

Village of Birchwood  
PO BOX 6  
101 N. Main Street  
Birchwood, WI 54817



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# Village of Birchwood Raze/Move Building

## Owner Information

Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

I, \_\_\_\_\_ owner, hereby make application for permission to remove a building from the following premises:

Lot \_\_\_\_\_ Block \_\_\_\_\_ Addition \_\_\_\_\_

Parcel ID # \_\_\_\_\_ Address \_\_\_\_\_

Residential \_\_\_\_\_ Commercial: \_\_\_\_\_

Building Size: \_\_\_\_\_ Date of Razing: \_\_\_\_\_

Remarks:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### OFFICE USE ONLY

Date Received: \_\_\_\_\_ Permit # \_\_\_\_\_  
Date Paid: \_\_\_\_\_ Receipt # \_\_\_\_\_  
Reasoning (if applicable): \_\_\_\_\_ Permitted: Yes \_\_\_\_ No \_\_\_\_  
\_\_\_\_\_

**FEE SCHEDULE**  
Administration Fee: \$25.00  
Raze/Moving Fee: \$75.00

\_\_\_\_\_  
Building/Zoning Administrator Signature

\_\_\_\_\_  
Date