

# DEMOLITION OR REMOVAL OF STRUCTURES

## CHECK LIST

- [ ] OWNER INFORMATION
- [ ] CONTRACTOR INFORMATION
- [ ] PROOF OF PAID TAXES, SEE ATTACHED FORM
- [ ] COPY OF LIABILITY INSURANCE COVERAGE [MINIMUM \$300,000.00]
- [ ] SERVICE DISCONNECTION:
  - [ ] a. CITY WATER, CERTIFICATION FROM M.U.A.
  - [ ] b. CITY SEWER, CERTIFICATION FROM THE M.U.A.
  - [ ] c. WELL WATER, CERTIFICATION BY LICENSED D.E.P. WELL DRILLER
  - [ ] d. SEPTIC SYSTEM, U.C.C. PERMIT OR CERTIFICATION FROM THE OCEAN COUNTY HEALTH DEPARTMENT
  - [ ] e. ELECTRICITY, CERTIFICATION FROM THE POWER COMPANY
  - [ ] f. NATURAL OR PROPANE GAS, CERTIFICATION FROM THE GAS COMPANY
  - [ ] g. CABLE TELEVISION, CERTIFICATION FROM SUPPLIER
  - [ ] h. TELEPHONE, CERTIFICATION FROM SUPPLIER
  - [ ] i. APPURTENANT EQUIPMENT, PERMIT OR CERTIFICATION
  - [ ] j. SUBTERRANEAN IMPROVEMENTS, TANKS ETC., U.C.C. PERMIT
  - [ ] k. OTHER \_\_\_\_\_, U.C.C. PERMIT OR CERTIFICATION
  - [ ] l. NEW JERSEY ONE CALL [811]. CALL THREE DAYS BEFORE YOU DIG
- [ ] NOTICE TO ADJOINING OWNERS, COPY OF CERTIFIED MAIL
- [ ] ASBESTOS ABATEMENT, PERMIT OR CERTIFICATION FROM COUNTY OR STATE
- [ ] ERADICATION OF RODENTS AND VERMIN, CERTIFICATION REQUIRED
- [ ] FUMIGATION, U.C.C. PERMIT IF REQUIRED
- [ ] REQUIRED U.C.C. PERMITS FROM THE BUILDING DEPARTMENT
- [ ] **SITE VISIT BY THE BUILDING DEPARTMENT PRIOR TO THE START OF WORK**

### **BEFORE CLOSING PERMIT:**

- [ ] RESTORATION OF THE SITE WITHIN (5) BUSINESS DAYS
- [ ] DUMP RECEIPTS

**Municipal Utility Authority: 732-928-2222**  
**Ocean County Health Department: 732-341-9700**  
**NJ Department of Labor, Asbestos Control 609-633-2159**