



BUILDING DEMOLITION Permit Application

Application Date/_	/ Received by	
Permit Issued/	/ Issued by	
Applicants name		
Where is the current locati	on of the structure proposed to be	<u>demolished?</u>
Parcel Id#	Property Address:	
	Name:	
	Mailing Address:	
	Owners Phone#:	
Who is demolishing the str	ucture?	
Demolition or Moving Con	ntractor:	
	Address:	
•		
Contact	Person:	
		
A licensed plumber is reau	ired to disconnect and can existing	g water and sewer laterals. Are there currently
-	erving the site? YES NO	•
If yes, please complete this	·	,
• •	g Contractor:	
	Mailing Address:	
Phone:	, maning radicess.	
Master P	lumbers name:	Certification Number:
Description of Work: (Incl	ude size and type of structure being	g demolished)
Project Start Date:	Expected Completic	on Date:
	emolition project \$	
Approximate cost of the de	mondon project \$	-

Owner/Contractor must contact the following a minimum of 2 business days before any work is started to schedule required inspections:

- City of Ashland Building Inspection Dept. 715-682-7002
 - City of Ashland Utility Dept. 715-682-7194

^{*}Please provide a complete application and package or delays in the processing of your application may occur.

GENERAL REQUIREMENTS

1. The Owner or Contractor shall contact the following for scheduling disconnection of applicable services: * Natural Gas and Electrical Services – Xcel Energy 800-628-2121 * Sewer and Water Services - City of Ashland Utility Dept. 715-682-7194 * POWTS Systems- Ashland County Zoning Dept. 715-682-7014 * Propane Tank- Local provider. * Phone and Cable- Local provider NOTE: All services shall be capped, abandoned or terminated as required by the regulating authorities for each utility. Have all applicable providers been contacted to discontinue their services? Yes No 2. Are there any private septic systems on the site? Yes ____ No ____ If yes, the POTWS system shall be properly abandoned in accordance with Comm. 383.33 of the State Plumbing Code. 3. Are there any private wells on the site? Yes_____ No____ If yes, the well shall be properly abandoned by a well drilling or pump installing business or licensed water well driller or pump installer in accordance with Department of Natural Resources regulation NR 812.26 and other related requirements. Attach copies of approval letters from the regulating authorities if required. Who will be responsible for the proper abandonment of the on-site well? Name _____License number _____ 4.It is the contractor's responsibility to minimize airborne dust in accordance with NR 415 of the Wisconsin Administrative Code through the application of water or other approved methods during the demolition and loading process. Please describe the dust control methods that will be used: 5. NR 447 of the Wisconsin Administrative Code requires that all commercial structures and residential structures having more than 4 dwelling units be inspected for the presence of asbestos by an asbestos inspector licensed by the WI Department of Health and Family Services (DHFS). See DNR publication WA-651-07 for more detailed information. Will this project involve the demolition of a commercial structure or residential structure having more than 4 dwelling units? If yes, you must attach a copy of the asbestos inspection report meeting the requirements of NR 447 prior to issuance of the demolition permit. 6. When a structure is being demolished, all remaining concrete slabs, below grade footings, walls, and floors shall be completely removed and hauled off site to an approved disposal site. (Some exceptions to this removal requirement may be granted for on grade slabs proposed to be used for parking or other approved uses). Clean Suitable Soil shall be brought in to bring the site back to level grade. The affected area shall be graded to eliminate ponding and allow for natural drainage patterns. Topsoil shall be installed and the affected area re-seeded to stabilize the site. Proper erosion control measures shall be installed and maintained where needed until the new vegetation has been established. Will there be a need to remove any remnant concrete or block from this site after the structure is demolished? Yes____ No____ If No, Please explain why:_____ If yes: Please describe the erosion control measures that will be installed and maintained until the site has stabilized. For disturbed sites exceeding 1 acre in size you must submit a formal erosion control and maintenance plan in accordance with sections 8.2 and 8.3 of the UDO.

7. The disposal of all demolition materials s proposed haul route and disposal site(s) for		en permitted for disposal/recycling. Please describe the
right-of-way or if access to or from the proj	ect site could cause damage to protecting the City of Ashland Pubhis project? Yes No	
9. It is the owner/contractor's responsibility	y to properly secure the site for I	public safety.
	City of Ashland Planning and D	Per Registry? Yes No Development Dept. (715-682-7002) to ensure that all work Appropriateness may be required prior to the issuance of
REQUIRED SIGNATURES PRICE	OR TO THE ISSUANCE	OF THE DEMOLITION OR MOVING
complete and accurate, and I hereby agree t State of Wisconsin regulations and any con	o comply with the above-noted a ditions attached hereto. I am also that I may be cited for non-con	I certify that the information provided on this form is requirements and any other applicable City of Ashland and so aware that if I or my contractors do not follow the impliance and I understand that the penalties may range from these.
Property Owner (Print Name)	_	
Property Owner's Signature	Date	
owner to perform the work described in this comply with the above-noted requirements any conditions attached hereto. I will contact days before any work is started to schedule	s application and that all information and any other applicable City of the Ashland Building Inspector required inspections. I am award compliance and I understand that	that I have entered into an agreement with the property lation provided is complete and accurate. I hereby agree to of Ashland and State of Wisconsin codes and ordinances and or and the Ashland Utility Department at least 2 business are that if I do not follow the requirements as specified in at the penalties may range from \$50 to \$500 per municipal
Contractor (Print Business Name)	_	
Contractor's Signature	(Drint contractors name)	Data
Contractor's Signature	(Print contractors name)	Date

Are there any water or sewer laterals, of Yes No If yes, then the licen		serving the site?	
Plumber: I have entered into an agre properly abandon any POWTS systems accordance with all applicable City of A I am aware that if I do not follow the reunderstand that the penalties may range	currently serving the site. I under ashland building codes & ordinance quirements as specified in this app	estand that it is my responsibility to sees and all State of Wisconsin rule dication that I may be cited for no	o complete this work in s, regulations and statutes. n-compliance and I
Plumber (Print Business Name)			
Plumbers Signature	(Print plumbers name)	 	
Plumbers Certification #			
Public Works Department: I ha conditions: (If none then so state)	ve reviewed this application and a	pprove the issuance of this permit	with the following
Public Works Director or authorized rep	presentative (Signature)	 Date	
Department of Planning and D the following conditions: (If none then		nis application and approve the issu	uance of this permit with
Building Inspector or authorized represe	entative (Signature)	Date	
(In order to ensure compliance with t may be required by the City on large current demolition projects)			
(A Copy of this fully signed and approv	ed application is to be provided to	all affected parties prior to the wo	ork commencing.)