



City of Fernley
 595 Silver Lace Blvd., Fernley, NV 89408 775-784-9900

DEMOLITION PERMIT APPLICATION

PERMIT APPLICATIONS, PLANS OR SUPPORTING DOCUMENTATION THAT IS INCOMPLETE, ILLEGIBLE OR SUBMITTED IN PENCIL WILL NOT BE ACCEPTED. PLEASE PRINT CLEARLY USING PERMANENT INK.

APPLICANT'S INFO:	APPLICANT'S NAME:			ROLE: <input type="checkbox"/> OWNER <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> OTHER:		
	COMPANY:					
	ADDRESS:					BUILDING OR SUITE NO.:
	CITY:			STATE:		ZIP CODE:
	PHONE NO.:		CELL NO.:	FAX NO.:		EMAIL:
	ASSESSOR PARCEL NO. (APN):				LOT #:	FLOOD ZONE: <input type="checkbox"/> YES <input type="checkbox"/> NO
	ZONING:	SUBDIVISION:	TOTAL LOT AREA:	SETBACKS - FRONT:	SIDES:	REAR:
	PROJECT ADDRESS:					BUILDING OR SUITE NO.:
	CITY: FERNLEY			STATE: NV	ZIP CODE: 89408	
	<input type="checkbox"/> DEMOLITION			BUILDING HEIGHT ABOVE GRADE (FT):		
	PROJECT/UNIT TYPE: <input type="checkbox"/> DETACHED ONE- OR TWO-FAMILY DWELLING <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> ACCESSORY STRUCTURE:					
	VALUATION AMOUNT OR CONTRACT AMOUNT (PROVIDE COPY): \$					
	FLOOR AREAS (SQ. FT.):	LIVING SPACE:	DECKS:	PORCHES:	BASEMENT/STORAGE:	
	GARAGE:	OTHER:		TOTAL STRUCTURE AREA:		
	UTILITY INFORMATION:	<input type="checkbox"/> CITY SEWER		<input type="checkbox"/> CITY WATER		<input type="checkbox"/> NATURAL GAS
<input type="checkbox"/> LPG/PROPANE GAS		<input type="checkbox"/> SEPTIC SYSTEM		<input type="checkbox"/> ELECTRICAL SERVICE (<input type="checkbox"/> OVERHEAD <input type="checkbox"/> UNDERGROUND)		
<input type="checkbox"/> PLOT PLAN ATTACHED		<input type="checkbox"/> NO PLANS	<input type="checkbox"/> PLANS ATTACHED		<input type="checkbox"/> ASBESTOS ABATEMENT REQUIRED	
FILING DATE:	ISSUED BY:	DATE:				
BY:					PERMIT FEE: \$	
BUILDING PERMIT NO.: BP					PLAN CHECK FEE: \$	
<input type="checkbox"/> OWNER-BUILDER PERMIT PURSUANT TO NRS 278.573 (<input type="checkbox"/> RECEIVED ACKNOWLEDGEMENT FORM)					TOTAL AMOUNT DUE: \$	
ZONING REVIEWED BY:	DATE:		TOTAL PAID: \$			
PLANS REVIEWED BY:	STARTED:	COMPLETED:				

OWNER'S INFO:	OWNER'S NAME:					
	COMPANY:					
	ADDRESS:					BUILDING OR SUITE NO.:
	CITY:			STATE:		ZIP CODE:
	PHONE NO.:		CELL NO.:	FAX NO.:		EMAIL:
DESIGN PROFESSIONAL'S INFO:	ARCHITECT:					
	ADDRESS:					BUILDING OR SUITE NO.:
	CITY:			STATE:		ZIP CODE:
	PHONE NO.:		CELL NO.:	FAX NO.:		EMAIL:
	ENGINEER OF RECORD:					

CONTRACTOR'S INFORMATION:	ADDRESS:			BUILDING OR SUITE NO.:
	CITY:		STATE:	ZIP CODE:
	PHONE NO.:	CELL NO.:	FAX NO.:	EMAIL:
	BUILDING/GENERAL CONTRACTOR:			CONTACT'S NAME:
	CITY OF FERNLEY BUSINESS LIC. NO.:		NV CONTRACTOR LIC. NO.:	CLASS:
	ADDRESS:			BUILDING OR SUITE NO.:
	CITY:		STATE:	ZIP CODE:
	PHONE NO.:	CELL NO.:	FAX NO.:	EMAIL:
	ELECTRICAL CONTRACTOR:			CONTACT'S NAME:
	CITY OF FERNLEY BUSINESS LIC. NO.:		NV CONTRACTOR LIC. NO.:	CLASS:
	ADDRESS:			BUILDING OR SUITE NO.:
	CITY:		STATE:	ZIP CODE:
	PHONE NO.:	CELL NO.:	FAX NO.:	EMAIL:
	MECHANICAL CONTRACTOR:			CONTACT'S NAME:
	CITY OF FERNLEY BUSINESS LIC. NO.:		NV CONTRACTOR LIC. NO.:	CLASS:
	ADDRESS:			BUILDING OR SUITE NO.:
	CITY:		STATE:	ZIP CODE:
	PHONE NO.:	CELL NO.:	FAX NO.:	EMAIL:
	PLUMBING CONTRACTOR:			CONTACT'S NAME:
	CITY OF FERNLEY BUSINESS LIC. NO.:		NV CONTRACTOR LIC. NO.:	CLASS:
ADDRESS:			BUILDING OR SUITE NO.:	
CITY:		STATE:	ZIP CODE:	
PHONE NO.:	CELL NO.:	FAX NO.:	EMAIL:	

