

**DEMOLITION APPLICATION
TOWN OF NORTH HAVEN**

_____ Date
_____ Zoning Approval
_____ Fire Marshal
_____ QVHD
_____ Fees Paid

PROPERTY/PROJECT INFORMATION:

RESIDENTIAL _____ COMMERCIAL _____ INDUSTRIAL _____

ADDRESS _____ Unit/Apt # _____

PROJECT DESCRIPTION _____

OWNER INFORMATION

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE NO _____ FAX NO _____

CONTRACTOR INFORMATION

LICENSE NO _____ TYPE _____
NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE NO _____ FAX NO _____

ARCHITECT INFORMATION

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE NO _____

APPLICANT INFORMATION

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE NO _____

**ALL INSPECTIONS MUST BE REQUESTED BY THE PERMIT HOLDER ONLY
24 HOUR NOTICE AND PERMIT/RECEIPT NUMBER REQUIRED**

**COMPLETE OTHER SIDE OF APPLICATION → → → → →
DEMOLITION SPECIFICATIONS**

LOCATION _____

ENTIRE STRUCTURE? _____ PARTIAL (please specify) _____

OWNER _____

OWNER'S ADDRESS _____

CONTRACTOR _____

CONTRACTOR'S ADDRESS _____

CONTRACTOR'S LICENSE NUMBER _____

CLASS OF BUILDING OR TYPE _____

SITE WHERE DEMOLITION MATERIAL WILL BE DISPOSED OF:

**COPY OF LETTER OF NOTIFICATION TO ADJOINING PROPERTY OWNERS;
CERTIFIED AND RETURN RECEIPT REQUESTED.**

ESTIMATED COST _____

PERMIT FEE _____

“CALL BEFORE YOU DIG” NUMBER _____ START DATE _____

**DATE “PUBLIC WORKS” NOTIFIED

THE UNDERSIGNED HEREBY APPLIES FOR PERMISSION TO CONSTRUCT THE SAME TO BE IN ALL RESPECTS IN ACCORDANCE WITH THE LAWS AND BUILDING REGULATIONS OF THE STATE OF CONNECTICUT AND THE TOWN OF NORTH HAVEN, AND AS SET FORTH IN THE ACCOMPANING DRAWINGS AND SPECIFICATIONS IN SO FAR AS THE SAME SHALL BE FOUND NOT TO CONFLICT WITH THE AFORESAID STATE AND TOWN LAWS AND BUILDING REGULATIONS

OWNER / APPLICANT / CONTRACTOR DATE

CODE OFFICIAL/ DATE