



TOWN OF DURHAM
15 NEWMARKET RD
DURHAM, NH 03824-2898
603/868-8064 603/868-8065
FAX 603/868-8033
www.ci.durham.nh.us

Fee: \$50

DEMOLITION PERMIT APPLICATION

Permit Number _____

A Copy of the Completed/Submitted Required NHDES-Air Resources Division Asbestos Demolition/Renovation Notification Form (REVISED 11-10-03) must be attached to this Permit Application. An approved Demolition Permit signed by the Durham CEO must be obtained prior to beginning any work.

PROJECT LOCATION

_____ Zoning Dist. _____
(Street No. & Name)

Map Number _____ Lot Number _____ Lot Dimensions _____

OWNER IDENTIFICATION

Owner _____
(Name) (Address) (Phone #)

(E-mail Address) (Cell Phone #)

Agent Only _____
(Name) (Address) (Phone #)

(E-mail Address) (Cell Phone #)

Contractor _____
(Name) (Address) (Phone #)

(E-mail Address) (Cell Phone #)

TYPE OF USE

Residential: _____ One Family
 _____ Two or more Families _____ No. of Units
 _____ Hotel/Motel _____ No. of Units
 _____ Other, Specify _____

No. of Bedrooms _____ No. of Bathrooms: Full _____ Partial _____

Nonresidential: _____ Amusement
 _____ Church
 _____ Industrial
 _____ Parking Garage
 _____ Service Station/Repair Garage
 _____ Hospital
 _____ Office, Bank, Professional
 _____ School, Library, Etc.
 _____ Other, Please Specify _____

Describe in detail existing use of building _____
Square footage _____
Occupancy Load _____

COST OF DEMOLITION _____

BULKY WASTE DISPOSAL

Blacktop, roofing materials, sheet rock, wallboard, lumber, ceramic plumbing fixtures, plastics, insulation, concrete etc.
Total amount of debris to be disposed of _____ Cubic Yards

Have the following utilities been properly disconnected and their respective owners notified and inspections performed?:

	<u>Yes</u>	<u>No</u>
Town Water	_____	_____
Town Sewer	_____	_____
Private Well	_____	_____
Private Septic	_____	_____
Gas or Propane	_____	_____
Electric	_____	_____
Cable	_____	_____
Telephone	_____	_____
Alarms	_____	_____

If No to any, please explain:

CERTIFICATION

I hereby certify that I have read and examined this application and know the same to be true and correct. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating demolition or the performance of demolition.

No substantive change(s) in the project scope and accompanying plans will be made without approval of the Building Inspector.

I owner/applicant hereby agree to comply with all statutes, ordinances, codes, regulations and rules as they pertain to the exercising of this permit.

I owner/applicant hereby give permission for the Building Inspector and/or other Town employees to enter onto the property at reasonable times for purposes of assuring compliance with any permits and approvals pertaining to this demolition permit.

Signature of Contractor or Authorized Agent

Date

Signature of Owner

Date

PLEASE NOTE:

This permit becomes null and void if work or demolition authorized has not commenced within 180 days, or if demolition or work is suspended or abandoned for a period of 180 days at any time after work has commenced.

This permit is not assignable or transferable.