



CITY OF ST. MARIES
 602 COLLEGE AVENUE
 ST. MARIES, ID 83861
 (208) 245-2577 or
 jkinzer@cityofstmaries.org

(Office use only)	
Amount Paid _____	Date _____
Receipt No _____	
Permit Number: _____	
Date Permit Issued _____	By _____

DEMOLITION PERMIT APPLICATION

Submit completed application and fees by cash or check to City Hall, 602 College Avenue, St. Maries, ID 83861.

OWNER INFORMATION	
Owner Name:	Phone Number:
Physical Address where license will be displayed:	
Mailing Address:	

CONTRACTOR INFORMATION	
Name/Business:	
Contract Person:	Phone Number:
Mailing Address:	

DEMO SITE INFORMATION		
Address:	Approximate Square Footage:	
Legal Description:		
_____	_____	_____
Lot	Block	Addition
<input type="checkbox"/> Commercial		<input type="checkbox"/> Residential
<input type="checkbox"/> Has a basement		<input type="checkbox"/> No Basement
<input type="checkbox"/> Interior only		<input type="checkbox"/> Partial Demo
<input type="checkbox"/> Complete Demo		
A site plan is required for a complete demolition and/or if there is a basement. If it is a partial or interior demolition, you must provide a floor plan reflecting where the demolition is taking place and what is being removed. Please provide a description of what is being demolished:		

- I understand that I need to contact City Hall before starting and upon completion of demolition. Demolition must be complete within 120 days of the issued permit date.
- Prior to demolishing a building that has a connection to the City water and wastewater system, it is necessary for the City Public Works to preserve and protect the existing sewer and water line. Please contact City Hall at (208) 245-2577 to schedule a time to have an inspection.
- I understand that I may need to contact the Environmental Protection Agency (EPA) regarding any possible asbestos containing materials on site.
- Fee is based on the most recent adopted fee schedule.

Applicant Signature _____

Date _____

Preserve/Protect Inspected and Approved By: _____ Date: _____

Preserve/Protect Inspected and Approved By: _____ Date: _____