



**City of Gatlinburg
Request for
Demolition Permit**

Partial Demolition Complete Demolition

1. Applicant: _____ Phone: _____

Mailing Address: _____

Email: _____

2. Property Owner: _____ Phone: _____

Mailing Address: _____

3. General Contractor: _____ Phone: _____

Mailing Address: _____

Contractor's License #: _____ Exp. Date _____ Lic. Limit _____

License Classification: _____ Contract Amount _____ Bus Lic. # _____

NOTE: A copy of your Contractor's License and Workers' Compensation Certificate of Insurance must accompany this application.

4. Property Address: _____

Tax Map _____ Group _____ Parcel _____

5. Request Description: _____

6. Cost of Project: _____

7. Approximate amount _____ (cubic yards)

8. Where is the demolition being taken? _____

9. By what means will it be transported? Dump Truck, Dumpster, Etc _____

10. Who will be transporting the material? _____

11. Is this demolition a result of the November 28, 2016 fires? Yes No

12. Was the structure Destroyed Major damage Minor damage

13. Is there a retaining wall on the property? Yes No

If yes, the retaining wall must be inspected by the City prior to its removal.

14. Is there a propane tank on the property? Yes No

If yes, then verification that the tank has been properly disconnected and/or disposed of by the tank supplier must be submitted.

15. Is there a well on property? Yes No

16. Is there a septic tank on property? Yes No

17. Have the following utilities been disconnected?

Electricity Yes No

Water Yes No

Sewer Yes No

Natural Gas Yes No

Propane Yes No

The above information is true and correct to the best of my knowledge. By signing this form I also acknowledge that the contractor and/or property owner is responsible for compliance with all local, state, and federal regulations related to the disposal of hazardous materials and waste.

Signature of Applicant _____ Date: _____

Printed Name _____