



Geoffrey S. Larsen  
BUILDING COMMISSIONER

**TOWN OF WAYLAND**  
MASSACHUSETTS  
01778  
**BUILDING DEPARTMENT**

TOWN BUILDING  
41 COCHITUATE ROAD  
TELEPHONE: (508)358-3600  
FAX: (508)358-3606

**DEMOLITION APPROVAL CHECKLIST**  
(to be submitted with Building Permit Application)

**GENERAL INFORMATION:**

Address \_\_\_\_\_ Plate \_\_\_\_\_ Parcel \_\_\_\_\_

Approximate size of structure/floor \_\_\_\_\_ sf

Use of Structure \_\_\_\_\_

Foundation Type \_\_\_\_\_

Construction Type \_\_\_\_\_

**TOWN DEPARTMENT APPROVALS:**

**Date Received**

- Fire Dept. Approval (signature required) \_\_\_\_\_
- Board of Health Approval (form) \_\_\_\_\_
- Water Dept. Approval (letter) \_\_\_\_\_
- Debris Disposal Form \_\_\_\_\_

**UTILITY APPROVALS:**

**as required by specialized codes**

- Electric Disconnect Letter \_\_\_\_\_
- Gas Disconnect Letter \_\_\_\_\_

***When applicable:***

- Telephone Disconnect Letter \_\_\_\_\_
- Cable Disconnect Letter \_\_\_\_\_

**NOTE:** Applicant is responsible for submitting **original release letters** for each of the utilities listed above.