VILLAGE OF BAYVILLE BUILDING DEPARTMENT 34 SCHOOL STREET, BAYVILLE N.Y. 11709 TELEPHONE 516-628-1247 DEMOLITION PERMIT APPLIC	APPROVED DATE PERMIT NUMBER FEE \$ ATION Receipt. No.
SECTION BLOCK LOT(s)	Residential Commercial
OWNER'S NAME	SITE ADDRESS
HOME ADDRESS	
	STATE ZIP CODE
OWNER'S HOME PHONE	CELL
CONTRACTOR'S NAME	CELL
<ul> <li>GAS DISCONNECT LETTER</li> <li>WATER DISCONNECT LETTER</li> <li>ELECTRIC DISCONNECT LETTER</li> <li>ASBESTOS SURVEY LETTER</li> <li>NASSAU COUNTY RODENT LETTER</li> <li>COMPREHENSIVE PHOTOS OF ROAT</li> </ul>	
AND 100 FEET IN EACH DIRECTION	,
DESCRIBE WORK	

### CALL 811 PRIOR TO EXCAVATION AND/OR DEMOLITION

- \$2500 ROAD BOND SHALL BE HELD UNTIL COMPLETION OF DEMOLITION WORK AND ROAD REPAIRED TO PRE-EXISTING CONDITION USING SAME MATERIALS ("COLD PATCH" NOT PERMITTED)
- NO TREES SHALL BE REMOVED WITHOUT TREE REMOVAL PERMIT
- 6' HIGH CHAIN LINK FENCING, WITH TOP AND BOTTOM RAILS, 8' ON CENTER POSTS REQUIRED
- PROVIDE SILTATION FENCING TO PREVENT EROSION AND SEDIMENT RUNOFF
- PROVIDE PORTABLE SANITARY FACILITIES

## VILLAGE OF BAYVILLE BUILDING DEPARTMENT 34 SCHOOL STREET, BAYVILLE N.Y. 11709 TELEPHONE 516-628-1247 EXT. 121

CONTRACTOR NAME ...... CELL.....

OWNER ...... ADDRESS.....

HOUSE LIFT......DEMOLITION.....

# PROVIDE DISCONNECT LETTERS FROM:

- CALL 811 MARK OUT OF UTILITIES
- NATIONAL GRID GAS DISCONNECT
- PSEG ELECTRIC DISCONNECT
- ASBESTOS SURVEY REPORT
- NASSAU COUNTY BOARD OF HEALTH LETTER
- DISCONNECT WATER LINE CONTACT THE WATER DEPARTMENT FOR THEIR DISCONNECT REQUIREMENTS
- PROVIDE PORTABLE TOILET

WATER DEPARTMENT SIGN OFF.....

DATE.....

# THE HOUSE **SHALL NOT BE DEMOLISHED OR LIFTED** <u>WITHOUT</u> <u>PRIOR BUILDING DEPARTMENT APPROVAL</u>

Contractor signature

NOTARY PUBLIC



#### NASSAU COUNTY DEPARTMENT OF HEALTH Office of Community Sanitation 200 County Seat Drive Mineola, New York 11501 516-227-9715 RODENT FREE CERTIFICATION BEFORE DEMOLITION APPLICATION INSTRUCTIONS

- 1. Obtain the Nassau County Department of Health *Rodent Free Certification Application* using one of the following methods:
  - Call the office and request the application be mailed or faxed.
  - Pick up the application at the office.
  - Download the application from the Nassau County Department of Health website.

#### 2. Front of application:

- Print location of the Demolition, include Street address, Village, Cross Street, Section, Block and Lot Information.
- Indicate Demolition Type: Check the box for Complete or Partial
- Indicate Property Usage: Check the box for Residential, Industrial, Commercial or Mixed Use
- Provide Disconnect Information: Check Yes or No box for Water, Electric, Gas, Sewer Utilities and Fuel oil Tank Disconnect.
- Provide Fuel Oil Tank Information for this Property: Check Yes or No box to indicate Underground tank(s), Aboveground Tank(s) on site. Provide Tank Information: # of Tanks on site, Tank size(s). Check Yes or No box if tank was removed and provide the Tank Removal Date.
- Provide Information on Ground Disturbance on Site Prior to the Rodent Free Inspection: Check Yes or No box to indicate work done on site prior to this application. List the work done to date on site.
- Provide Access and Safety Information: Check Yes or No box to indicate if there are Construction gates on site or any other barriers that prevent entry to the site. Provide the combination lock access code or indicate location of the key for the lock. Check Yes or No box to indicate if the property, building safe to walk around.
  - List any physical hazards on site.
- 3. Page 2 of the application:
  - Provide a hand drawn sketch of the property. Indicate the buildings to be demolished in relationship to that street.
  - Provide the Contact Information for the Property Owner, Demolition Company and the person requesting the Rodent free Certification and the title of the person making the request.
  - Check the box for Office pick-up, Leave on site or Other to indicate the method you wish to obtain the Completed Rodent Free Certificate.
  - Read the last Sections "Applicant Acknowledges the Following" and "Penalties"
  - Print, sign and date the bottom of the application.

