

Town of Bennington Application for Demolition/Relocation Permit

Date Received: _____

Fee: Single Family Dwelling and Accessory Buildings \$25.00 * All other buildings 0-500 sq.ft \$30.00 Over 500 sq.ft. \$50.00

Location of Structure: _____

Owner: _____ Phone: _____

Address: _____

Description of structure to be demolished/relocated: _____

Contractor: _____

Address: _____

Reason for Demolition/Relocation _____



PRIOR TO DEMOLITION/RELOCATION: Asbestos containing materials may be present in the structure to be demolished. State and Federal Regulations may apply regarding asbestos removal and demolition notification. Contact the Vermont Asbestos and Lead Regulatory Program at 800-439-8550 or 802-863-7231 for further information.

- The Housing, Building, Safety Standard Ordinance allows the Historic Preservation Commission five (5) days to review the demolition permit for those purposes outlined in the Ordinance.
- If the structure is a contributing historic property located within the Design Review District, review and approval by the Development Review Board is required before demolition. Contact the Zoning Administrator at 442-1037 to schedule an appearance before the Development Review Board to review the request.
- All foundations and cellar holes shall be filled and graded with suitable material to ensure protection of the health, safety and welfare of the public.
- The owner or contractor shall carry all applicable liability insurance to protect adjoining property and the public from any damages resulting from the demolition project. **Proof of insurance shall be filed with this application.**
- All services and utilities shall be disconnected, capped and location and depth marked on street and recorded, if applicable. Signatures of those authorized agents listed below must be obtained.



Design Review District: Yes _____ No _____

Zoning Administrator Date

Town of Bennington Water Resources Superintendent Date

Collections Department Authorized Agent Date

Historic Preservation Commission Authorized Agent Date

Building Inspector Authorized Agent Date

THE PROPERTY OWNER SHALL BE RESPONSIBLE FOR OBTAINING THE PERMISSION OF THE ELECTRIC, TELEPHONE AND CABLE UTILITY COMPANIES (AS APPLICABLE) PRIOR TO DEMOLITION. THE CONTACT INFORMATION FOR THE UTILITY COMPANIES IS PROVIDED ON THE BACK OF THIS APPLICATION. BY SIGNING THIS APPLICATION, OWNER AFFIRMS THAT PERMISSION TO DEMOLISH THE BUILDING HAS BEEN OBTAINED FROM THE UTILITY COMPANIES.

This Demolition/Relocation is Approved by Owner: _____

Owners Signature Date

THIS PERMIT IS VALID FOR 1 YEAR FROM DATE OF ISSUANCE

SEE REVERSE SIDE

DEMOLITION PERMIT UTILITY CONTACT PERSONS

CVPS.....CHRIS MESSIER.....FAX #375-6120

TELEPHONE CO...CHRIS LILLIE.....PHONE #802-254-9975
.....FAX #257-7801

CABLE CO.....MIKE ELWELL.....PHONE #447-1534
.....FAX #442-2063

State permits may be required for this project. Call 802-786-5907 to speak to the State Permit Specialist before beginning any construction.

TO: General Contractors/Building Owners/Architects

FROM: Asbestos & Lead Regulatory Program Permit Specialist

SUBJ: **State and Federal Regulations for Demolition & Renovation Activities**

The Asbestos NESHAP, 40 CFR Part 61, Subpart M, requires written notification of demolition or renovation operations under Section 61.145. The NESHAP Notification Form is to be used to notify the EPA of any renovation or demolition project at least 10 days prior to the start of work.

Please take a moment to visit our web site where all the latest required documentation is available for download: <http://www.healthvermont.gov/enviro/asbestos/asbestos.aspx>

For additional information or questions about accessing our forms online please feel free to contact our department:

**Drawer 30, PO Box 70
Burlington, Vermont 05402-0072
TEL 802-863-7220 VT 800-439-8550 FAX 802-863-7483**