

# DEMOLITION APPLICATION

The City of North Adams Building Department  
(413-662-3014)

Dear Sir:

The undersigned \_\_\_\_\_ hereby applies for  
permission to demolish building at \_\_\_\_\_.  
Type & size of structure \_\_\_\_\_.  
The building is owned by \_\_\_\_\_.  
The demolition contractor is \_\_\_\_\_.  
Date of demolition to begin \_\_\_\_\_.

AS REQUIRED BY SECTION 116.0 MASSACHUSETTS STATE BUILDING CODE, A DEMOLITION PERMIT MAY NOT BE GRANTED UNTIL RELEASE IS OBTAINED, STATING THE RESPECTIVE SERVICE CONNECTIONS HAVE BEEN REMOVED.

### WITNESSED SIGNATURES:

1. Berkshire Gas Company (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_
2. Telephone Company (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_
3. National Grid (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_
4. Public Utilities (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_  
413-662-3047
5. Health Department (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_  
(Bating) 413-662-3020
6. Health Department (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_  
(Demo Waste Disposal) 413-662-3020
7. Fire Department (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_  
413-662-3103
8. Cable Company (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_
9. Dept. of Labor & Workforce Development  
Division of Occupational Safety (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_  
413-448-8746
10. Department of Environmental  
Protection (witnessed by) \_\_\_\_\_ (date) \_\_\_\_\_  
413-755-2145
11. Dig Safe (confirmation number) \_\_\_\_\_ (date) \_\_\_\_\_  
888-344-7233

Remarks: \_\_\_\_\_  
\_\_\_\_\_

THIS PERMIT MUST BE RETURNED TO THE BUILDING INSPECTOR'S OFFICE  
BEFORE DEMOLITION BEGINS

Signature of owner : \_\_\_\_\_ (date) \_\_\_\_\_

Signature of contractor : \_\_\_\_\_ (date) \_\_\_\_\_

# Construction Debris Disposal Affidavit

(Required for all demolition and renovation work)

In accordance with the sixth edition of the State Building Code, 780 CMR section 111.5 Debris, and the provisions of MGL c 40, S54:

Building Permit # \_\_\_\_\_ is issued for \_\_\_\_\_ with  
(Location)

the condition that the debris resulting from this work shall be disposed of in a properly licensed waste disposal facility as defined by MGL c 111, S 150A.

The debris will be transported by:

\_\_\_\_\_  
(Name of hauler)

Debris will be disposed in:

Dumpster Permit required  yes  
 no

\_\_\_\_\_  
(Name of facility)

\_\_\_\_\_  
(Address of facility)

\_\_\_\_\_  
Signature of permit applicant

\_\_\_\_\_  
Date

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North Adams, MA 01247

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