

TOWN OF BETHEL BUILDING DEPARTMENT
1 SCHOOL STREET, BETHEL CT 06801
203-794-8517 Phone 203-778-7518 Fax
APPLICATION FOR DEMOLITION PERMIT

AGE OF STRUCTURE	SQ. FOOTAGE OF STRUCTURE	HOW MANY FAMILY	
Required Departmental or Utility Approvals			
Tax Assessor Valuation (Field Card)		Tax Collector (Paper stating taxes are paid up to date)	
Electric Disconnect		Water/Sewer Dept.Disconnect	
Gas Disconnect		Cable Disconnect	
DEP Asbestos and/or Lead Remediation		Phone Disconnect	
DPH Demolition/Notification Form Provided to State and Copy Provided to Building Dept. <input type="checkbox"/> Yes <input type="checkbox"/> No			
To Be Filled Out By Applicant (Information Obtained from Field Card at Assessor's Office)			
Lot Size	Prop. Location Street Address		
Map	Block	Lot	Zone
Owner's Name As It Appears In Land Records			
Owner/Applicant To Fill Out Below --Please Print or Type All Entries			
Owner's Street Address			Date
Town	State	Zip Code	
Area Code & Home Ph. No.	Work Ph. No.	Fax	
Applicants Name If Not Owner			
Address	Town	State	Zip
Phone No.	Work Phone	Fax	
Contractor	Address	Phone	
Demolition Contractor License & Insurance Copy Must Be Provided			Call before you dig 811
License Number			
Describe Work To Be Done Below			
Is The Structure Within The 100 Year Flood Plain?			

Owner's Signature _____

Owner's Agent(s) Signature _____

Owner's Printed Name _____

Owner's Agent(s) Printed Name _____

FEES

Building	
State Building	
Dumpster	
TOTAL	

CHECK APPROPRIATE LINE

Septic _____ City Sewer _____
 Well Water _____ City Water _____ Other Water _____