



TOWN OF SANDWICH

8 MAPLE STREET ~ PO BOX 194
SANDWICH, NEW HAMPSHIRE 03227
(603) 284-7701

DEMOLITION APPLICATION PERMIT BY NOTIFICATION

Date: _____

Owner(s) Name: _____

Contractor / Owner's Agent¹: _____

Street Location: (include street number): _____

Tax Map: _____ Lot Number: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Project Details: Town sewer () Yes () No

Demolition Project Description: _____

How will you be disposing of the demolition debris? Note: If burning of debris is contemplated, permission is required from the Sandwich Fire Department. _____

Date demolition will begin: _____ (Permit VOID six (6) months from date of issue)

Attach the following:

- NHDES Asbestos Demolition / Renovation Notification Form
Asbestos Program
NHDES Air Resources Division
(603) 271-1373 or (603) 271-1370
<https://www.des.nh.gov>
- Lead Paint Assessment required for all buildings built prior to 1978
- Site fencing and stabilization plan, if applicable
- Application fee: \$25. Please make checks payable to: "Town of Sandwich"

The undersigned hereby applies for permission to raze, demolish, and dispose as described in this application and attached documentation. Demolition shall be completed in accordance with all applicable Town of Sandwich, State of New Hampshire, and United States laws and regulations. I hereby attest that all information on this application is true and correct to the best of my knowledge. The permit shall become invalid unless demolition within six (6) months of issuance. This permit is issued only for the use set forth in the application.

¹If an agent is representing the property owner(s), a letter or email from the property owner(s) to the Selectmen's Office giving approval to the Agent representing the property owner(s) must be received by the Selectmen's Office as part of the application submission.

Signature of Property Owner(s) and/or Agent¹

Burn Permit Issued By: _____ Fire Department Official	Date: _____
Permit Issued By: _____ Compliance Officer/Selectman	Date: _____