



4600 West Fifty-First Street  
Roeland Park, Kansas 66205 City Hall  
(913) 722-2600 • Fax (913) 722-3713



### Demolition Permit Application

Applications will not be processed until all required information is provided. **Please Print.**

Date \_\_\_\_\_ Project Address \_\_\_\_\_ Estimated Cost \_\_\_\_\_

#### Application Information

Applicant/Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Property Owner/Agent Name \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

(if different from project address)

Owner/Agent: Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

#### Demolition Information Start Date:

Commercial  Residential (please circle)

**Type of Demolition**

Interior, non-structural  Residential/Commercial Building  Swimming pool

Other \_\_\_\_\_

Note that demolition of septic systems is handled by Johnson County Wastewater:  
<http://www.jocogov.org/dept/wastewater/home>

Please Describe \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Proof of Disconnection

Electric:	Water:
Gas:	Phone:
Sewer:	Cable:

An inspection to visit the site must be scheduled **prior to** demolition. Once demolition is finished, a **final inspection** is required to confirm demolition and cleanup.

I hereby affirm that the information contained herein is true and correct to the best of my knowledge and agree to conform to all the regulations of the City of Roeland Park covering this type of permit. I understand failure to comply with these provisions may result in the revocation of the permit.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Method of Payment Check # \_\_\_\_\_ Cash \_\_\_\_\_