

Dr. Peter Beilenson, M.D., M.P.H., Health Officer

DEMOLITION REQUEST FORM

(Please fill in all blanks)

Information of Property to be Demolished:

Current Owner's Name

Property Address

Subdivision (if applicable)

Lot #

All Prior Owners' Names (if requested or known)

Tax Map

Parcel #

Tax ID #

Purpose/Reason for Demolition

Future plans of property after demo (i.e. subdivision, parking lot, re-build new house, etc...)

If a subdivision, SDP# _____ Has the structure(s) been deemed unsafe by DILP ___ YES ___ NO

UTILITY RECORDS:

Property currently connected to public water ___ YES ___ NO

Property currently connected to public sewer ___ YES ___ NO

Does the property currently have any wells and/or septic systems ___ YES ___ NO

→ Explain:

*Note: Any wells and/or septic systems that are to remain may require an approved percolation certification plan under *Howard County Code Sec. 3.805*

*Note: Any septic systems that are to be abandoned must be done by a septic contractor with documentation of the process.

*Note: All abandoned wells are to be sealed by a well driller licensed by the Maryland State Board of Well Drillers *COMAR Sec 26.04.04.11 Abandonment Standards D (3)*

COMMENTS:

Applicant's Name (please print)

Applicant's Phone #

Applicant's Email

Applicant's Fax #

Applicant's Signature

Date