EDGECOMBE COUNTY
P.O. BOX 10, 201 St. Andrew Street Tarboro, NC 27886

Phone: 252-641-7802 Email: permit@edgecombeco.com

DEMOLITION PERMIT APPLICATION COMMERCIAL & RESIDENTIAL BUILDINGS

Application Date:	Ta	x/Parcel ID #:	
Commercial: Residentia	ıl:		
Applicant:		Phone #: _	
Current Resident:		Phone #:	
Current Address:	City:	State:	Zip:
Job Site Address:	City:	State:	Zip:
Land Owner's Name:		Phone #:	
Building Contractor:		License #	:
Telephone #: (office)		(mobile)	
Type of Building: House:	odular: Add	ition/Garage:	Renovation:
Building Use: Single Family: S	torage: Accesso	ory Building:	Business:
Contractor's Total Estimated Cost: \$ (BLDG. ONLY-Do not	include other trades)	
Fees: Residential - \$100 Commercial - \$200			
ATTACH ASBESTOS REPOR	T FOR ALL COMMER	RCIAL DEMOLITION	APPLICATIONS
I hereby certify that all the informatic the State Building Code and all othe further understand that this is not an approval and issuance of the permit. **	r applicable State an authorization to be	d local laws ordina gin work. Work may	nces and regulations. It only commence after
Printed Name	Signature of	Applicant	 Date