#### **APPLICATION SUBMISSION**

- 1. Submit the Application to the Health Department by mail or in person with the application fee of \$250.00 (two hundred fifty dollars).
- 2. Payment must be in the form of a Certified Bank Check or Money Order made payable to :

## "Nassau County Department of Health"

- 3. Note the following:
  - Cash, personal checks, or business checks will <u>not</u> be accepted.
  - Inspection of the site will <u>not</u> be made without payment of the application fee.

FOR OFFICE USE ONLY				DEPARTMENT OF HEALTH community Sanitation ounty Seat Drive a, New York 11501 16-227-9715 FICATION BEFORE DEMOLITION PPLICATION			RODENT FREE APPLICATION DEMOLITION LOG #		
DATE RECEIVED: ASSIGNED TO :			υ.	ъ Б					
				LOCATION INFO					
PAYMENT TYPE	: ID#			ATIC	VILLAGE				
Bank									
Check 🗌				DEMOLITION	CROSS STREET	-	SECTION	BLOCK	LOT(S)
Money	ID#			100					
Order 🗌				DEN					
DEMOLITION	N TYPE			1			0		
ALL Building(s	DEMOLITION ) / Structure(s) to L DEMOLITIONS res(s) to be Demo	PARTIAL DI <u>ONLY</u> a Porti			ructure(s) i	s to be Dem	olished*		
PROPERTY	USAGE								
Residential		Industrial		Commercial		Mixed Use (Describe)			
DISCONNEC	T INFORMATI	ON							
Wa	ater	E	lectric	Gas		Sewer		Fuel Oil Tank	
Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
FUEL OIL TANK(S) INFORMATION									
Undergrou	und Tank(s)	Aboveg	round Tank(s)	# of Tanks	Tank Size	Tank R	emoved	Tank Re	emoval Date
Yes	No	Yes	No			Yes	No		
I	STURBANCE	ON PROPE		HE RODENT	FREE INSF	PECTION	u	n	
ANY WORK DONE on Property <u>PRIOR</u> to this APPLICATION?			YES * 🗆			NONE			
* <u>LIST</u> The GRC done on the Pro	OUND DISTURBAI	NCE WORK							
ACCESS AN	D SAFETY								
ANY Construction Gates/ Barriers surrounding Property that can prevent entry to property?				YES*		NO			
NEED a KEY OR LOCK CODE to enter?				YES*		NO			
* <u>List</u> Location of the KEY - or - * <u>List</u> Lock Code for entry:									
Is it <u>SAFE</u> to walk around Property, Building(s) or Structu			re(s)?	YES		NO*			
* <u>LIST</u> ALL Physical Hazards on the Property:									
	$\underline{PAGE} \xrightarrow{2}  $	<u> </u>	$\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow$	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	→→
REVISED: 12/2015									

			PAG	E 2			
Log#		Address			Hamlet		
	PROVIDE IN SPACE BE	LOW -SKETC	H OF PROPERTY WITH	THE LOCATION	IL OF ALL BUILD	DINGS/STRUCTURES ON SITE	
	INFORMATION - PRO	-	<b>T</b>				
NAME		<del>_</del>	ADDRESS			TELEPHONE NUMBER(S)	
CONTACT	INFORMATION - DEM		COMPANY			Ц	
NAME			ADDRESS			TELEPHONE NUMBER(S)	
		i					
	INFORMATION - PER			FREE CERTIF	ICATION		
NAME		<del> </del>	ADDRESS			TELEPHONE NUMBER(S)	
TITLE:	DEMO CONTRACTOR			EXPEDITER			
	RODENT F	REE CERT	IFICATE - METHOD	TO OBTAIN (	COMPLETE	_	
Office pick	k-up	Leave on s	ite Other (Describe):				
APPLICAN	NT ACKNOWLEDGES	THE FOLL	OWING:				
1) <u>NO</u> demolition work can begin without an inspection of the property, including the exterior of all structures on the premises and							
grounds by a Nassau County Department of Health representative to determine if there is rodent activity. If rodent activity has been identified on the property, then extermination by a New York State licensed exterminator is required to prevent the spread of rodents							
throughout the neighborhood. No work can be started until extermination is complete.							
2) Building(s) / structure(s) on this property must be intact and the land must remain in an unaltered state for the inspection to take							
place. If any work is done on the property that results in ground disturbance <b>BEFORE</b> the inspection takes place, then the							
inspection is deemed INVALID and the Rodent Free Certificate will not be issued by the Nassau County Department of Health.							
-					-	he property. Demolition of the	
- · ·	and/or structure(s) on the nent of Health.	ne breunses	MUST De completeu	Within ten (10)	days from a	he date of issuance of certification by	
4) PENALT							
Any person	Any person, firm or corporation that violates Nassau County Public Health Ordinance, ArticleVII, Section 13, by demolishing any						
building(s)	and/or structure(s) on the	he above ref	ferenced property wit	hout obtaining	j a Rodent Fr	ree Certificate issued by the Nassau	
County Department of Health, WILL be subject to enforcement action by this Department.							
ACKNOWLEDGEMENT SIGNED (BELOW):							
APPLICANT PRINT NAME	E:						
APPLICANT SIGNATURE:	:					DATE:	
TITLE:						1	