



(315) 314-0682 Nicholas Snyder

7171 State Hwy 3
PO Box 686
Cranberry Lake, NY 12927

Fax: (315) 314-0682

www.townofcliftonny.org

DEMOLITION PERMIT APPLICATION

*****Office Use Only*****	
Date Submitted:	_____
Permit No.:	_____
Date Issued:	_____

**PERMIT MUST BE OBTAINED BEFORE BEGINNING ANY
CONSTRUCTION**

**PLEASE READ AND COMPLETE THIS ENTIRE FORM
TO AVOID DELAYS IN OBTAINING YOUR PERMIT**

The undersigned hereby applies for a Demolition Permit for the following work, which will be completed in accordance with the description, plans and specifications submitted and such special conditions as may be indicated on the Demolition Permit.

Owner Information

Property Owner Name: St. Lawrence County: Blighted Property Program (Trevor Harris)

Address: 803 County Route 6

City/State/Zip: Hammond, N.Y. 13646

Telephone: _____

Cell Phone: _____

E-mail: _____

Project Site Information

Project/Property Address: 29 Front Street, Newton Falls, N.Y.

Legal Description: (Attach additional sheets if necessary) _____

Condemned/Burnt House- Open to Elements

Tax Map No.: 214.026-5-51

Contractor / Contact Information

PERSON RESPONSIBLE FOR DEMOLITION AND CLEAN-UP

Name: Jeda Environmental- Shawn Burke
Address: 273 South Grasse River Road
City/State/Zip: Massena, N.Y. 13662
Telephone: 315-769-3685 **E-mail:** info@jedaenvironmental.com

ARCHITECT/ENGINEER

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____ **E-mail:** _____

GENERAL CONTRACTOR

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____ **E-mail:** _____

Details of Building Being Demolished

Dwelling Garage Shed Barn
 Business Industrial
 Other Uses: _____

Size of Structure: Length _____ feet x Width _____ feet

Foundation: Yes No

Debris Disposal: Dump Where: DANC- Rodman Landfill
 Burn (NYSDEC Permit Required; Contact: NYS Forest Ranger William Benzel at
Wanakena, New York (315) 848-3598

Will manufactured home have: Full basement Slab Piers Anchored/Tied Down

Site Plan Information

A plot plan must be prepared and submitted for all proposed work; drawn to scale and attached hereto, showing clearly and distinctly all buildings, both existing and proposed and indicate all set-back dimensions from property lines and other buildings. Give street number and/or lot number and indicate whether it is an interior or corner lot. Show the locations of both any well or private septic disposal systems.

AFFIDAVIT

I certify to the best of my knowledge and belief the statements contained in this application, together with all plans and specifications submitted therewith, are true and complete statements of all proposed work to be completed on the described premises and that all provisions of the *New York State Uniform Fire Prevention and Building Code* and all other laws or regulations pertaining to the proposed work shall be complied with, whether specified herein, or not, and such work is authorized by the property owner. The granting of a permit does not authorize any work that will violate or cancel the provisions of any other state or local law regulating construction or land use or the performance of any construction.

Owner Name (*Printed*): _____

Owner's Signature: _____ Date: _____

Applicant's Name (*Printed*): Shawn Burke-V.P. JEDA Environmental

Applicant's Signature: *Shawn K. Burke* Date: 04/18/2023

SPECIAL CONDITIONS OF PERMIT:

Asbestos Mitigation Documentation Required

Structure will be demolished and disposed of as asbestos containing material. Project will be done in strict compliance with all federal and state regulations. See attached asbestos license and waste hauling permit.

OFFICE USE ONLY	
Date Denied: _____	Date approved: _____
Comments: _____ _____	
Code Enforcement Officer: _____	

Updated 9/22/22