

City of Kelso

Demolition Permit Application

FOR OFFICE USE ONLY

Permit #:		Zoning:	RV:		
		Building and Planni		360.423.9922 (office)	
directed to the fe	ollowing:	203 S. Pacific Ave., # Kelso, WA 98626		360.423.6591 (fax) puilding@kelso.gov (email)	
	TE INFORMATION			(**************************************	
Address/Location:			Parcel #:		
PROPERTY OWNER Business Name: Contact Name					
Mailing/Billing Address:		City:	City: State: Zip:		
Phone:		Email:			
APPLICANT (If different from property owner listed above) Business Name: Contact Name					
Mailing/Billing Address:		City:	State:	Zip:	
Phone:		Email:			
CONTRACTOR					
Business Name:		Contact N	Contact Name:		
Mailing/Billing Address:		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): Expirat			Expiration Date:		
DETAILED PROJECT INFORMATION					
Building Type – Check all that apply:					
□ Residential – # of structures removed: □ Commercial – Total Project Valuation: \$					
Structure Square Footage:					
Project Description:					
DEMOLITION SUPPLEMENTAL CHECKLIST					
For each application you are required to submit:					
	Aerial/Vicinity map with location of structures/demolition work. Label each structure with current use. Demolition Plans/Schedule for demolition.				
	Copy of the APPROVED application for hazardous material removal (Asbestos Survey) from:				
	Southwest Clean Air Agency www.swcleanair.org				
	11815 NE 99 th St. Suite 1294 Vancouver, WA 98682		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					
•	at I have read and examined this application and know the		orrect, and I am author	rized to apply for this permit.	
Signature:	Printed Nan	ne:		Date:	