TOWN OF WESTON

APPLICATION FOR DEMOLITION PERMIT - APPLICATION FEE \$100

| | Application DateADDRESS OF WORK | |
|-------------------------------|---|--|
| | | |
| 1. | NAME & ADDRESS OF PROPERTY OWN | NER TELEPHONE |
| 2. | *DEMOLITION CONTRACTOR | LICENSE NUMBER |
| 2a. | CONTACT PERSON | TELEPHONE |
| PER S The der of thirty | | by an owner of such structure if it does not exceed a height te while such demolition work is in progress, shall be held |
| SIGNA | ATURE OF OWNER | |
| | SUBMISSION REQUIREMENTS: ertificate of appropriateness if house/structure is ertificate of Insurance: | s in the Historic District ———— |
| | SHUT OI | FF NOTICES: |
| | BRIDGEPORT HYDROLIC CO GAS COMPANY | SEPTIC ABANDONMENT – HEALTH DEPT. ELECTRIC LIGHT & POWER TELEPHONE COMPANY ASBESTOS ABATEMENT |
| OI | NOTIFICATION TO ADJACENT PROPERTY OWNE BTAINED FROM ASSESSORS OFFICE AND COPIED T | ERS BY OWNER (LIST OF NAMES & ADDRESSES TO BE O BUILDING DEPARTMENT) |
| 2. | CONSERVATION PLANNER SIGNOFF | DATE |
| 3. | DESCRIPTION OF WORK: | |
| of the Ordina | Connecticut Basic Building Code, the State state ance, of the Town of Weston as they apply to the themse in every portion of that work, and to give | I am familiar with the requirements and provisions ue concerning Historic Districts, and the Demolition e work described above, and I agree to satisfy those e the applicable local and state requirements |
| necess | EBY CERTIFY that I am the OWNER of the Party legal right and authority to proceed with the is true and correct to the best of my knowledge. | e work herein outlined, and that the information I have |
| PRINT | Γ NAME SIGNAT | OWNER DATE |
| SIGNA | ATURE OF CONTRACTOR | |
| BUILI | DING OFFICIAL | DATE |