



**BUILDING DIVISION**

Community Development Department, 1776 Independence Lane, Maitland, FL 32751  
Phone (407) 539-6248 FAX (407) 539-6275 www.itsmymaitland.com

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**Demolition Permit Application**

**All permit application packages must be complete prior to acceptance.**

**A complete demo application package shall include the following:**

1) Disconnect letters/sign offs from the following:

- Water - Maitland Utility Department 407-539-6252
- Sewer - Maitland Utility Department 407-539-6252
- Stormwater - Maitland Public Works 407-539-6203
- Tree Protection - Maitland City Landscape Specialist 407-539-6245
- Septic Tank Abandonment permit (if applicable) issued by Orange County Health Department, 407-858-1497
- Electric Company – Duke Energy 407-629-1010
- Gas (if applicable)
- Phone
- Cable

2) Rodent control certificate by a pest control operator certified by the State of Florida to eradicate rodents.

3) Asbestos clearance documentation (if applicable) State Asbestos Coordinator 850-488-1344

4) There must be a double silt fence installed prior to demolition

**Note: Demolition permit application does not include tree and vegetation removal within the demolition area. You will need to contact Public Works Department at 407-539-6252, located at 1827 Fennell Street to obtain tree/vegetation removal permit.**

**City of Maitland - Community Development**  
 Building Safety & Code Compliance Division

**CERTIFICATION OF SERVICE DISCONNECT**

Building Structure to be demolished: Residential  Commercial  Other

Site Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Description of work: \_\_\_\_\_

**The firms and offices listed below shall certify this application to signify notice of the proposed demolition and to attest that their respective service connections, etc. will be removed or sealed and plugged in a safe manner before any demolition is initiated.**

UTILITY	PRINT NAME	SIGNATURE	DATE
Water Department			
Sewer Department			
Stormwater Dept			
Landscape Specialist			
Electric Company			
Gas Company			
Phone Company			
Cable Company			
Other			

**City of Maitland - Community Development**

Building Safety & Code Compliance Division

Phone: 407-539-6248

1776 Independence Lane Maitland, FL 32751

Fax: 407-539-6275

**DEMO PERMIT APPLICATION**

Date Rec'd: \_\_\_\_\_ Rec'd by: \_\_\_\_\_ Permit#: \_\_\_\_\_

Job Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Description of work: \_\_\_\_\_

**Contractor Information:**

Business Name: \_\_\_\_\_ Address: \_\_\_\_\_

Qualifier Name: \_\_\_\_\_ State License Number: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in the jurisdiction. I understand that a separate permit must be secured for ELECTRICAL, PLUMBING, SIGNS, WEELS, POOLS, HEATERS, TANKS, AIR CONDITIONERS, etc.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. ANOTICE MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Signature of Contractor

\_\_\_\_\_  
Printed Name of Owner or Agent

\_\_\_\_\_  
Printed Name of Contractor

STATE OF FLORIDA, COUNTY OF ORANGE, Sworn to  
Sworn to (or affirmed) and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

STATE OF FLORIDA, COUNTY OF ORANGE,  
(or affirmed) and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Personally Known \_\_\_\_\_ or Produced ID \_\_\_\_\_

Personally Known \_\_\_\_\_ or Produced ID \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Notary Public Signature

My Commission Expires: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_