PLANNING AND DEVELOPMENT

16 S 10th Street, Suite B140 Noblesville, IN 46060

Ph. 317.776.6325 planapplications@noblesville.in.gov

PERMIT APPLICATION
DEMOLITION REQUIREMENTS

ADDRESS OF DEMOLITION: _____

TO BE SUBMITTED WITH APPLICATION

- A site plan clearly identifying the structure or structures to be demolished.
- An address of where the debris is being disposed of. Load receipts may be required after disposal.
- This form signed by the appropriate departments.
- Other utility disconnections (gas, electric, water, etc.) are required. The contractor or applicant shall provide written proof of the disconnection as part of the application package.
- If an accessory structure only, needs to verify that the power has been removed.
- Should approvals be required from other State or local government entities, it is the sole responsibility of the contractor of record to obtain such approvals.
- Asbestos Abatement report is required for all Commercial Demolition Applications or demolishing two or more residential structures.
- You are required to schedule an inspection with the Planning Department once structure has been removed.

THE CITY OF NOBLESVILLE UTILITIES DEPARTMENT
Requires proof of sewer disconnection, PRIOR to demolition

Sanitary Sewer: Sanitary sewer line must be dug up and capped; or plugged until ready for re-use. While it is exposed, the Utility will visually verify disconnection and then sign off.

THE HAMILTON COUNTY HEALTH DEPARTMENT
Requires certain inspections relating to private wells, septic systems and fuel tanks, PRIOR to demolition

Existing Well: Well must be plugged according to Well Ordinance A-62 (as amended)

Existing Septic: Septic system must be pumped and filled with sand, or removed. If septic system is to be reused, it must be plugged-off until ready for re-use.

Fuel Tanks: Fuel tanks must be pumped and removed from building and/or property.

The City of Noblesville and/or Hamilton County Health Department must perform an inspection prior to demolition. In order to approve the demolition permit, include this completed form with all appropriate signatures and documentation to the Planning Department.

Applicant's Signature	Date	Applicants Phone Number
Name of Licensed Well Driller		Name of Licensed Septic Installer
Signature/Date: Noblesville Utilities Representative		Signature/Date: Health Department Representative

Under the penalties of perjury (Indiana Code 35-44-1), I hereby affirm under oath that all of the information I have provided in this application for demolition to be true and accurate to the best of my knowledge and belief, and that I have not knowingly provided or omitted any information that would tend to hide, obscure or otherwise mislead the Department of Planning and Development regarding the truth of the matters addressed herein.