

TOWN OF GROVER
RAZING PERMIT APPLICATION

Date: _____

Owner Name: _____

Address: _____

Phone Number: _____

Parcel Number: _____

Address of property where razing is taking place if different than home address:

Description of building(s) being razed: _____

If an improvement was destroyed by fire or natural disaster and is being replaced with another building, a building permit will be required.

Send application to:
Zoning Administrator
W5161 Town Hall Rd
Peshtigo WI 54157

Questions or need zoning information:
Zoning Administrator Kim Kittredge 920-829-6650 or groverzoning@yahoo.com