

BUILDING DEPARTMENT
REQUIREMENTS FOR DEMOLITION
PERMIT

I. Date: _____

II. Site Data:

1. Location: _____

2. Type of Construction: _____

3. Age of Facility: _____

4. Prior Use: _____

5. Owner: _____

6. Owner's Address: _____

7. Owner's Phone: day () _____ evening () _____

III. Utilities Cut-Off: (Signature of Authorized Representative of Utility/Department required)

1. Gas Company: _____
(Name) (Title)

2. Electric Company: _____
(Name) (Title)

3. DPW Department: _____
(Name) (Title)

4. Sewer Dept: _____
(Name) (Title)

5. Health Dept: _____
(Name) (Title)

NOTE: As required by Massachusetts State Building Code, Article I. Section 116.0, a demolition permit will not be issued until release is obtained that the respective services have been removed.

IV. Mass. Dept. of Environmental Quality Engineering – Notification

Date Filed

1. Regulation 310 CMR 7.00
(Demolition of Industrial, Commercial,
Institutional Buildings, and 20+ unit
Residences)

2. Regulation 310 CMR 7.15
(Demolition of any facility containing
asbestos)

Building Inspector

Date Approved

Permit #

Permit Fee