KELSO	• •	<i>City of Kelso</i> Demolition Permit Application				FOR OFFICE USE ONLY	
Permit #:		Zor	ning:	RV:			
Questions and a directed to the f	pplications can be ollowing:	203 S.	ling and Planni Pacific Ave., ‡ lso, WA 98626	<sup>‡208</sup>	build	360.423.9922 (office) 360.423.6591 (fax) ling@kelso.gov (email)	
PROJECT SIT Address/Location:	TE INFORMATION		Parcel #:				
PROPERTY OWNER Business Name:				Contact Name			
Mailing/Billing Add	ress:		City:		State:	Zip:	
Phone:			Email:				
APPLICANT Business Name:	(If different from property own	er listed above)	Contact N	ame			
Mailing/Billing Address:			City:	City: State:		Zip:	
Phone:			Email:				
CONTRACTO	OR						
Business Name:			Contact N	lame:			
Mailing/Billing Add	ress:		City:		State:	Zip:	
Phone:			Email:				
WA State License # (Not UBI#):				Expiration Date:			
City of Kelso Business License # (Permit cannot be issued until one is obtained): Expiration Date:							
DETAILED P Building Type – Che	<b>ROJECT INFORMATION</b> exck all that apply:						
Residential – # of structures removed: Commercial – Total Project Valuation: \$							
Structure Square Footage:							
Project Description:							
	N SUPPLEMENTAL CHECK						
For each application you are required to submit: Aerial/Vicinity map with location of structures/demolition work. Label each structure with current use.							
	Copy of the APPROVED application for hazardous material removal (Asbestos Survey) from:						
Southwest Clean Air Agency ww 11815 NE 99 <sup>th</sup> St. Suite 1294 Vancouver, WA 98682				www.swcleanair.org 360.574.3058 1.800.633.0079			
Depending on the scope of the work, you may also be required to submit:							
Copy of SEPA Review (SEPA Review may be required unless the demolition project is included under the general exemptions to SEPA - Refer to Kelso Municipal Code).							
Civil Engineering Permit (for disconnection of water/sewer lines and work in the ROW).							
PROPERTY OWNER OR AUTHORIZED AGENT I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit.							
Signature:	iai i nave read and examined this appl	Printed Name:		oncer, alle I al		Date:	
Signaturo.		i inited i funic.				2 att.	