



Town of Plainville  
 Building Department  
 190 South Street  
 Plainville, MA 02762  
 Tel: 508-576-8491

## APPLICATION FOR PERMIT FOR DEMOLITION

Estimated Cost: \_\_\_\_\_ Demolition Permit # \_\_\_\_\_  
 Fee\$ \_\_\_\_\_  
 Application Date \_\_\_\_\_

1. Name & Address of Applicant/Agent \_\_\_\_\_
2. Name & Address of Owner \_\_\_\_\_ Tel. \_\_\_\_\_
3. Location of Property: Assessor's Map: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Street Address: \_\_\_\_\_
4. Type of Building: Structure: \_\_\_\_\_ Dimensions: \_\_\_\_\_
5. Nature of Construction: \_\_\_\_\_ No. of Stories: \_\_\_\_\_
6. Residential or Accessory Building: \_\_\_\_\_ Commercial or Accessory: \_\_\_\_\_
7. Utilities to Structure: Check Applicable Boxes:  
 A.  Electric B.  Gas C.  Sewer D.  Water E.  Other

	Printed Name	Signature	Date
Sewer Department/Plumbing Inspector			
Water Department/Plumbing Inspector			
Electric Company/Wiring Inspector			
Gas Company/Gas Inspector			
Board of Health			
Fire Department			
Asbestos Survey			
Pest Control			
Historical Commission			
Conservation Commission			

8. Proposed location and manner of disposal of demolition material (be specific)  
 \_\_\_\_\_
9. Intended date for complete site cleaning: \_\_\_\_\_

Statement of Applicant: I understand and affirm that I am responsible for the proper completion of this demolition project.

Date Issued: \_\_\_\_\_

Approved: \_\_\_\_\_  
 Inspector of Buildings Signature of Applicant/Agent