Checklist for Application for Demolition Permit

Property Address: _____

Is this structure more than 75 years old? _____

Does this structure exceed 500 square feet? _____

☐ Notice of Intent to Demolish - If the answer is yes to both of the above, **OR** the structure is listed on the National Register of Historic Places, a Notice of Intent to Demolish will need to be completed and the steps outlined in the Ordinance for Delaying Granting of Permit for Demolition of Historic Buildings must be followed.

- Date sent to CC's: _____
- Date posted on website: _____
- Date sign posted: _____

☐ Town of Essex Demolition Permit Application

☐ Permit Fee

☐ Certificate of demolition registration (Demolition Contractor's License)

☐ Certificate of Insurance – Liability

☐ Contractor's Certificate of Insurance - Worker's Compensation

☐ Declaration (Save harmless statement) from applicant/contractor

☐ Public Utility Disconnect Notices

Public Utility Company	Attached	Not Applicable
CT Light & Power		
Phone Company		
Cable Company		
Propane/gas Company		
Water Company		

☐ Copy of Certified Mail Notices to adjoining property owners along with letter sent (CGS 29-407)

☐ Copy of Pre-Demolition review regarding the existence/non-existence of asbestos containing material(s). If asbestos containing material(s) found, a report from a licensed asbestos abatement contractor stating that any asbestos containing material found has been removed in their entirety. *(Does NOT apply to single family homes.)*

☐ Copy of State Department of Public Health "Demolition/Notification Form"

7/18/16

Town of Essex
Building Department
29 West Avenue, Essex CT 06426
(860) 767-4340 extension 117 Fax (860) 767-8509

NOTICE OF INTENT TO DEMOLISH

Fee: $175.00* (payable to the Town of Essex)

☐Residential ☐Commercial Assessor's Map _____ Lot _____

Building/Structure Address: _____

Property Owner(s) :_____

Property Owner(s) mailing address: _____

Property Owner(s) phone: _____ e-mail address: _____

Approximate area of each floor of the building or structure: _____

_____

General characteristics of the building or structure: _____

_____

Estimated age of the building or structure: _____

General description of the material of the building, structure and its appurtenances: _____

_____

_____

_____

Print Name of Applicant: _____

Signature of Applicant: _____ Date: _____

No demolition permit application shall be deemed complete and filed until such Notice is filed and accepted as complete by the Building Official.

Building Official: _____ Date: _____
David R. DeLeeuw

*$100.00 refundable upon return of posted sign.

Sign Posted: _____

Sign Returned: _____

cc: First Selectman
Town Historian
President, Essex Historical Society

10/15/14

Town of Essex Building Permit Application

Residential ___ Commercial ___

Town of Essex Building Department
29 West Avenue, Essex, CT 06426
Phone: 860-767-4340 Building Official x 117/Asst. 144 Fax: 860-767-8509

HVAC ___ PLMB ___ ELEC ___
CRS # _____ Sprinkler ____

Permit # _____

Map: _____ Lot: _____ Zone: _____ Year Built: _____

Project Permit # _____

Property Address: _____ Village: _____

Owner of Record: _____

Applicant/Contractor: _____ Lic # _____
Attach copy of Contractors License & Certificate of Insurance for Worker's Compensation or State of CT Form 7A/7B)

Mailing Address: _____
(No./Street/PO Box/City/State/Zip)

Telephone/Cell# _____ E-mail address: _____

Type of Improvement: ☐ New Construction/addition ☐ New Shed/Garage/Barn ☐ New Deck ☐ Foundation Only
☐ Roof ☐ Demolition ☐ Repair/Alteration ☐ Other Proposed Use: _____ Proposed Occupancy:_____

Description of proposed work : _____

_____

_____

Commercial Only (New Construction/Additions) Construction Type: _____ Design Occupant Load: _____
New Square Footage: _____ Sprinkler Provided: Y/N Sprinkler Required: Y/N

Electrical $ _____ **HVAC $**_____ **Plumbing $**_____ **Total Cost of Project $** _____

******Please make check payable to: Town of Essex*** **Fee $** _____

(Note: Fee schedule available at www.essexct.gov.)

This application is to be accompanied by (2) sets of construction documents unless waived by the building official.

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. 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. In addition, if a permit for work described in this application is issued, I certify that the code official or the code officials authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce provisions of the code(s) applicable to such permit.

