

Village of New York Mills
Codes Department
1 Maple Street, New York Mills, NY 13417
315-736-9212 ext 227
Demolition Permit

Application Approved _____

Permit No. # _____
(Expires One (1) Yr. From Date of Approval)

Codes Enforcement Officer _____

Date _____

This application must be completely filled out in ink (**PLEASE PRINT CLEARLY**) and submitted to the Codes Enforcement Officer.

Application is hereby made to the Codes Enforcement Officer for the issuance of a Demolition Permit pursuant to The Codes of New York State for the removal or demolition, as herein described. The applicant shall comply with all applicable laws, ordinances and regulations.

NOTE: If asbestos removal is required by the Codes Enforcement Officer, Industrial Code Rule 56, shall be complied with.

Applicant:

Name: _____

Address: _____

Phone No. #: _____

Check if Applicant is: Owner _____ Lessee _____ Agent _____ Architect _____ Engineer _____ Builder _____

Owner of Premises:

Name _____

Address _____

Type of Structure _____

Name of Contractor, Address:

Name of Compensation Insurance Carrier:

Number of Policy: _____ Date of Expiration _____

(CERTIFICATE OF INSURANCE SHALL BE SUBMITTED)

Date

Signature of Applicant

