Planning and Community Development
Cynthiana - Harrison County - Berry Planning Commission

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DEMOLITION APPLICATION

PERMIT NUMBER _____ City ☐ County ☐

Applicant	**Contact Name**
Address	**Contact Number**
Applicant is: ☐ Owner ☐ Contractor ☐ Both	
Type and Size of Building:	
Location of Demolition:	
Disposal of demolition debris:	
Landfill location:	
Description of Demolition Plan:	

Submit the following with this application:

- ☐ Illustration of property and building to be demolished.
- ☐ Plan for demolition of structure and disposal of demolition debris.
- ☐ Copy of asbestos testing paperwork (original should go to EPA).
- ☐ Copy of 10-day demolition notification paperwork (original should go to EPA).

REQUIREMENTS FROM THE BUILDING CODE-

3301 .1 CONSTRUCTION DOCUMENTS. Construction documents and a schedule for demolition must be submitted when required by the building official. Where such is required, no work shall be done until such construction documents or schedule, or both, are approved.
3303.2 PEDESTRIAN PROTECTION. The work of demolishing any building shall not be commenced until pedestrian protection is in place as required by the chapter.
3303.3 MEANS OF EGRESS. A party wall balcony or horizontal exit shall not be destroyed unless and until a substitute means of egress has been provided and approved.
3303.4 VACANT LOT. Where a structure has been demolished or removed, the vacant lot shall be filled and maintained to the existing grade or in accordance with the ordinances of the jurisdiction having authority.
3303.5 WATER ACCUMULATION. Provision shall be made to prevent the accumulation of water or damage to any foundations on the premises or adjoining property.
3303.6 UTILITY CONNECTIONS. Service utility connections shall be discontinued and capped in accordance with the approved rules and the of the authority having jurisdiction.

The aforementioned requirement shall be the responsibility of the applicant to ensure compliance and to incur all costs associated with meeting this requirement. I hereby certify that the information contained in this application and all supporting attachments is true and correct

Signature _____ **Date:** _____

Utility termination and disconnection from the City of Cynthiana Water and Sewer Services:
Notification date:_____ Completion date and inspection: _____
Cynthiana Utility Clerk Signature: _____

OFFICE USE ONLY			
Remarks:		**Date:**	
TOTAL PERMIT FEE $130			
Receipt #	**Date Received:**	**Check #:**	**Received By:**