



# TOWN OF EASTON DEMO PERMIT APPLICATION

**DEMO FEE \$300.00  
MUST BE SUBMITTED  
WITH PERMIT  
APPLICATION**

**CHECK PAYABLE TO  
"TOWN OF EASTON"**

APPLICATION DATE: \_\_\_\_\_

PERMIT # \_\_\_\_\_

**PLEASE ENSURE ALL APPLICABLE FIELDS ARE COMPLETED**

ADDRESS of STRUCTURE to be DEMOLISHED: \_\_\_\_\_

BUILDING DESCRIPTION: \_\_\_\_\_

NUMBER OF STORIES \_\_\_\_\_

(CHECK ONE) PARTIAL DEMO  COMPLETE DEMO

PROPERTY OWNER/ LEGAL REPRESENTATIVE: \_\_\_\_\_

CONTACT # \_\_\_\_\_

DEMO CONTRACTOR \_\_\_\_\_ COMPANY \_\_\_\_\_

CELL # \_\_\_\_\_ LIC # \_\_\_\_\_ Email \_\_\_\_\_

*I THE UNDERSIGNED, owner or agent and demolition contractor, agree to demolish the above described structure in accordance with Public Act 551 of the State of Connecticut and Ordinances of the Town of Easton.*

*I THE UNDERSIGNED, hereby affirm and attest that I am familiar with the requirements and provisions of the Connecticut Building Code, and all other laws and rules applicable to the demolition of property, and I agree to comply with such laws, rules or regulations and satisfy those requirements in every aspect of the work.*

SIGNATURE OF OWNER/AGENT \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE OF CONTRACTOR \_\_\_\_\_

DATE \_\_\_\_\_

### CHECK LIST

WELL WATER

UI

GAS COMPANY

PROPANE TANK

CERTIFICATE OF INSURANCE

CONSERVATION DEPT.

HISTORICAL COMMISSION

COMMUNICATION UTILITIES

OIL TANK (ABOVE/UNDER)

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH DEMO NOTIFICATION FORM

CERTIFIED RECEIPTS OF NOTIFICATION LETTERS TO NEIGHBORS

EASTON BUILDING OFFICIAL \_\_\_\_\_

DATE \_\_\_\_\_