

**MOVING/DEMOLITION APPLICATION
BUTTE-SILVER BOW
STATE OF MONTANA**

Signature of Applicant:		Address:		Application Date
LOCATION OF BUILDING (PRESENT)	Number & Street:			
	Subdivision:	Lot:	Block:	
LOCATION OF BUILDING (NEW)	Number & Street:			
	Subdivision:	Lot:	Block:	
IDENTIFICATION	Name	Mailing Address – City, State	Zip Code	Telephone

OWNER

CONTRACTOR

<p>INFORMATION: Type of Construction: <input type="checkbox"/> Wood Frame <input type="checkbox"/> Masonry (Wall bearing) <input type="checkbox"/> Structural Steel <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Wallframe (brick veneer) <input type="checkbox"/> Other.....</p>	<p>Dimensions: Number of Stories and height Building Depth..... Building Width Basement Yes..... No..... Square Feet</p>	<p>Type of Occupancy: Fees: Based on Square Feet Total</p>
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Beginning Date of Moving/Demolition (circle)

Estimate Time of Completion

If Moving – Time of Day

If Demolition – All Wood to be removed and excavation back filled to grade
(Must have final approval from Inspector)

Specific Route of Moving

DO NOT WRITE BELOW THIS SPACE

Approved By: _____ Permit Fee: _____ Date Permit Issued _____ Permit No. _____