



# CITY OF IRONTON APPLICATION FOR DEMOLITION PERMIT

|           |  |   |
|-----------|--|---|
| App. Date |  | Is Owner Applicant?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|-----------|--|---|

## 1. PROPERTY INFORMATION

|                |            |  |   |
|----------------|------------|--|---|
| Street Address | Zip        | Parcel Number  | Year Constructed ?  |
| Subdivision    | Lot Number | Parcel Type<br><input type="checkbox"/> Residential (R)<br><input type="checkbox"/> Business (B) | <input type="checkbox"/> Industrial (I)<br><input type="checkbox"/> Other (O) |

## 2. OWNER INFORMATION

| First Name   | Last Name or Business Name  | Phone   |   |
|--|---|---|---|
| Street Address   | City  | State Zip   |   |
| Do you own other property in the City of Ironton ?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | Number of other properties owned in City of Ironton:<br><input type="checkbox"/> 3 or less <input type="checkbox"/> 4 or more |   |   |
| LISTING OF OTHER PROPERTY OWNED IN CITY OF IRONTON   |   |   |   |
| PARCEL NUMBER  | ADDRESS   | USE<br><input type="checkbox"/> Residential<br><input type="checkbox"/> Commercial/Industrial | VACANT<br><input type="checkbox"/> YES<br><input type="checkbox"/> NO |
|  |   | <input type="checkbox"/> Residential<br><input type="checkbox"/> Commercial/Industrial        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO           |
|  |   | <input type="checkbox"/> Residential<br><input type="checkbox"/> Commercial/Industrial        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO           |
|  |   | <input type="checkbox"/> Residential<br><input type="checkbox"/> Commercial/Industrial        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO           |
|  |   | <input type="checkbox"/> Residential<br><input type="checkbox"/> Commercial/Industrial        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO           |

## 3. CONTRACTORS INFORMATION

|                       | NAME OF CONTRACTOR | STREET ADDRESS | CITY, ST. | LICENSE NO. |
|-----------------------|--------------------|----------------|-----------|-------------|
| Applicant             |                    |                |           |             |
| Demolition Contractor |                    |                |           |             |
| Excavation            |                    |                |           |             |
| Concrete              |                    |                |           |             |
| Contract Hauler       |                    |                |           |             |
| Disposal Site         |                    |                |           |             |

## 4. CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of the City of Ironton. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

