



Demolition Permit Submittal Requirements and Supplement

Demolition Supplement form (copy of the MPCA Notification form if asbestos is present)

Proposed site plans showing location and size of structure(s) to be demolished

Submit permit request online at: www.corcoranmn.gov - Building Permits

**Required online attachments are preferred in PDF format.*

Inspections

There will be a minimum of two (2) inspections. (Other inspections, such as a pre-demolition site visit may be required).

Excavation:

After the demolition project has taken place but before any excavations are filled.

- Septic tank pumped and removed or filled by licensed septic contractor
- All wells abandoned by a licensed well contractor (provide certification)
- Demolition materials and debris including footings, foundations, and slabs removed
- Site properly cleaned up

Final:

After project completion.

- All excavations filled
- Final grading is complete and satisfactory

Prior to demolition, the following items must be completed and remain in place throughout the duration of the project:

- Utilities terminated (electric service, natural gas/LP, phone, cable, etc.)
- All underground utilities marked (Gopher State One call)
- Private sewer and water terminated
- Traffic control - Pedestrian protection (if needed, this may require Public Safety approval and inspection)
- Erosion, debris, and dust control (silt fence, etc.)
- Provide verification of proper clean-up/disposal of asbestos, hazardous materials, contaminated soils, etc.

It is the responsibility of the owner and/or contractor to comply with the requirements and rules of all authorities and government agencies having jurisdiction. The permit holder shall be responsible for contacting all of the proper State, County and Local authorities prior to the demolition commencing. All asbestos and other prohibited materials shall be removed and disposed of in accordance with the rules and regulations established by the Minnesota Pollution Control Agency. If you have any questions regarding the classification, removal, transport, disposal, or any questions regarding asbestos rules, regulations, or standards, please feel free to contact the MPCA asbestos team at the following numbers: (651) 296-6300; (800) 657-3864 or at the MPCA website: www.pca.state.mn.us.

This handout is intended only as a guide and is based in part on the Minnesota State Building Code, Corcoran city ordinances, and good building practice. While every attempt has been made to ensure the correctness of this handout, no guarantees are made to its accuracy or completeness. Responsibility for compliance with applicable codes and ordinances falls on the owner and/or contractor.

For specific questions regarding building code requirements, refer to the applicable codes or the contact the city's contracted Building Official, Metro West Inspection at 763-479-1720 or permits@corcoranmn.gov.



CITY OF CORCORAN

www.corcoranmn.gov

Demolition Supplement

Owner's Name _____ Phone # _____

Site Address _____ PID: ____ - 119 - 23 - ____ - _____

Contractor's Name _____ Phone # _____

Address _____

1. Building(s) to be demolished: _____

2. Commercial ____ Residential ____ Agricultural ____ Other _____

3. Type of construction: Wood ____ Masonry ____ Mix/Other _____

4. Disposal site(s): _____

5. Asbestos present: Yes ____ No ____ **If yes, the Notification of Intent to Perform a Demolition must be completed and submitted to the MPCA and a copy must be provided to the City.**

A. Contractor removing asbestos: _____

B. Disposal site: Name: _____

Address: _____

6. Other hazardous materials present: Yes ____ No ____

A. Materials: _____

B. How will they be managed? _____

7. Will the well(s) be abandoned and sealed? Yes ____ No ____ **Must provide copy of the Well and Boring Sealing Record at inspection.**

A. If yes, Name of Licensed Well Contractor: _____

8. Septic tank(s) to be:

A. ____ Pumped, cleaned, collapsed, and filled ***Needs inspection prior to filling**

B. ____ Pumped, cleaned, and removed. Disposal site: _____

C. Other: _____

9. Erosion and debris control: _____

10. Utilities to be abandoned by the utility company: _____

11. Demolition plan: _____

12. Start date: _____ End date: _____

I, the undersigned, accept the terms and conditions of the demolition permit application, and agree to fully comply with the City of Corcoran as well as all federal, state, county, and local rules and regulations pertaining to building demolition and the handling and removal of hazardous materials.

Applicant's Signature _____ Date _____

A permit issued by the Building Official shall not be construed as permission to proceed without approval from all appropriate agencies.

Deconstruction, renovation, or demolition notification form

Asbestos Program

Doc Type: Asbestos & Demolition/Amendments

Type of notification: Original Amended Project cancellation

Notification is required for all NESHAP-regulated facilities, as defined in [40 CFR § 61.141](#), and the notification must be postmarked or received ten (10) working days before renovation, deconstruction, or demolition begins. See Item 5 for emergency demolition projects. If the project dates change, submit an amended form with an updated start and end dates to reflect current project dates.

Submittal: Notifications may be made electronically (preferred) or by paper copy. To submit this form electronically, save the form to your computer and send the form to the Minnesota Pollution Control Agency (MPCA) by attaching the form to an email message, using *Deconstruction, renovation, or demolition notification form (w-sw4-21)* as the subject line to asbestos.demolition.pca@state.mn.us. To submit the form by paper copy, please mail to the Asbestos Program at the address above. If you have any questions, contact the MPCA Asbestos Program Coordinator, Colin Boysen at colin.boysen@state.mn.us or 507-206-2644.

Important Note: Ensure you are in compliance with Minn. R. 7035.0805 prior to the commencement of the deconstruction, renovation or demolition project. This rule requires that the following items be removed two days prior to demolition: mixed municipal solid waste; household hazardous waste; industrial or hazardous waste; waste tires; major appliances; items containing elemental mercury, Poly-Chlorinated BiPhenyls (PCBs), and chlorofluorocarbons (CFCs); oil; lead; electronics; and other prohibited items. See MPCA website at <http://www.pca.state.mn.us/publications/w-sw4-20.pdf> for a *Pre-Renovation/ Demolition Environmental Checklist Guidance Document* to assist with completion of this rule.

