

Township of Readington

Department of Code Enforcement

Demolition Checklist

Owner: _____ Blk: _____ Lot: _____

Site Address: _____

Description of Structure: _____
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Prior Approvals – Indicate items included * designates required items

*Hunt. Co. Dept of Health Review _____

*Hunterdon County Soils Conservation _____

*Historical Review Committee _____

Service Connection Releases: (if applicable)

Electric _____

Gas: _____

Cable _____

Phone: _____

Water: Public _____

Well _____ if abandoned notice by licensed well driller and HCHD inspection

Sewer _____ letter from licensed plumber

Septic _____ if abandoned requires HCHD inspection

*Asbestos Abatement _____ or letter of none existing _____

Underground Storage Tanks _____ requires separate permit if removal is anticipated

Notification of adjoining owners _____ only if services temporarily disrupted

Department Forms

Building Subcode _____

Electrical Subcode _____

Plumbing Subcode _____

Fire Subcode _____

Plot Plan Submitted _____
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For Dept. Use

Reviewed by: _____ Date: _____

Comments: _____
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