**X**  
SIGNATURE OF APPLICANT ADDRESS PHONE NO.

**X**  
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO.



Permit No. Address

## 5. BUILDING USE & STRUCTURAL INFORMATION

|   |   |  |
|---|---|--|
| <b>EXISTING USE:</b>  |   |  |
| <b>ASSEMBLY:</b><br><input type="checkbox"/> THEATRE<br><input type="checkbox"/> NIGHT CLUB<br><input type="checkbox"/> RESTAURANT<br><input type="checkbox"/> CHURCH<br><input type="checkbox"/> OTHER ASSEMBLY<br><b>EDUCATIONAL:</b><br><input type="checkbox"/> (GRADES 1-12)<br><input type="checkbox"/> DAY CARE FACILITY<br><input type="checkbox"/> <b>BUSINESS</b><br><input type="checkbox"/> <b>MERCANTILE</b> | <b>INSTITUTIONAL:</b><br><input type="checkbox"/> GROUP HOME<br><input type="checkbox"/> HOSPITAL<br><input type="checkbox"/> JAIL<br><b>RESIDENTIAL:</b><br><input type="checkbox"/> HOTEL, MOTEL<br><input type="checkbox"/> MULTI-FAMILY<br><input type="checkbox"/> CABO TWO FAMILY<br><input type="checkbox"/> CABO ONE FAMILY<br><input type="checkbox"/> <b>CARPORNT/ACCESSORY</b> | <b>FACTORY:</b><br><input type="checkbox"/> MODERATE HAZARD<br><input type="checkbox"/> LOW HAZARD<br><input type="checkbox"/> HIGH HAZARD<br><b>STORAGE:</b><br><input type="checkbox"/> LOW HAZARD<br><input type="checkbox"/> MODERATE HAZARD<br><b>OTHER:</b><br><input type="checkbox"/> <b>PARKING GARAGE</b><br><input type="checkbox"/> <b>MOTOR FUEL SERVICE</b><br><input type="checkbox"/> <b>REPAIR GARAGE</b><br><input type="checkbox"/> <b>PUBLIC UTILITY</b> |
| <b>Foundation</b> (Check all that apply)<br><input type="checkbox"/> Steel <input type="checkbox"/> Concrete<br><input type="checkbox"/> Masonry <input type="checkbox"/> Wood  | <b>Structural Frame</b> (Check all that apply)<br><input type="checkbox"/> Steel <input type="checkbox"/> Concrete<br><input type="checkbox"/> Masonry <input type="checkbox"/> Wood  | <b>Exterior Walls</b> (Check all that apply)<br><input type="checkbox"/> Steel <input type="checkbox"/> Concrete<br><input type="checkbox"/> Masonry <input type="checkbox"/> Wood   |
| Street Frontage (Feet)  | Stories (Number)  | Fireplaces (Number)  |
| Front Setback (Feet)  | Building Area (Sq. Feet)  | Existing Residential Units (Number)  |
| Rear Setback (Feet)   | Living Area (Sq. Feet)  | Office/Service (Sq. Feet)  |
| Left Setback (Feet)   | Basement Area (Sq. Feet)  | Elevators/ Escalator (Number)  |
| Right Setback (Feet)  | Accessory Buildings (Number)  | Manufacturing (Sq. Feet)   |
| Lot Area (Sq. Feet)   | Accessory (Sq. Feet)  | Signs (Number)   |
| Height Above Grade (Feet)   | Garages (Number)  | Vegetation above 30" (Number)  |
| Depth Below Grade (Feet)  | Garage Area (Sq. Feet)  | Paved Area (Sq. Feet)  |
| Est. Start Date:     ___ / ___ / ___  | Est. Finish Date:   ___ / ___ / ___   | Structures<br>Total Value \$   |

## 6. UTILITY INFORMATION

| UTILITY             | ON SITE  | PROVIDER | ACTIVE   |
|---------------------|--|----------|--|
| <b>WATER</b>        | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| SANITARY SEWER      | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| STORM SEWER         | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| GAS/ FUEL           | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| ELECTRIC            | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| UNDERGROUND STORAGE | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| TELEPHONE           | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| CATV                | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| OTHER               | <input type="checkbox"/> YES <input type="checkbox"/> NO |          | <input type="checkbox"/> YES <input type="checkbox"/> NO |

## 7. AREA UTILITY PROVIDERS

|                            |  |                |
|----------------------------|--|----------------|
| Ironton Water Works Office |  | (740) 532-3353 |
| Hecla Water Association    |  | (740) 533-0526 |
| American Electric Power    |  | (800) 672-2231 |
| Columbia Gas of Ohio       |  | (800) 344-4077 |
| Ameritech                  |  | (800) 660-1000 |
|                            |  |                |
|                            |  |                |
|                            |  |                |
|                            |  |                |

**CITY OF IRONTON, OHIO**  
**REQUIREMENTS FOR DEMOLITION SITE ACCEPTANCE**

- All rubbish shall be cleared and hauled to proper place of disposal.
- Copies of disposal receipts from approved landfill site certifying the date, address of demolition site, weight and type of material disposed. Material disposed at sites other than landfills shall require a ***Disposal Certification Form***, available from the Building Office, filed for each alternate site.
- All concrete walks, steps, etc. must be removed from site.
- All concrete slabs, forms and footings below grade must be removed from site.  
Exception: It is permitted that slab concrete not containing reinforcing wire be pulverized into pieces no larger than 6" X 6" X 6" and mixed in fill material so that each cubic foot of fill does not contain more than 33% of the pulverized concrete.

