



Rural Municipality of Abram-Village / Municipalité Rurale d'Abram-Village

8938 Rte 11
Wellington, PE
COB 2E0

Tel: (902) 854-2255

E-Mail: abvillage@bellaliant.com

DEMOLITION PERMIT

Date: _____

Name & Phone Number of Applicant: _____

Property PID # & Building Civic Address: _____

Size of Building (Length & Width): _____

Name & Phone Number of Contractor: _____

Anticipated Demolition Date: _____

- I agree to ensure that *Island Tel* and/or *Maritime Electric Co. Ltd.* are engaged for the removal of any overhead/underground wires as required for the demolition of such building.
- I agree to ensure that proper safety measures are adhered to at the demolition site in compliance with Part 8, Section 8.2 of the *National Building Code*.
- I agree to ensure that any sewer lines are properly disconnected at the main line at the street right-of-way or its nearest practical junction.
- I agree to pay for all expenses connected with the demolition and for any repairs/damages to neighbouring properties as a result of the demolition work.
- I agree to ensure that debris is properly disposed of at an approved site or pit as per the *Environment Protection Act* and related regulations.

Application Fee: \$25.00. Please make cheque payable to: *Rural Municipality of Abram-Village*.

Applicant Signature: _____

For Office Use Only:	Date Application Received:
	Date Application Approved:
	Approval Permit Number:
	Authorized Signature: