

**VILLAGE OF JOHNSON CREEK**  
125 Depot Street, P.O. Box 238, Johnson Creek, WI 53038 (920-699-2296)

**APPLICATION  
RAZING PERMIT**

**Chapter 112-2 (H-1) requires a razing permit.**

Date \_\_\_\_\_ Permit# \_\_\_\_\_ Tax Key# \_\_\_\_\_

Project Location: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone:# (\_\_\_\_) \_\_\_\_\_

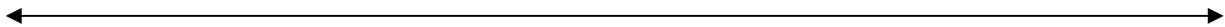
Applicant Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_

Contractor Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_



**Before a permit can be issued to demolish or remove a building, the owner/applicant will complete and submit all of the pre-permit information and must have the building inspector do a preliminary razing inspection. (Information attached)**



**SPECIAL PROVISION:**

Excavation will be filled with a solid clean fill to match a lot grade within (5) five days of removal of structure. Any excavation will be protected with appropriate fences, barriers, and erosion control measures. Asbestos, under ground tanks, and any other health, safety or environmental site conditions will be properly addressed by the owner/applicant. **Note: The owner/applicant will be responsible for the disposal of all material pertaining to this (contact DNR)**

**RAZING PERMIT**

**CONDITIONS OF APPROVAL:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The applicant agrees to comply with all information pertaining to this **RAZING PERMIT**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Fee: \_\_\_\_\_ \$50.00 \_\_\_\_\_ Approval of Authorized Person: \_\_\_\_\_