

2020



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

ONLINE PERMITS  
www.cityofroseville.com/epermits

**DEMOLITION PERMIT APPLICATION**

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

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

<b>DEMOLITION WORK PROPOSED:</b>	<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: \_\_\_\_\_

<b>TENANT SUITE #:</b>	<b>TENANT NAME:</b>	<b>TENANT EMAIL :</b>
	<b>CONTACT PERSON:</b>	<b>TENANT PHONE:</b>

**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	\$ _____	Engineering Fee \$ _____	
Processing Fee	\$ _____		Receipt #: _____
State Surcharge	\$ _____	Erosion Control Permit – Engineering Fee	
Plan Check	\$ _____	Paid: _____	Receipt Date: _____
Fire Surcharge	\$ _____		
Fire Plan Check	\$ _____		
Cert. of Occ.	\$ _____	Erosion Control Escrow – Engineering Fee	
Other	\$ _____	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 \_\_\_\_\_