

JONES COUNTY PLANNING & ZONING
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Date:_____
Map/Parcel #:_____
Zone:_____
Permit #: _____

Demolition Permit Application

Applicant's Name: _____

Phone Number: _____

Name of Property Owner: _____

Demolition Site Address: _____ City:_____ State: _____Zip:_____

Subdivision Name (if applicable): _____

Lot #:_____ Lot Size:_____

Type of structure to be demolished:_____

If structure is a mobile home, provide the following:

Make:_____ Year:_____ Size:_____Color:_____

VIN:_____, and recent tax bill receipt if available.

_____
Signature of Applicant