

**TOWN OF ENFIELD, NEW HAMPSHIRE
DEMOLITION PERMIT**

PLEASE PRINT OR TYPE -- INK ONLY

OFFICE USE ONLY
No.

Date: _____

This is to certify this permit is issued to:

Name

Telephone

Mailing Address

Telephone

Email Address

Map #

Lot #

Address of DEMOLITION

Zone

Serial #

In accordance with the applicable Zoning and Building Regulations of the Town of Enfield for the purpose of:

Asbestos Abatement Performed Date: _____

Contractor's Name (**print**)

Telephone

Contractor's Mailing Address

Email Address

I hereby certify that all information herein is true and complete to the best of my knowledge, that all work performed for which this permit is issued will comply with all pertinent Town or State Ordinances, that all debris will be disposed of in an appropriate licensed landfill, and that all utility companies serving the DEMOLITION site have been notified of my intent. (Applicant: Please attach list of utility companies names and addresses.)

Signature of Property Owner

Date

Signature of Building Official

Date

CALL WHEN READY FOR INSPECTION, GIVING 24 HOURS NOTICE

**** BUILDING PERMIT MUST BE PICKED UP AND PAID FOR BEFORE CONSTRUCTION BEGINS ****

Note: Construction and demolition debris is not accepted at the Enfield Transfer Station and Recycling Center, but must be disposed of at the Lebanon, NH or Hartford, VT Landfills