NOTE: This application to be made out in duplicate, together with surveys, in triplicate, on which must be indicated the block and lot numbers or a detailed description and location of the property, also all existing buildings with distances of same from the property lines, together with names of all streets and distances from corners.

Permit No. _____

Approved _____, 20 _____

_____
Director

Per _____

Fee _____ Receipt # _____

APPLICATION FOR DEMOLITION PERMIT

Issued Pursuant to the Provisions of the Code of the Town of Huntington

TOWN OF HUNTINGTON, SUFFOLK COUNTY, N.Y.

Tax Map No. _____ Section _____ Block _____ lot _____

Zone _____ Map _____

Date _____ Section _____ Block _____ lot _____

Location _____

_____

structure(s) to be demolished _____

_____

Method of demolition (explain briefly) _____

_____

_____

How will you dispose of debris? _____

_____

_____

_____

If excavation results, how do you intend to fill? _____

_____

_____

When do you expect to start operations? _____

_____

_____

Have you advised all Public Utilities of this demolition? ☐ yes ☐ no

Is this structure(s) in a historical area? ☐ yes ☐ no

Demolition Permit is issued subject to the provisions of Section 57 of the Workman's Compensation Law.

Workman's Compensation Certificate No. _____ Expiration date _____

Company _____

AFFIDAVIT OF PROPERTY OWNER

STATE OF NEW YORK
COUNTY OF SUFFOLK } SS:

_____ being duly sworn,
Property in Name of (Individual or Corporation) Please Print

desposes and says: That he resides at _____ in the _____
Street Town or City

in the State of _____, that he is the owner in fee of all that certain lot, piece or parcel of land shown on the attached survey situate, lying and being within the unincorporated area of the Town of Huntington; that the work proposed to be done upon the said premises will be done in accordance with the approved application and accompanying plans.

That _____
Name of Applicant (Please print)

is duly authorized by the aforesaid _____ to make application for a permit to perform said work
Owner (Please print)

in the foregoing application and accompanying plans and all the statements contained herein are true to deponent's knowledge.

Sworn to me this _____ day

of _____, 20 _____

_____
Notary Public

Owner _____
Signature

Applicant _____
Signature

Address _____ Zip _____

Phone _____

NO WORK IS TO BE STARTED UNTIL PERMIT HAS BEEN RECEIVED BY APPLICANT