



**APPLICATION  
for  
DEMOLITION PERMIT REVIEW**

Received by Building  
Inspections Department

Application Date: \_\_\_\_\_

**Please ensure all applicable fields are completed.**

Address of building proposed to be demolished: \_\_\_\_\_

**Applicant**

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Phone number  
\_\_\_\_\_  
E-mail

**Property Owner (if different)**

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Phone number  
\_\_\_\_\_  
E-mail

Description of building: \_\_\_\_\_  
(e.g., colonial farmhouse, cape cod colonial)

Number of stories: \_\_\_\_\_

Current use: \_\_\_\_\_  
(e.g., home, retail business, vacant etc.)

Additions/other identifying features: \_\_\_\_\_

Description of and reason for demolition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of proposed re-use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age of building listed on Assessor's Field Card\_\_\_\_\_

Does the building lie in the FEMA FIRM Velocity Zone (circle) Yes or No

Additional Information that is helpful to the Historical Commission:

\_\_\_\_\_  
Applicant’s signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property owner’s signature (if different)

\_\_\_\_\_  
Date

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The following to be completed by Historical Commission

\_\_\_\_\_

**DETERMINATION**

**€ Significant**

Hearing date scheduled: \_\_\_\_\_  
(date)

Building Inspector notified: \_\_\_\_\_  
(date)

Owner notified: \_\_\_\_\_  
(date)

\_\_\_\_\_

\_\_\_\_\_  
Date

**€ Not Significant**

Building Inspector notified: \_\_\_\_\_  
(date)

Owner notified: \_\_\_\_\_  
(date)