I understand and agree that the City of Fernley has no obligation to explain every requirement and ordinance to me prior to or during the course of this project. Furthermore, I understand that any and all City or State laws or ordinances are enforceable at any time, with or without prior notification. The issuance of a permit based on plans, specifications and other construction documents shall not prevent the Building Official from thereafter requiring the corrections of errors in said plans, specifications and other construction documents, or preventing building operations be carried on there under when in violation of City or State laws or ordinances. The Building Official is authorized to suspend or revoke a permit issued under the provisions of the code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation of the provisions of the code.

It shall be the duty of the permit holder or their agent to notify the Building Official that permitted work is ready for an inspection. Requesting an inspection for work that is incomplete, in progress or not ready may result in a reinspection fee. It shall be the duty of the person requesting any inspections required by the code to provide access to and means for inspection of such work. Inspectors will not perform inspections in the presence of any unrestrained animals or in the presence of minors without a parent or legal guardian present. Work shall not be done beyond the point indicated in each successive inspection without first obtaining the approval of the Building Official. Any portion of work shall not be covered or

concealed until authorized by the Building Official. The building permit, approved plans and inspection card shall be kept on the site of the work until the completion of the project.

The Building Official shall suspend or revoke a certificate of occupancy issued under the provisions of the code wherever the certificate is issued in error, or on the basis of incorrect information supplied, or where it is determined that the building or structure or portion thereof is in violation of any ordinance or regulation or any of the provisions of the code

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the applicable ordinances. I further certify that all easements, deed restrictions, or other encumbrances restricting the use of the property are shown on the site plans submitted with this application. I have been given authorization from the property owner to obtain this permit. I realize that the information that I have affirmed hereon forms a basis for the issuance of the permit herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any applicable ordinance or to excuse the owner or his or her successors in title from complying therewith.

I understand that by applying for this permit, I am consenting to the inspection of this property and to the entry onto the property by inspectors of the authority having jurisdiction for the purpose of performing the necessary inspections during normal business hours for the duration of the permit.

_____ I certify that I am a licensed contractor pursuant to NRS 624.
(Initial)

_____ I certify that I am an owner-builder pursuant to the provisions of NRS 278.573.
(Initial)

Signature Date

Print Name Title (architect, contractor, etc.)

DEMOLITION REQUIREMENTS

Service connections shall be disconnected and capped

Owner of property: _____ Date: _____

Public Works: _____ Date: _____

NV Energy: _____ Date: _____

SWG: _____ Date: _____

1. Asbestos Abatement Report.
2. Construction documents and a schedule for demolition must be submitted, specify on a plot plan all buildings to be demolished, specify dimensions from property lines to proposed demolished buildings, specify dimensions from proposed demolished building to existing buildings.
3. Where a structure has been demolished or removed, the vacant lot shall be filled and maintained to the existing grade.
4. Provisions shall be made to prevent the accumulation of water or damage to any foundations on the premises or the adjoining property.
5. Adjoining public and private property shall be protected from damage during demolition.
6. Construction materials and equipment shall not be placed or stored so as to obstruct any access to public or private property or fire hydrant.
7. A fire extinguisher shall be on the job site.
8. A water supply shall be on the job site for dust control, and fire protection.
9. Sanitary facilities shall be provided during demolition.
10. Pedestrians shall be protected during demolition.
11. Water service shall be turned off and sewer capped, gas service shall be turned off and capped, electrical service shall be de-energized.
12. Total valuation of proposed work submitted.

Structures affected by fire damages shall require at the minimum upon submittal

1. Floor plan specifying areas to be demolished and repaired.
2. Itemized list of material replacement.
3. Asbestos abatement report.
4. Fire extinguisher shall be on job site.
5. Sanitary facilities shall be provided up to completion of job.
6. Total valuation of proposed work.
7. Signature required from owner.
8. Approved trash receptacle provided.

Contractor Signature: _____

Date: _____