

Application for Demolition Permit Supplemental Data Form This form is authorized by the City of Niagara Falls Building By-law [2013-178] Updated: January 2015

Stre	Project information et Address: rent use of Building to ent of demolition:	be demolished: 🔲 do	· —	ssory building	Unit No.	Lot/Con:	
В.	Form of correspond	lence	<u> </u>	· ·			
Please select the form in which you wish for Building Services to correspond with you regarding the following components of the building permit process (please choose only one for each):							
Issuance of the Demolition Permit: by mail, pick up or digitally – email address:							
Building Inspection reports (prepared digitally):							
<u>С</u> .	Disconnection infor	mation					
Available Services are required to be shut off, disconnected and in some cases capped as a component of your demolition permit. Clearance from the corresponding Utility provider may be required. Please acknowledge confirmation of shut off / disconnection below: — electricity							
	☐ telephone						
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		Co	· ·				
	all before you	ı digOr	ntario One Call		800 400	2255	
D. Fire safety maintenance conditions							
Fire Watch		shall be provided during periods of demolition where operations may create a fire hazard to neighbouring properties or adjacent partially occupied spaces and the site shall be toured at least once hourly					
Standpipe Systems		where demolition is occurring floor by floor, the standpipe system and all accessory components shall be maintained operational on all floors beneath the one being demolished other than the floor immediately below					
Access for Fire Fighting		all access routes shall be maintained throughout demolition activities including clear access to hydrants					
Fire Extinguishers		portable fire extinguishers shall be provided in all areas of concern during demolition activities					
E.	Declaration of appli	cant					
I, the undersigned certify that the information I have provided on this document is true to the best of my knowledge, that the necessary clearances have been obtained and arrangements made with the required utility providers for disconnection, and further that I understand and accept responsibility for the required fire maintenance conditions identified above.							
Date:			Signature:				
For Use by City Staff (Principal Authority)							
Z	oning / Amendments:			Acc	epted by:		
В	Building comments:						
D	Demolition permit issuance authorized by the undersigned for Salvatore Valeo, Chief Building Official						
Date:			Signature:	Signature:			

Personal information contained in this form is collected under the authority of subsection 8(1.1) of the Building Code Act, 1992, and will be used in the administration and enforcement of the Building Code Act, 1992. Questions about the collection of personal information may be addressed to the Chief Building Official of the City of Niagara Falls.