THIS PAGE TO BE ATTACHED TO THE MAIN BUILDING PERMIT APPLICATION

| Application for Demolition of a structure |
|--|
| Dig Safe # Trench Permit No |
| TO THE BUILDING COMMISSIONER: The undersigned hereby applies for a permit to demolish the following: |
| Location of work site |
| Name of Owner |
| Owner's Address |
| Contractor |
| Contractor's Address |
| Describe briefly the type of building to be demolished |
| Is Asbestos present on site? (circle one) YES NO |
| Are there Oil tanks or similar storage tanks present on site? (circle one) |
| Will water service be reused (circle one) YES NO |
| Will sewer/septic be reused (circle one) YES NO |
| Signatures of authorized persons for utility companies and municipal departments |
| or attach verification from all utility companies that service has been properly disconnected |
| ASP Removal Co. Verizon |
| National Grid > Comcast |
| Eversource |
| Fire Department (508-485-2323) |
| Sewer Department |
| Water Department |
| ➢ Board of Health (508-460-3751) |
| Dust Control (BoH) |
| Rodent/Pest Control (BoH) |
| Note: A permit to demolish a building shall not be issued until a release is obtained from the utilities, stating that their respective service connections and appurtenant equipment, such as meters and regulators, have been removed or sealed and plugged in a safe manner. By entering my name below, I hereby attest under the pains and penalties of perjury that all of the information contained in this application is true & accurate to the best of my knowledge and understanding. |
| Print Owner's or Authorized Agent's name (PRINT) |

Signature of Owner or Authorized Agent _____ Date _____

For the described property the following action was taken and written confirmation of the utilities that apply for this property have been properly disconnected:

| Applicant circle below | | | Bldg. Dept Initials |
|------------------------|------------------------------|--------------------------------|---------------------|
| A. | Water shut off? Yes | No | Release obtained |
| B. | Sewer shut off?Yes | No | Release obtained |
| C. | Gas shut off? Yes | No | Release obtained |
| D. | Electrical shut off? Yes | No | Release obtained |
| E. | Telephone shut off? Yes | No | Release obtained |
| F. | Cable shut off?Yes | No | Release obtained |
| G. | Underground storage tanks (: | 527 CMR 11.5.1.10.5(4)) Yes No | - Release obtained |

ASBESTOS

All residential, commercial and institutional buildings are subject to Massachusetts Dept. Environmental Protection (MA DEP) asbestos regulations 310 CMR 7.15. Therefore, owners and/or operators (e.g. building owners, renovation and demolition contractor, plumbing & heating contractors, flooring contractors, etc.) need to determine all asbestos containing materials (both friable & non-friable) that are present at the site and whether or not those materials will be impacted by the proposed work prior to conducting any renovation or demolition activity.

The building has been investigated and/or evaluated for containing Asbestos. It has been determined that:

> NO Asbestos (friable or non-friable)is now present on site ______ initial

(print name and address of company that conducted the Asbestos survey – attach Survey results)

(print name and address of company that conducted the Asbestos Abatement – attach disposal ticket)

DISPOSAL AFFIDAVIT

In accordance with MGL c.40 ss.54 and Section 105.3.1(4) of 780 CMR, Massachusetts State Building Code (or R105.3.1(4). I hereby certify that all debris resulting from work associated at: ______ will be properly disposed of at:

Job location

Name

Address

which is a licensed solid waste disposal facility as defined by MGL c111 & 150A. If the debris will not be disposed of as indicated, the holder of the permit shall notify the building official, in writing, as to the name and location of the disposal facility being used.

Signed under the pains & penalties of perjury.

Date

Print Name of Applicant

Signature of Applicant

Demo Contractor's Firm Name

firm address

Permit number