



**Town of Barnstable
Hyannis Main Street Waterfront Historic District Commission**

**Application
Certificate for Demolition or Removal**

Application is hereby made for the issuance of a Permit for Demolition or Removal of a building or a structure or part thereof, under M.G.L. Chapter 40C, The Historic Districts Act, for proposed work as described below and on plans, drawings or photographs accompanying this application.

Assessor's Map No. _____ **Parcel No.** _____

Address of Proposed Work _____

Applicant Name _____

Applicant Mailing Address _____ Town/State/Zip _____

Applicant Phone Number _____

Applicant E-Mail _____

Property Owner Name _____

Owner Mailing Address _____ Town/State/Zip _____

Owner Phone _____

Agent or Contractor Name _____

Agent or Contractor Address _____ Town/State/Zip _____

Agent or Contractor Phone _____

Agent or Contractor E-Mail _____

DESCRIPTION OF PROPOSED DEMOLITION OR REMOVAL: Provide a detailed evaluation of the existing condition and appearance of the building or structure. Describe the proposed scope of the demolition or removal. Attach an additional sheet and supporting pictures and materials as necessary.

SIGNED: _____

Owner/Agent

DATE: _____