TOWN of Greenville MAINE

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Demolition Permit Application

Property Location:_____ Owner's Name:_____

Owner's Address:_____ Phone:_____

Applicant's Name:_____ City/Town:_____

Applicant's Address:_____ Phone:_____

Contractor's Name:_____ Phone:_____

Account #:_____ Permit #:_____ **Fee: $50.00** Paid Receipt #:_____

BUILDING INFORMATION

Tax Map & Lot Number:_____ Is building serviced by electricity? ☐ Yes ☐ No

Square feet of structure:_____ Full basement? ☐ Yes ☐ No

EXISTING OR PREVIOUS USE OF BUILDING TO BE DEMOLISHED

☐ Dwelling ☐ Barn ☐ Garage ☐ Shed ☐ Other:_____

Brief description of what is to be demolished:_____

_____

_____

_____

I hereby certify that the owner has authorized the proposed demolition and that I have been authorized by the owner to make this application. I also certify that the information provided is accurate to the best of my knowledge and agree to conform to all applicable laws.

Signature of Owner / Applicant:_____ Date:_____

By signing this application, the applicant agrees to the following:

1. *Demolition debris shall be disposed of properly.*
2. *Appropriate safety precautions shall be in place prior ro start of demolition.*
3. *Demolition permit requires sewer line capped, water line shut off, and electricity removed from structure.*
4. *Asbestos Building Demolition Notification form D to be completed and attached to application*