## **INTERIOR** DEMOLITION PERMIT APPLICATION

City of Goldsboro Inspections Dept.— 200 N. Center Street, Goldsboro, NC 27530 Phone: (919) 580-4389 or (919) 580-4385 Fax: (919) 580- 4315

Please choose one: Residential or C	ommercial	Square Footage:	
NOTE: A State Permit is required for all co	mmercial demoliti	ons	
ADDRESS OF DEMOLITION			
ADDRESS OF DEMOLITION:			
Owner:	PH:		
Owner Address:	City	State	Zip
DEMOLITION CONTRACTOR:	License#		
Address:	City	State	Zip
PH:	Email		
Demolition Permit Basic Fees: Res (Fee includes a \$15.00 Technology TOTAL PERMIT  An Asbestos Inspection Report prepared by an NC Accredite building. It is the contractor's responsibility to properly republic health – Health Hazards Control Unit at least ten (	sidential: \$115.00 or ology fee which is add  FEE  d Asbestos Inspector must notify the Department of I	Commercial: \$140.00 led to all permits)  be provided with application Health and Human Service	n to demolish any es <b>Division of</b>
building is known to contain asbestos.  I hereby certify that the information on this application is job will be performed under my supervision and that sucl Codes and applicable City of Goldsboro Ordinances.  Contractor/Applicant	s correct and that all work	s in connection with the ab	ove referenced