



# City of Saratoga Springs

## BUILDING DEPARTMENT

CITY HALL - 474 BROADWAY - SARATOGA SPRINGS, NY 12866

PHONE 518-587-3550 EXT. 2511

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### APPLICATION FOR DEMOLITION PERMIT

- APPLICATION MUST BE FILLED OUT COMPLETELY.** Signatures of property owner, applicant (if different than owner) and contractor are required.
- The demolition permit fees: check made payable to *Commissioner of Finance* must accompany application.
 

Residential primary structure	\$150.00
Residential accessory structure	\$ 50.00
Commercial structure	\$200.00

<b>Location Information</b>	
JOB SITE ADDRESS _____	TAX MAP ID# _____
ZONING DISTRICT _____	COST OF DEMOLITION _____
CONSTRUCTION TYPE _____	USE OF BUILDING(S) _____
NO. OF BUILDINGS BEING DEMOLISHED _____	1 <sup>ST</sup> FLOOR AREA _____ NO. OF STORIES _____
NAT'L REGISTER OF HISTORIC PLACES      YES    NO	
ARCHITECTURAL REVIEW DISTRICT          YES    NO	
HISTORIC REVIEW DISTRICT                  YES    NO	D.R.C. DECISION DATE _____ (PLEASE ATTACH COPY OF DECISION)
IS JOB SITE IN A FLOOD PLAIN?            YES    NO	H.O.A. APPROVAL DATE (IF ANY) _____ (PLEASE ATTACH COPY OF APPROVAL)
IS PLANNING BOARD APPROVAL REQUIRED?   YES    NO	P.B. DECISION DATE _____ (PLEASE ATTACH COPY OF APPROVAL)
<b>PROPERTY OWNER INFORMATION</b>	
OWNER'S NAME _____	PHONE _____
ADDRESS _____	EMAIL _____
	CID# _____
	OWNER'S SIGNATURE _____ DATE _____
<b>APPLICANT INFORMATION (IF APPLICABLE)</b>	
APPLICANT _____	PHONE _____
ADDRESS _____	EMAIL _____
	APPLICANT'S SIGNATURE _____ DATE _____
<b>CONTRACTOR INFORMATION</b>	
	CID# _____
COMPANY NAME _____	PHONE _____
ADDRESS _____	EMAIL _____
	CONTRACTOR'S SIGNATURE _____ DATE _____

<b>FOR STAFF USE ONLY:</b>		
FILE # _____	DATE/TIME APPLIED _____	RECEIVED BY _____
APPLICATION # _____	PERMIT # _____	DATE ISSUED _____

**HOLD HARMLESS:**

The Individual filing this application, to the fullest extent provided by law, shall indemnify and save harmless the City of Saratoga Springs, its Agents and Employees (hereinafter referred to as “City”), from and against all claims, damages, losses and expense (including, but not limited to, attorneys’ fees), arising out of or resulting from the performance of the work covered by this building permit application, sustained by any person or persons, provided that any such claim, damage, loss or expense is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of property caused by the tortious act or negligent act or omission of Applicant, its contractor or its employees or anyone for whom the Contractor is legally liable or Subcontractors. \_\_\_\_\_ **INITIAL**

**DEMOLITION PERMIT APPLICATION REQUIREMENTS**

**THE FOLLOWING INFORMATION MUST BE PROVIDED:**

Insurance requirements:

1. Demolition contractor must provide:

- a) Certificate of liability insurance showing a minimum one million dollars per occurrence, with the City of Saratoga Springs listed as additional insured and certificate holder. The following language should appear in the “Description of Operations”; **“City of Saratoga Springs is an additional insured for the permit application process”**.
- b) Certificate of workers compensation insurance, on either the State approved **C-105.2** form or the **U-26.3** form.
- c) Certificate of disability insurance, on either the State approved **DB-120.1** or **DB-155** form.
- d) City of Saratoga Springs Hold Harmless agreement.

2. Applicant must submit the following:

- a) Letter from Dept. of Public Works (Utilities), stating water and sewer hookups have been disconnected.
- b) Letter from National Grid, stating both **gas** and **electric** have been disconnected.
- c) Asbestos **SURVEY** in accordance with NYS DOL Industrial Code Rule 56