DEMOLITION SUBMITTAL

(COMPLETE AND SUBMIT WITH PERMIT APPLICATION)

SUBMITTAL DATE: ________  PROJECT ADDRESS: _____________________________________________

PERMIT NUMBER: _______________________________________________________________

DEMOlITION INFORMATION:

CHECK ONE:  TOTAL DEMOLITION: ___  PARTIAL DEMOLITION: ___

NUMBER OF STRUCTURES:________________________

1.  TYPE OF STRUCTURE: ___________________  SQUARE FOOTAGE: ______
2.  TYPE OF STRUCTURE: ___________________  SQUARE FOOTAGE: ______
3.  TYPE OF STRUCTURE: ___________________  SQUARE FOOTAGE: ______
4.  TYPE OF STRUCTURE: ___________________  SQUARE FOOTAGE: ______

ADDITIONAL INFORMATION: ______________________________________________________
________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

DISPOSAL SITE: ___________________________  DATE OF DEMOLITION: _________________

ASBESTOS INFORMATION: (required for commercial projects)

ASBESTOS CONTRACTOR: ___________________  DATE OF REPORT: _______________________

ASBESTOS CONTRACTOR LICENSE: _____________  REPORT NUMBER/NAME: _______________

FEES:

1ST 1500 FT² FEE - $35.00  ADDITIONAL SQUARE FOOTAGE FEE - $8.00 FOR UP TO EACH ADDITIONAL 500 FT²

BASE FEE: $35.00  ADDITIONAL SQUARE FOOTAGE FEE: ______________

SUBTOTAL: ______________

DEMOLITION SITE SHALL BE LEFT CLEAR OF ALL MATERIAL AND DEBRIS, FILLED AND GRADED TO THE ORIGINAL FINISHED GRADE AND SHALL BE INSPECTED BY THE BUILDING INSPECTOR UPON COMPLETION. ALL ELECTRIC, WATER, SEWER AND GAS SERVICES MUST BE TURNED OFF PRIOR TO DEMOLITION. SEPTIC TANKS MUST HAVE TOP REMOVED AND BACK FILLED TO GRADE. DAMAGE CAUSED BY DEMOLITION TO THE PUBLIC OR PRIVATE UTILITIES OR STREETS SHALL BE REPAIRED AT THE EXPENSE OF THE APPLICANT.

APPROVAL: _____________________________  BUILDING INSPECTION: ___________________

APPROVAL DATE: _________________________  INSPECTION DATE: _______________________

PLANNING DEPARTMENT  APPROVAL
PERMIT APPLICATION

INFORMATION PROCEDURES FOR ALL PERMITS: Call Inspection Hotline (575) 258-6996; leave name, address, and type of inspection, permit number and call back number. All this info MUST be on recorder or inspection cannot be scheduled. Requests will be processed the next business day and will be scheduled as work load and staff availability permits. Every effort will be made to schedule and complete inspections within one to two business days (RMC sec. 22-38)

NOTE: INSPECTIONS WILL ONLY BE SCHEDULED VIA THE INSPECTION HOTLINE

Submittal Date: _______________________________ Is there an existing Permit for this Project? Yes-□ No-□
Submittal Type: Building-□ Plumbing-□ Mechanical-□ Electrical-□ Land/Site Development-□

Location: Lincoln County-□ Village of Ruidoso-□

Proposed Structure Type: Manufactured-□ Site Built-□ Modular-□ Grading/Drainage-□
Existing Structure Type: Manufactured-□ Site Built-□ Modular-□

NOTE: APPLICATIONS NOT FILLED OUT COMPLETELY WILL NOT BE ACCEPTED

1. Project Address: _______________________________ Parcel Number: ____________
2. Legal Description: Lot Number: ________ Block: ________ Plat/Unit: ____________
   Zoning District: _____ Subdivision: ____________________________________________
   Flood Zone: __________________________

3. Permit Type: Owner-□ Contractor-□ Government-□
4. Building Class: Residential-□ Commercial-□
5. Description of Work: New Construction-□ Addition-□ Demolition-□
   Relocate Existing-□ Change of Occ. □ Alteration/Repair-□

6. Project Valuation: _____________________________ Permit Fees: $________________

7. Owner’s Name: _______________________________ Phone Number: __________
   Mailing Address: _______________________________ City: __________
8. Contracting Company: ___________________________ Phone Number: __________
   Mailing Address: _______________________________ City, State: __________
   New Mexico State License Number: ________ Classification(s): ______

9. Contact Person: _______________________________ Phone: __________

10. Responsible Design Professional: ______________________ Phone: __________

11. Plan(s): No-□ Yes-□ Plan(s) Type: Large-□ Small-□ Electronic-□

12. Percent Slope of Building site: ____________

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<tr>
<th>FLOOR AREA</th>
<th>SQ. FT. COST</th>
<th>VALUE</th>
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<tbody>
<tr>
<td>Heated</td>
<td>$__________ $</td>
<td>$__________</td>
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<tr>
<td>Open Deck</td>
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<td>$__________</td>
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<tr>
<td>Covered Deck</td>
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<td>Storage</td>
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<tr>
<td>Basement</td>
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<td>Car Port</td>
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<td>Garage</td>
<td>$__________ $</td>
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<tr>
<td>Other/ Site Dev.</td>
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<td>$__________</td>
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<tr>
<td>Total</td>
<td>$__________</td>
<td>$__________</td>
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<tr>
<td>Bid *(optional) *Must submit copy of Bid contract</td>
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<td>FEE(S): SUBTTL $__________</td>
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<td>Site Dev $__________</td>
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<tr>
<td>REMAINING $__________</td>
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CAUTION: I/we have carefully examined and read this application and know the same is true and correct. I/we are also aware that whoever is indicated as the "Contractor" assumes full responsibility for this application and for the construction and will comply with all provisions of the Building Codes and Village Ordinances and State Laws, whether herein specified or not. I/we further understand that the Contractor, Plumber and/or Electrician are the only persons authorized to request inspections, and the plumbers and electricians must file for their own applications. To start construction before a building permit is issued and/or to use and occupy the premises before a U & O Certificate is obtained is a violation of the law.

Applicant’s Signature: ____________________________ Date: ____________