**DEMOLITION APPLICATION OWNER STATEMENT**

I (We) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, state that I (We) own the property at

#  NAME(S)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, for which a demolition permit application is

STREET ADDRESS

being made to The City Powell Building Department.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, is acting as my (our) agent and will demolish

NAME OF DEMOLITION CONTRACTOR

the structure on the property with my (our) approval and permission after the demolition permit is

issued.

# ***WAIVER OF LIABILITY***

To the fullest extent permitted by law, I agree to, and my demolition contractor agree to defend, pay on behalf of, indemnify and hold the City harmless from any and all claims, demands, suits, or loss, including all costs associated therewith, and for any damages that may be asserted, claimed or recovered against or from the City by reason of personal injury, death and damage to property of third parties, which arise out of or are in any way connected to Applicant’s permit.

|  |  |
| --- | --- |
| Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | Signature of property owner(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | Signature of Demolition Contractor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  ***SANITARY SEWER INFORMATION***  |  |  |
| The sanitary sewer has been properly disconnected and capped.  |   | \_\_\_\_\_\_\_\_\_\_\_  |
|  ***UTILITY DISCONNECTION***  |   |  *INITIAL HERE*  |
| All utilities have been properly disconnected to the above property.  |   | \_\_\_\_\_\_\_\_\_\_\_  |
|  ***HAZARDOUS MATERIALS***  |   |  *INITIAL HERE*  |
| All Hazardous materials have been properly handled and removed in accordance | \_\_\_\_\_\_\_\_\_\_\_  |
| with Section 3745.20 of the Ohio Administrative Code. (Commercial only)  | *INITIAL HERE*  |

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