



**TAOS COUNTY
PLANNING DEPARTMENT
105 ALBRIGHT STREET SUITE H.
TAOS, NM 87571
(575) 737-6440 FAX (575) 737-6449
APPLICATION FOR DEMOLITION PERMIT**



OFFICE USE ONLY

Date Issued	Approved By	FEE: \$ _____	Type of Const.	Occupancy	Building Permit No.
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SECTION I

Please check the permit you are applying for: Licensed Contractor Permit or Homeowner Permit

Contractor Company Name: _____ License expiration date: _____

APPLICANT NAME: _____ State License #: _____

MAILING ADDRESS: _____ Main Phone #: _____

_____ Alt. Phone #: _____

City, State, Zip

SECTION II

PROPERTY OWNER: _____ Phone # (h): _____

MAILING ADDRESS: _____ Phone # (w): _____

_____ Phone # (c): _____

City, State, Zip

SECTION III

PHYSICAL ADDRESS/LOCATION: _____
(Must have a house or street number assigned by the Taos County Planning Department)

Directions to Building Site _____

CONSTRUCTION MATERIAL: _____ **VALUATION OF PROJECT:**
\$ _____

Owner Number _____ Property Code Number _____ Community _____

Subdivision _____ Lot No. _____ Block No. _____

Township _____ Range _____ Section _____

PROJECT TYPE: Residential Commercial Garage Shed Other _____

For commercial projects, state the name of the business: _____

PROJECT FLOOR AREAS (IN SQUARE FEET): Heated Area Porches Basement Carport
 Garage Storage Other (Explain) _____

DISCONNECT DATE FOR UTILITIES: GAS: _____ ELECTRICITY: _____ OTHER: _____

TOWN OF TAOS LAND FILL APPROVAL: _____

DOES ASBESTOS EXIST WITHIN THE BUILDING? YES NO
If yes, a letter from the State of NM Environment Department must be submitted stating how it will be removed.

CERTIFICATION

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of codes and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

FILING OF THIS APPLICATION SHALL NOT IMPLY OR DEEM APPROVAL OF SAID APPLICATION

PRINT NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____

I, _____ will be demolishing a structure at _____
Owner Physical Address

and will be disposing of the material at the Town of Taos Land fill. I will return a copy of the receipt from the Land Fill to the Taos County Planning Department upon completion.

Owner Name

Owner Signature

Notary Public Seal

Sworn to before me this _____ day of _____ 20____.

Signed: _____ My commission expires: _____

REQUIRED SUBMITTALS:

- Completed Taos County Demolition Permit Application with original signatures
- Report from the New Mexico Environment Department for asbestos remediation
- Copy of warranty deed
- Copy of Tax Information Sheet from Taos County Assessor’s Office
- Pictures of structure to be demolished
- Signature from Town of Taos Public Works Department for Land Fill Approval