

APPLICATION FOR DEMOLITION OR MOVING OF STRUCTURES
CITY OF MOUNTAIN HOME
720 SOUTH HICKORY STREET
MOUNTAIN HOME, ARKANSAS 72653

PROPERTY OWNER _____ DATE _____

APPLICANT _____

ADDRESS OF STRUCTURE _____

DEMOLITION OF STRUCTURE _____

MOVING OF STRUCTURE _____

AT THE TIME WATER AND SEWER IS DISCONNECTED FROM THE STRUCTURE, AN INSPECTION MUST BE MADE BY THE PLUMBING INSPECTOR.

UPON THIS PERMIT BEING ISSUED, I HEREBY AGREE TO CONTACT THE PLUMBING INSPECTOR FOR AN INSPECTION OF THE WATER AND SEWER DISCONNECT.

APPLICANT

SPACE BELOW TO BE COMPLETED BY CITY OFFICIAL

PERMIT APPROVED AND ISSUED BY _____

DATE _____ COST OF PERMIT _____

REMARKS: _____
