

A SEWER CAP PERMIT SHALL BE OBTAINED FROM PUBLIC SERVICE PRIOR TO APPLICATION

CITY OF LANSING BUILDING SAFETY OFFICE 316 N. CAPITOL AVE SUITE C-1 LANSING, MI 48933-1238 517-483-4355

Pe	ermit #
Total Fee:	

DEMOLITION PERMIT APPLICATION

DATE:		
DEMOLITION ADDRESS:		
DEMOLITION REQUESTED BY:		
APPLICANT NAME:		
APPLICANT ADDRESS:		
PROPERTY OWNER:	DAY/PHONE ()	
PROPERTY OWNERS ADDRESS:		
Consumer's Power letter provided? Date:		
Board of Water & Light letter provided? Date:		
Building Use:	Number of Stories:	_
Intended Use of Property:		
 Erection of new structures and providing new and/or permits from the City of Lansing. Sewer <u>must</u> be inspected by Public Service De Work to be done under this permit <u>must</u> con other applicable laws and ordinances. APPLICANT SIGNATURE	epartment before capping. (517) 483-4455 Inply with the requirements of the Building Cod	e and all
For Offi	ice Use Only	
Zoning Signature:	Date:	
Comments:		
Director Signature (or authorized representative)	Date:	
Building Office Approval:	Date:	

The City of Lansing has adopted a local income tax that requires residents to pay a 1% income tax and non-residents performing work in the city pay 0.5% income tax. Any employees or contractors paid for labor performed in connection with this permit is taxable income. Failure to withhold or pay income tax is a criminal misdemeanor.