

RAZE WAVER

Date: _____

This form letter serves as a waiver and to inform the Property Owner, General Contractor or their Representative:

Name: _____

Project Location: _____

Building being razed: _____

That all Hazardous, Toxic or Obnoxious Materials including but not limited to (Lead and Asbestos) be Handled, Removed, Transported and Disposed of per, all Local, State and Federal Regulations.

The Water Supply and the Sanitary Systems must also be Protected or Sealed per. Local, State and Federal Regulations.

All other Utilities (Gas, Electric, Etc.) must be disconnected per, supplier's recommendations.

This form releases the Inspectors and the Municipality: Town of Scott
Of any Liability involved the Razing of this property.

_____ Property Owner/Representative

_____ Date

Mail to Building Inspector: Walt Grotelueschen P.O Box 296, Newburg, WI 53060

\$10.00 Fee: Payable to Town of Scott