

# TOWN OF FLOYD

## OFFICE OF CODE ENFORCEMENT

### DEMOLITION PERMIT

#### APPLICATION INFORMATION

THIS PAGE, THE DEMOLITION UTILITY DISCONNECT FORM AND THE DEMOLITION CHECK LIST MUST BE COMPLETED IN THEIR ENTIRETY AND SUBMITTED AT TIME OF APPLICATION; ITEMS 1 THRU 4 ARE MANDATORY. ALLOW 7 TO 10 DAYS FOR PROCESSING.

Property Owners Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Property Owners Address \_\_\_\_\_ Work Phone \_\_\_\_\_

Property Address ( If different from above) \_\_\_\_\_

Tax Map Number \_\_\_\_\_ Date \_\_\_\_\_

( ) Self Demolition

( ) Contracted ( Furnish Contract)

Demolition Co. Name \_\_\_\_\_ Demo Co. Owner \_\_\_\_\_

Demolition Co. Address \_\_\_\_\_ Office Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

1. Structure to be Demolished (circle one) House Garage Shed Barn Other \_\_\_\_\_

2. Check either one below and furnish information required.

( ) If self demolished, estimated project cost \_\_\_\_\_

( ) If contracted, contracted cost \_\_\_\_\_

3. This property must be in the name of the person applying for the permit. Otherwise, a written , notarized document by the owner giving permission for the demolition of the structure must be provided.

4. Proof of Contractors New York State Workers Compensation and Liability Insurance is required. •

If self demolished, owner must fill out an affidavit of exemption.

Brief description or scope of project \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PERMIT FEE \$100 \_\_\_\_\_ Date Paid \_\_\_\_\_

**TOWN OF FLOYD  
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**DEMOLITION UTILITY DISCONNECT FORM**

ADDRESS \_\_\_\_\_

OWNER \_\_\_\_\_

CONTRACTOR \_\_\_\_\_

**I. GAS & ELECTRIC:** National Grid, Gas - Electric 1-800-642-4272

☐ The Gas and Electric Utilities have been properly disconnected

**II. WATER:** Town of Floyd Water Department 315-335-4953

**SEWER:** Plumbing Contractor of your choice.

☐ The services at the above address have been properly disconnected and inspected. Proper repairs have been made to all pavement, sidewalks and grass surfaces.

**III. EXTERMINATION: (if necessary)** Licensed Exterminator  
(as required)

☐ The building at above address has been properly exterminated

**IV. ASBESTOS:** Certified Asbestos Building Inspector

☐ The presence/absence of asbestos has been confirmed (provide copy of report) and proper disposal has taken place, A copy of the Asbestos Handling license is attached)

**NOTE:**

**A demolition permit cannot be issued until this form is completed, signed by the responsible Demolition Contractor or Owner and returned to the Office of Code Enforcement.**

I, as the responsible demolition Contractor/Owner, confirm the above items have been completed and all necessary documents are attached hereto.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

**V. Pre-demo meeting with Town of Floyd Officials**      Date \_\_\_\_\_

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**DEMOLITION CHECK LIST**

- ( ) Review demolition plans with Code Officials
- ( ) Asbestos survey/abatement requirements \*
- ( ) Site plan showing distance to property lines and adjoining buildings \*
- ( ) Proof of ownership \*
- ( ) Copy of contract agreement with owner to demolish building \*
- ( ) Adjoining property owners within 100 feet must be notified
- ( ) Copy of notification \*
- ( ) All services properly terminated (electric, gas, water, sewer)
- ( ) Office of Code Enforcement, be notified of dumping site for materials \*
- ( ) Secure debris on site at end of each workday
- ( ) Secure site from unauthorized entry
- ( ) Measures taken to keep work site dust free
- ( ) Site must be backfilled with suitable materials, landscape and seeded
- ( ) Obtain Demolition Permit (establish expiration date)
- ( ) All above required paperwork submitted at time of permit application

\* Item requires submission of described paperwork