



# TOWN OF RAYMOND

Building Department  
Office of Code Enforcement  
4 Epping Street  
Raymond, NH 03077

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<http://www.raymondnh.gov>

## Demolition Permit Application

### Property & Structure Information - Where and what is being proposed for demolition?

Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Tax Map#: \_\_\_\_\_ Lot #: \_\_\_\_\_

Square Footage of Structure being Demolished: \_\_\_\_\_ Estimated Cost of Demolition: \_\_\_\_\_

Description of Structure being Demolished: \_\_\_\_\_ Age: \_\_\_\_\_

Use of Structure: Residential \_\_\_ Commercial: \_\_\_ Industrial: \_\_\_ Municipal: \_\_\_ Other: \_\_\_\_\_

Anticipated Demolition Timeline: Start: \_\_\_\_\_ Finish: \_\_\_\_\_

### Owner Information - Who owns the property where the demolition is being proposed?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Applicant Information - Who will be performing the demolition work?

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Disposal of Materials - How will the demolition debris be disposed?

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Hazardous Materials - List any hazardous materials being removed (e.g. asbestos siding).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Signature of Applicant

I hereby declare that the statements and information contained on this application and submitted in conjunction with said application are true and accurate, to the best of my knowledge. I understand that I am responsible for ensuring all construction or other work will be completed in accordance with applicable Federal, State and Local laws, regulations, codes and ordinances, including but not limited to the State of New Hampshire Building Code (RSA 155-A). I understand that I am responsible for ensuring all inspections will be completed as required by the Town of Raymond and that no structure will be used in violation of Federal, State and Local laws, regulations, codes and ordinances. The making of a false statement on this application shall constitute a criminal offense.

I hereby certify that I am signing this application as the: Property Owner: \_\_\_\_\_ Authorized Agent: \_\_\_\_\_\*

\*If you are not the property owner, a notarized letter of permission from the owner authorizing you to submit this application is required.

Attest: \_\_\_\_\_

Signature of Applicant

Date: \_\_\_\_\_