5800 Melaleuca Lane Greenacres, Florida 33463 Tel: (561) 642-2059 Fax: (561) 642-2049

www.greenacresfl.gov

# **DEMOLITION PACKAGE**

This package contains all the release forms necessary for the demolition contractors' submittal. The following procedure is to be followed by all applicants applying for demolition permits excluding sidewalks and driveways located in the public right of way.

Zoning and Engineering approval is required for demolition of all structures. Prior to submitting your completed application, you shall first obtain all required releases.

\*\*\*\*\*Please do not proceed with any of the items below prior to receiving the approval from the Zoning and Engineering Division\*\*\*\*\*

### **Contractor Responsibility:**

Obtain and provide copies of the following:

- a. A boundary survey or site plan of the property indicating all structures (including driveways, pools, etc.) to be demolished.
- b. An asbestos statement and survey of all structures. If indicated in the survey that asbestos and/or lead paint abatement is necessary, a separate permit application for asbestos and/or lead paint abatement must be submitted by a licensed abatement contractor per F.S. 469. The asbestos abatement contractor must provide a copy of the FDEP Form 62-257-900, Notice of Asbestos Renovation or Removal with the abatement permit application
- c. Certification from a licensed pest control operator (PCO) that all structures are rodent free. A letter or invoice under the signature of the PCO is acceptable. The letter or invoice must include the address of the inspected structures and indicate the date that the inspection was performed.
- d. Utilities disconnection form must be submitted to the City confirming electric and gas utilities have been disconnected from the structure.
- e. A separate permit by a licensed plumbing contractor is required to disconnect and cap the sanitary sewer and/ or water service
- Best Management Practices (BMP) for protection of the storm water drainage system. It is the responsibility of the applicant to protect the storm water drainage system by installation of a silt fence along the property lines and wrapping and blocking all drainage system inlets in the vicinity of the property. The installed protection must be in place and inspected / approved by building department staff **PRIOR** to commencement of the demolition. Once the silt fence is in place, please call (561) 642-2059 to schedule an inspection.
- g. Removal of above / below ground propane tanks / lines requires a separate permit application.

#### PERMIT ISSUANCE

Upon approval of your application, you will be contacted by building division staff that your permit is ready for pick up.

#### PRE INSPECTION

The contractor is responsible to schedule a pre demolition inspection through the Building Division prior to commencement of all work. Call (561) 642-2059 to schedule this inspection.

#### **DEMOLITION PROCESS**

During and subsequent to the demolition process, the contractor is responsible to provide for:

- Dust control
- Traffic control as necessary
- Protection of adjacent property
- Filling of the site as necessary to ensure adequate drainage
- Final cleaning of the public right of way
- Repair of any / all damage to sidewalks, curbs, and city streets / alleys that resulted from the demolition activity
- Compliance with Florida Building Code, Chapter 33 (Demolition), Sections 3301 through 3312 as applicable
- Fine grading of disturbed areas
- Sod With Bahia or better, will be waived upon receipt of permit application to build on the site

#### FINAL INSPECTION

The contractor is responsible to schedule the final demolition inspection through the Building Division upon completion of all work. Call (561) 642-2059 to schedule this inspection.



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# **Demolition Approval**

Should you have questions with regard to this form please email or call the number listed below:

Phone 561.642.2059 Email permitcenter@greenacresfl.gov

Application for permit is being made by the undersigned for the demolition and removal of the following structure(s).

siructure(s).	
Address:	
Legal Description:	
Location on lot and description of structure to	be demolished:
Property Owner/ Agent:	
Name of Contractor:	
Email Address of Contractor:	
	P's must be approved by the City of Greenacres Building e until all BMP'S have been installed and inspected. Call
FOR DEPARTMENTAL USE ONL	LY
Completed by:	Date:
Signature:	Title:
THIS SIGNED FORM MUST BE SU THE COMPLETED PERMIT APPLI	BMITTED TO THE BUILDING DEPARTMENT WITH CATION.
THIS FORM MUST BE COMPLETE ISSUED.	ED BEFORE A DEMOLITION PERMIT CAN BE



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### **Planning and Engineering Release**

Should you have questions with regard to this form please email or call the number listed below: Phone **561.642.2054** Email **groupeng@greenacresfl.gov** 

Application for permit is being made by the undersigned for the demolition and removal of the following structure(s).

Address:	
Legal Description:	
Location on lot and description of structure to be demolished:	
Property Owner/ Agent:	
Name of Contractor:	
Address of Contractor:	
Email Address of Contractor:	
Phone Number of Contractor:	
Signature of Applicant:	
***MINIMUM OF ONE (1) COLOR PHOTOGRAP STRUCTURE PROPOSED TO BE DEMOLISHED RELEASE FORM***	
FOR DEPARTMENTAL USE ONLY	
Comments:	
City of Greenacres Planning and Engineering Division:	
Review Completed by:	Date:
Signature:	

THIS SIGNED FORM MUST BE SUBMITTED TO THE BUILDING DEPARTMENT WITH THE COMPLETED PERMIT APPLICATION.

THIS FORM MUST BE COMPLETED BEFORE A DEMOLITION PERMIT CAN BE ISSUED.



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### **Utilities Disconnection**

Should you have questions with regard to this form please email or call the number listed below: Phone **561.642.2059** Email **permittenter@greenacresfl.gov** 

Application for permit is being made by the undersigned for the demolition and removal of the following structure(s).

Address:				
Legal Description:				
Location on lot and description of structure to be demolished:				
Property Owner/ Agent:				
Name of Contractor:				
Address of Contractor:				
Email Address of Contractor:				
Phone Number of Contractor:				
Signature of Applicant:				
Comments:				
I certify that the following utilities have been disconnected and/or removed:				
Electric: Gas Se	ewer/Septic System	Water:		
Form completed by:	Date:			
Signature:	Title:			

THIS SIGNED FORM MUST BE SUBMITTED TO THE BUILDING DEPARTMENT WITH THE COMPLETED PERMIT APPLICATION.

THIS FORM MUST BE COMPLETED BEFORE A DEMOLITION PERMIT CAN BE ISSUED.