RESIDENTIAL BUILDING PERMIT APPLICATION

Warren County Department of Building Inspections
220 North Commerce Ave., Suite 400
Front Royal, VA 22630 (540)-636-9973
www.warrencountyva.net

CODE COMPLIANCE
□2003 USBC
□2006 USBC
□RESIDENTIAL
□NON RESIDENTIAL

PERMIT #:_____
RECEIVED BY:_____
DATE:_____
TIME:_____

OWNER/APPLICANT NAME:	**CONTRACTOR NAME:**
ADDRESS:	ADDRESS:
CITY, ST. ZIP:	CITY, ST. ZIP:
PHONE:	PHONE:
ADDITIONAL PHONE:	ADDITIONAL PHONE:
MECHANIC'S LIEN AGENT:	STATE CONTRACTOR LICENSE #:
	EXPIRATION DATE:

JOB SITE LOCATION:_____

ZONING:

TAX MAP #:	FRONT SETBACK:	SIDE STREET SETBACK:	BUILDING HEIGHT_____ft. (GRADE TO AVG. ROOF HEIGHT)
SECTION:	REAR SETBACK:	# OF EXISTING BUILDINGS:	□MANUFACTURED DWELLING UNIT*
BLOCK:	RIGHT SIDE SETBACK:	# OF EXISTING DWELLINGS:	□INDUSTRIALIZED DWELLING UNIT**
LOT/PARCEL:	LEFT SIDE SETBACK:	ACRES:	SUBDIVISION NAME:

**Manufactured Dwelling is constructed to Federal "HUD" Standards, transportable in one or more sections, built on a permanent chasis and designed for occupancy with or without a permanent foundation, (formerly classified as mobile home; single or double wide).*
***Industrialized Dwelling is a combination of one or more sections, not constructed to "HUD" Standards, subject to State regulation, (Modular).*

I do hereby certify that on _____ (MONTH), _____ (YEAR), the property described above was listed in the name of_____.

WORK HAS NOT STARTED_____ WORK HAS STARTED_____ WORK IS COMPLETED_____

BUILDING INFORMATION: **FOR ALTERATIONS, ADDITIONS AND DEMOLITION-WAS YOUR STRUCTURE BUILT □ BEFORE 1987 OR □ AFTER 1987?**

□NEW	□SINGLE FAMILY DWELLING	□1ST FLOOR SF:	□PORCH SF:	□SHED SF:
□ADDITION	□DUPLEX/ TOWNHOUSE	□2ND FLOOR SF:	□DECK SF:	□OTHER SF:
□ALTERATION	□MULTI-FAMILY DWELLING	□3RD FLOOR SF:	□CARPORT SF:	
□RENOVATION/REPAIR	□OTHER	□BASEMENT: FIN SF:_____ UNF SF:_____	GARAGE: □ATTACHED SF:_____ □BASEMENT SF:_____ □DETACHED SF:_____	CHIMNEY(S) #: □MASONRY_____ □PREFAB_____
□DEMOLITION	# OF BATHROOMS: _____FULL _____HALF	# OF BEDROOMS:	SWIMMING POOL: □ABOVE GROUND □INGROUND SF _____	FIREPLACE(S) #: □MASONRY_____ □PREFAB_____

FOUNDATION TYPE:	**CONSTRUCTION TYPE:**	**UTILITIES:**
□CRAWLSPACE	□MASONRY	
□BASEMENT	□WOOD FRAME	WATER: □PUBLIC □PRIVATE □COMMUNITY
□SLAB ON GRADE	□STEEL	SEWER: □PUBLIC □PRIVATE □COMMUNITY
□PIERS	□MANUFACTURED DWELLING UNIT	
□OTHER	□INDUSTRIALIZED DWELLING UNIT	

ESTIMATED VALUE OF CONSTRUCTION INCLUDING VALUE OF MATERIALS AND LABOR: $_____

TOTAL SQUARE FOOT OF ALL FLOORS:_____

NOTICE: By signing this Building Permit Application, the undersigned Applicant expressly acknowledges that by commencing construction before drilling a well yielding an adequate supply of potable water, the undersigned Applicant assumes the risk of constructing a dwelling house which may not be usable or saleable due to an inability to find a water supply for Applicant's dwelling house after construction.

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct and that the construction will conform with the regulations in the Building Code and Zoning Ordinance.

_____
APPLICANT'S SIGNATURE DATE

_____
PRINT PHONE

FEES:
BUILDING PERMIT FEE:_____
1.75% SURCHARGE:_____
ZONING PERMIT FEE:_____
LAND DISTURBING PERMIT FEE:_____
CREDIT CARD USE FEE:_____

TOTAL FEES:_____

□ CHECK #_____
□ CREDIT CARD
□ CASH

NOTE: FOUNDATION LOCATION SURVEY REQUIRED ON ALL PRINCIPLE STRUCTURES IN COUNTY ON LOTS 2 ACRES OR LESS
FOUNDATION LOCATION SURVEY REQUIRED ON ALL NEW BUILDINGS IN TOWN OF FRONT ROYAL

REVISED 11-3-08

JOB SITE DIRECTIONS

PLEASE GIVE DIRECTIONS FROM THIS OFFICE TO THE JOB SITE

APPLICANT: _____

DIRECTIONS: