## **RESIDENTIAL BUILDING**





**COUNTY OF HENRICO, VIRGINIA** DEPARTMENT OF

**BUILDING CONSTRUCTION AND INSPECTIONS** 



October 1, 2013

APPI	LICATION DA		Application is hereby made for a building permit in accordance with the description and for the purposes hereinafter set forth. This application											
INSTRUCTIONS	This permit application does not include installation of electrical, plumbing, heating, air conditioning, elevators, or fire protection systems. Separate permits are required for these systems and must be obtained prior to the time that work is begun.					is made subject to all County and State laws, Ordinances, rules and regulations now in force or that may hereafter be enacted affecting or regulating thereto and which are hereby agreed to by the undersigned applicant and which shall be deemed a condition entering into the exercise of this permit. Approval of this permit shall not be construed as								
	Fill out appl tion with tw must show lines and o Chesapeake erosion and partment of sets of sign	ot to indicial cial cial cial cial cial cial cial	codes. The work conducted under this building permit will be subject to inspections during normal office hours by appropriate County officials for the purpose of determining compliance with applicable State and County laws and regulations. Such inspections are authorized by VA Code §36-105. By accepting this permit, the undersigned applicant agrees to these inspections. In addition, real estate assessors may											
	☐ BUILD ☐ ALTER/REPAIR ☐ DEMOLITION					(Briefly describe the work to be performed)								
DESCRIPTION OF WORK	_	W DWELLING DITION	DECK DETACHED GARAGE	_										
SCRIF F WO	□ υті	LITY BUILDING	ATTACHED GARAGE	_										
DE		HER (SPECIFY) D REFERENCE PLAN NO.		_										
	STREET ADDRESS													
JOB	LOT		SECTION											
JOB -OCATI	SUBDIVISION		GPIN											
		NAME												
OWNER OF RECORD	form shall wner/lessee sibility for Contact our lebsite to his form.					I hereby certify that I am the owner or that I have the au of the owner to make application, that the information is correct and that the use and construction shall confo				tion given				
	vit form owner/l onsibilit Conta websit	ADDRESS							he County Health, Building and Zoning ordinances which imposed on the property.					
	ffidavespo espo vork. t our py of	CITY	ST ZIP											
	sec sec a c	HOME OR CELL PHONE		SIGNATURE OF OWNER / AUTHORIZED AGEN						GENT				
	Owr Subn II as prop ffice	WORK PHONE					PRINTED NAME OF OWNER / AUTHORIZED AGENT							
	RAME PRINTED N										K / A	UTHORIZED	AGENI	
CTOR	ADDRESS													
ONTRA	CITY ST ZIP													
ខ	VIRGINIA CONTRACTOR'S LICENSE NUMBER PHONE FAX													
	E-MAIL													
MECHANICS LIEN AGENT	NAME ADDRESS													
	CITY	•	ZIP		— RECEIVED									
EN A	PHONE				STA			47	MP					
LS	E-MAIL													
	HONE NO :	NOTIF	Y WHEN PERMIT IS READY AT:			z		WATER SOURCE		METHOD OF SEWAGE DISPOSAL				
<del>                                     </del>	→ PHONE NO.:  E-MAIL:						JOB INFORMATION		COUNTY WATER					
MAIL I	PERMIT TO:			JO ORM					COUNTY SEWER PRIVATE COMPANY					
CITY					Ž	□ WELL [				SEPTIC TANK				
						FOR OFFICE USE ONLY								
FLOOR AREA PERMIT FEE FINISHED NEW ONE AND TWO							T	K	DATE	DAT		DATE		
UNFIN	IISHED		FAMILY DWELLING	680.	00	DEPT. HEALTH	SEC	QUENCE				REJECTED	INITIALS	
ESTIMATED COST			*STATE LEVY TAX			DEPT. PLANNING	<b>3</b> /							
	T OF BUILDIN	IG ONLY	TOTAL			ZONING PUBLIC								
EXCLU ELECT HVAC	JDE: [RICAL, PLUMBIN , ELEVATOR	NG \$	ADDITIONS / ALTERATIONS / REPAIRS/ E The fee for the first \$5000 of the cost is \$100. For amo over \$5000, the cost is \$6 per additional \$1000 or frac			WORKS PUBLIC								
	ROTECTION		thereof, of estimated cost. The ca	of estimated cost. The calculated fee shall not \$680, regardless of the estimated cost.  UTILITIE BLDG. I										
	AL COST		AMOUNT FROM FEE SCHEDULE		*Levy percentage			VOUCHER NO.			POD/VARIA	ANCE NO.		
INCLUDE: ELECTRICAL, PLUMBING \$ HVAC, ELEVATOR			*STATE LEVY TAX	ATE LEVY TAX			ct to or cur- ntage, r office	CHECK NO.						
	PROTECTION		TOTAL →			or visit our	r office website.	CILCINIO.						