



**DEMO**

DECLARATION CONCERNING TENANCY OF BUILDING  
PRIOR TO ISSURANCE OF A DEMOLITION PERMIT

**Service Address for Demolition/Remodeling**

Street # \_\_\_\_\_ Street Name \_\_\_\_\_

Palo Alto Municipal code 16.04.060 section 105.1.3 provides no work or demolition shall begin upon any portion of such a unit until each and every portion has been vacated by all tenants lawfully in possession thereof.

I \_\_\_\_\_ hereby declare that I am the owner, or owner’s agent, of the premises located at the service address listed above. **I also declare the building located at the service address listed above, for which a demolition permit is requested, is not currently occupied or presently being used for residential purposes.**

Said Premise Consists of \_\_\_\_\_ number of buildings

I will not use not use any demolition permit issued to aid in securing vacation of said premise. I certify under penalty or perjury that the foregoing is true and correct.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

City of Palo Alto Utilities, Customer Service Center 250 Hamilton Ave., Ground Floor, Palo Alto, CA 94301  
Tel. 650 329-2161 Fax. 650-321-2786 Hours Mon – Thur 7:30 am to 5:30 pm Friday 8:00 to 5:00 pm  
Email: [UtilitiesCustomerService@cityofpaloalto.org](mailto:UtilitiesCustomerService@cityofpaloalto.org) Web: <http://www.cityofpaloalto.org/depts/utl/default.asp>

## Utilities Disconnection Prior To Building Demolition/Remodeling

Service Address \_\_\_\_\_

All addresses on the property being demolished need to be listed. A separate Demo application is required for each address.

Single Family Dwelling     
  Multi Family Dwelling     
  Commercial Building

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_

Owner Name \_\_\_\_\_ Phone \_\_\_\_\_

Billing Address \_\_\_\_\_

Email Address \_\_\_\_\_

**Services Requested for Removal (Check all applicable boxes)**

<input type="checkbox"/> Remove Electric Meter # _____ <input type="checkbox"/> Remove Gas Meter # _____ <input type="checkbox"/> Remove Water Meter # _____	<input type="checkbox"/> Remove Electric Service Line <input type="checkbox"/> Remove Gas Service Line
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**Utilities will be disconnected and/or removed within 1 and 10 working days after receipt of a completed application. Exact times and/or dates cannot be scheduled.**

**If utilities are to be reinstalled, a connection fee will be charged per current utility rate schedule.**

\_\_\_\_\_  
Signature (Applicant)

\_\_\_\_\_  
Date

**General Information**

Will there be multiple or new address(s) when construction is complete?    Yes            No

Will you need temporary power during construction?                            Yes            No

Have you applied for a building permit?    Yes            No

Will the foundation be removed?    Yes            No

What is the purposed property use after demolition? (Example: single family home, restaurant)

\_\_\_\_\_