

**APPLICATION TO RAZE BUILDINGS  
VILLAGE OF SURING**

**Address/location of building:** \_\_\_\_\_

1. **Owner of building:** \_\_\_\_\_  
**Address of owner (if different than above):** \_\_\_\_\_

2. **Name of contractor performing demolition work:** \_\_\_\_\_  
\_\_\_\_\_  
**Contractor address / phone #:** \_\_\_\_\_

3. **Date which demolition will commence:** \_\_\_\_\_

4. **Date which demolition shall be complete:** \_\_\_\_\_

5. **List hazardous waste and hazardous/toxic substance as defined by  
NR 181.12 & 158.03(4), Wis. Adm. Code contained in building:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Does the building contain asbestos (as defined by Sec. 140.04(1)(a) Wis. Stats.?**

**Describe method used in removing, transporting & disposing of  
hazardous wastes and asbestos:** \_\_\_\_\_

\_\_\_\_\_

6. **Where will waste materials resulting from demolition be transported &  
disposed of?** \_\_\_\_\_

7. **Method of demolition:** \_\_\_\_\_

8. **Method to be used to prevent water runoff, soil erosion and prevention  
of unreasonable amount of dust from the site:** \_\_\_\_\_

\_\_\_\_\_

9. **Attach release from utilities stating their respective service connections &  
appurtenant equipment such as meters & regulators have been removed or  
sealed & plugged in a safe manner:** \_\_\_\_\_

10. **Review attached copy of Sec. 15-1-11 – Regulation & Permit for Razing  
Buildings – Village of Suring**

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**Reviewed and approved by** \_\_\_\_\_ **for Village of Suring, on**  
\_\_\_\_\_, 20\_\_.