Applicant's Signature: _____ (Property owner/Contractor/demo contractor/authorized agent)
Date: _____

Property Owner: _____ (for Demolition permit) Date: _____

Approved:

Fire Marshal (Commercial only): _____ Tax Dept _____ Zoning _____ Health _____
(initial) (initial) (initial) (initial)

Building Official: _____ Approved (Date): _____

FILE-APPLICANT-OWNER-BINDER **3-20-14**

DEMOLITION PERMIT REQUIREMENTS

(7/18/16)

There are no permit requirements for demolition with the **Zoning Department**. Please see "What if my house burns down?" at www.essexct.gov/land-use-zoning-inland-wetlands for requirements regarding re-construction should the current structure have non-conforming characteristics or if there are wetlands or a watercourse nearby.

For the Health Department:

1. Health Department review of septic system and well protection measures.
2. Copy of State Department of Public Health "Demolition/Notification Form/Asbestos Abatement Notification Form" (See Health Department demolition requirements attached or at www.essexct.gov/health-department)

Permit applicants must complete the Application for Demolition Permit and submit the following to the Building Department:

Note: For structures that are included on the National Register of Historic Places or are over 75 years old, see the demolition delay ordinance for procedures and information regarding the 90 day waiting period.

3. Completed Application signed by BOTH owner of property and demolition contractor
4. Appropriate permit fee
5. Certificate of demolition registration (see **Registration Guidelines/Exceptions***)
6. Certificate of Insurance illustrating Liability
    a. Specifying demolition purposes
    b. 100,000/300,000 bodily injury
    c. 50,000/100,000 property damage
7. Certificate of Insurance illustrating Worker's Compensation
8. Written Declaration as per CGS 29-406 (4)
9. Notification of Disconnect Certificate from each public utility serving the building to be demolished stating that all service connections are discontinued and capped.
10. Per 29-407: Copies of notifications to all adjoining property owners by registered or certified mail at last known address in assessor's records along with a copy of the corresponding letter.

DEMOLITION NOT TO COMMENCE UNTIL PERMIT ISSUED.

*REGISTRATION (LICENSE) GUIDELINES/EXCEPTIONS

1. Per CGS 29-402 "No person shall engage in the business of demolition of buildings without a certificate of registration." see #3 below for registration exceptions
2. Two classes of registration: Class A: Structures that exceed 2 ½ stories or 35' in height. Class B: Structures equal to or less than 2 ½ stories or 35' in height.
3. Registration exceptions – Registration/license is not required for the following:
    a. Person engaged in disassembling, transportation and reconstruction of historic buildings *for historic purposes*
    b. Demolition of farm buildings
    c. Renovation, alteration or reconstruction of single-family residence- See #4 below
    d. Burning of building by Fire Department for training
4. The demolition of a single family residence or outbuilding by owner meets registration exceptions under the following conditions:
    a. Structure cannot exceed 30' in height
    b. Owner shall be present on site while demo work is in progress – need not perform demolition
    c. Owner held personally liable for injury to persons or property (public or private)
    d. Building must have clearance to other structures, roads or highways equal to or greater than height of building

Sec. 29-402. (Formerly Sec. 19-403c). License for demolition business: Application; fees; refusal or revocation. Exemptions. (a) As used in this part, the term "license" includes the whole or part of any permit which the Department of Administrative Services issues under authority of the general statutes, and which (1) requires persons to place their names on a list maintained by the department before they can engage in the business of demolition of buildings, (2) requires a person to demonstrate competence by examination or other means, and (3) may be revoked or suspended by the department for cause.

(b) No person shall engage in the business of demolition of buildings without a license obtained from the Department of Administrative Services. An applicant for an initial license shall file an application with the Department of Administrative Services, furnish evidence of expertise and financial responsibility and pay a fee of four hundred forty dollars for a class B license and nine hundred forty dollars for a class A license. Each license shall be valid for twelve months from date of issuance and shall be renewable on application of the licensee upon payment of an annual fee of two hundred fifty dollars for a class B license and seven hundred fifty dollars for a class A license. The department may refuse to issue any such license for cause, and may revoke or refuse to renew any such license for failure to carry out and conform to the provisions of this part or to any regulations adopted hereunder, or for any violation of title 22a. No person shall be refused a license or a renewal thereof, and no license shall be revoked, without an opportunity for a hearing conducted by the Department of Administrative Services in accordance with the provisions of chapter 54.

