



Toni N. Harp
Mayor

James Turcio
Building Official

DEMOLITION PERMIT APPLICATION

CITY OF NEW HAVEN

Toni N. Harp, Mayor

BUILDING DEPARTMENT

200 Orange Street, 5th Floor

New Haven, CT 06510

Phone: (203) 946-8045 Fax: (203) 946-8049

www.cityofnewhaven.com

(FOR OFFICIAL USE ONLY)

PERMIT NO:

B- _____ - _____

Entered By: _____

Date: ____/____/20____

1. Work Location: _____ **New Haven, CT**

2. Owner Name: _____ Phone No: (____) _____ - _____

Address: _____

3. Kind of Building: Residential Non-Residential/Commercial Mixed Use

4. Applicant Name: _____

5. Contractor Name: _____ Phone No: (____) _____ - _____

Address: _____

**Note this is where the permit will be mailed.*

Conn. State License (Type and Number): _____

Email Address: _____

Asbestos Removal: _____

Dump Site: _____

(This includes Labor and Materials)

Cost Estimate: \$ _____

Permit Fee: \$ _____

Penalty Fee: \$ _____

Total Fee: \$ _____

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- National Register
- No Historical Significance – Immediate Demolition Authorized
- Delay Waived per 9-29.a.3A – Order Demolished as threat to public safety by Building Official
- Local Historic District – HDC Application Required
- DEMOLITION DELAY APPLICATION REQUIRED – Contact [City Plan Department 203-946-8237](tel:203-946-8237)

Review Completed by: _____ Title: _____ Date: ____/____/20____

CERTIFICATION: I hereby certify that: I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and/or I have been authorized to make this application as an authorized agent, and we agree to conform to all applicable laws, regulations, and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.

X _____ DATE: ____/____/20____

Inspector Signature: _____ DATE: ____/____/20____

Notarized By: _____ DATE: ____/____/20____

(For Official Use Only)

CASH CHECK# _____

See Reverse side for additional information

CGS Sec. 29-407. No person shall commence any demolition operation unless he first notifies each adjoining property owner by registered or certified mail at such owner's last address according to the records of the assessor of the city, town or borough in which such demolition operation is planned.

REQUIRED CONDITIONS

- 1) Proof of utility cut-offs (gas, electrical, water, etc.) shall be necessary prior to issuance of any demolition permit.
- 2) Demolition contractor is responsible for plugging sewer lateral as per specifications by City engineer.
- 3) Fire Watch.
 - a) When so ordered by the New Haven Fire Department, the contractor will be required to provide a professional fireman to serve as a Fire Watch.
 - b) The Fire Watch when so ordered, will be in effect during any period that the contractor's employees are not working at the demolition site, including the period that the contractor's hours, day and night, Saturdays, Sundays, and Holidays.
 - c) The contractor shall pay weekly the cost of any such fire watch directly to the New Haven Fire Department.

Building Department Procedure for the Issuance of Demolition Permits

- 1) Check for address on New Haven Preservation Trust List and Historic List. If address appears on either list, notify City Plan, [Tom Talbot – 203-946-8237](tel:203-946-8237). Contractor must file forms at City Plan Department for **“Hold for Delay of Demolition Ordinance” Section 7-147P**. “Historic Property Ordinance”. Municipalities’ Title 7 Client must file forms within the City Plan Department - Subject to 90 – day delay. **90-day delay starts from the date of completed applications.**
 - a) City Plan must send all memos to Building Department if **“90-day delay requirement”** is waived.
- 2) Provide completed forms for asbestos removal-EPA & DEP. Consult with local Health Department, [Paul Kowalski – 203-946-8173](tel:203-946-8173) and refer to list of accepted **“Waste Disposal Sites”**. Abatement of hazardous material responsibility of owner.
- 3) All Utility company disconnection notices must be confirmed either in writing or by telephone confirmation. If all utilities are recorded in proper file, notify Engineers Office for (sewer plug) signature – OK. (State Demolition Code 29-406)
- 4) **Requirements of Contractor:**
 - a) Provide copy of the valid License, if further verification needed contact, [860-713-5580](tel:860-713-5580).
 - b) Provide Certificate of Insurance for liability coverage, (\$500,000 - \$1,000,000 minimum).
 - c) Provide copies of notification letters sent to adjoining properties of intent to demolish.
 - d) Dump Site on demolition application form must be documented for **“Disposal of Hazardous waste Materials”**.

Consult with the Demolition Officer, [Jose Romero 203-946-7730](tel:203-946-7730) with any questions or concerns.

Utility Disconnect Contact Numbers

- **Frontier** – 1-800-921-8101
- **Southern Connecticut Gas Co.** – 203-795-7792
- **The United Illuminating Co.** – 800-722-5584 (all applications must be mailed)
- **Regional Water Authority** – 203-401-2582