



DEMOLITION PERMIT APPLICATION

\$200.00 FEE

Incomplete application and/or submittal will delay the review process.

Permit Type

☐ Residential

☐ Commercial

Is the structure currently connected to utilities?

☐ Yes

☐ No

Address of structure to be demolished: _____

Name of property owner: _____

Phone Number: _____

This permit affirms my acknowledgement of the restrictions of the disposal of rubbish set forth by TCEQ.

This permit verifies that all utilities have been disconnected and permit applicant takes all responsibility.

Property Owner

Name: _____

Phone: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Contractor Information

Company name: _____

Office Phone: _____

Email: _____

Applicant Acknowledgement: I certify by my signature below that I agree to abide by all laws and ordinance governing this type of work whether specified herein or not. Where no work has been started within 180 days after the issuance of a permit or when more than 180 days lapses between approval of required inspections, such permit shall be void. I have read and examined this application and know the same to be true and correct.

Please return application along with all applicable documents to:

Email: permits@cityofboyd.com ; Mailing address: P.O. Box 216, Boyd, TX. 76023

Physical address: 731 E. Rock island Ave., Boyd, TX. 76023

Applicant/Contractor Name (PRINT): _____

Applicant/Contractor Signature: _____

Date: _____

ALL COMMERCIAL BUILDING DEMOLITION OR TENANT REMODEL PERMITS

*******ASBESTOS SURVEY*******

Was an asbestos survey performed in accordance with Texas Asbestos Health Protection Rules (TAHPR) AND THE National Emission Standards for Hazardous Air Pollutants (NESHAP)?

☐ Yes

☐ No

If the answer is NO, then as the owner/operator of the renovation/demolition site, I understand that it is my responsibility to have this asbestos survey conducted in accordance with the Texas Asbestos Health Protection Rules (TAHPR) and National Emission Standards for Hazardous Air Pollutants (NESHAP) prior to a renovation/demolition permit being issued by the City of Boyd.

Date of Survey: _____ TDH Inspector Name: _____ License# _____