

Village of Liverpool

310 Sycamore Street, Liverpool, NY 13088 Phone: (315) 457-3441, Fax: (315) 457-5119 Email: codes@villageofliverpool.org

Demolition Permit Application

All applicable sections of this application must be completed or the application will be returned.

OFFICE USE ONLY					
Permit Number:	Date Received:				
Approved By:	Date Approved:				
Cost of Work:	Permit Fee: \$				
Denied By:	Date Denied:				
Reason Denied:					

be completed or the application will be returned.								
PROPERTY LOCATION & OWNER								
PROPERTY ADDRESS				TAX MAP NO.				
PROPERTY OWNER		ADDRESS ☐ Same as above			OWNER PHONE			
CITY		STATE	ZIP		OWN	OWNER EMAIL		
G		52						
APPLICANT ☐ Same as above	APPLICANT ☐ Same as above							
NAME				RELATIONSHIP TO OWNER				
ADDRESS					PHONE			
CITY		STATE ZIP			EMAIL			
PROJECT DETAILS								
PROJECT TYPE		PROPOSED LOCATION FO	R DEBRIS	DISPOSAL		ESTIMATED COST	OF ALL WORK – MATERIALS AND LABOR	
☐ Residential ☐ Commercial						\$		
DESCRIPTION OF PROPOSED WORK	DESCRIPTION OF PROPOSED WORK							
DEMOLITION CONTRACTOR				DESIGN PROF	ESSION	NAL		
COMPANY NAME				NAME				
ADDRESS				ADDRESS				
CONTACT NAME	PHONE			PROFESSION ☐ RA ☐ PE	SSION PHONE A PE Other			
EMAIL				EMAIL				
ASBESTOS SURVEY CONTRACTOR				ASBESTOS ABATEMENT CONTRACTOR				
COMPANY NAME				COMPANY NAME				
ADDRESS				ADDRESS				
CONTACT NAME	BUGNE			CONTACTALANA			Laurans	
CONTACT NAME	PHONE	:		CONTACT NAME	Ē		PHONE	
APPLICANT CERTIFICATION								
I agree this permit is only for the work described, and does not grant permission for additional or related work that requires separate								
permits. I hereby certify that the proposed work is authorized by the owner, and that I am authorized by the owner to make this application								
as his/her authorized agent. I agree to conform to all applicable laws of the State of New York and the Village of Liverpool. All information on								
this permit application is accurate to the best of my knowledge.								
Inspections Required: I understand I am responsible to ensure that the required utility inspections are performed by the appropriate inspector and have been approved prior to concealing any work.								
Consent to Enter Property: By signing this application I agree to allow representatives of the Village access to the above referenced								
property at reasonable times to ascertain compliance with any resulting permit.								
SIGN HERE		PRINT NAME				DATE		

Demolition Permit Application Procedure

Village of Liverpool

310 Sycamore Street, Liverpool, NY 13088 Phone: (315) 457-3441, Fax: (315) 457-5119

Email: codes@villageofliverpool.org

A)	Complete all applicable sections of the Demolition Permit Application.								
B)	Sign and date the bottom of the application.								
C)	Submit the following required items with your completed application:								
	(Some may not be applicable to your project)								
	Copy of a property survey indicating the project location								
	An asbestos survey (does not apply to owner-occupied single family dwellings where the owner								
	performs all of the work)								
	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $								
	siltation control measures to be installed								
	Approved Site Development Permit (If disturbing one acre or more of land)								
	Contractor Insurance Certificates with the Village of Liverpool as certificate holder:								
	o General Contractor's Liability Insurance Certificate								
	 General Contractor's Workman's Compensation Insurance Certificate or exemption 								
	Please Note: ACORD forms, while acceptable proof of General Liability Insurance, are NOT acceptable as proof o NYS Worker's Compensation Insurance or Disability Benefits Insurance coverage!								

- General Contractor's Disability Insurance Certificate
- D) Typical applications take 3-5 days to review.
- E) Any erosion, runoff and siltation control measures must be inspected and approved before work can commence.
- F) Length of validity. Permits shall be valid for up to six months from date of issue. The time period may be extended for good cause provided that an extension application is submitted prior to the expiration date.
- G) Call 811 Before You Dig! You must call for a location request at least two working days but not more than 10 working days before any excavation starts.
- H) The applicant shall be responsible for:
 - a. Proper disconnection of all utilities including water, gas, electric, sewer, telephone, cable, etc.
 - b. Obtaining a sewer disconnect permit from Onondaga County Plumbing.
 - c. Calling 811 before bringing heavy equipment on site or excavating.
 - d. Erosion, runoff, and siltation control measures in accordance with New York State guidelines.
 - e. Dust, mud, and debris control on public highways.
 - f. Maintaining fire department access to the site and maintaining fire extinguishers when required.
 - g. Proper waste disposal.
 - h. Reclamation, including suitable replacement of ground cover, topsoil and seeding.