



UINTAH COUNTY COMMUNITY DEVELOPMENT
 152 East 100 North Vernal, Utah 84078
 Office (435)-781-5336 Fax (435)-781-5352

DEMOLITION APPLICATION

- Step 1:** Get an asbestos inspection (This only applies if the demolition is done by a hired contractor. Private homeowners doing the demolition would be exempt per House Bill 285). (See www.airquality.utah.gov "Asbestos" "Certified Asbestos Companies" for a list of certified companies.)
- Step 2:** Get Fire Marshal, Questar Gas, Rocky Mountain Power and Health Department signatures
- Step 3:** Two weeks prior to demolishing, the state Division of Air Quality must be notified (even if no asbestos is found). There is approx. a \$50 fee. Go to www.airquality.utah.gov "Asbestos" "Forms" and print the applicable form. (There are forms for asbestos and demolition notification. If you have questions, you may contact the State @ 801-536-4000.)
- Step 4:** Get asbestos removed, if needed, by a Certified Asbestos Contractor (again, see list of certified companies).
- Step 5:** Fill out the remaining information on *this* application and submit it, along with a copy of your approval from the Division of Air Quality, to the building department.
- Step 6:** Once the building office issues your demolition permit, remove the building and then call for an inspection.

Owner's Name _____ Phone Number _____ Parcel No. _____

Property Address _____ City _____ State _____ Zip _____

Mailing Address (if different) _____ City _____ State _____ Zip _____

Zone _____ Square ft. of Bldg. _____ Value of Structure \$ _____ Previous use of structure _____

Square footage of: Main floor _____ 2nd floor _____ Basement _____ Garage _____

Will a new structure be built? Yes ___ No ___ What type of structure will be built: _____

Any new structure being built to replace the existing building must have a building permit approved through the Community Development department. Applications can be picked up at our office or printed off our website at www.co.uintah.ut.us.

DEMOLITION CONTRACTOR INFORMATION

Contractor: _____ Signature: _____

State License # _____ Expiration Date: _____ Phone: _____

Was Division of Air Quality Contacted? Yes ___ No ___ Date _____

FIRE MARSHAL APPROVAL

QUESTAR GAS APPROVAL

ROCKY MOUNTAIN POWER APPROVAL

_____	_____	_____	_____	_____
Fire Marshal Signature	Date	Signature	Date	Signature
				Date

HEALTH DEPARTMENT APPROVAL

An asbestos inspection, if applicable, (see Step 1) is required before the health department will approve your demolition.

Health Dept. Signature _____ Date _____

OFFICE USE ONLY

FEE: \$0 Date Submitted: _____

I have read and submitted to the best of my knowledge all information to be true and correct.

Name of Applicant: _____ Signature: _____ Date: _____