



Site Address	Address	Suite/Apartment No.	City	State	Zip
Legal Description					
Lot			Block		
Addition					
Project Contacts (Contact Person & Business Name)					
Applicant	Address			Email	
	City	State	Zip	Phone	
Property Owner	Address			Email	
	City	State	Zip	Phone	
Contractor	Address			Email	
Project Manager	City	State	Zip	Phone	
State Contractor License	No.				
Type of building to be demolished (select one below):					
☐ House		☐ Commercial Building			
☐ Garage		☐ Other			
Start Date			Completion Date		
Existing utilities must be shut-off or removed. Applicant must contact the Public Utilities Office to determine what is necessary for water and electric disconnection. The sanitary sewer connection must be disconnected and sealed at the property line within 30 days from the date of removal. You must notify Gopher State One Call by calling 1.800.252.1166 for all other utility companies. Gopher State One Call will notify all utilities in the area of your intention to demolish and the date you will begin. Please contact Prokore at 507.388.4224 or permits@prokoreins.com to schedule the required demolition inspection.					
I hereby declare that I am the owner or authorized agent of the above described property. I agree to demolish the building herein described in accordance with the standards, regulations and ordinances governed by Federal, State, and County governments and the local municipality. I further agree that all demolition activity will occur with construction safeguards in accordance with Chapter 33 of the Minnesota Building Code, including pedestrian protection during all demolition activity. I represent the information contained on the permit is true and correct.					
Applicant Name (print)			Date		
Applicant Signature (initial to sign)			Fee Paid		\$
Approved by		Title	Date		