

2019



ONLINE PERMITS  
www.cityofroseville.com/epermits

COMMUNITY DEVELOPMENT DEPARTMENT • PHONE: 651-792-7080  
2660 CIVIC CENTER DR • ROSEVILLE, MN 55113

### DEMOLITION PERMIT APPLICATION

APPLICATION DATE: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

DEMOLITION WORK PROPOSED:	<input type="checkbox"/> Interior Demo Only	<input type="checkbox"/> Entire Structure Demo with Utility Disconnect (Requires Tree Preservation Plan Review) (Separate Sewer & Water Permit Required)	<input type="checkbox"/> Entire Structure Demo without Utility Disconnect (Requires Tree Preservation Plan Review)

PROPERTY TYPE:  Commercial  Residential  Multi-family  Industrial  Public

SEWER AND WATER DISCONNECT PERMITS ISSUED?:  Yes – Permit # \_\_\_\_\_  No

SITE : Address: \_\_\_\_\_ Suite/Space #: \_\_\_\_\_

APPLICANT: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

OWNER: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

CONTRACTOR: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ License Number: \_\_\_\_\_

TENANT SUITE #: \_\_\_\_\_ TENANT NAME: \_\_\_\_\_ TENANT EMAIL : \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TENANT PHONE: \_\_\_\_\_

VALUATION (labor & materials): \$ \_\_\_\_\_

WORK DESCRIPTION: \_\_\_\_\_

**Acknowledgement and Signature**  
 The undersigned hereby makes application to the City of Roseville to perform the work as herein described. The undersigned further states, under penalty of law, that the work will be performed in accordance with the Minnesota State Building Code, Roseville City Code, this application, and any approved plans and/or specifications.

**IF PROPERTY IS VACANT, APPLICANT AGREES TO MAINTAIN STRUCTURE IN A SECURE MANNER AT ALL TIMES PRIOR TO AND DURING DEMOLITION ACTIVITY.**

Print Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_  
                          Contractor                           Owner                           Applicant                           Email: \_\_\_\_\_

**SEPARATE PERMITS ARE REQUIRED FOR:**  
**Plumbing Mechanic Electrical Sewer Water Erosion Control Fire Alarm Fire Sprinkler Tank Removal**

**OFFICE USE ONLY:**

<b>FEES:</b>		Total Fees:
Permit	\$ _____	\$ _____
Processing Fee	\$ _____	
State Surcharge	\$ _____	Receipt #:
Plan Check	\$ _____	_____
Fire Surcharge	\$ _____	Receipt Date:
Fire Plan Check	\$ _____	_____
Cert. of Occupancy	\$ _____	
Other	\$ _____	
	Engineering Fee \$ _____	
	Erosion Control Permit – Engineering Fee Paid: _____	
	Erosion Control Escrow – Engineering Fee Paid: _____	

**WARNING: Be sure to contact Gopher State One Call @ 811 prior to digging for locations of underground cables, pipes, etc.**

**Requests for permit refunds must be made within 180 days of permit issuance date.**

**FOR OFFICE USE ONLY:**

**REVIEW REQUIRED BY:**

Utilities: \_\_\_\_\_

Engineering: \_\_\_\_\_

Building: \_\_\_\_\_

Fire: \_\_\_\_\_

Planning: \_\_\_\_\_

New Service Required: \_\_\_\_\_

Escrow Fee Required for Water Meter Disconnect? \_\_\_\_\_

Water Shut-off? \_\_\_\_\_

Curb Stop? \_\_\_\_\_

Construction Type: \_\_\_\_\_

Occupancy Type: \_\_\_\_\_

Occupant Load: \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Square Footage: \_\_\_\_\_

**REQUIRED INSPECTIONS:**

\_\_\_\_\_ Erosion Control

\_\_\_\_\_ Foundation

\_\_\_\_\_ Special Inspections

\_\_\_\_\_ Fire Marshal

\_\_\_\_\_ Engineering

\_\_\_\_\_ Utilities

\_\_\_\_\_ Final

\_\_\_\_\_ Escrow Fee Refund

\_\_\_\_\_ Other: \_\_\_\_\_

**APPROVALS:**

Plan Reviewer \_\_\_\_\_

Engineering \_\_\_\_\_

Utilities \_\_\_\_\_

Other \_\_\_\_\_