(c) The provisions of this section shall not apply to (1) a person who is engaged in the disassembly, transportation and reconstruction of historic buildings for historical purposes, in the demolition of farm buildings, in the renovation, alteration or reconstruction of a single-family residence or in the disassembly of nonstructural building materials of a building for the purpose of reusing or recycling such building materials, (2) the removal of underground petroleum storage tanks, (3) the burning of a building or structure as part of an organized fire department training exercise, or (4) the demolition of a single-family residence or outbuilding by an owner of such structure if it does not exceed a height of thirty feet, provided (A) the owner shall be present on site while such demolition work is in progress and shall be held personally liable for any injury to individuals or damage to public or private property caused by such demolition, and (B) such demolition shall be permitted only with respect to buildings which have clearance from other structures, roads or highways equal to or greater than the height of the structure subject to demolition. The local building official may require additional clearance when deemed necessary for safety.

Sec. 29-406. (Formerly Sec. 19-403g). Permit for demolition of particular structure. Exemption. Waiting period. (a) No person shall demolish any building, structure or part thereof without obtaining a permit for the particular demolition undertaking from the building official of the town, city or borough wherein such building or part thereof is located. No person shall be eligible to receive a permit under this section unless such person furnishes to the building official: (1) Written notice of financial responsibility in the form of a certificate of insurance specifying demolition purposes and providing liability coverage for bodily injury of at least one hundred thousand dollars per person with an aggregate of at least three hundred thousand dollars, and for property damage of at least fifty thousand dollars per accident with an aggregate of at least one hundred thousand dollars; (2) written notice in the form of a certificate of notice executed by all public utilities having service connections within the premises proposed to be demolished, stating that such utilities have severed such connections and service; (3) written notice that such person is the holder of a current valid license issued under the provisions of section 29-402, or is exempted from such license requirement as provided in subsection (c) of said section; and (4) a written declaration by such person that the town or city and its agents shall be saved harmless from any claim or claims arising out of the negligence of the applicant or the applicant's agents or employees in the course of the demolition operations. No permit shall be issued under this section unless signed by the owner and the demolition contractor. Each such permit shall contain a printed intention on the part of the signers to comply with the provisions of this part.

(b) In addition to the powers granted pursuant to this part, any town, city or borough may impose, by ordinance, a waiting period of not more than one hundred eighty days before granting any permit for the demolition of any building or structure or any part thereof, except when the demolition permit is required for the removal of a structure acquired by the Department of Transportation for a transportation project.

Sec. 29-407. (Formerly Sec. 19-403h). Notice to adjoining property owners. 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.

Applicant

Street Address

City, State ZIP

In accordance with Connecticut General Statue 29-406, I **(applicant)** hereby agree to save harmless the Town of Essex and its agents from any claim or claims arising out of the negligence of the applicant or his agents or employees in the course of the demolition operations associated with **(project title, address).**

SAMPLE

Signed,

Health Department Demolition Permit Requirements:

A COPY of the Demolition Notification to remain in the property file.

Health Department:

Any building being demolished, regardless of its use, (single family, multi-family, residential, commercial, industrial, public, private, etc.) must have a completed Demolition Notification form submitted to the CT Department of Public Health as required by the Regulations of CT State Agencies (RCSA), Section 19a-322a-3. All buildings other than single family homes must also have an asbestos inspection done by a licensed asbestos contractor prior to demolition.

Demolition Notification Form (required for all buildings being demolished)

1. This form must be completed and submitted to the Department of Public Health (DPH) when a facility is being demolished and the facility either contains no known asbestos-containing material or if the facility contains no more than ten (10) linear feet or no more than twenty-five (25) square feet of asbestos-containing material.

   Note: Facility means any private or public building or structure including but not limited to those used for institutional, residential (including single family homes), commercial or industrial purposes and vessels while ashore or in drydock.

2. Demolition can begin 10 calendar days or more after postmark date on the Demolition Notification Form and after all other permits are issued.

Asbestos Abatement Notification Form (use only if asbestos abatement is required)

1. This form must be completed and submitted to the Department of Public Health (DPH) for asbestos abatement involving more than ten (10) linear feet or more than twenty-five (25) square feet of asbestos-containing material.
2. All asbestos abatement involving more than three (3) linear feet or more than three (3) square feet of asbestos-containing material must be performed by a licensed asbestos contractor.
3. The Demolition Notification Form (above) does not need to be submitted to DPH *if* the agency previously received an *asbestos abatement* notification form for the facility in which "Demolition" was indicated in Box 9.

All asbestos abatement contractors, consultants, workers & site supervisors must be licensed by the CT DPH. To verify a license go to www.elicense.ct.gov

Drinking Water Wells & Septic Systems

The Health Dept must be notified of the status of the existing on-site septic system and wells – will they remain in place or be abandoned. Documentation of septic system abandonment must be submitted to the health department. Well abandonment must be done by a licensed well driller and the appropriate Well Abandonment Form must be submitted to the Health Dept. (RCSA, Sec. 25-131)

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

DEMOLITION NOTIFICATION FORM

FOR STATE USE ONLY	
Postmark Date	
Check #	
Transmittal No.	
Amount Paid	
Record No.	

