

DEMOLITION TRACKING FORM

DEMOLITION ADDRESS: _____

PERMIT NO.: _____

DESCRIPTION OF WORK: _____

OWNER'S NAME: _____

PHONE: _____

CONTRACTOR: _____

PHONE: _____

This tracking sheet must be signed by an authorized agent for the utilities listed below:

PUBLIC WORKS AND ENGINEERING - Township of WilmotDisconnect Acknowledgment: Water Service Sanitary Sewer Storm SewerDate: _____

APPROVED BY: _____

***Sewer cap confirmation required - Contact Public Works and Engineering or Development Services for inspection of sewer capping prior to covering

ENBRIDGE GAS

Gas Service locate and disconnect acknowledgment.....Date: _____

APPROVED BY: _____

KITCHENER - WILMOT HYDRO

Disconnect Services and Meter acknowledgment.....Date: _____

APPROVED BY: _____

HERITAGE WILMOT - Township of Wilmot (ONLY IF APPLICABLE)

Heritage Wilmot.....Date: _____

APPROVED BY: _____

NO SERVICES – There are no current or abandoned utility connections to this structure

OWNER/AUTHOURIZED AGENT : _____

Date: _____

It is the responsibility of the owner and contractor to ensure all services have been properly disconnected PRIOR to the commencement of any demolition.