



BUILDING AND SAFETY DIVISION
1685 MAIN STREET Room # 111
SANTA MONICA, CA 90401
310-458-8355

**DEMOLITION
 PLAN CHECK / PERMIT
 APPLICATION**

PLCK No.:	Permit No.:
Date:	Date:
Amount:	Amount:
Ck#	Ck#

**A filing fee plus Public Landscape plan check fees are required at time of submittal
 To Be Completed By Applicant**

PROJECT IDENTIFICATION & DESCRIPTION

Street Address of Site:	Assessor's Parcel Number
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Separately identify each structure proposed to be demolished, its square footage and year built.	Structure Type (SFR, MFR, Garage, Comm.)	Square Feet to be Demolished*	Year Built*	*Demolition applications shall be subject to a 75-day waiting period from the date of submittal of a complete application to the City except for: • Structures less than 40 years old; or • Accessory structures less than 400 sq. ft. in floor area that are not a City-Designated Historic Resource or not listed on the City's Historic Resources Inventory Any applications to be considered exempt from the 75-day waiting period shall include proper documentation demonstrating eligibility for the exemption.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Lot Dimensions	<input type="text"/> X <input type="text"/>	Total No. of Residential Units to be demolished:	Single Family <input type="text"/>	Multiple Family <input type="text"/>	Valuation \$	<input type="text"/>
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Other site information such as rent control status and planned development on site

**ATTACH CLEAR PHOTOGRAPHS OF ALL STRUCTURES & PROVIDE A SITE PLAN
 AND PROPERTY MAINTENANCE PLAN ON OTHER SIDE OF APPLICATION**

*** CERTIFY REQUIRED POSTING OF SITE 3 DAYS PRIOR TO FILING ***

(Check one box) Owner Contractor Other

Signature _____ Name _____ Date _____

Principals Identification:

Property Owner	Name:	<input type="text"/>	Phone No.:	<input type="text"/>	Fax No.:	<input type="text"/>
	Address:	<input type="text"/>	Unit Number:	<input type="text"/>	Zip Code:	<input type="text"/>
	Email Address:	<input type="text"/>				
Applicant and/or Agent	Name:	<input type="text"/>	Phone No.:	<input type="text"/>	Zip Code:	<input type="text"/>
	Address:	<input type="text"/>	Unit Number:	<input type="text"/>	Zip Code:	<input type="text"/>
	Email Address:	<input type="text"/>				
Contractor	Name:	<input type="text"/>	Phone No.:	<input type="text"/>	Zip Code:	<input type="text"/>
	Address:	<input type="text"/>	City:	<input type="text"/>	State:	<input type="text"/>
	City Business License No.:	<input type="text"/>	State of California License No.:	<input type="text"/>	Classification:	<input type="text"/>
	<input type="text"/>					

FINAL DECLARATION

I certify that I have read this application and declaration attachment and state under penalty of perjury, under the laws of the State of California, that the above and attached information is true and correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city and county to enter upon the above-mentioned property for inspection purposes. I realize that this application is to request for a permit and that it does not approve or authorize the specified therein. Also, that a permit does not authorize any violation or failure to comply with applicable laws and ordinances. Furthermore, that neither the City of Santa Monica nor any board, department officer or employee thereof make any warranty nor shall be responsible for the performance, or results of any work described herein nor the condition of the property nor the soil upon which such work is performed.

(Check one box) Owner Contractor Authorized Agent

Applicant's Name: Signature _____ Date:

PLOT & SITE PLAN

Provide a detailed SITE PLAN showing property dimensions and general location of all existing structures on the property. Clearly label and dimension the building(s) proposed to be demolished. Please be sure to identify the location of any fences, trees & other screening to remain on site, as well as the location of adjacent street and alleys. The space below can be used to illustrate the required information; otherwise, please attach a separate sheet to ensure the scope of work proposed is clearly defined in the site plan. Insufficient information on the site plan shall be deemed an incomplete application that will not be accepted by the City.

PROPERTY MAINTENANCE PLAN

(Describe a maintenance plan for vacant site & disregard any projects / redevelopment proposed for parcel)

A) Fencing

Describe:

B) Screening for adjacent properties / streets - (trees, shrubs, etc.):

Describe:

C) Ground Cover

Describe:

D) Maintenance Plan - describe (bi-weekly monitoring / clean up required):

Describe:

E) Other Maintenance Provisions

Describe:

OWNER'S AGREEMENT

I pledge to maintain the vacant property as indicated above, if Demolition Permit is approved

Name

Signature

Date