This form is to be completed and postmarked or hand delivered to the Connecticut Department of Public Health at least ten (10) days prior to the start of demolition as required by the Regulations of Connecticut State Agencies (RCSA), Section 19a-332a-3. Each demolition notification **must be accompanied by a fee of FIFTY ($50)** dollars. A check in that amount made payable to **"Treasurer, State of Connecticut"** must be submitted with the notification form. In case of emergency notifications, this form is to be completed and postmarked or hand delivered within one (1) working day following the start of demolition. **A copy of the written order requiring demolition prepared by a state or local building official shall accompany each emergency demolition notification.** Faxed originals are not acceptable. Revisions to the original notification form may be faxed. Further instructions are found on back of this form.

1. TYPE OF NOTIFICATION:

A. ☐ NEW B. ☐ EMERGENCY C. ☐ REVISED ITEMS REVISED:

2. FACILITY OWNER:

NAME:

ADDRESS:

CITY: STATE:

ZIP: PHONE NO.:

3. LOCATION OF FACILITY TO BE DEMOLISHED:

NAME:

ADDRESS:

CITY: STATE:

ZIP: PHONE NO.:

HAS AN ASBESTOS INSPECTION BEEN CONDUCTED? YES ☐ NO ☐

4. INSPECTION INFORMATION:

NAME OF INSPECTOR:

LICENSE #: DATE OF INSPECTION:

INSPECTOR ADDRESS: CITY:

STATE: ZIP: PHONE NO.:

(Inspection information applicable to facilities subject to the asbestos NESHAP, 40 C.F.R., Part 61)

In accordance with *Section 61.145* of the U.S. Environmental Protection Agency's National Emission Standards for Hazardous Air Pollutants (NESHAPs) regulation, the owner or operator of a facility shall, prior to the commencement of renovation or demolition, inspect the affected portions of the facility for asbestos, including Category I and Category II nonfriable asbestos.

5(A.)	*DEMOLITION START DATE:*	*5(B.)*	*DEMOLITION COMPLETION DATE:*

*Phone: **(860) 509-7367/ Fax (860) 509-7378***
Telephone Device for the Deaf: (860) 509- 7191
*410 Capitol Avenue, MS# **51 AIR***
P.O. Box 340308
Hartford, CT 06134-0308
Affirmative Action / An Equal Opportunity Employer

6. USE OF FACILITY:

A. SCHOOL (K-12) B. PUBLIC BUILDING C. MANUFACTURING D. OFFICE E. COLLEGE

F. COMMERCIAL G. CHURCH/SYNAGOGUE H. RESIDENTIAL, # OF DWELLINGS I. OTHER

(I. SPECIFY) SINGLE FAMILY HOME – asbestos *inspection* is not required

7. BUILDING DATA: SQUARE FEET: # OF FLOORS: AGE:

8. DEMOLITION CONTRACTOR:

NAME: CONTACT PERSON:

ADDRESS:

CITY: STATE:

ZIP: PHONE NO.:

9. DEMOLITION DISPOSAL FACILITY:

NAME:

ADDRESS:

CITY: STATE:

ZIP: PHONE NO.:

10. DEMOLITION WASTE HAULER:

NAME:

ADDRESS:

CITY: STATE:

ZIP: PHONE NO.:

11. PERSON COMPLETING THIS FORM:

NAME:

ADDRESS:

CITY: STATE:

ZIP: PHONE NO.:

SIGNATURE ***DATE:***

The submission of the **Notification of Demolition Form** is not required provided that an **Asbestos Abatement Notification Form** was previously submitted to the Department of Public Health involving abatement related to the demolition of the facility. In that case, the **Asbestos Abatement Notification Form** submitted to the agency satisfied the notification requirement for demolition of the facility. In all cases of demolition, one and only one form (**Notification of Demolition Form** or **Asbestos Abatement Notification Form**, as applicable) shall be sufficient to satisfy the Department of Public Health notification requirements detailed in Section 19a-332a-3 of the RCSA.

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

ASBESTOS ABATEMENT NOTIFICATION FORM

STATE USE ONLY	
Post Mark Date	
Check #	
Amount	$
Transmittal #	
Record #	

This form is to be completed and postmarked or hand delivered to the Connecticut Department of Public Health at least ten (10) days prior to the start of asbestos abatement, as required by the Regulations of Connecticut State Agencies, Section 19a-332a-3. In case of an emergency, this form is to be completed and postmarked within one (1) working day following the start of asbestos abatement. Faxed originals are not acceptable. Revisions may be faxed unless an additional fee payment is due.

