



# CITY OF DERBY

1 Elizabeth Street, Derby, CT 06418 - (203) 736-1481

**APPLICATION MUST BE SIGNED IN INK**

## APPLICATION TO DEMOLISH

To the Building Inspector of the City of Derby, CT:

The undersigned hereby applies for a permit to demolish a building according to the following detail:

Location: \_\_\_\_\_ Main or accessory building: \_\_\_\_\_

Between what streets? \_\_\_\_\_

What used for at present? \_\_\_\_\_  
(If vacant, give use for which building was designed)

Type of construction \_\_\_\_\_

Number of stories \_\_\_\_\_ Size \_\_\_\_\_ Date work will be started on above \_\_\_\_\_

Are any Public Utility services connected to this building? Yes  No

If Yes, discontinuance of service approved by:

Eversource \_\_\_\_\_ Aquarion/RWA \_\_\_\_\_

Frontier \_\_\_\_\_ United Illuminating Co \_\_\_\_\_

City Sewer [ ] Septic Tank [ ]

### RULING

The Building Department shall be given not less than twenty-four hours' notice before the demolition of any building or structure is commenced.

In demolishing any building or structure or part thereof, story after story shall be completely removed. No material shall be placed upon a floor of any building in the course of demolition: the bricks, timbers and other parts of each story shall be lowered to the ground immediately upon displacement. The material to be removed shall be properly wet to lay the dust incident to its removal.

When any building or structure over 40 feet in height is demolished, a shed covering shall be provided.

To complete the responsibility of the demolition firm and/or the owner, the area shall be graded with well-compacted fill.

Value of Job \$ \_\_\_\_\_ License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Name of Demo Contractor: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

Signature of Demo Contractor: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Address of Demo Contractor: \_\_\_\_\_

Owner's Phone #: \_\_\_\_\_

Demo Contractor Phone #: \_\_\_\_\_

Fee \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Credit Card \_\_\_\_\_

Permit # \_\_\_\_\_ Date \_\_\_\_\_



**CITY OF DERBY**  
**BUILDING DEPARTMENT**

1 Elizabeth Street, Derby, CT 06418 - (203) 736-1481

**DEMOLITION CHECK LIST**

- Copy of Assessor's Field Card
- Copy of Demo-Contractor's License
- Copy of Demo-Contractor's Certificate of Insurance
- Demolition Permit signed by Property Owner
- Letters of Disconnect:
  - Gas – Eversource
  - Electric – United Illuminating / Eversource
  - Water – Aquarion / Regional Water Authority
  - Phone/Internet - Frontier
- Asbestos Abatement
- Letter stating where Demolition Material is going
- Well and Septic Release, if applicable – Naugatuck Valley Health District
- Check payment for Demo Permit Fee, payable to "City of Derby"
- Check payment for Fire Watch, if applicable – payable to "City of Derby"  
(payment required before demo permit can be issued)
- State of Connecticut – Demolition / Notification Form

\_\_\_\_\_  
BUILDING OFFICIAL APPROVAL SIGNATURE  
City of Derby, CT

\_\_\_\_\_  
DATE



**CITY OF DERBY**  
**BUILDING DEPARTMENT**

1 Elizabeth Street, Derby, CT 06418 - (203) 736-1481

**DERBY FIRE DEPARTMENT**  
**FIRE WATCH APPLICATION / PERMIT**

IN ACCORDANCE WITH THE ORDINANCE OF THE CITY OF DERBY ARTICLE IV SECTION 89-14 THROUGH 89-17 AS REVISED ON NOVEMBER 15, 2012, I HEREBY PROVIDE INFORMATION NECESSARY FOR THE DEMOLITION / RENOVATION, AS REQUIRED:

**APPLICANT'S INFORMATION:**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

CONTACT PERSON (IF APPLICANT IS CORPORATION): \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS TELEPHONE: \_\_\_\_\_ HOME/CELL: \_\_\_\_\_

**PROPERTY TO BE DEMOLISHED/ RENOVATED:**

PROPERTY ADDRESS: \_\_\_\_\_

DEMOLITION CONTRACTOR: \_\_\_\_\_

CONTRACTOR ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTRACTOR TELEPHONE: \_\_\_\_\_ HOME/CELL: \_\_\_\_\_

TYPE OF CONSTRUCTION:  WOOD  MASONRY  OTHER: \_\_\_\_\_

APPROX. SIZE: \_\_\_\_\_ STORIES: \_\_\_\_\_

DATE TO START DEMO: \_\_\_\_\_ DATE TO COMPLETE DEMO: \_\_\_\_\_

CONTRACTOR DAILY WORK SCHEDULE: START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

**FIRE WATCH TO COMMENCE WHEN CONTRACTOR LEAVES WORK SITE AND REMAIN ON SITE UNTIL START UP ON NEXT BUSINESS DAY (AM).**

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**FIRE DEPARTMENT APPROVAL / ASSIGNMENT:**

- CITY DEMO RATE \$20.00 PER HOUR PER MAN (MINIMUM TWO (2) MEN) PER SHIFT.
- PRIVATE DEMO RATE \$35.00 PER HOUR PER MAN (MINIMUM TWO (2) MEN) PER SHIFT.
- RATE \$100.00 PER HOUR FOR FIRE APPARATUS, IF NEEDED.

ESTIMATED COST OF FIRE WATCH: \$ \_\_\_\_\_

**SECTION 89-17 FEES FOR FIRE WATCH TO BE PAID IN ADVANCE FOR A DEMOLITION PERMIT TO BE ISSUED BY THE BUILDING INSPECTOR .**

ADVANCE PAYMENT RECEIVED: \$ \_\_\_\_\_ DATE: \_\_\_\_\_

ATTN: FIRE COMMISSIONER

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
FIRE DEPT. APPROVAL SIGNATURE  
(Fire Commissioner or Fire Chief)