

TOWN OF TUXEDO
1 Temple Drive
TUXEDO NY 10987
351-4421

DEMOLITION APPLICATION

FILE # _____ **DATE:** _____

SECTION: _____ **BLOCK:** _____ **LOT:** _____

INSTRUCTIONS: the applicant either in ink or typewriter must complete this form. Two inspections must be **requested by the applicant** and certified by the Building Inspector. The first, before any work is done, and at the completion of all work. One copy of this form will be returned with a permit as an indication that this office is prepared to make the first inspection. The second copy will be filed as a permanent record in this office.

LOCATION: _____

TYPE AND SIZE OF STRUCTURE:

APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Permit pursuant to the New York State Construction Code for the construction of buildings, additions or alterations, or for the removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

FEES: A fee in keeping with the schedule set up for alterations and additions to a building will apply. This is payable at the time of requesting a permit and should be make payable to the Town of Tuxedo.

Estimated Cost \$ _____

Signature of Applicant

Fee \$ _____

Telephone # _____

Print name of Applicant

Address of Applicant

SCOPE: This office is to check the following points as stated in the New York State Building Construction Code Applicable to General Building Construction and such other matters as may be deemed necessary.

Safety During Construction

- a. Safe and sanitary conditions shall be provided where demolition and wrecking operations are being carried on. Work shall be done in such manner that hazard from fire; possibility of injury, danger to health, and conditions, which may constitute a public nuisance, will be minimized, in conformity with general accepted standards.
- b. Access to utilities and public facilities, including among others, fire hydrants, street lights and manholes, shall be kept unobstructed during demolition.
- c. Gas, electric, sewer, heat, power, water and other service connections shall be disconnected, removed, or sealed, in conformity with the applicable regulations of the public utility or municipal agency having jurisdiction.
- d. Please contact the Asbestos Control Bureau for necessary safety standards where asbestos is involved.

Description of work being performed: _____

State whether applicant is owner, lessee, agent, architect, engineer or builder. _____

Name and address of contractor:

Telephone # _____

Destination of removed materials _____

If owner or applicant is a corporation, give names and titles of two officers and signature of duly authorized officer.

STATE OF NEW YORK.)ss.:
COUNTY OF _____)

_____ being duly sworn deposes and says that
(Name of individual signing application) he is the applicant above names.

He is the _____ of said owner or owners, and is
duly

(contractor, agent, corp. officer, etc.)
authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

(Signature of Applicant)

Sworn before me

this _____ day of _____ 20__

Notary Public _____

County _____

Approved

Date: _____

(Building Inspector)

