



# Utility Disconnect Form

Demo Permit application should be filed for Demo Permit  
**Loyall Bennett, Building Official**  
**Caleb O'Toole, Building Inspector**  
**Electrical Inspector Ken Simpson at (269) 471-5869**  
**Mechanical Inspector Ken M. Jewell at (269) 287-0425**  
**Plumbing Inspector John Maier at (269) 519-8820**

**1725 Territorial Road  
 Benton Harbor, MI 49022**

**Tel: (269) 925-7284  
 Fax: (269) 925-7134**

This form is to serve only as a guide to get the utilities shut off and terminated properly. See page two for more information (reverse of this form). **PLEASE FILE DEMO PERMIT APPLICATION FOR DEMO PERMIT.**

**I. DATE AND PROPERTY ID NUMBER**

Property ID #: 11-03- (twp use only)	<b>NO FEES FOR THIS FORM:        DEMO PERMIT SEPARATE FORM:</b>
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**II. PROPERTY ADDRESS WHERE UTILITIES ARE BEING DISCONNECTED:**

**DEMO ADDRESS:**

**III. DESIGNATED AGENT / CONTRACTOR:**

Name of Agent:			
Address (St No. and Name) of applicant:	City	State	Zip Code
Telephone number:	Cell Number:	<b>EMAIL ADDRESS (PRINT CLEARLY)</b>	

**THE FOLLOWING SIGNATURES CERTIFY THAT THOSE UTILITIES UNDER THEIR AUTHORITY WERE DISCONNECTED AND THAT THE STRUCTURE IS READY FOR DEMOLITION ON THE DATE SPECIFIED:** please notify if the phone numbers are incorrect:

<b>AT&amp;T</b> (telephone) Phone: 800.288.2020	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>MICHIGAN GAS UTILITIES:</b> Phone: 800.401.6451	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>AEP</b> (electrical service): Phone: 800.311.6424	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>Sewer Dept:</b> Verify septic or sewer Phone: 269.208.7275	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>Water Dept:</b> Well: Berrien County Health Dept: abandonment procedure needs to be followed Phone: 269.944.9805	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>COMCAST CABLE:</b> Phone: 269.	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>BERRIEN COUNTY HEALTH DEPT:</b> (Septic system): Phone: 269.684.2800	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>BERRIEN COUNTY HEALTH DEPT:</b> (Well system): Phone: 269.927.5623	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:
<b>Verizon Phone: (Dan):</b> Phone: IF VERIZON only Fax: 269.637.9443	<b>DISCONNECT CERTIFIED BY:</b>	POSITION AT UTILITY: signature	DATE:

**DIRECTIONS: REVERSE SIDE OF UTILITY SHUTOFF SHEET (PAGE 2 OF 2):**

**Contractor should determine what type of utility is present in the ground and how that should be properly terminated. Electrical service and gas services are the most important from a safety perspective and the utility provider should sign off that the service has been safely and properly terminated.**

**This form may be faxed to each of the utilities for their signature. Electronic and faxed copies from the individual utilities will be accepted. The contractor should verify in the field that all utilities are safely terminated.**

**Water and sewer terminations ARE TO BE verified by the inspector at the time of demolition when the work is completed. The contractor should provide a diagram with scaled dimensions to permanent structures (sewer manholes, etc) for ease of finding those at a future time if intended for re-use. PLEASE CALL WITH QUESTIONS**

**Note the inspection schedule below:**

- 1. Notification when the work starts**
- 2. Before municipal water and sewer is disconnected contact the office (for instructions). Based on the size, location, condition, and type of pipe we will instruct the demo contractor on termination of water and sewer pipe. The termination, removal, capping, and location will need to be inspected and logged into the property file.**
- 3. After all foundations are removed.**
- 4. When work is complete (final inspection will determine whether the fill is adequate, whether the area is able to be mowed (raked out) and whether enough grass seed has been planted).**

**It is the responsibility of the owner (contractor working as agent of the owner) to arrange for inspections. At a minimum, after permit is issued, there should be notice to this department when work is commenced, and when the foundations have been removed and the utilities capped, and when work is done.**

**Work that is covered without inspection will be required to be opened up so the necessary inspections can be made.**

**Thank you for your completed application. We look forward to serving you.**

Permit revised date: 6.23.2026