TOWN OF FRANKFORT
CODES DEPARTMENT
DEMOLITION PERMIT
315-894-0922

PERMIT NO._____

Date_____

Applicant's Name:_____

Address:_____

_____Zip_____

Property Owner's Name:_____

Property Address:_____

_____Zip_____

Tax Map Number:_____

Use of Structure:_____

Structure Size:_____

Contractor's Name:_____

Address:_____

Construction Debris: Hauler_____

Designation_____

Type of Material_____

Asbestos_____

Signature of Owner, Applicant or Agent_____

Dated_____ Codes Officer_____