

PLANNING & DEVELOPMENT

600 West Fourth Street
Davenport, Iowa 52801
Office: (563) 326-8643
Fax: (563) 326-8257
Email: planning@scottcountyiowa.gov

Demolition
Permit Application
for Unincorporated Scott County



Owner Information

General Contractor Information

Name: _____

Name: _____

Address: _____

Address: _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Phone: _____

Phone: _____

Email: _____

Email: _____

**Please indicate preferred contact for payment,
permit inquiries, and inspections:

Owner

General Contractor

*Permit Fee for demolition is \$50. All well
capping and septic abandonment requires
approval from the Scott County Health
Department.*

Property Information of Job Site

Job Site Address: _____ City _____ State _____ Zip _____

I hereby acknowledge that I have read this application and state that the above is true and correct to the best of my knowledge and belief. I agree to comply with all applicable County Ordinances or City Ordinances and all State Laws regulating Building Construction. If any information provided is incorrect, the building permit may be revoked.

Applicant Signature:

Date: ____ / ____ / _____