

Department of Development Services

WRECKING/DEMOLITION PERMIT



61 N. Green Street | Brownsburg, IN 46112

Phone 317-852-1128 | Fax 317-852-1134

www.brownsburg.org

Items to be included with this application:

Required Submittals:

- Completed Application (signed by the Applicant)
- Affidavit and Consent of Property Owner
- Statement of Financial Responsibility (signed by the Owner)
- Sample Letter to Adjacent Property Owners
- Bond
- Schedule of work.
- Record Drawing (Post Demo) with Dimensions.
- Electronic Copies of all submittal items.

Unified Development Ordinance (UDO) & Other Code Links:

Unified Development Ordinance (UDO)



Scan me

<http://bit.ly/UDO-2015>

Ch. 57 Illicit Discharges and Connections



Scan me

<http://bit.ly/TitleVCh57>

Ch. 150 Building Regulations



Scan me

<http://bit.ly/TitleXVCh150>

Ch. 151 Stormwater Management



Scan me

<http://bit.ly/TitleXVCh151>

Brownsburg Construction Standards



Scan me

<http://bit.ly/ConstructStds>

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Items to be included with this application:

Additional Required Documents:

Interior Demolitions:

- Asbestos Report.

All Other Demolitions:

- Written Statements obtained from utility companies servicing premises stating utility has been disconnected.
- Site/Plot Plan showing location of all structures, utilities (including disconnections), safety measures, traffic control (if required), temporary utilities, egress to site, and any other information that may be deemed necessary by the Building Commissioner or his representative.
- Notice to Adjacent Property Owners via Certified Mail.
- Asbestos Report.
- If Septic System, Location and future uses.
- If a well is present, proof of notification to Hendricks County Health Department.
- Certificate of Public Liability Insurance in the amount prescribed in §150.57.
- Completed Clean Water (>1 acre) or Storm Water Application (≤1 acre).
- Maintenance of Traffic Plan (MOT) (if traffic disruption is necessary) .
- Site Fencing Plan.

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PROJECT NAME:	RECEIVED STAMP
PERMIT #:	
RECEIPT #:	

COMPLETE THE FOLLOWING:

Applicant:	Company:		
	Contact:		Email:
	Address:		City, State Zip code:
	Phone #:	Cell #:	Fax #:

Check if the Applicant is the Property Owner.

Property Owner:	Company:		
	Contact:		Email:
	Address:		City, State Zip code:
	Phone #:	Cell #:	Fax #:

Check if the Applicant is the Project Contact.

Project Contact:	Company:		
	Contact:		Email:
	Address:		City, State Zip code:
	Phone #:	Cell #:	Fax #:

Location & Project Info:	Parcel #:		Estimated Cost:	
	Site Address:		Suite #:	
Subdivision:		Lot #:	Township:	
Water Provider:	Service Diameter:	Sewer Provider:	Lateral Size:	

Height of Structure: _____ Ft.		Number of Floors: _____		Total Building Footprint: _____ SF		Number of Structures: _____		
Construction Type:		<input type="checkbox"/> Residential		<input type="checkbox"/> Commercial		<input type="checkbox"/> Industrial		
Type of Structure:	<input type="checkbox"/> Primary		<input type="checkbox"/> Accessory		<input type="checkbox"/> Interior Demo		<input type="checkbox"/> Other: _____	
Utility Providers:		Electric: _____		Gas: _____		Other: _____		

Date work is expected to begin: _____

Date work is expected to end: _____

Project Description:	

Application Notarization:

I affirm, under oath, and under penalties of perjury (I.C. 35-44-2-1), that I have the authority to make the above application, and that all of the information provided in this application for demolition permit is true and accurate, to the best of my knowledge and belief, and that I have not knowingly or intentionally provided or omitted any information that would tend to hide, obscure, or otherwise mislead the Town of Brownsburg regarding the truth of the matters addressed herein.

STATE OF _____)			_____ Signature of Applicant
_____)	SS:		_____ Printed Name
COUNTY OF _____)			

BEFORE ME, the undersigned, a Notary Public in and for said County and State, personally appeared _____, who acknowledged the execution of the above and foregoing instrument to its voluntary act and deed on the ____ day of _____, 20____.

_____ Commission Expiration Date	_____ Notary
_____ County of Residence	_____ Printed Name

Office Use Only		Inspections:
Reviewed By: _____	Date: _____	<input type="checkbox"/> Backfill
Approved By: _____	Date: _____	<input type="checkbox"/> Daily
		<input type="checkbox"/> Final

Department of Development Services

**AFFIDAVIT & CONSENT OF
PROPERTY OWNER**

WRECKING/DEMOLITION PERMIT

That I/we _____ after first being duly sworn, depose and say:

That I am/we are the owner(s) of the Real Estate located at: (Legal and/or common address)

Parcel Number(s): _____

That I/we have read and examined the application for Wrecking/Demolition Permit, and I/we are familiar with its contents.

That I/we have no objections to, and consent to such request as set forth in the application.

Signature of Owner

Print Name

STATE OF _____)
) SS:
COUNTY OF _____)

BEFORE ME, the undersigned, a Notary Public in and for said County and State, personally appeared _____, who acknowledged the execution of the above and foregoing instrument to its voluntary act and deed on the ____ day of _____, 20____.