*Demolition waste must be disposed of at a permitted solid waste facility. MPCA encourages consideration of building material reuse and recycling before demolition/disposal at a permitted solid waste facility, as outlined in in Minn. Stat. 115A.02, which establishes preferred management methods based on environmental impact.

Note that some questions are **optional**. For more information on deconstruction/material salvage and reuse, please contact MPCA Sustainable Building Material Management staff: demo.mPCA@state.mn.us.

Renovation, deconstruction, and/or demolition contractor

If there is more than one contractor, please see last page (**optional**).

Contractor

Name of firm or organization: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____

Building owner

Name of owner: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____

Building information

Name of building, if applicable: _____

Address/location: _____ County: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____

Year built _____ Size of building: _____ Sq. ft. Number of floors, including basement level(s): _____

Prior use of building _____

Present use of building _____

Future use of building, if applicable: _____

Dates of renovation, deconstruction or demolition: Start date: _____ End date: _____
(mm/dd/yyyy) (mm/dd/yyyy)

Provide a brief description of the planned demolition or renovation & anticipated removal method(s):
Optional for deconstruction

If the activity was ordered by a government agency, please identify the agency and attach a copy of the order:

Name: _____ Title: _____

Authority: _____

Date of order (mm/dd/yy): _____ Start date (mm/dd/yy): _____

*Notification for an emergency demolition must be submitted as early as possible before demolition begins, but not later than the following working day. A demolition is considered an emergency **only** when the facility has been deemed structurally unsound and in danger of imminent collapse. If the structurally unsound building is known to contain any regulated Asbestos Containing Material (ACM) or is suspected to contain any regulated ACM, special procedures **must** be followed. If you are unaware of the special procedures, instructions/ regulations can be obtained by contacting the MPCA at the phone numbers listed below. Refer to 40 CFR 61.145(a)(3) for additional information.*

If the ACM will become crumbled, pulverized, or reduced to powder during the demolition process it must be removed prior to demolition activities.

Is nonfriable ACM present in the structure to be demolished? Yes No

Will nonfriable ACM be present in the structure at the time of demolition? Yes No

If Yes to either question above, complete Items 1-9. If No to both questions, complete Items 3-9.

1. If ACM will be left in place, indicate the amount of Category I and/or Category II nonfriable ACM left in place.

Category I: _____ Linear feet
_____ Square feet
_____ Cubic feet

Category II: _____ Linear feet
_____ Square feet
_____ Cubic feet

Category I nonfriable ACM means asbestos-containing packings, gaskets, resilient floor covering, and asphalt roofing products containing more than one percent asbestos.

Category I nonfriable ACM is not allowed to remain in place for demolition if it is in poor condition.

Category II nonfriable ACM means any material, excluding Category I nonfriable ACM, containing more than one percent Asbestos that, when dry, cannot be crumbled, pulverized, or reduced to a powder by hand pressure.

Category II nonfriable ACM is not allowed to remain in place for demolition if it has a high probability of becoming crumbled, pulverized, or reduced to a powder during demolition, transport, or disposal (e.g., transite, cement, slate roofing).

2. Description and location of ACM remaining in place (including number of floors and rooms):

3. Company and/or individual that conducted the building inspection and the procedure used to determine the presence or absence of ACM (including analytic method).

Note: Prior to demolition all structures must be inspected by a licensed asbestos inspector who has been certified through the Minnesota Department of Health.

4. Description of procedure to be followed in the event that unexpected RACM is found or Category II nonfriable ACM becomes crumbled, pulverized or reduced to powder:

5. a. Were any materials assessed for salvaging/reuse or for recycling? (optional) Yes No

b. If yes, which ones?

c. Structure/building material management methods (optional). Use this section to describe the destination or end use of the materials

Material	Management method (Reused/salvaged, recycled, sent to landfill, etc.)	Company/Organization	Location (City/township, State)
Concrete:			
Masonry:			
Ferrous metals:			
Non-ferrous metals			
Whole items*			
Wood			
Miscellaneous**			

*Example: fixtures, whole doors, etc.

**Miscellaneous materials include shingles, drywall, carpet, etc.

6. Waste transporter information

Transporter name: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____

7. Permitted waste disposal site information (*see below for more information)

Facility name: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____

Contractor signature: By typing my name below, I certify that the above information is correct and I am a bonafide representative of the demolition contractor or building owner and have authority to enter into agreements for my employer.

By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Signature: _____ Title: _____

(This document has been electronically signed.)

Date (mm/dd/yyyy): _____

Building owner signature optional: By typing my name below, I certify that I approve of the building material management system outlined by the contractor.

By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Signature: _____ Title: _____

(This document has been electronically signed.)

Date (mm/dd/yyyy): _____

A copy of this form should be sent to the local governing authority. Has a copy been sent? Yes No

Check local ordinances if submittal is required; **otherwise optional.**

*Minn. R. 7035.0805 states lead paint not firmly adhered to the substrate is required to be removed prior to demolition or renovation. For purposes of this item, "lead paint" means a coating that contains one-half of one percent (0.5 percent) or more or 5,000 parts per million (5,000 ppm) or more of total lead by weight in the dried film, as determined by acid digestion and analysis, or contains one milligram per square centimeter (1.0 mg/cm²) or more of lead, as determined by X-ray fluorescence analyzer; MPCA encourages the proper management of lead based paint.

If there's more than one contractor on this project, please list them here (*optional*).

Contractor

Name of firm or organization: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____

Contractor

Name of firm or organization: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact: _____ Phone: _____ Email: _____