Note: Mixed fill must be inspected by the Engineering Dept. **prior** to placement.

- Cellar or basement shall be filled with approved material to sub-grade level and compacted.
- All utility lines must be disconnected as per service provider specifications.

1. City of Ironton specifications for utility termination:

- Sanitary sewers and storm drains (roof leaders) are to be located and marked, properly terminated, removed and properly sealed to prevent any infiltration or discharge possibly creating health and safety problems on site.

Note: Inspection by the Engineering Dept. is required **prior** to covering of sanitary or storms sewer piping.

- Roof leader drains are to be terminated at least two (2) feet below the top of the ground; all storm water piping above the two-foot level is to be removed.
- The sealed end of the sanitary sewer piping shall be located and permanently marked with a section of 3" or 4" PVC pipe capped and extending from the termination point of the sewer pipe vertically to an elevation of 6" to 10" above finished grade. Pipe cap shall be permanently labeled "SANITARY SEWER" or "STORM SEWER"
- The termination of the sanitary sewer shall be outside the existing foundation excavation area at the nearest joint if clay tile or cut if PVC pipe a minimum of 2' outside the excavation area. The termination point shall be plugged solid with concrete, or capped and properly sealed. All remaining sewer piping will be removed from site and properly disposed.
- Existing water service lines shall be terminated at the meter well, removed and disposed of properly.
- Topsoil or other approved material suitable for supporting grass and vegetation shall be added to achieve final grade.
- Lot area to be seeded, strawed and smoothed to allow ease of mowing and maintenance.

Note: Upon completion, final inspection by the Building Officer shall be necessary to obtain Certificate of Completion. Such certificate shall be necessary for to release of demolition deposit funds or issuance of Building Permit for future development.

# CITY OF IRONTON

## PROCEDURE FOR DEMOLITION/WRECKING PERMIT

### **Requirements:**

Permit as per Chapter 1440, Section 1440.02, Subsection (f) of Ironton Codified Ordinances (Permit Fees-Wrecking).

Ohio Administrative Code rule 3745-20 (Ohio Asbestos Emission Control Rules).

Ohio Administrative Code rule 3701-34

### **Instructions:**

- Complete City of Ironton Building Permit Application for Demolition for each building to be razed.
- Complete OEPA "Notification of Demolition and Renovation" form, copy, and submit to appropriate entity and supply copy of such with Ironton Permit Application.
- Complete Ohio Department of Health "Prior Notification of Asbestos Hazard Abatement Project" form if applicable.
- Submit Permit Fees: (\$20 for each building and \$20/ each 2000SF or fraction thereof of area over 2000SF per building).
- Submit Demolition Deposit:
  - A. Performance Bond equal to total cost of demolition, or;
  - B. Cash Bond equal to ½ the estimated cost of demolition, or;
  - C. Certificate of Insurance equal to cost total cost of demolition, naming City of Ironton as Insured.
- Receive Demolition/Wrecking Permit from City of Ironton.
- Proceed to discontinue/relocate affected utility services (e.g. gas, electric, communications, underground water, sewer, etc.)
- Obtain City Sidewalk and Curb Cut Permits if applicable.
- Proceed with Hazard Abatement as per OEPA and/or Ohio Department of Health.
- Proceed with Demolition/Wrecking on site.
- Notify City Engineering Department 48 hours prior to removal of City sidewalks, and curb/street work.
- Call Department of Engineering for inspection of completed demolition.
- Make application for release of Demolition Bond escrow payment providing copies of forms submitted to OEPA and Ohio Department of Health as well as any supporting records, contracts and receipts of payments associated the with project.
- Receive reimbursement of cash deposit payment from City less any assessed damages. if as certification of completion and satisfactory compliance.

### **Contacts:**

USEPA/OEPA Representative, Portsmouth Local Air Agency  
605 Washington St., Third Floor  
Portsmouth, OH 45662  
Phone: (740) 353-5156 Fax: (740) 353-3638

(11/99, KRW)