		LIBERTY	
Date:		P	Permit No:
	City of Liberty Comr	munity Development Department	:
Dharas		ion Permit Application	
Phone:	936-336-3684 Fax: 936-3	336-9846 Email: <u>permits@cityof</u>	<u>liberty.org</u>
Demolition	_ Residential	Commercial	Other
Job Location:			
Subdivision:		Block No.	Lot No
Or Legal Description:			
Owner Name: Owner Phone:			
Contractor Name:			
		Mobile Phone:	
Structure Set Backs: Fr	ont: Side:	Side: Back:	
Residential:S	quare feet Comm	ercial:Square Feet	No. Stories:
		ood Steel Conc	
Description of work to be	done:		
			completedays
		ations Code 1954.259 an asbestos su urvey been completed? Yes	
-		city staff prior to the issuance of a de	
		ed this application and filled all inform compliance with the 2021 Internation	
-	-	ordinances and laws adopted by the	
		authorized agent is not responsible of	
-		nomeowner association requirement	
		issuance hereof. I, as the authorized	-
allow the City Manager or	his authorized agent access t	to perform inspections during norma	l working hours.
	Thisday of		,
	Applicant Signature: _		
	A		and the substance of the substance of the
Date of Approval:	Approved by:	Demolition Pe	rmits are issued at no charge Updated 01/03/2024