GREENE COUNTY BUILDING REGULATIONS 940 N BOONVILLE, ROOM 305, SPRINGFIELD, MO 65802 (417) 868-4015 PHONE (417) 868-4175 FAX

DEMOLITION PERMIT

I. PURPOSE

- a. To insure safe and proper removal of all construction material from site.
- b. To insure that no unsafe condition is left on the site as a result of the demolition.

II. REQUIREMENTS

- a. A cash bond in the amount of five hundred dollars (\$500.00) must be posted at the time a Demolition Permit is issued. This portion of the fees must be paid in cash, cashier's check or money order, and will be returned once the requirements to finalize the permit have been met.
- b. Site Plan: A detailed layout of the property, to include the property lines with setbacks, all structures, wells, onsite wastewater treatment system with tank and laterals, etc.
- c. Provide verification from all public utilities that all meters and/or hookups have been removed and/or properly sealed. (This information can be provided via fax or mail.)
- d. Upon completion, must provide a receipt from licensed authorized waste disposal unit documenting that the debris material was disposed of in an appropriate manner. **Without** this documentation, the permittee is **NOT** eligible for the cash bond return.
- e. For each well that is being capped a Well Plugging Registration Record, Form MO 780-1603, must be obtained from the Department of Natural Resources. A copy of this form must be submitted to our office **prior to final inspection.** (This information can be provided via fax or mail.) Without this documentation, the permittee is **NOT** eligible for the cash bond return.
- f. If any asbestos is present on site, compliance with the Asbestos Hazard Emergency Response Act (AHERA) is recommended.
- g. Demolition Permit must be obtained before any work may begin.

III. FAILURE TO COMPLETE WORK

- a. It should be noted that failure to complete prescribed work within three (3) months from date of issuance of permit may result in:
 - i. Forfeiture of cash bond.
 - ii. Property lien for any amount in excess of bond to correct project.

GREENE COUNTY BUILDING REGULATIONS

Telephone: 417-868-4015

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Resourcemanagement@greenecountymo.gov

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	DEMOLITION APPLICATION	NC				
	****FOR OFFICE USE ONLY*	****				
RI	ECEIPTED BY:	PERMIT # PERMIT COST APPLICATION SITE PLAN RETIREMENT OF UTILITIES OWNERSHIP				
L.	Demolition of:					
2. 3.	Permit Issued To: Property Owner Contractor/Installer *If property acquired recently, copy of recorded warranty deed or executed closing statement required. Name of Recorded Property Owner: Mailing Address:					
	Work/Day Phone: Mobile/Evening Phone:					
	Email Address:					
1.	Contractor/Installer Information (If other than Owner) Name:					
	Mailing Address:					
	Office/Day Phone: Mobile/Evening Phone:					
	Email Address:					
5.	Cash Bond being paid by (Name):					
	Mailing Address:					
	Day Phone: Evening Phone:	Mobile:				
	Email Address:					
5.	Work Site Address: (Must be approved by the Greene County Addressing O	ffice-Room 305)				
7.	EXACT Directions to Work Site: (Must furnish nearest intersection of county	and/or state roads.)				
3.	Is structure in a Subdivision?	Lot #				
9.	Is structure on acreage? Yes No If yes, how man	ny acres?				
LO.	Type of Wastewater System: Existing: ☐ Onsite Wastewater Treatment Sys	stem Sewer Other				
	Existing onsite wastewater treatment system tanks* to be taken out of service must Environmental Section staff is REQUIRED WITH TANK OPEN to insure that work is do still open could result in being required to expose onsite wastewater treatment syste regarding procedure to connect to existing system(s) is available through our office.	be pumped, crushed and filled. An inspection by the one correctly. (Failure to have this inspection while tank is				

^{**}Use of the existing system will require approval from the Environmental Division when applying for a new permit.

SIGNATURE:			D	ATE:
COMMISSION. FAILU INSPECTION CAN BE	RE TO HAVE AN INSPECTI	ON CONDUCTED COULD RES	ULT IN UNCOVERING WOR	K SO THAT THE REQUIRED
1. Permit Number	2. Address of Inspection	on Site 3. Type of Inspect REE TO ABIDE BY THE REGULA		Name and Phone Number
		HEN SCHEDULING INSPECTION		
8. FINA	L INSPECTION. ase of deposited bond per	·		
	· ·	for the waste disposal must b n for return of cash bond depo		disposal and submitted to
insp	ection(s) not being conduc			
5. Prop	erty serviced by sewer mu	ist have required inspections p		
	t be submitted to this offi	ot to be used must be abandor ce <u>PRIOR</u> to a final inspection		
ador	oted regulations. (Informa	molition, permit to be issued	onnect to existing system(s)	is available at our office).
3. Rece	The state of the s	er system pumping to be sup		-
syste	em located on the propert	nducted by our Environmenta y where the demolition is tak		
	•	nin three (3) months from dat	•	proporty has a wastowater
PHONE: 417-868-4		PECTIONS CHECK LIST-DEN		FAX: 417-868-4175
		ENE COUNTY BUILDING REG		·
SIGNATURF:			PFRMIT NO	·
PRINT NAME:			DATE:	
	do so will result in the forfeit			,
representative. By signing below I unde	erstand that it is my responsib	oility to present proper document	ation from a licensed landfill in	order for my bond to be
the responsibility of Gr		t. Errors and/or omissions of info my signature below, I affirm that		
		nsible for accuracy of information		
-		MOUNT IN EXCESS OF BON		
NOTE: FAILURE T		CORDING TO REGLUATION		
□ Natural Gas		☐ Gas Supplier:		
	•		Office Location:	
-	R (For services at this locati	d. Contact DNR at 417-891-4300 ion):	jor details.	
-	•	bandoned per state law. A copy of		nust be submitted to this
	For any wells	not capped, state intended u	se:	
	If more than	one, how many are to be capp	ed?	
	☐ Existing Private We	ell(s): Is there more than one	private well on the property	⁄? □Yes □No
11. <u>WATER SOURCE</u> :	□cu			