

# DEMOLITION PERMIT-APPLICATION

\*\*\*General information on REVERSE side of this page\*\*\*

**Demolition- Residential:** \$75.00 + \$10.00 per 100 Square Feet  
 Square Feet \_\_\_\_\_ x \$10.00 per 100' or part of + \$75.00 \_\_\_\_\_

**Demolition- Commercial/Industrial:** \$150.00 + \$10.00 per 100 Square Feet  
 Square Feet \_\_\_\_\_ x \$10.00 per 100' or part of + \$150.00 \_\_\_\_\_

**Demolition- Commercial/Residential:** \$225.00 per structure + \$10.00 per 100 Square Feet  
 Square Feet \_\_\_\_\_ x \$10.00 per 100' or part of + \$225.00 \_\_\_\_\_

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

PROPERTY INFORMATION: SECTION: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

OWNERS LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

APPLICANT LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PURPOSE OF DEMOLITION: \_\_\_\_\_

ADDRESS LOCATION OF PERMIT ACTIVITY: \_\_\_\_\_

METHOD OF DISPOSAL: \_\_\_\_\_

If using a dumpster, the Carter/Solid Waste Operator must be licensed by the Village or provide insurance as specified on the Dumpster Permit Application. A Dumpster Permit is required in addition to this Demolition Permit. Failure to do so will subject you to a summons.

### REQUIRED INFORMATION:

Is this a permit to legalize an existing structure? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Will any trees be cut down? Yes: \_\_\_\_\_ No: \_\_\_\_\_ If Yes-Tree Permit#: \_\_\_\_\_

Square Ft of Lot: \_\_\_\_\_ Sq. Ft. of Work Area: \_\_\_\_\_

Present use of Building: \_\_\_\_\_

### ARCHITECT/ENGINEER:

NAME: \_\_\_\_\_ LIC. #: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### CONTRACTOR:

NAME: \_\_\_\_\_ LIC. #: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### ELECTRICIAN:

NAME: \_\_\_\_\_ LIC. #: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### PLUMBER:

NAME: \_\_\_\_\_ LIC. #: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### EXTERMINATOR:

NAME: \_\_\_\_\_ LIC. #: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Inc. Village of New Hyde Park  
**DEMOLITION PERMIT**  
**GENERAL INFORMATION**

Application on REVERSE side of this page  
Authority: Village Code Section 71-2

**FEES:**

<b>Demolition-Residential</b>	<b>\$ 75.00 + \$10.00 per 100 Square Feet</b>
<b>Demolition-Commercial/Industrial</b>	<b>\$150.00 + \$10.00 per 100 Square Feet</b>
<b>Demolition-Commercial/Residential</b>	<b>\$225.00 + \$10.00 per 100 Square Feet</b>

1. Fee **MUST** be paid at time application is filed.
2. All fees are non-refundable.
3. All blanks on the application are to be filled in. If an item is "not applicable" note as N/A. Leave no blanks. \*\*\*  
PLEASE PRINT\*\*\*
4. All applications are subject to Village Board approval. Certain applications are issued at the discretion of the Building Department pending Board approval.
5. No license or permit will be issued if the applicant, business, or principle of the corporation submitting the application has any outstanding unpaid violations due the Village.
6. The permit issued by the Village Clerk must be prominently displayed and readily available for review by any Village designated authority.

**The following information is required to be submitted with the application.**

**Any missing information will delay the application process.**

1. Certificate from Nassau County Board of Health or a private exterminator certifying building is rodent free.
2. A sewer disconnection permit, where premises are connected to a sewer.
3. State, County and Town permits, where required.
4. All utility shutoff consents, in writing, included but not limited to water, gas and electricity, where premises are served by utilities.
5. Owner's or contractors' liability indemnifying the Village of New Hyde Park in the amount of \$2,000,000.00.
6. Proof property is asbestos free and that all necessary Federal, State, County or Town Permits have been issued for asbestos abatement.
7. Statement as to who and how demolition material will be disposed of. If by dumpster, a permit is required.

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Inc. Village of New Hyde Park

**BUILDING DEPARTMENT**

**OWNERS AUTHORIZATION**

I (we) certify that:

1. I agree to permit the Building Inspector and any officer or employee of the Village of New Hyde Park to enter upon the premises in the discharge of their duties with this application.
2. Approved plans and a copy of approved permit will remain on the premises at all times until Certificate of Occupancy/Completion is issued. These plans will be made available to the Building Inspector.
3. Building Inspector will be given a minimum of 48 hours notice to make the required inspection and no work will continue until such inspection has been completed and approved.
4. Owner or his representative will be responsible to arrange for all required inspections.

State of New York  
County of Nassau )

Property Owner-Please Print \_\_\_\_\_

Property Owner deposes and says that he/she resides at: \_\_\_\_\_

in the State of \_\_\_\_\_, that he/she is the owner in fee of all certain lots, parcel of land shown on the attached survey Section \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_ situated, lying and being within the Village of New Hyde Park; that I/we have read and understand the items 1 through 4 as here in stated, that the work to be done upon the premises, will be done in accordance with the approved application and accompanying plans, of which he/she totally familiar and that he/she hereby names \_\_\_\_\_ as his or her representative to file this application on his/ her behalf.

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

Sworn to me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Signature of Notary Public \_\_\_\_\_