

# Demolition Permit Application

City of Rockland Code Enforcement Office

270 Pleasant Street  
 Rockland, Maine 04841  
 TEL (207) 594-0308 FAX (207) 594-9481  
 City's Web: [www.ci.rockland.me.us](http://www.ci.rockland.me.us)  
 Code Office: [rocklandcode@ci.rockland.me.us](mailto:rocklandcode@ci.rockland.me.us)

Property Address	Zoning District	Tax Map, Block & Lot	
Owner's Name	Owner's Phone Email		
Owner's Address	City	State	Zip
Applicant's Name (if different from owner)	Phone Email		
Contractor's Name	Phone Email		

### Building Information

Is building connected to City sewer or septic system? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is building connected to public water supply? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is building serviced by electricity? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is basement a full basement? <input type="checkbox"/> Yes <input type="checkbox"/> No	Basement depth: _____ feet Sq. ft. of basement: _____ by _____	Sq. ft. of bldg: _____ by _____

### Existing or Previous Use of Building to Be Demolished

<input type="checkbox"/> <b>Residential:</b> <input type="checkbox"/> Dwelling Building: # of units: _____ <input type="checkbox"/> Garage/barn <input type="checkbox"/> Shed <input type="checkbox"/> Other: (ie, el) _____ <input type="checkbox"/> <b>Non-Residential/Mixed Use</b>	<b>Brief Description of What is to be Demolished:</b>
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I hereby certify that the owner has authorized the proposed demolition and that I have been authorized by the owner to make this application. I also certify that the information provided is accurate to the best of my knowledge and agree to conform to all applicable laws of this jurisdiction.

<b>Signature of Owner or Applicant:</b> _____	<b>Address:</b> _____	<b>Date:</b> _____
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### NOTES TO APPLICANT:

**Disposal of demolition debris in the City of Rockland Landfill must meet the requirements and specifications of the Solid Waste Facility and Landfill Ordinance.**

**The Demolition Permit requires that building sewer lines be capped, water shut off and electricity terminated. Oil tanks must be properly emptied, removed and disposed of appropriately.**

**Appropriate safety precautions in accordance with Section 4 of the Rockland Code must be taken.**

<b>Code Enforcement Officer:</b> _____	<b>Date:</b> _____
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For Office Use Only		Rev. 05-17-2016
Permit # _____	Account # <b>3251</b>	Date _____ Receipt # _____ Paid By _____
Deposit \$ _____	Account # <b>3261</b>	Date _____ Receipt # _____ Paid By _____

**DEPOSIT IS REFUNDABLE ONCE PROPERTY IS RETURNED TO SAFE AND PROPER CONDITION PENDING INSPECTION BY CODE OFFICE**