

# TOWN OF ROCHESTER

50 Scenic Drive • P.O. Box 65 • Accord, NY 12404  
Area Code 845

Town Clerk 626-7384  
Supervisor 626-3043  
Highway Dept 626-7221  
Assessor 626-0920  
Transfer Station 626-5273



Code Enforcement 626-2433  
Planning Board 626-2434  
Zoning Board 626-2434  
Court House 626-2522  
Youth Commission 626-2115

## APPLICATION FOR DEMOLITION PERMIT

NAME OF OWNER: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

1. PLEASE ATTACH PHOTOS OF THE STRUCTURE OR PART OF STRUCTURE THAT IS TO BE DEMOLISHED.
2. DIMENSIONS: \_\_\_\_\_
3. TYPE OF STRUCTURE: \_\_\_\_\_
4. ADDRESS OF STRUCTURE \_\_\_\_\_
5. SECTION: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

**YOU HAVE THIRTY (30) DAYS TO TAKE STRUCTURE DOWN AND SIXTY (60) DAYS TO CLEAN IT UP IN ITS ENTIRETY.**

NAME OF CONTRACTOR: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE: \_\_\_\_\_

OWNER/CONTRACTOR SIGNATURE

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DATE: \_\_\_\_\_ APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

\_\_\_\_\_  
CODE ENFORCEMENT OFFICER