

# VILAS COUNTY DEMOLITION ATTACHMENT

(Attachment may be to a zoning or a shoreland permit.)

Date Filed: \_\_\_\_\_ Date Received: \_\_\_\_\_

Property Owner's Name \_\_\_\_\_  
Print Clearly

Address: \_\_\_\_\_  
\_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Agent Name & Address \_\_\_\_\_  
Print Clearly

Phone Number: (\_\_\_\_) \_\_\_\_\_ Signature: \_\_\_\_\_

Address & Legal Description of Demolition Site: \_\_\_\_\_

\_\_\_\_\_ 1/4 , \_\_\_\_\_ 1/4, Gov. Lot \_\_\_\_\_ , Lot \_\_\_\_\_ , Sec. \_\_\_\_\_ , Town \_\_\_\_\_ N., Range \_\_\_\_\_ E.

Computer Number: \_\_\_\_\_ Town Permit Number: \_\_\_\_\_

Demolition Being Done By: \_\_\_\_\_

Date of Demolition: Start: \_\_\_\_\_ Date of Demolition: End: \_\_\_\_\_

Location and Manner of Disposal, of Site Demolition Materials: \_\_\_\_\_

Directions to the property of the demolition site from the nearest main highway: \_\_\_\_\_

\_\_\_\_\_  
(OWNER'S SIGNATURE)

\_\_\_\_\_  
(AGENT'S SIGNATURE IF DIFFERENT THAN OWNER'S)

## OFFICE USE

Application Date Approved: \_\_\_\_\_ Application Date Denied: \_\_\_\_\_

Signed: \_\_\_\_\_  
(Zoning Administrator, Assistant Zoning Administrator, or Deputy Administrator)

### COMMENTS:

DEMOLITION OF STRUCTURES. When a structure is demolished or removed, all sanitary sewer, storm sewer and water supply connections shall be sealed and plugged in a safe manner.