Demo Permit Application

Permit #:	
Date Received:	
Staff Initials:	

Property Location

E911 Address: _____

Tax Map Number: _____

What is currently on the property? _____

Directions to Property: _____

The applicant is the: ☐Owner ☐Agent for Owner/Lessee

Owner	**General Contractor**
Name:	Name:
Mailing Address:	Mailing Address:
Phone Number:	Phone Number:
Email (Optional):	Email (Optional):
	State Lic. #: Exp Date:

Application is made to demolish: _____

☐ Residential Structure -- Is this for commercial development? ☐ Yes ☐ No

☐ Commercial Structure

☐ Other -- Please describe: _____

Size of Structure: _____ Estimated cost of demo: _____

Structure to be demolished by: ☐ Tear Down ☐ Control Burn ☐ Other – Please describe: _____

Date of demolition: _____

Asbestos removal required: ☐ Yes ☐ No If yes, permit number: _____

Electrical released: ☐ Yes ☐ No ☐ N/A Date: _____ **(written confirmation required from SVEC)**

Water Source: ☐ Public ☐ Private ☐ N/A

Water/Sewer Lines disconnected: ☐ Yes ☐ No ☐ N/A Date: _____ **(if public, written confirmation required from town)**

Gas disconnected: ☐ Yes ☐ No ☐ N/A Date: _____

For the remaining utilities, you must contact the appropriate company that serves this property along with Miss Utility (811) to confirm disconnection of services/lines. By signing below, you are responsible for any issues that may arise.

Telephone Service: ☐ Yes ☐ No ☐ N/A Date: _____ Signature: _____

TV/Cable: ☐Yes ☐ No ☐ N/A Date: _____ Signature: _____

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct and that the demolition will conform to the regulations in the Uniform Statewide Building Code. I further understand that a site visit may be conducted by the Building Official prior to and after demolition of the structure.

_____ _____ _____

Applicant's Name (Printed) Applicant's Signature Date

OFFICE USE ONLY	
Total Fees: _____	Check #: _____ ☐ Debit ☐ Credit ☐ Cash