CITY OF REDMOND
Development Services Center
15670 NE 85th Street, 2nd Floor
Redmond, WA 98052
(425) 556-2473
www.redmond.gov

FOR STAFF USE ONLY
DEV_____ **Date:** _____/_____/_____
PRJ_____ **App expires**: ____/_____/_____
B_____ **Accepted by**: _____
Type: _____ **Payment method:** _____

DEMOLITION PERMIT APPLICATION

TYPE OF WORK

❒ Commercial ❒ Commercial Garage ❒ Other Commercial ❒ Multi-Family ❒ Residential ❒ Other Residential ❒ Accessory Structure

Building Square Feet: _____ Number of units: _____ Existing use: _____ Public Owned: ❒ Yes ❒ No

SITE LOCATION

Site Address: _____ Tax Parcel Number: _____

Project Name/Tenant: _____ *Value of Construction: $_____

Location/Plat name/Lot number: _____

Property Owner: _____ Phone: (_____) _____-_____

Mailing Address:_____City _____Zip _____

Lender Name: _____ Phone: (_____) _____-_____

Mailing Address: _____ City _____Zip _____

DETAILED DESCRIPTION OF WORK

_____

_____

APPLICANT/CONTACT PERSON

Name: _____ Phone: (_____) _____-_____

Mailing Address: _____City _____Zip_____

E-Mail Address: _____ Fax: (_____) _____-_____

CONTRACTOR INFORMATION

Company Name: _____

Mailing Address: _____City _____Zip _____

Phone: (_____)_____-_____ Fax: (_____)_____-_____

State Contractor's License #: _____ Expiration Date: _____/_____/_____

Redmond Business License #:RED_____

Street Clean Up Bond to be on file with Public Works

Notification to Public Works Utilities, Utility Billing, Fire Prevention, King County Assessor

BUILDING OWNER OR AUTHORIZED AGENT

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit.

Print Name:_____

Signature:_____

***Value of Construction:** The value of construction shall include the prevailing fair market value of all labor, materials, and equipment needed to complete the work, whether actually paid or not.

DEMOLITION CHECK LIST

		DATE
	Water Supply	
YES/NO	A. Meter to be removed. (Call Public Works Utilities 425-556-2840)	_____
YES/NO	B. Meter to remain and be protected.	_____
YES/NO	C. Private well* or Monitoring Well (Call Public Works Nat. Resources 425-556-2756)	_____
	_____To be filled and capped per WAC 173-160	_____
	_____To be used for other purposes	_____
	Sanitary Sewer	
YES/NO	A. Sewer to be capped (Call Public Works Construction 425-556-2723)	_____
YES/NO	B. Existing line to remain and be used by new structure.	_____
	Note: Contact Public Works for other required permits (425-556-2723)	
	Septic System	
YES/NO	A. Tank to be removed*	_____
YES/NO	B. Tank to be drained and filled*	_____
	Electrical Supply	
YES/NO	Electricity to be shut-off and meter removed☆.	_____
	Gas/Oil	
YES/NO	A. Gas to be shut-off and meter removed☆.	_____
YES/NO	B. Remove fuel or oil tanks. Complete underground/above ground storage tank closure checklist (Call Fire Prevention Division 425-556-2237)	_____
	Existing Foundation	
YES/NO	A. Foundations destroyed and removed	_____
YES/NO	B. Basement - Destroyed or filled	_____
YES/NO	C. All debris removed from site – lot to be restored to original condition.	_____
	Fire Information	
YES/NO	Fire alarm system removal?	_____
YES/NO	Fire alarm system partial removal?	_____
YES/NO	Fire Sprinkler system removal?	_____
YES/NO	Fire Sprinkler system partial removal?	_____
YES/NO	Knox Box to be removed?	_____

***Call King County Health Department 206-296-4932**
☆ Call Puget Sound Energy 425-447-0700

REQUIRED DOCUMENTATION

1. Anticipated demolition date _____
2. Tree Removal Proposed ❒ Yes ❒ No
3. Ensure all Demolition Check List items are clearly shown and noted on two (2) copies of the site plan.
4. Asbestos Abatement: Obtain approval form Puget Sound Clean Air Agency prior to proceeding with demolition.
5. If structure to be demolished is over 4000 sq. ft. - **SEPA checklist is required.**
6. Construction debris to be taken to an approved facility (King County information handout available at Permit Center)

ABANDONMENT OF SEPTIC TANK FOR RESIDENTIAL REQUIRES THE FOLLOWING CONDITIONS TO BE MET

1. Pump tank, fill with sand, dismantle or destroy cap.
2. Letter or receipt to verify above conditions have been met by pumping services.
3. Identify current sewer/water billing account number.
4. Hauling requirements must be met if over 50 cubic yards of material are to be taken to or from site.
5. Fire protection system demo (issued through Fire Department).