

TOWN OF NORTH SALEM BUILDING DEPARTMENT  
270 TITICUS ROAD  
NORTH SALEM, NY 10560

**DEMOLITION PERMIT**

PERMIT No. \_\_\_\_\_

Fee: \_\_\_\_\_

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

OWNER: \_\_\_\_\_ Phone No. \_\_\_\_\_

LOCATION OF STRUCTURE: \_\_\_\_\_

TAX ID: Sheet \_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

---

Nature of the Proposed Demolition:

Is this Demolition Permit for a building/structure that required a building permit and Certificate of Occupancy (C.O.) or a Certificate of Completion (C.C.)? yes  no   
If yes, provide the following information about the structure:

Building Permit Number: \_\_\_\_\_

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

C. O./C. C. Number: \_\_\_\_\_

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

Additional Information:

---

Contractor \_\_\_\_\_

Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
\_\_\_\_\_

Certificate of Insurance

Additional Information:

Asbestos Certification : \_\_\_\_\_ Electrical Cut-Off Letter from NYSEG: \_\_\_\_\_

Propane/Gas Cut-off: \_\_\_\_\_ Septic abandoned: \_\_\_\_\_ Photo: \_\_\_\_\_

**APPROVED:** \_\_\_\_\_ Date \_\_\_\_\_  
Building Inspector