City of Chilton • 42 School St. • Chilton, WI 53014
Telephone: (920)849-2451
Fax: (920)849-2025
Website: www.chilton.govoffice.com

WRECKING PERMIT APPLICATION

(Wrecking permit used for demolition or removal)

$25.00 Application Fee (Non-Refundable) Receipt No._____

Application No._____ Parcel ID No._____

_____
Property Owner's Name Mailing Address Phone

_____
Contractor's Name Mailing Address Phone

The above named property owner requests a wrecking permit for removal of the following structure from the property:

☐ Shed ☐ House

☐ Garage ☐ Other Structure:_____

PROJECT LOCATION:
Location of Structure: _____
If the building to be removed is serviced by sanitary sewer an inspection of the abandonment must be done. Call 849-2451 to schedule an inspection.

Date To Begin Razing: _____ Date To Be Completed:_____

Reason For Razing: _____
(Address)

PROPERTY OWNER MUST CALL CITY HALL AT 849-2451 TO SCHEDULE AN INSPECTION OF THE DEMOLITION OR REMOVAL PROJECT WHEN COMPLETED. STRUCTURE WILL NOT BE REMOVED FROM YOUR PROPERTY TAX BILL UNTIL AN INSPECTION IS MADE.

_____ _____
(Property Owner's Signature) (Date)

Conditionally Approved By City of Chilton:

_____ Date_____
Building Inspector

_____ Date_____
Director of Public Works

Note: If DNR Permit(s) are required, indicate date obtained:_____

REV 6-20-2014