



Development Services  
Building Division  
17575 Peak Ave  
Morgan Hill, CA 95037-4128  
Phone: (408)778-6480  
Fax: (408)779-7236  
[www.morganhill.ca.gov](http://www.morganhill.ca.gov)

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## DEMOLITION PERMIT APPLICATION PACKAGE

### 1. PERMIT PROCESS

- a. Contact the Planning Division to verify that the structure is less than (45) five years old and not a Historical Building.
- b. Application: Complete and submit a Building Permit application form.
- c. Affidavit: Complete and submit a Demolition Affidavit form.
- d. Notice: Complete and submit a Demolition Notice application form.
- e. Site Plan: Provide a site plan showing structures to be demolished.
- f. Asbestos: Obtain a Demolition Notification Form from the Bay Area Quality Management District at [www.baaqmd.gov](http://www.baaqmd.gov). Submit copy of BAAQMD permit (J#) to the City of Morgan Hill.
- g. Posting: Post a sign as defined on the Demolition Affidavit form attached.
- h. Submit a disconnect letter from PG&E.

### 2. UTILITIES

- a. Contact PG&E at (877) 743-7782 for electric and gas disconnection
- b. Contact Verizon at (800) 483-1000 for telephone disconnection.
- c. Contact the Department of Public Works for sewer and water disconnection at (408) 776-7333.
- d. Contact the Santa Clara County Environmental Health Department at (408) 918-3400 for septic tank and well abandonment.
- e. Contact Charter Communication for cable TV disconnection at (866) 731-5420.
- f. Contact the Department of Public Works at (408) 776-7336, if work is being performed in the public right-of-way, or in the event of damage to public improvements.

For a list of Certified Asbestos Consultants go to: [www.dir.ca.gov/dosh](http://www.dir.ca.gov/dosh)

3. **FINAL INSPECTION REQUIREMENTS**

- a. Abandonment of septic tanks and wells require a separate clearance from the Santa Clara County Department of Environmental Health.
- b. All rubble, including footings, slab on grade and all debris must be removed and the site graded.
- c. All water lines and sewer laterals shall be capped, staked and inspected prior to covering.
- d. A "***Final Inspection***" will be required for verification that all the above conditions have been met.

If you have additional questions, contact the Building Division at (408) 778-6480.



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## DEMOLITION AFFIDAVIT

This affidavit is to verify that the demolition sign has been posted as of \_\_\_\_\_ (date) in a conspicuous place, pursuant to Chapter 15.60, Demolition permit issuance prerequisites at \_\_\_\_\_, Morgan Hill, California.

### A. SIGN REQUIREMENTS

The lettering size on the notice should be at least 2 inches high and contain the following words as shown below.

*“NOTICE OF INTENDED DEMOLITION: ANY INTERESTED PERSON MAY APPEAL THE INTENDED DEMOLITION OF THIS BUILDING OR STRUCTURE BY WRITTEN APPEAL FILED WITH THE BUILDING OFFICIAL OF THE CITY OF MORGAN HILL, FIFTEEN (15) DAYS FROM THE DATE OF POSTING HEREOF, BUT NOT AFTER THE FIFTEENTH (15<sup>TH</sup>) DAY FROM POSTING.”*

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Date Posted)

### B. SUBMITTAL REQUIREMENTS

Submit a completed Demolition Affidavit, Notice of Demolition, & Permit Application to the Building Division to start the application process.

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(Office Use)

Posting Verification: \_\_\_\_\_  
(Employee's Name)

Date: \_\_\_\_\_



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## DEMOLITION NOTICE

Site Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_

BAAQMD notice received? (yes)\_\_\_\_\_ (no)\_\_\_\_\_

I hereby declare that the written asbestos notification to BAAQMD is not required for the demolition described in this application.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

Bay Area Air Quality Management District address:  
BAAQMD, Enforcement Division  
939 Ellis Street  
San Francisco, CA 94109  
Phone No. (415) 749-4762

I certify that I am aware that the City of Morgan Hill may not issue a demolition permit to demolish said structure until applicant has demonstrated exemption or compliance with the notification of National Emission Standards for hazardous air pollutants.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date