



DEMOLITION PERMIT
Town of Islip Building Division
1 Manitton Court, Islip, NY 11751
www.islipny.gov

COMPLETE THIS APPLICATION AND SUBMIT TO THE PERMITS DEPARTMENT ALONG WITH ALL REQUIRED DOCUMENTATION LISTED BELOW.

This permit expires 4 months from the date of issuance.
NO RENEWALS ALLOWED

Subject Address: _____ Bldg./House No _____ Street _____ Suite _____
 City _____ State _____ Zip _____
Tenant Name: _____ **Unit #:** _____
 (if applicable)
Property Type: Commercial* Residential
 *Additional permit requirements may apply, please check with a Plans Examiner

FOR OFFICE USE ONLY

PLACE STICKER HERE

Filing Date: _____ By: _____

Zoning Letter for Applicant: <input type="checkbox"/> Yes <input type="checkbox"/> No	As-built Survey Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Zoning Approval Date: _____ N/A	By: _____ N/A
Plans Examiner Approval Date: _____	By: _____
Approved to Issue Date: _____	By: _____
Issued Date: _____	By: _____
Permit Expiration Date: _____	
Special Conditions of Permit: _____	
Filing Fee: \$ _____	Receipt #: _____
Permit Fee: \$ _____	Receipt #: _____
Total Fee: \$ _____	C/O Issued: _____

Property Owner*: _____ Company (if applicable) _____ Contact/Homeowner _____ Email _____ Phone _____

Owners Address: _____ (if different than subject address) House No / Street _____ City _____ State _____ Zip _____

Expeditor or Design Professional / Applicant: _____ (if different than property owner) Business Name _____ Contact Name _____ Email _____ Phone _____

Business Address: _____ No / Street _____ City _____ State _____ Zip _____

Contractor: _____ Business Name _____ Contact Name _____ Email _____ Phone _____

Business Address: _____ No / Street _____ City _____ State _____ Zip _____

*If property was purchased within the last 6 months, a copy of the deed, or closing papers indicating the deed was sent to Suffolk County to be recorded is required. If property owner is a corporation or LLC, legal paperwork stating the person signing the application is an authorized signator for the Corporation or LLC is required.

IMPROVEMENTS TO BE DEMOLISHED / REMOVED:

Main Structure: Yes No **Detached Garage:** Yes No **Pool:** Yes No

Cesspool / Septic System: Yes No **Shed:** Yes No **Cesspool / Septic System:** _____

Driveway (residential): Yes No **Parking Lot (commercial):** Yes No **Other:** _____

Trees (A separate land clearing permit may be required): Yes No **Parking:** **Trees:** _____

Driveway (residential): _____ **Lot (A separate land clearing permit may be required):** _____

REQUIRED DOCUMENTATION:
 Please note, if anything other than structures are to be removed, Engineering review will be required.

1. **Survey:** Two (2) copies of an accurate survey are required. All surveys must have been prepared by a licensed surveyor, be scalable and must accurately depict all existing structures on the property. All and show structures and/or improvements to be

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- removed must be marked on the survey or a site plan, and the areas of disturbance must be dimensioned. The dimensions of the area of disturbance must be detailed on the survey.
- 23. Erosion Control Plan:** An Erosion Control Plan is required if the project will result in ground disturbing activity.
 - 2. Storm Water Pollution Prevention Plan (SWPPP):** If area of disturbance is one acre or more and drains to a NYS Waterway, a SWPPP may be required at the discretion of the Town Engineer in compliance with NYSDEC regulations.
 - 3. Erosion Control Plan:** An Erosion Control Plan is required if the project will result in ground disturbing activity.
 - 43. Right of Way Work Permit:** Any work on Town, County or State property will require the appropriate Right of Way work permit. This may involve the removal of an apron, sidewalk or any work in the roadway or property extending 8-10ft typically behind the curb to the applicant's property line.

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REQUIRED DOCUMENTATION CONTINUED:
Please note, if anything other than structures are to be removed, Engineering review will be required.

543. Disconnect letters from the following agencies:

- a. PSEGLI
- b. Suffolk County Water Authority
- c. National Grid *(If there is no gas to the structure, a letter from National Grid is required stating there is no gas.)*
- ~~d. Sewer District (If the parcel isn't within the boundaries of Suffolk County Department of Public Works (SCDPW) Sewer District, a letter is required stating the parcel is not within the boundaries of SCDPW Sewer District, is to be provided)~~

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REQUIRED DOCUMENTATION CONTINUED:

653. Asbestos Certification:

- a. Copy of Asbestos Handling License
- b. Copy of Asbestos Certificate (front and back)

764. If asbestos is present: Remediation report & lab results to be provided.

87. Other: Additional requirements may be required by the Engineering Division, including a -if the area of disturbance is over one acre, your application will be forwarded to the Engineering Division for review-
Storm Water Pollution Prevention Plan (SWPPP) if -if the area of disturbance is one acre or more and drains to a NYS Waterway - a SWPPP may be required at the discretion of the Town Engineer in compliance with NYSDEC regulations.

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OTHER IMPORTANT DOCUMENTS:

Prior to issuance of a permit, the following Insurance Certificates are required:
(ACORD Forms are not acceptable proof of NYS Workers' Compensation or Disability Benefits Insurance Coverage)

- a. NYS Workers' Compensation Insurance: NYS Form C-105.2, NYS GSI-105.2 (2/02), NYS Form U-26.3, or if exempt, signed and dated CE-200 Form
- b. NYS Disability Insurance: NYS Form DB-120.1, NYS Form DB-155, or if exempt, signed and dated CE-200 Form

Exception: If demolition work is to be done by the Property Owner, an original signed BP-1 Insurance Waiver is required.

I understand that the Town is relying on the information provided herein. Any inaccuracy may cause delays and/or additional fees. I swear this application is a true and complete statement of all work to be done on the desired premises. This permit issuance expressly implies approval by the landowner of inspection required of the premises. By submitting this application, I acknowledge and agree that a modification or addition may be made to the Certificate of Occupancy/Compliance. No further notice of any resultant modification or addition shall be required.

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PROPERTY OWNER:	SWORN TO ME THIS	NOTARY STAMP
_____	DAY OF _____, 20 _____	
<small>PRINT NAME</small>		

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SIGNATURE _____	NOTARY PUBLIC _____	
CONTRACTOR:	SWORN TO ME THIS	NOTARY STAMP
PRINT NAME _____	DAY OF _____, 20 _____	
SIGNATURE _____	COUNTY HOME _____ IMPROVEMENT LLC # _____	NOTARY PUBLIC _____
EXPEDITOR/DESIGN PROFESSIONAL:	SWORN TO ME THIS	NOTARY STAMP
PRINT NAME _____	DAY OF _____, 20 _____	
SIGNATURE _____	NOTARY PUBLIC _____	