DEMOLITION PERMIT APPLICATION

City of Villa Grove • Administrative Office

120 North Main Street • Post Office Box 108
Villa Grove, Illinois 61956-0108
Phone 217-832-4721 • Fax 217-832-4900
Emails city.hall@villagrove.org or bldg.insp@villagrove.org

OFFICIAL USE ONLY		
PERMIT NO	FEE \$	
DATE ISSUED		
EXPIRATION DATE		
ZONING DIST		
FLOOD ZONE		

APPLICANT INFORMATION:	
Owner's Name	
Mailing Address	
Demolition Contractor's Name	Phone
Mailing Address	
Address of Proposed Demolition	
TYPE OF BUILDING:	
Commercial	Building Characteristics
Manufacturing	
Retail Sales	Number of Stories
Office	Foundation
Other	Poured Slab
Residential	Cement Block
Single family	Other Roof
Multi-family	Asphalt Shingle
Accessory Building Garage/Carport	Other
Garage/Carport	Frame
	Wood
Ownership	Masonry
Private (individual, corp., etc)	Concrete
Public (federal, state, local)	Other
(If you answer "yes" to any Zone listed above, you must first o Is the property located in a floodway (ZONE AE) ? (If you answer "yes" to Zone AE, you must obtain a permit	hin (ZONE A, AH, AO, AR or A99)?YesNo btain a fill permit from the City of Villa Grove)
CERTIFICATIONS:	
	f described property, certify that the proposed work will comply with ons of the City of Villa Grove and that all information provided is true
Signature of Owner	Date
	vork is authorized by the owner(s) of record and that I/We agree to s and regulations of the City of Villa Grove and that all information
Signature of Contractor/Builder	Date