

# Town of Roxbury

Office of the Building Inspector  
PO Box 189 – 53690 State Hwy. 30  
Roxbury, NY 12474

William Walcutt, CEO

Phone/Fax 607-326-7643

## Application for Demolition Permit

Is the property in the hamlet of Roxbury Historic District?      **YES**      **NO**

Name of Owner \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

Name of Applicant      **OWNER** OR **OTHER**

If OTHER, Name \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone \_\_\_\_\_

Name of Contractor      **OWNER** OR **OTHER**

If OTHER, Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

Location of building to be demo'd \_\_\_\_\_

Tax Map # \_\_\_\_\_

Hazardous materials present? \_\_\_\_\_

Method of demolition \_\_\_\_\_

Attach photograph of building(s)

Attach insurance documents

Demolition Fee: No Charge

Signature of Owner \_\_\_\_\_