

Plan Review Checklist Demolition

1 & 2 Family Residential

Massachusetts State Building Code

The following symbols indicate in this plan review items have been satisfied for the purpose of plan review. ✕ ✓

If section states "complete" that indicates that section is satisfied move to next section.

If unchecked that item needs to be addressed.

Property Address: _____

Review by: _____

Review Date Started: _____ Completed Review Date _____

E-Mail Address _____ Phone Number _____

Permit Application Denied

Approved as submitted

Approved as noted

Resubmit with requested information for approval

Project Information:

- Type of Proposed Work
- Market or Affordable
- Is Owner doing the Work
- Property Type
- Total Number of Dwellings
- Brief Description of Proposed Work

Site Information:

- Lot Area
- Frontage
- Zoning Overlay District
- Flood Zone Designations
- Water Supply
- Sewage Disposal system
- Zoning District
- Flood Zone Information
- Construction Type

Construction Details:

- Building Code Edition
- Sprinkler System

Estimated Construction Cost:

- Building
- Plumbing
- Fire Protection
- Electric
- Mechanical (HVAC)
- Total Estimated Cost

License Construction Supervisor:

- o Name
- o Phone #
- o License #
- o Mailing Address
- o Email
- o Expiration Date

Homeowner License Exemption:

- o Name Homeowner
- o Phone #
- o Homeowner Signature

Plan Review Checklist for Demolition
Massachusetts State Building Code

the following items needs to be submitted

CHECKLIST FOR APPLICATION CHECKLIST

1. Owner's Authorization Form Completed
2. Copies of Variances or Special Permits Granted by The Planning Board or Zoning Board of Appeals or any other Town Boards
3. Worker's Compensation Affidavit
4. Insurance Binder from Insurance Company made out to the Town Hudson
5. Homeowner License Exemption (If applicable)
6. Copy of Construction Supervisor License
7. Statement for disposal of debris
8. Disconnect Letter Electric Utility
9. Disconnect Letter Gas Utility (if applicable)
10. Disconnect Letter Cable (if applicable)
11. Disconnect Water Confirmed by DPW in workflow
12. Disconnect Sewer Confirmed by DPW in workflow
13. Site Plan showing location of buildings or structure to lot lines

OWNER'S AUTHORIZATION FORM

OFFICE OF THE BUILDING DEPARTMENT

SECTION 1 - SITE INFORMATION

1.1 Property Address:

Zip Code _____

1.2 Assessors Map & Parcel Number:

_____/_____/_____
Map Number Block Number Lot/Parcel Number

SECTION 2 - PROPERTY OWNERSHIP

2.1 Owner of Record:

I _____; as Owner hereby declare that the statements and information on the foregoing Owner's Authorization Form are true and accurate, to the best of my knowledge and belief. Signed under the pains and penalties of perjury.

Print Name

Street #, Street Name, Town /City, State, Zip (full address)

Signature of Owner

Date

2.2 Authorized Agent:

Name: (Print)

Street #, Street Name, Town /City, State, Zip (full address)

Signature:

Telephone:

SECTION 3 - OWNER AUTHORIZATION TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

Homeowner authorizing an agent to obtain the building permit

I _____; as Owner of the subject property

hereby Authorize _____ to act on my behalf, in all matters relative to work authorized by this building permit application.

Signature of Owner

Date

SECTION 4 - OWNER/AUTHORIZED AGENT DECLARATION

Person obtaining the building permit

I _____; as Owner/Authorized Agent hereby declare that the statements and information on the foregoing Owner's Authorization Form are true and accurate, to the best of my knowledge and belief. Signed under the pains and penalties of perjury.

Print Name

Signature of Owner/Agent

Date