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Demolition Permit Tahoe City Public Utility District

Issue Date: _____

Permit Number: _____

Property Location:	APN:		
Subdivision:	Unit/Lot:	🗌 Placer	🗌 El Dorado
APPLICANT	Phone		
Mailing Address	City/State/Zip		
PROPERTY OWNER	Phone		
Mailing Address	City/State/Zip		
CONTRACTOR	Phone		
Mailing Address	City/State/Zip		
California License #	License Expiration Date		
 Permanent Service Removal Teardown/Rebuild Temporary Sewer Disconnect Temporary Water Disconnect 	Sewer Service Domestic Water Service Fire Service Irrigation Service Other		
Temporary Construction Water This permit is issued for the demolition / remove	Other al of:		
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