Commission Expiration Date

Notary

County of Residence

Printed Name

Department of Development Services

STATEMENT OF FINANCIAL RESPONSIBILITY WITHIN THE PUBLIC RIGHT-OF-WAY

WRECKING/DEMOLITION PERMIT

That I/we _____ after first being duly sworn, depose and say:

That I am/we are the owner(s) (the "Owner") of the Real Estate (the "Property") located at:

_____, Brownsburg, IN 46112.

Parcel Number(s): _____

That I/we understand the following:

1. As the Owner, I/we shall be responsible for repairs or reconstruction for damage, expenses and liabilities to the public right-of-way and/or public infrastructure (e.g. sidewalks, curb and gutter, roads, storm, water and sanitary infrastructure) which arises out of or is resulting directly or indirectly from Owner's (and/or any of Owner's employees, agents, contractors, invitees, licensees, officers, owners, directors, assigns or affiliates) activities associated with this permit, including but not limited to driving or allowing heavy vehicles on the sidewalk. Owner shall be responsible for the repair and/or reconstruction of such damage, expense and liability to the satisfaction of the Town of Brownsburg (the "Town") and paying the costs thereof.
2. In the event that the Owner causes damage to the public right-of-way and/or public infrastructure and fails to comply with the requirements set forth herein, the Town may, at its discretion, take action to correct the condition and recover the costs of doing so using the following procedures:
 - A. Written notice shall be given by the Town to the Owner describing the property involved and the condition to be remedied, requiring the Owner within a reasonable time but not less than fourteen days to take such action as may be necessary or as may be specified to correct the condition, and advising that failure to do so will result in further actions and legal procedures by the Town to require immediate correction of the condition.
 - B. If the condition described in the notice is not corrected within the time limit set by the notice, the Town may take appropriate actions, including but not limited to, whatever actions at law or in equity are necessary or appropriate to correct the condition.
 - C. If the Town takes any corrective action described above, all costs of such action shall be charged to the Owner. Costs shall include but not be limited to labor and material for performance of the work and any repair, administrative and supervisory time, attorneys' fees and costs, and disposal fees. Owner will cooperate with the payment of all fees within 7 days upon receipt of billing from the Town. If costs are not paid by Owner in full within 7 days of receipt of billing from the Town, then the Town will add a penalty of one percent per month to the outstanding balance until the outstanding balance is fully paid by the Owner.

STATE OF _____)

)

SS:

COUNTY OF _____)

Signature of Owner

Print Name

BEFORE ME, the undersigned, a Notary Public in and for said County and State, personally appeared _____, who acknowledged the execution of the above and foregoing instrument to its voluntary act and deed on the ____ day of _____, 20____.

Commission Expiration Date

Notary

County of Residence

Printed Name

Notice of Demolition to Adjoining Property Owners

TO WHOM IT MAY CONCERN:

You are receiving this notice of demolition as an adjoining property owner.

An Application for **Wrecking and Demolition** was filed with the Department of Development Services on _____ day of _____, 20_____.

APPLICATION DETAILS:

Permit Number: _____

Subject Address: _____

General Location: _____

Owner: _____

Description of Activity: _____

Scheduled Start Date: _____

Scheduled Finish Date: _____

Hours of Operation: _____

The application and permit details of the scheduled demolition are on file in the Department of Development Services, Room 110, Town Hall, located at N. Green Street, Brownsburg, Indiana. All information may be reviewed between the hours of 8:00 A.M. to 4:00 P.M., Monday through Friday, excluding legal holidays.

All adjoining persons wishing to comment on this application must submit any written comments to the Department of Development Services.

Applicant Or Agent for Applicant Contact Information

Signature: _____

Printed Name: _____

Street Address: _____

City, State, Zip: _____

Phone Number: _____ FAX: _____

Email: _____

****Please see reverse side for additional information****

*****A color map of the subject property MUST be included with this notice*****

The Town of Brownsburg acknowledges its responsibility to comply with the Americans with Disabilities Act of 1990. In order to assist individuals with disabilities who require special services (i.e. sign interpretive services, alternative audio/visual devices, and amanuenses) for participation in or access to Town sponsored public programs, services, and/or meetings, the Town requests that individuals makes requests for these services by contacting us at 317-852-1128 or by E-mail at developmentervices@brownsburg.org

General Information about this Notice of Demolition to Adjoining Property Owners

Why am I getting this? You are receiving this formal notice because you are a property owner which adjoins a property or properties which are scheduled for Demolition.

Do I need to do anything or go anywhere? This notice does NOT require you to do anything. This notice simply informs you that an application for Wrecking and Demolition has been filed pertaining to property adjoining to yours and that you have the opportunity to be informed of and view this application.

What is the Board of Zoning Appeals? The Brownsburg Board of Zoning Appeals is a body authorized by State Statute. The Board of Zoning Appeals has the authority to grant or deny variance petitions pertaining to the Brownsburg Unified Development Ordinance.

What is a Wrecking and Demolition Permit? An application for a permit to wreck or demolish any building or structure shall be made in writing to the Building Commissioner. The application shall give the location of the building or structure, the specific location of all utility connections, the date when wrecking or demolition is to commence and the approximate time which the wrecking or demolition shall occur.

May I contact the Applicant? Yes. The Applicant's contact information is on the front side of this notice.

May I contact the Department of Development Services? Yes. You may contact the Department of Development Services. A Development Services staff member is available to discuss questions you may have regarding the application for Wrecking and Demolition. The Department may be reached at (317) 852-1128, or by email at developmentsservices@brownsburg.org.

What about commitments or conditions? If the application is approved, commitments or conditions may be attached to its approval. After the Demolition process has been completed, the commitments or conditions will be reviewed prior to the Certificate of Completion being issued by the Building Commissioner.

STAFF CONTACT:

NAME:	Jack Swalley	Shawn Pabst	Terri Lambert
TITLE:	Building Commissioner	Bld. Services Coordinator	Administrative Assistant
PHONE:	317-852-1128	317-852-1128	317-852-1128
EMAIL:	jswalley@brownsburg.org	spabst@brownsburg.org	tlambert@brownsburg.org