

**DEMOLITION PERMIT**  
**Building Department**  
**172 N 2<sup>nd</sup> St. Decatur, IN 46733**  
**(260) 724-3814**

Email: [permits@cityofdecatur.in.gov](mailto:permits@cityofdecatur.in.gov)

Permit: \_\_\_\_\_  
Date: \_\_\_\_\_

Before a permit will be issued, an asbestos report (from a licensed asbestos remediation agency), shall be filed with this office indicating minimal to no asbestos present in the building. Should asbestos be discovered, a letter/report shall be submitted to this office from a licensed asbestos remediation agency indicating the proper removal of any and all discovered asbestos.

The undersigned agrees that any construction, reconstruction, enlargement, alteration, repair, moving, removal, demolition, conversion, relocation or alteration of structure or any changes in use of land or structures requested by this application will comply with and conform to all applicable laws of the State of Indiana and ordinances of the City of Decatur.

PROJECT ADDRESS: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

OWNER (IF DIFFERENT FROM APPLICANT): \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PERMIT FEES:**

**\$45.00 PER LOT: \_\_\_\_\_**

**TOTAL: \_\_\_\_\_**

**ALL UTILITIES MUST BE LOCATED AND TERMINATED/RETIRED PRIOR TO COMMENCEMENT OF DEMOLITION**

**PLEASE NOTIFY OUR OFFICE AT (260) 724-3814**

**24 HOURS PRIOR TO COMMENCEMENT OF DEMOLITION**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SPRINT TELEPHONE: (800) 257-3212

SEWAGE: (260) 724-4218

INDIANA MICHIGAN POWER: (800) 552-3702

ADAMS COUNTY LANDFILL: (260) 724-9971

WATER: (260) 724-7171

NIPSCO: (800) 422-6199

CABLE TV: (800) 873-1212 OR (260) 925-2885