



District of Port Hardy
Building & Licensing Services

7360 Columbia St., PO Box 68 Port Hardy, BC V0N 2P0
 Tel. (250) 949-6665 Fax: (250) 949-7433

Demolition Permit Application

DAMAGE DEPOSIT REQUIRED FOR ALL DEMOLITION

Description of Property DATE: _____ ROLL NO. _____ PERMIT # _____

Civic Address _____ PID _____

Legal Lot(s) _____ Block _____ Section _____ Dist _____ Plan _____

Was the structure built prior to 1990? _____ Yes _____ No

Contacts

Owner

Name		Company	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	

**Applicant –
 if different
 from owner)**

Name		Company	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	

Contractor

Name		Company	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	
Description of Work:			

Services to be disconnected: Please provide letters from each service provider(s) indicated as being presently on site to confirm the disconnection of service with this application.

<input type="checkbox"/> Water	<input type="checkbox"/> Oil	<input type="checkbox"/> BC Hydro	<input type="checkbox"/> Storm & Sewer /Septic
Evidence demolition waste removed to appropriate site (receipt) required for return of damage deposit.			

If the building was built pre-1990 a Hazmat Report is required before a Demolition Application can proceed.

Please note: before an application can be accepted the following documents must be presented with this application.

- A completed application form
- Letter of confirmation from service providers
- Title Search (Can be done by the District for the prescribed fee)
- Application Fee in the form of Cash, Cheque, Debit, Mastercard or Visa

WHEN THE DEMOLITION IS COMPLETE PLEASE CALL TO BOOK A FINAL INSPECTION AT 250-949-6665

Owner's Signature: _____
Print name Signature

OFFICE USE ONLY:

Application Approved	
Building Inspector: _____	_____
Print name	Signature
Date: _____	
<hr/>	
Operational Services: _____	_____
Print name	Signature
Date: _____	
<hr/>	
Planning Dept: _____	_____
Print name	Signature
Date: _____	
<hr/>	
Finance Review: _____	_____
Print name	Signature
Date: _____	

Cost of Permit	\$
Damage Deposit	\$
Total Due	\$

Copies to: Building Inspection, Property File