



City of Groveport
Building & Zoning Department
655 Blacklick St
Groveport, OH 43125
614-830-2045

Date: _____

Application # _____

Permit # _____

APPLICATION FOR DEMOLITION PERMIT

Address of Project

Parcel #

Building Owners Name

Phone #

Street Address

City

State

Zip

Contractor Name

Phone #

Address

City

State

Zip

COMMERCIAL

RESIDENTIAL

Cost of Demolition: \$ _____

Height of Structure: _____

Square footage of building(s) to be demolished: _____

Demolition Start Date: _____ Method of Demolition: _____

Submit two (2) copies of the following:

1. Site plan – to scale showing location of all existing buildings and which building(s) will be razed.
2. A copy of the environmental study completed for each structure to be razed (if required).
3. Statement that all utilities have been disconnected to affected buildings.

Base Fee

\$ **\$57.50**

Commercial Prints attached for plan review \$172.50

\$ _____

Residential Prints attached for plan review \$28.75 + \$2.50 per 100 sf

\$ _____

Subtotal: \$ _____

1% State Fee (1, 2 & 3 family dwellings)

\$ _____

3% State Fee (other than 1, 2 & 3 family)

\$ _____

Total Permit Fee: \$ _____

Applicant's Signature

Applicant's Printed Name

Contact Phone Number