



DEMO / REMOVAL PERMIT APPLICATION

Crook County Community Development

300 NE 3rd Street, Room 12 Prineville, OR 97754

Phone: (541) 447-3211

E-mail: bld@crookcountyor.gov

Applicants must adhere to the following statements:

Contact the local “LOCATE” service by calling 811 [PRIOR](#) to digging or removing any structures!

1. The “Owners” signature is required on the application or a signed “Authorization Form” that allows your agent to submit this application on your behalf.
2. Ensure you are aware of the location of any well, water, sewer / septic, power, or gas lines.
3. A “Demo” permit does [NOT](#) authorize the re-construction of any structure.
4. If re-construction is a part of your project, [DO NOT](#) begin demolition until you have received land use approval from the appropriate jurisdiction:
 - If the property is located [within](#) the City limits of Prineville, contact: **City of Prineville Planning Department:** 387 NE 3rd Street, Prineville OR 97754, Phone (541) 447-2367
 - If the property is located [outside](#) the city limits of Prineville, contact: **Crook County Community Development Department:** 300 NE 3rd Street, Room 12 Prineville, OR 97754, Phone (541) 447-3211
5. Once you’ve received your “approval” from the appropriate jurisdiction, you are ready to submit your [Demo / Removal Permit Application](#) to the **Crook County Community Development Department**.

IMPORTANT: Contact the Crook County **Assessor’s** Office to obtain the necessary forms and/or trip permits. This assists the Assessor’s Office with removing the improvement from your property tax rolls. Phone: (541) 447-4133

IMPORTANT: Per CCC 18.132 – Manufactured & Mobile Homes - the manufactured dwelling shall be used solely for the purpose of a residential dwelling. **Use of a manufactured dwelling for storage is [PROHIBITED](#).** **Initial**

INSPECTION DETAILS

IMPORTANT INFORMATION: There is only one inspection allowed to verify the structure has been removed from the property and all safety guidelines have been followed. If your inspection is denied, you may be charged a reinspection fee and another inspection is required. So please, before calling in for the [FINAL DEMOLITION](#) inspection, ensure you are ready.

Sequence of events for demo permit final inspection:

1. All lines need to be disconnected and capped off: sewer, water, natural gas, propane lines.
2. Electrical Safety: The electrical service panel can remain, but no wires can be exposed from the bottom of the service panel.
3. Structure completely removed.
4. All debris from the demo/removal area must be cleaned up / removed.

SIGNATURE

By signing below, I / We understand the above statements. I understand it is my responsibility to follow all DEQ requirements for removal and disposal of hazardous materials from structures built prior to January 1, 2004.

Contact DEQ at (503) 378-5086 for additional information.

Owner/Agent Signature: _____

Print Name Clearly: _____

Email: _____ **Date:** _____



DEMO / REMOVAL PERMIT APPLICATION

Crook County Community Development
 300 NE 3rd St. Room 12, Prineville OR 97754
 Phone: (541) 447-3211 Fax: (541) 416-2139
 Email: bld@crookcountyor.gov

Date Received:

Initials:

This permit application expires if a permit is not purchased within 180 days after it has been accepted as completed.

DISCRIPTION OF WORK	
Description of structure:	
Demo start date:	Demo completion date:
Reason for demolition?	
Building height:	# of stories:
Square footage of structure:	# of plumbing fixtures:
How will the structure be demolished?	
Method of transporting demolished material:	
Name of disposal site:	
List all known hazardous materials present (Example: Lead paint, asbestos, Underground tanks, etc.):	
JOBSITE INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP:	
Suite/bldg./apt. no.:	
Tax/map parcel no:	
PROPERTY OWNER	
Name:	
Mailing Address:	
City/State/ZIP:	
Phone:	
E-mail:	
APPLICANT	
Name:	
Mailing Address:	
City/State/ZIP:	
Phone:	
E-mail:	
Signature:	Date:
CONTRACTOR	
Business name:	
Mailing Address:	
City/State/ZIP:	
Phone:	CCB Lic#:
E-mail:	

WATER
<input type="checkbox"/> City Water <input type="checkbox"/> Individual/Shared Well <input type="checkbox"/> Other (Specify):
<input type="checkbox"/> No Connection
WATER METER
<input type="checkbox"/> Retain Water meter <input type="checkbox"/> Pull Water Meter
SANITARY SYSTEM
<input type="checkbox"/> City Sewer <input type="checkbox"/> Septic System <input type="checkbox"/> No Connection
ONSITE SEPTIC SYSTEM
Check the appropriate box below:
The tank will be pumped by a licensed sewage disposal service to remove all septage; and the tank will be:
<input type="checkbox"/> Filled with reject sand, bar run gravel, or other material. If other, list material(s): _____
<input type="checkbox"/> Removed and properly disposed of. Location of disposal: _____
CITY SERVICES
Contact the Public Works Dept. at (541) 416-7844. 1233 NW Lamonta Rd, Prineville, OR 97754
As a staff member for Public Works, I am aware the applicant has applied for a demolition application.
Name: _____
Phone #: _____ Date: _____
Signature: _____
Comments: _____
POWER
<input type="checkbox"/> Electricity <input type="checkbox"/> Solar <input type="checkbox"/> Generator <input type="checkbox"/> Other (Specify):
<input type="checkbox"/> No Connection
GAS
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> No Connection
HISTORICAL STRUCTURES
Is the structure designated as historic or within a designated historic district? <input type="checkbox"/> Yes, Planning sign off is required <input type="checkbox"/> No
PLANNING SIGN OFF
By Signing below, the Planning Department that has jurisdiction is aware of the decommissioning of the mentioned Historical Structure.
Name: _____
Phone #: _____ Date: _____
Signature: _____
Comments: _____