

# DEMOLITION CHECK LIST

PREMISES: \_\_\_\_\_

1. Is this permit application for the demolition of a primary structure? Yes No \_\_\_\_\_  
2. Is this permit application for the legalization of a completed demolition? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, complete section A only.

If yes, complete section B only.

**Section A**  
**Yes / No**

**ITEM**

|       |   |
|-------|---|
| _____ | Pre-Demo Inspectors Report                          |
| _____ | Worker's Compensation Insurance                     |
| _____ | Disability Benefits Insurance                       |
| _____ | Street Obstruction Bond                             |
| _____ | Rodent Control                                      |
| _____ | Gas / Electric Cut-Off                              |
| _____ | Sewer Cut-Off                                       |
| _____ | Water Cut-Off                                       |
| _____ | SRO Intake Form (SRO1) (Single Room Occupancy)      |
| _____ | 5 Day Prior Notice To Adjoining Property Owners     |
| _____ | Community Board Notification                        |
| _____ | 4 Docket Information Sheets                         |
| _____ | Asbestos Report                                     |
| _____ | BN or Permit for asbestos removal (If Necessary)    |
| _____ | Photographs   |
| _____ | BN for Fence or NB Application                      |
| _____ | ** Appointment Card from B.E.S.T. Squad             |
| _____ | No Landmark Designation or Calendar By              |
| _____ | A letter from the Landmarks Preservation Commission |

**SECTION B**  
**Yes / No**

**ITEM**

|       |   |
|-------|---|
| _____ | Inspectors Report                               |
| _____ | Gas / Electric Cut-Off                          |
| _____ | Water / Sewer Cut-Off                           |
| _____ | Rodent Control                                  |
| _____ | Former Landmark                                 |
| _____ | BN for fence                                    |
| _____ | Photograph                                      |
| _____ | Tittle Search                                   |
| _____ | Deed indicating transfer of unimproved property |
| _____ | ** Appointment Card from B.E.S.T. Squad         |

If "Yes" to the last two (2) items the remaining items need not be filed.

|       |   |
|-------|---|
| _____ | ECB Violation(s) for Illegal Demolition   |
| _____ | Copy of Contractors Payroll <u>or</u> New workers Compensation Insurance Coverage |
| _____ | Asbestos Report <u>or</u> DEP Verification of No Asbestos                         |