

CITY OF DERBY
Building Department
APPLICATION TO DEMOLISH
NOTHING CONTAINED IN THIS APPLICATION
CONSTITUTES AN APPROVAL TO CONSTRUCT

Please complete entire application and submit with ALL required information.

Owners name _____ Phone _____

Owners address _____

Address of structure to be demolished _____

Verification of taxes paid; Tax collector signature _____

Assessors Map _____ Block _____ Lot _____ Assessors signature _____

Demo contractor name _____ Phone _____

Address _____

Demo certificate number _____ Expiration date _____

GENERATOR PERMIT

Contact person for this application _____ Phone _____

Description and use of structure being demolished. _____

Type of construction _____

Estimated cost of demolition _____ Age of structure _____

Please include the following with your application.

- 1) Disconnect letter from ALL utilities, gas, water, electric, phone, cable, etc.
- 2) Proof of workers compensation insurance, and liability insurance.
- 3) Letter from company removing or accepting debris.
- 4) Copy of letter notifying adjoining property owners; please attach from post office certified or registered mail.
- 5) Copy of assessors' field card.
- 6) Verification of oil tank removal by tank removal company.

Is property located in Historic District: Yes _____ No _____?

If yes include certificate of appropriateness from Historic District.

It is the responsibility of both the applicant and property owner to comply with ALL aspects of section 6.4 entitled "Grading and Drainage," section 6.6 entitled "Import/Export of Earth Materials," and section 6.7 entitled "Erosion and Sediment Control" of the New Canaan Zoning Regulations as the result of any proposed demolition and/or construction activity at the subject property.

Are there any wetlands or watercourses located on site or visible in adjoining properties?
Yes _____ No _____ If yes E&S measures must be in place and approved before work can begin. Inland Wetlands Signature _____

We the undersigned agree to comply with all the restrictions and regulations set forth in sections 29-401 through 29-415 of The Connecticut General Statutes entitled "State Demolition Code"

Signature of owner _____ Date _____

Signature of demo contractor _____ Date _____

Do not write below this line, office use only.

Date of application _____

Permit No. _____ Permit issue date _____

Permit fee _____ Health Dept fee _____ Wetland Dept fee _____

Total Fee paid _____

Building Official Signature _____