



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 date of issuance.
NO RENEWALS ALLOWED.

Subject Address: _____
House No / Street

City _____ State _____ Zip _____

FOR OFFICE USE ONLY

0500- _____

ADDRESS _____

POST OFFICE _____ ZONE _____

SPECIAL CONDITIONS _____

DATE FILED _____ BY _____

DATE ISSUED _____ BY _____

TOTAL FEE _____

RECEIPT # _____ C/C ISSUED _____

Property Owner: _____
Full Name Email Phone

Owners Address: _____
House No / Street City State Zip

Expeditor / 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

REQUIRED DOCUMENTATION:

- Survey – Two (2) copies of Survey.
- PSEGLI – Disconnect Letter.
- National Grid – Disconnect Letter or letter stating there is no gas to the structure.
- SC Water Authority – Disconnect Letter.
- Sewer District – Disconnect Letter or letter stating the parcel is not within the boundaries of a SCDPW owned Sewer District.
- Asbestos Certification – If asbestos is present, remediation report is required.
- Application Fee – Please visit <http://islipny.gov/departments/planning-and-development/building-division-permits-section> for our current fee schedule. The final fee will be determined by the Permits Department.

STRUCTURES TO BE DEMOLISHED:

Main Structure Shed

Detached Garage Pool

Other _____

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 on the desired premises. This permit issuance expressly implies approval by the landowner of inspections 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.

PROPERTY OWNER:

CONTRACTOR:

PRINT _____ SIGNATURE _____

PRINT _____ SIGNATURE _____ SC HOME IMPROVEMENT LICENSE # _____

SWORN TO ME ON THIS _____ DAY OF _____, 20____

SWORN TO ME ON THIS _____ DAY OF _____, 20____

NOTARY PUBLIC _____

NOTARY PUBLIC _____

SIGNATURE _____

SIGNATURE _____