DEMOLITION PERMIT CLEARANCE FORM

Owner: _____

Applicant: _____

Address: _____

Assessors' Map #_____ Parcel #_____

Prior to the issuance of any Demolition Permit, the applicant for said Permit/License must obtain sign-offs from the following:

National Grid Gas_____ _____Date_____
Phone: 1-800-233-5325

National Grid Electric_____Date_____
Phone: 1-800-322-3223 Fax: 1-508-357-4730

Pennichuck Water / Town of Salisbury Water
Department_____Date_____
Phone: 1-800-553-5191 Fax: 1-603-913-2331

Town of Salisbury Sewer Department _____Date_____
Phone: 1-978-465-4058

Exterminator_____Date_____