER</b> Sewer Department	(660) 563-2595 201 N. State Street Knob Noster, MO 65336	_____	<b>Date</b>	_____

The Sanitary Sewer Service connection must be CAPPED at the property line with concrete. An inspection is required once it has been capped. The Public Works Department will sign this Utilities Disconnect Form after the inspection has been performed and accepted.

**SIGNATURE OF APPLICANT/AGENT**

I have made contact with all of the utility companies listed here and have received their signatures acknowledging that their service has been disconnected or that a connection never existed at this location.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_