



# Demolition Permit

## Office of the Building Official

Building Safety Services  
410 Academy Street  
Cambridge, Maryland 21613  
Telephone: 410-228-8811

Approx. Demolition Value \$ \_\_\_\_\_ Owner: \_\_\_\_\_

PERMIT FEE: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Zoned: \_\_\_\_\_

Project: \_\_\_\_\_ PERMIT FOR: DEMOLITION

Location: \_\_\_\_\_ Application Date: \_\_\_\_\_

Account# \_\_\_\_\_ Contractor: \_\_\_\_\_

Phone# \_\_\_\_\_ Mailing Address \_\_\_\_\_

Liability Insurance?  Yes  No

Refuse Destination: \_\_\_\_\_ Phone#: \_\_\_\_\_ License#: \_\_\_\_\_

Size of Building: W \_\_\_\_\_ xD \_\_\_\_\_ xH \_\_\_\_\_ Approval Date: \_\_\_\_\_

Haul Route: \_\_\_\_\_

### Notes:

1. This permit expires one month from the date approved. Demolition must be completed within this time frame.
2. The City of Cambridge is not responsible for utility disconnections. You must contact the proper agencies to schedule all disconnections prior to demolition approval.
3. All sewer laterals must be properly terminated to City specifications.
4. It is the responsibility of the owner, contractor, and/or agent for the owner to contact the Maryland Department of the Environment, (410-901-4020) to determine compliance with all environmental regulations.
5. Owner, contractor, and/or agent for the owner shall contact the Building Safety Services within 24 hours after completion of demolition to schedule an inspection for compliance with these permit provisions.
6. Work shall not begin until this permit has been issued.

The undersigned, as owner (contractor and/or agent for the owner) of the proposed demolition hereby applies for permission to perform said demolition in accordance with the provisions of Chapter 4 of the Code of Laws of the City of Cambridge, and authorizes inspection of the property as necessary to determine compliance with said code. The applicant hereby swears or affirms under the penalty of perjury that the information given above is true and correct to the best of his/her knowledge and belief, and that he/she will bring to the attention of the Building Safety Services any change or divergence thereof.

\_\_\_\_\_  
Applicant (please Print)

\_\_\_\_\_  
Applicant Signature

Upon payment of required fees & signed approval, permission is hereby granted to the above applicant to perform the work herein described in accordance with the submitted plans and specifications and in accordance the Chapter 4 of the Code of the Laws of the City of Cambridge

\_\_\_\_\_  
Building Official Signature

RECEIPT# \_\_\_\_\_ PERMIT# \_\_\_\_\_

# ***CERTIFICATION OF UTILITIES DISCONNECT***

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Address of Structure

I hereby certify that the utility for which I represent has been disconnected and properly terminated from said structure.

## **Power Company**

Delmarva Power  
Phone # 410-860-6357  
Eng. Dept  
Fax # 410-860-6077

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Representative's Signature

Date

## **Gas Company**

Chesapeake Utilities  
Phone # 410-648-2447  
Fax # 410-548-3245

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Representative's Signature

Date

## **Water Company**

Municipal Utilities Com.  
Phone # 410-228-5440

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Representative's Signature

Date

## **Telephone Company**

Verizon  
Phone # 410-860-8029  
Russell Seldon

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Representative's Signature

Date

## **Cable Companies**

Comcast  
Phone # 1-443-225-6673  
Phone # 1-888-266-2278

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Representative's Signature

Date

Bay Country  
Phone # 410-943-8311

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Representative's Signature

Date