

CITY OF HOLMES BEACH

DEMOLITION CHECKLIST - PRIOR TO INSPECTION

**(THIS FORM MUST BE ON SITE FOR THE
INSPECTOR @ PRE-DEMO INSPECTION)**

**A pre-demo inspection is required with completed
disconnections: call 941-708-5800 x261**

Jobsite Address: _____

Permit #: _____

Homeowner Name: _____

Phone #: _____

Demolition Contractor: _____

Phone: _____

Address: _____

Contact: _____

Anticipated start date: _____

Expected completion date: _____

Building Contractor: _____

Contact: _____ Phone: _____

Specs/plans for rebuilding submitted: Yes No

Disconnection Contractors:

Electrical: _____ Phone: _____

Plumbing: _____ Phone: _____

Mechanical: _____ Phone: _____

Gas: _____ Phone: _____

Demo Swimming Pool/De-Watering Plans Submitted:

Yes No N/A

Silt Fence Initial Inspection Completed:

Yes No

Disconnections Completed:

Electricity: Yes No

Water/ Sewer Tap: Yes No

Gas: Yes No

Mechanical: Yes No

Telecommunications: Yes No

Hazardous Substances:

Asbestos-containing material onsite:

Yes No Removed Report submitted

PCBs: (Poly-Chlorinated BiPhenyls) onsite:

Yes No Removed Report submitted

Biological: (TV, Refrigerators, Window AC, Thermostat):

Yes No Removed Report submitted

Radioactive Materials: (exit signs, emergency lighting,
fluorescent lighting, smoke detectors):

Yes No Removed Report submitted

Flammable substances: Yes No Removed

Chemicals: (cleaning products, pesticides, herbicides, oils):

Yes No Removed

Any wells or underground storage tanks onsite:

Yes No Removed & Certified Abandonment

Abandoned:

Paint: Yes No Removed

Batteries: Yes No Removed

Chemicals: Yes No Removed

Type of Building/Structure: (levels etc.)

Frame: CMU Concrete CMU/Frame Steel

Full demolition: Yes Partial/strip-out: Yes

Property for Historical use: Yes No

Special Structures: (Explain)

Provide Dump Location: _____

Demo Contractor: _____ **Date:** _____

Signed: _____

Print: _____

Inspector Approved: _____

Date: _____