CITY OF HOLMES BEACH DEMOLITION CHECKLIST- PRIOR TO INSPECTION

(THIS FORM MUST BE ON SITE FOR THE INSPECTOR @ PRE-DEMO INSPECTION)

A pre-demo inspection is required with completed disconnections.

Jobsite Address: _____
Permit #: _____
Homeowner Name: _____
Phone #: _____

Demolition Contractor: _____
Phone: _____
Address: _____
Contact: _____
Anticipated start date: _____
Expected completion date: _____

Building Contractor: _____
Contact: _____ Phone: _____
Specs/plans for rebuilding submitted: Yes No

Disconnection Contractors:
Electrical: _____ Phone: _____
Plumbing: _____ Phone: _____
Mechanical: _____ Phone: _____
Gas: _____ Phone: _____

Demo Swimming Pool/De-Watering Plans Submitted: Yes No N/A

Silt Fence Initial Inspection Completed:
Yes No

Disconnections Completed:

Electricity:	Yes	No
Water/Sewer Tap:	Yes	No
Gas:	Yes	No
Mechanical:	Yes	No
Telecommunications:	Yes	No

Hazardous Substances:
Asbestos containing material onsite:
Yes No Removed Report Submitted
PCB's (Poly-Chlorinated BiPhenyls) onsite:
Yes No Removed Report Submitted
Biological: (TV, Refrigerators, Window AC, Thermostat)
Yes No Removed Report Submitted

Radioactive Materials: (exit signs, emergency lighting, fluorescent lighting, smoke detectors):
Yes No Removed Report Submitted
Flammable Substances: Yes No Removed
Chemicals: (cleaning products, pesticides, herbicides, oils) Yes No Removed
Any wells or underground storage tanks onsite:
Yes No Removed & Certified Abandonment

Abandoned:

Paint:	Yes	No	Removed
Batteries:	Yes	No	Removed
Chemicals:	Yes	No	Removed

Type of Building/Structure: (Levels, etc.)
Frame: CMU Concrete CMU Frame Steel
Full Demolition: Yes Partial/Strip-out
Property for Historical use: Yes No

Special Structures: (explain)
_____
Provide dump location: _____
_____
_____
Demo Contractor: **Date:** _____

Signed: _____
Print: _____
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Inspector Approved: _____
Date: _____