DEMOLITION/SITE RESTORATION AND STABILIZATION PROPOSAL

HMGP Project: _____ **PEMA #:** _____

Property Address: _____

Parcel/PIN: _____

Contractor Information

Company Name: _____

Address: _____

Contact: _____ **Phone:** _____ **Email:** _____

Homeowner has NFIP Insurance- Mandatory USE OF ICC

Eligible Activities	ICC	407
Required State/County Permits *	$	n/a
Demolition of Structure	$	n/a
Demolition of Outbuildings	n/a	$
Fill in Basement	$	n/a
Fill in Pools	n/a	$
Utility dis-connection (Water/Sewer/Electric)	$	n/a
Plug Wells , Capping Wells or Water line	$	n/a
Pumping, Capping, Removal Septic Tanks,	$	n/a
Testing-Removal of Hazardous Waste	n/a	$
Removal of Slabs,Foundations, Pads	$	n/a
Removal of Driveways, Sidewalks, Patios	n/a	$
Disposal of Debris	$	n/a
Grade & Stabilize site	$	n/a
Erosion Control Seeding	n/a	$
Totals by Category	$ 0.00	$ 0.00

Grand Total: $_____0.00_____

Company Official: _____ _____ _____

Name Signature Date

ACCEPTED:

Municipal Official: _____ _____ _____

Applicant Agent Name Signature Date

Change Order Request: (Explain any unforseen or additional work and associated costs by Activity)

Cost Adjustment: ICC=$**_____ **407=$_____ **Revised Total$**_____0.00_____

ACCEPTED:

Municipal Official: _____ _____ _____

Applicant Agent Name Signature Date

*Community issued permits NOT eligible

DEMOLITION/SITE RESTORATION AND STABILIZATION PROPOSAL

HMGP Project: _____ **PEMA #:** _____

Property Address: _____

Parcel/PIN: _____

Contractor Information

Company Name: _____

Address: _____

Contact: _____ **Phone:** _____ **Email:** _____

Public Assistance/407 Funding - Homeowner does not have NFIP Insurance/ICC

Eligible Activities	ICC	407
Required State/County Permits *	n/a	$
Demolition of Structure	n/a	$
Demolition of Outbuildings	n/a	$
Fill in Basement	n/a	$
Fill in Pools	n/a	$
Utility dis-connection (Water/Sewer/Electric)	n/a	$
Plug Wells , Capping Wells or Water line	n/a	$
Pumping, Capping, Removal Septic Tanks,	n/a	$
Testing-Removal of Hazardous Waste	n/a	$
Removal of Slabs,Foundations, Pads	n/a	$
Removal of Driveways, Sidewalks, Patios	n/a	$
Disposal of Debris	n/a	$
Grade & Stabilize site	n/a	$
Erosion Control Seeding	n/a	$
Totals by Category	n/a	$ 0.00

Grand Total: $_____0.00_____

Company Official: _____ _____ _____

Name Signature Date

ACCEPTED:

Municipal Official: _____ _____ _____

Name Signature Date

Change Order Request: (Explain any unforseen or additional work and associated costs by Activity)

Cost Adjustment: 407=$**_____ **Revised Total$_____0.00_____

ACCEPTED:

Municipal Official: _____ _____ _____

Applicant Agent Name Signature Date

*Community issued permits NOT eligible

DEMOLITION/SITE RESTORATION AND STABILIZATION PROPOSAL

HMGP Project: _____ **PEMA #:** _____

Property Address: _____

Parcel/PIN: _____

Contractor Information

Company Name: _____

Address: _____

Contact: _____ **Phone:** _____ **Email:** _____

Homeowner has NFIP Insurance- Mandatory USE OF ICC (County not declared for Public Assistance)

Eligible Activities	ICC	404
Required State/County Permits *	$	n/a
Demolition of Structure	$	n/a
Demolition of Outbuildings	n/a	$
Fill in Basement	$	n/a
Fill in Pools	n/a	$
Utility dis-connection (Water/Sewer/Electric)	$	n/a
Plug Wells , Capping Wells or Water line	$	n/a
Pumping, Capping, Removal Septic Tanks,	$	n/a
Testing-Removal of Hazardous Waste	n/a	$
Removal of Slabs,Foundations, Pads	$	n/a
Removal of Driveways, Sidewalks, Patios	n/a	$
Disposal of Debris	$	n/a
Grade & Stabilize site	$	n/a
Erosion Control Seeding	n/a	$
Totals by Category	$ 0.00	$ 0.00

Grand Total: $_____0.00_____

Company Official: _____ _____ _____

Name Signature Date

ACCEPTED:

Municipal Official: _____ _____ _____

Applicant Agent Name Signature Date

Change Order Request: (Explain any unforseen or additional work and associated costs by Activity)

Cost Adjustment: ICC=$**_____ **404=$_____ **Revised Total=$**_____0.00_____

ACCEPTED:

Municipal Official: _____ _____ _____

Applicant Agent Name Signature Date

*Community issued permits NOT eligible

DEMOLITION/SITE RESTORATION AND STABILIZATION PROPOSAL

HMGP Project: _____ **PEMA #:** _____

Property Address: _____

Parcel/PIN: _____

Contractor Information

Company Name: _____

Address: _____

Contact: _____ **Phone:** _____ **Email:** _____

404 Funding - Homeowner does not have NFIP Insurance/ICC (County not declared for Public Assistance)

Eligible Activities	ICC	404
Required State/County Permits *	n/a	$
Demolition of Structure	n/a	$
Demolition of Outbuildings	n/a	$
Fill in Basement	n/a	$
Fill in Pools	n/a	$
Utility dis-connection (Water/Sewer/Electric)	n/a	$
Plug Wells , Capping Wells or Water line	n/a	$
Pumping, Capping, Removal Septic Tanks,	n/a	$
Testing-Removal of Hazardous Waste	n/a	$
Removal of Slabs,Foundations, Pads	n/a	$
Removal of Driveways, Sidewalks, Patios	n/a	$
Disposal of Debris	n/a	$
Grade & Stabilize site	n/a	$
Erosion Control Seeding	n/a	$
Totals by Category	n/a	$ 0.00

Grand Total: $_____0.00_____

Company Official: _____ _____ _____

Name Signature Date

ACCEPTED:

Municipal Official: _____ _____ _____

Name Signature Date

Change Order Request: (Explain any unforseen or additional work and associated costs by Activity)

Cost Adjustment: 404=$**_____ **Revised Total$_____0.00_____

ACCEPTED:

Municipal Official: _____ _____ _____

Applicant Agent Name Signature Date

*Community issued permits NOT eligible