1. TYPE OF NOTIFICATION:

A. NEW ___ B. BLANKET ___ C. CANCELLATION / POSTPONED C _____ P _____

D. REVISED ___ (ITEMS REVISED) _____ REVISION # _____

E. EMERGENCY DESCRIBE NATURE OF EMERGENCY

2. ABATEMENT CONTRACTOR:

NAME: _____ LICENSE # _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # _____ CONTACT PERSON: _____

3. FACILITY (OWNER'S NAME) OWNER/OPERATOR:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # _____ CONTACT PERSON: _____

4. NAME OF FACILITY: (FILL IN ADDRESS WHERE ABATEMENT PROJECT IS LOCATED)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

5.(A) ABATEMENT START DATE: ___/___/___ *Month/Day/Year format* **5.(B) COMPLETION DATE:** ___/___/___ *Month/Day/Year format*

(#6 only) *TO BE COMPLETED IF PROJECT IS GREATER THAN 160 SQUARE FEET*

Notification Fee Due: $100.00 + 1% total asbestos abatement cost _____

6. TOTAL ABATEMENT PROJECT COST: _____ ***REVISED COST (ONLY FOR REVISIONS):** _____

7. USE OF FACILITY:

A. SCHOOL (K-12)		B. PUBLIC BUILDING		C. MANUFACTURING		D. OFFICE		E. COLLEGE	
F. COMMERCIAL		G. CHURCH/SYNAGOGUE		H. RESIDENTIAL, # OF DWELLINGS				I. OTHER	
(I. SPECIFY)									

Phone: (860) 509-7367/ Fax: (860) 509-7378
Telephone Device for the Deaf: (860) 509-7191
410 Capitol Avenue- MS # 51 AIR
PO Box 340308 Hartford CT 06134-0308 Hartford CT 06134

Affirmative Action/ An Equal Opportunity Employer

ADDRESS:_____
TOWN:

8. BUILDING DATA:

SQUARE FEET: _____ NUMBER OF FLOORS: _____ AGE: _____

9. ABATEMENT CLASSIFICATION:

RENOVATION _____ DEMOLITION _____ ORDERED DEMO (AGENCY ISSUING ORDER) *MUST ATTACH COPY OF DEMO ORDER* _____

10. ABATEMENT TECHNIQUE:

A. FULL CONTAINMENT WITH NEGATIVE AIR B. ALTERNATIVE WORK PRACTICE (PRE-APPROVAL REQUIRED

(IF AWP, include) Project Designer & LICENSE # _____

C. EXTERIOR ABATEMENT D. SPOT REPAIR (>25 SQ. FT. TOTAL) _____

11. ABATEMENT METHOD:

A. REMOVAL _____ B. ENCAPSULATION _____ C. ENCLOSURE _____

12. TYPE OF DECONTAMINATION SYSTEM:

A. CONTIGUOUS _____ B. REMOTE _____ C. BOTH _____

13. TYPE AND AMOUNT OF ASBESTOS TO BE ABATED: (REPORTED IN SQUARE FEET)

FRIABLE MATERIAL		NONFRIABLE MATERIAL
A. SPRAYED /TROWELED ON:		**Category I**
B. BOILER INSULATION:		I. FLOOR COVERINGS/TILES:
C. TANK INSULATION:		J. ROOFING, SPECIFY:
D. BREECHING INSULATION:		K. GASKETS, PACKINGS:
E. DUCT INSULATION:		**Category II**
F. CEILING TILES:		L. TRANSITE BOARD:
G. OTHER, SPECIFY:		M. OTHER, SPECIFY:
H.* PIPE INSULATION:	**Use conversion table**	**Total Square Feet**
(Pipe diameter)"	*Multiply LF by CF*	*= Total Square Feet*

14. WASTE DISPOSAL SITE (IF MULTIPLE SITES, LIST SEPARATELY)

NAME:	
ADDRESS:	
CITY, STATE, ZIP:	
OWNER, OPERATOR:	

15. HAULER/ WASTE TRANSPORTER

NAME:	
ADDRESS:	
CITY, STATE, ZIP:	

Signature and Title of Person Completing this Form: _____

Mail to:

DPH
ASBESTOS PROGRAM
410 CAPITOL AVENUE, MS # 51 AIR
PO BOX 340308
HARTFORD CT 06134-0308

Rev. 08/27/10