



BUILDING/LAND USE PERMIT APPLICATION

Department of Building and Zoning
 P.O. Box 618 Norton, VA 24273
 Phone- 276-679-1160
 Fax- 276-679-3510

PERMIT #:
MANUFACTURED HOME PERMIT #:
ASSOCIATED PERMIT #

WORK DESCRIPTION	What type of work is to be performed (please circle): RESIDENTIAL COMMERCIAL						
	If a garage is included, what type (please circle): ATTACHED DETACHED						
	What type of property improvement will be made (please describe):						
	IF THIS APPLICATION IS FOR A MANUFACTURED HOME, PLEASE ANSWER THE FOLLOWING:	YEAR MODEL:	NAME OF HOME:	SIZE:	HEAT SOURCE:	SERIAL NUMBER:	PRIVATE LOT OR NAME OF MANUFACTURED PARK:
ID	CONTRACTOR NAME				CONTRACTOR ID #:		
	ARCHITECT NAME/ADDRESS (COMMERCIAL ONLY):		ARCHITECT ID #:	PHONE #:			
AGENTS	DEVELOPER NAME/ADDRESS (COMMERCIAL ONLY):		DEVELOPER ID:	PHONE #:			
	PERSON WHO PREPARED PLANS NAME/ADDRESS (RESIDENTIAL):				PHONE #:		
OWNER	PROPERTY OWNER NAME (FIRST NAME, LAST NAME OR COMPANY NAME):				OWNER PHONE #:		
	PROPERTY OWNER MAILING ADDRESS (SKIP, IF MAILING ADDRESS IS SAME AS JOB LOCATION):						
JOB INFORMATION	ADDRESS/LOCATION OF WORK TO BE PERFORMED (STREET #/STREET NAME				SECTION:	LOT:	
	WHAT IS THE NAME AND ADDRESS OF THE TENANT?						
	What is the estimated cost of STRUCTURAL WORK ONLY (materials and labor)? Do not include the cost of plumbing, mechanical, electrical or other work in this estimate:				ESTIMATED COST OF CONSTRUCTION		
				\$			

WATER AND SEWER	Please circle the type of water supply to this property: City Water Well				
	Please circle the type of disposal used by this property: City Sewer Septic				
STRUCTURAL	RESIDENTIAL ONLY				
	BUILDING HEIGHT (AVG. ROOF HEIGHT FROM GRADE)	HOW MANY KITCHENS? (SINK AND 1 MAJOR APPLIANCE = 1 KITCHEN)	# OF STORIES (EXCLUDING BASEMENT)	WILL THERE BE A BASEMENT (CIRCLE)? YES NO	# OF BEDROOMS
APPLICANT	APPLICANT NAME (PLEASE PRINT)				
	APPLICANT SIGNATURE:			DATE:	
OWNER AFFIDAVIT	COMPLETE THIS SECTION ONLY IF YOU ARE AN OWNER DOING YOUR OWN WORK, AND ARE NOT SUBJECT TO LICENSURE AS A CONTRACTOR OR SUBCONTRACTOR.				
	If you are an owner and intend to do the work or subcontract the work out, an Owner Affidavit is required certifying that you are the owner of this tract or parcel of land, that you have applied for this permit, and are not subject to licensing as a contractor or subcontractor. Signing the Owner Affidavit and, in turn, obtaining the permit in your name makes you the owner, responsible for the quality of the work and compliance with applicable State and Local Codes. This Owner Affidavit must be completed, with the signature of a person who witnessed your signature to this document, acknowledging your compliance with Section 54.1-1111 of the Code of Virginia. (Note: Lessees are owners per State Law.)				
	I, as the OWNER, will be responsible for the work performed on my property, and shall be responsible for compliance with all state laws regulating building construction and use, and compliance with all City Ordinances.				
	OWNER'S SIGNATURE		DATE	PLEASE PRINT OWNER NAME LEGIBLY	
	I, as a WITNESS, saw the owner of this property affix his signature to this Owner Affidavit, certifying that he/she is not subject to licensure as a contractor or subcontractor in the State of Virginia.				
	WITNESS SIGNATURE:		DATE:	PLEASE PRINT WITNESS NAME LEGIBLY	
OFFICE USE ONLY	BUILDING PERMIT FEE:		MANUFACTURED HOME PERMIT FEE:		
	STATE LEVY:		STATE LEVY MANUFACTURED HOME:		
	TOTAL PERMIT FEE:				
	FLOODPLAIN ZONE?				
	WHAT CITY ZONE IS THE PROPOSED PROJECT IN?				