

DEMOLITION LETTER REQUEST

DATE OF APPLICATION:		
PROPERTY ADDRESS:		
MUNICIPALITY(IES):		
BLOCK(S):	LOT(S):	
COMPANY NAME:		
ADDRESS:		
TOWN:	STATE: ZIP CODE:	
HOME/OFFICE PHONE:	CELL: EMAIL:	
CONTACT PERSON(S):		
PROPERTY OWNER ⁽¹⁾ :		
ADDRESS:		
TOWN:	STATE:ZIP CODE:	
HOME/OFFICE PHONE:	CELL:EMAIL:	
	SON FOR THE DEMOLITION INCLUDING POTENTIAL NEW DEVELOPMENT (IF AN	
IS PROPERTY VACANT?	YES WILL CONSTRUCTION WATER BE REQUIRED?	YES ⁽³⁾
HAS A DEVELOPMENT INFO	DRMATION FORM PREVIOUSLY BEEN SUBMITTED TO SMCMUA? YES NO (Attach applicable Development Info	rmation form)
THE ACCOUNT NUMBER AI	ND TYPE TO BE DECOMMISSIONED (attach additional sheets if necessary):	
 ⁽¹⁾ Attach proof of ownersh ⁽²⁾ Attach a letter from the letter building. 	umber) ⁽²⁾ Domestic Service (Account Number) ip (required when the property has been recently purchased). Fire Marshall or your Insurance Carrier that SMCMUA has permission to turn-off ion Water Request' Form will be required.	
	ter off at the curb and remove the meter. A final bill will be issued. Once p ovided. Only SMCMUA personnel are permitted to operate the curb stop.	aid in full, the
Submitted by: I certify that I have personally exa	(name printed)	_(signature)
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