

OFFICE USE ONLY: Paid on _____ / _____ / _____ by Cash Check # _____ CC Amount \$ _____ Sc Ex QB

**TOWN OF TRENTON
RAZE ORDER WAIVER**



Town of Trenton
1071 Highway 33
West Bend, WI 53095

**RAZE ORDER
PERMIT NUMBER**

***** PLEASE NOTE THAT CONTACT PHONE NUMBERS FOR BOTH OWNER AND CONTRACTOR ARE REQUIRED*****

DATE _____ OWNER _____ PHONE _____

ADDRESS _____ EMAIL _____

PROJECT ADDRESS _____ TAX KEY: T11 _____

CONTRACTOR _____ ADDRESS _____

CONTACT _____ PHONE _____ EMAIL _____

LICENSE/CERTIFICATION # _____ EXPIRATION _____

BUILDING BEING RAZED: _____

This form serves as a waiver and to inform the property owner, general contractor or their representative:

1. That all hazardous, toxic or obnoxious materials, including, but not limited to, lead and asbestos, be handled, removed, transported and disposed of per all local, state and federal regulations.
2. The water supply and the sanitary systems must also be protector or sealed per local, state and federal regulations.
3. All other utilities (gas, electric, etc..) must be disconnected per supplier's recommendations.

This waiver releases the inspectors and the municipality, Town of Trenton, of any liability involved in the razing of this property.

Contractor Signature: _____ Date: _____

Owner Signature: _____ Date: _____

Item	
Raze Order Permit Fee	\$ 50.00