

SEABROOK BEACH VILLAGE DISTRICT
P.O. BOX 2660
SEABROOK, NH 03874
603-474-7029
DEMOLITION PERMIT APPLICATION

Property Address: _____ Map _____ Lot _____ Seq. _____

Applicant Name: _____

Address and Phone: _____

Property Owner: _____

Address and Phone: _____

By signing below you are verifying that the utility/department responsible has been safely terminated or never existed at the structure above.

ALL HAZARDOUS MATERIALS MUST BE REMOVED AND PROPERLY DISPOSED OF PRIOR TO REMOVAL OF THE STRUCTURE – AN ENVIRONMENTAL STUDY MUST BE PERFORMED TO VERIFY SUCH CONDITIONS

Signature of Property Owner/Authorized Agent: _____

Dig Safe # _____

Tax Collector
474-9881 _____
Tax Collector/Authorized Agent

Town of Seabrook Water Department
550 Rt. 107 Phone 474-9921 _____
Water Superintendent/Authorized Agent

Sewer Department
274 Rt. 286 Wrights Island Phone 474-8012 _____
Sewer Superintendent/Authorized Agent

Unitil Gas
1-866-3820 _____
Authorized Agent

Unitil Electricity

Authorized Agent

Transfer Station
70 Rocks Road Phone 474-9765 _____
Authorized Agent

SBVD Code Enforcement Official
210 Ocean Blvd. Phone 474-7029 _____

