

DEMOLITION PERMIT APPLICATION CHECKLIST

IMPORTANT

“BEFORE PERMITS FOR DEMOLITION CAN BE ISSUED;

THE FOLLOWING DOCUMENTATION IS REQUIRED”

- 1-** Proof of Certificate of insurance holding the City of Passaic harmless.
* See attached hold harmless insurance statement
- 2-** Building Permits for Demolition shall be obtained.
- 3-** Proof of Public Service Electric & Gas (PSE&G) cutoff.
- 4-** Proof of Sewer Service capping & Water Service cutoff.
* Plumbing Permit required for Sewer/Water capped off
- 5-** Copy of Hydrant Meter Permit for “Wet Demolition”.
* Permit available at Fire Department Headquarters
- 6-** Recycling verification form.
* Fill out attached application
- 7-** Proof of Baiting/Exterminator Certification.
* Rodents/pest extermination around property
- 8-** Property Tax Certification.
* Statement may be obtained from Tax assessor’s Office.
- 9-** Copy of City of Passaic Contractor’s License.
* Commercial Properties; check License validation
- 10-** Letter from the Owner or Agent stating that all asbestos has been or will be removed.
* I certify that all friable asbestos or asbestos containing materials that will become friable during demolition or removal has been or will be properly abated prior to Demolition*
- 11-** As of January 1, 2006 a copy of State Home Improvement Contractor’s Registration.
* **Questions !** Call 1 (888) 656-6225 or log onto <http://www.state.nj.us/lps/ca/contractor.htm>.
- 12-** Copy of letters sent to owners of adjoining properties, notifying them prior to demolition.
* **Note:** The adjoining properties are those on the right; left; from and back of your property and all properties that actually touch your property. List of property owners may be obtained from Tax Assessor’s Office.
- 13-** Any disturbance of more than 5,000sq/ft of land area shall obtain a Soil Erosion & Sediment Control Permit : Hudson, Essex, & Passaic Soil Conservation District (862) 333-4505 Ext. 316

Hold Harmless Insurance Statement

The following Statement must appear on the face of the Insurance Policy:

“ The insurer hereby acknowledges that the Applicant for the above mentioned Permits is required to indemnify, defend and hold harmless the City of Passaic, its agents, servants from and against any and all claims or actions at law, whether for personal injury, property damage or liability including the cost of defense incurred by the City of Passaic and for payment of any acts or omission of the applicant, his agents, employees or servants in the exclusion of the work or the duties or both to be performed under the permit to be issued by the City of Passaic, which are deemed not to be the sole responsibility of the City of Passaic”

***** THIS EXACT STATEMENT MUST APEAR ON
THE INSURANCE POLICY, WE WILL BE
UNABLETO ACCEPT THE
INSURANCE POLICY WITHOUT IT !!! *****



MAYOR HECTOR C. LORA
CITY OF PASSAIC
RECYCLING VERIFICATION FORM

Contractor Information

Name: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone: (____) _____ - _____

Work Site Location

Address: _____

Description of Work: _____

Start Date: ____/____/____

Recycling Information

- CONCRETE ROOFING MATERIAL DEMOLITION DEBRIS
 BLACKTOP WOOD STUMPS OTHER _____

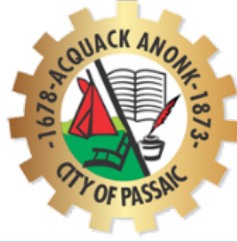
Name of Recycling Company: _____

Address: _____

Signatures

Contractor/Agent: _____

Print Name: _____



MAYOR HECTOR C. LORA

Demolition Permit Information & Application Checklist

DEMOLITION

IF ANY STRUCTURE ON THE SUBJECT PROPERTY NEEDS TO BE DEMOLISHED, IT IS IMPORTANT FOR YOU TO OBTAIN FROM THE DESIGNATED CITY AGENCIES ALL NECESSARY DOCUMENTS FOR THE SUBMISSION TO THE UCC OFFICE IN ROOM# 205 OF CITY HALL, ALONG WITH A BUILDING APPLICATION FOR DEMOLITION.

***** IMPORTANT NOTICE *****

**FINAL INSPECTION IS REQUIRED BEFORE BACKFILL ON ALL DEMOLITION PERMITS OR YOU MAY SUBJECT TO A
“PENALTY”**