



COUNTY OF RANDOLPH
Department of Building Inspections
204 E Academy St • Asheboro, NC 27204-0771

DEMOLITION PERMIT APPLICATION

Date: _____
Parcel number: _____
Application number: _____

Job contact name: _____
Job contact phone number: _____
Job contact e-mail: _____

Owner: _____
Address: _____
City, ST ZIP: _____

LOCATION INFORMATION:

Address of work site: _____

CONTRACTOR INFORMATION:

Contractor: _____ License number: _____
Phone number: _____

BUILDING INFORMATION:

Type of Use (select one): _____
Reason for Demolition: _____
Are all utilities (electric, gas, water, sewer, etc.) disconnected from the structure?: _____
Was there an asbestos testing agency? If yes, attach testing report. _____
Name of certified landfill where debris is going: _____

Attach HCCS (Health Hazard Control Unit) permit if asbestos amount is over 160 square feet, 35 cubic feet or 260 linear feet.

DESCRIPTION OF WORK/ COMMENTS: _____

Authorized County Official

Signature of Contractor or Owner

***** See Demolition Renovation requirements brochure. *****

Any disagreement with a decision made by a Building Safety Official may be brought before the Director of Building Inspections for review. You can schedule an informal internal review at (336) 318-6595.

LOCAL TELEPHONE NUMBER
Asheboro: (336) 318-6565
<http://www.randolphcountync.gov>