DEFIANCE COUNTY COMMISSIONERS' COUNTY DEMOLITION PROGRAM
REQUEST FOR DEMOLITION PROJECT

PROPERTY ADDRESS: _____

PROPERTY OWNER: _____

PROPERTY OWNER'S MAILING ADDRESS: _____

_____

PROPERTY OWNER'S TELEPHONE NUMBER: _____

PROPERTY OWNER'S EMAIL ADDRESS: _____

PROJECT SUMMARY:

Is the property: ☐ Vacant ☐ Blighted ☐ Abandoned

Current use of property: ☐ Agricultural ☐ Residential

Does the property contain a well? ☐ Yes ☐ No ☐ Unknown **If yes, must be abandoned, or written permission obtained from the Defiance County Health Department to retain. If yes, please provide a map with the approximate location of the well.*

Does the property contain a septic system? ☐ Yes ☐ No ☐ Unknown **If yes, must be abandoned, or written permission obtained from the Defiance County Health Department to retain. If yes, please provide a map with the approximate location of the well.*

Number and types of buildings requested to demolish: _____

_____

Is there additional cleanup necessary on the property (i.e. rubbish, brush, trees, etc.)

☐ Yes ☐ No ** Removal of any items listed as hazardous materials and/or are unable to be accepted by the Defiance County Landfill will be the sole responsibility of the landowner (other than asbestos through the EPA's asbestos remediation process.* If yes, please provide details: _____

_____

Reason requesting assistance with demolition of property:_____

_____

_____

Is the Property Owner able to contribute financially to the costs of demolition and cleanup of the entire property? ☐ Yes ☐ No

Are there any unpaid real estate taxes owed for the property? ☐ Yes ☐ No**If Yes, proof of payment must be received prior to project approval by the Commissioners.*

Are there any liens or loans against the property? ☐ Yes ☐ No **If yes, proof of payment or letter of demolition approval from lienholder must be received.*

Application **MUST** include:

- ☐ Location Map
- ☐ Pictures of all sides of the property, including details of requested demolition/cleanup
- ☐ Owner's Consent for Demolition