

**COUNTY OF GREENSVILLE
BUILDING & ZONING PERMIT APPLICATION**

1781 Greensville County Circle
Emporia, VA 23847
(434) 348-4232
(434) 348-0696 Fax

Property Owner: _____ Address: _____

Phone #: _____

Applicant's Name: _____ Address: _____

Phone #: _____

Street Address or Building Site: _____

Directions to the Property: _____

List of Work to be covered by Permit: _____

<p>A. TYPE OF IMPROVEMENT</p> <p>1. <input type="checkbox"/> New Building 2. <input type="checkbox"/> Remodel/Add/Demo 3. <input type="checkbox"/> Electrical/Plumbing/Mechanical 4. <input type="checkbox"/> Other Specify: _____ 5. Value _____</p>	<p>B. PROPOSED USE Residential</p> <p>1. <input type="checkbox"/> One Family Dwelling 2. <input type="checkbox"/> Two or more Family Dwelling # of Units _____ 3. <input type="checkbox"/> Garage/Carport 4. <input type="checkbox"/> Storage Building 5. <input type="checkbox"/> Other Specify: _____</p> <p align="center">Non-Residential - State Use _____</p>	<p>C. TYPE OF CONSTRUCTION</p> <p>1. <input type="checkbox"/> Site Built 2. <input type="checkbox"/> SWMH yr _____ type _____ 3. <input type="checkbox"/> DWMH yr _____ type _____ 4. <input type="checkbox"/> Modular 5. <input type="checkbox"/> Other Specify: _____ _____ _____</p>	
<p>D. TYPE OF HEAT</p> <p>1. <input type="checkbox"/> Gas/Elect./Oil 2. <input type="checkbox"/> Other Specify: _____ _____</p>	<p>E. MECHANICAL</p> <p>1. <input type="checkbox"/> Central Air 2. <input type="checkbox"/> HVAC 3. <input type="checkbox"/> Suppression System 4. <input type="checkbox"/> Other 5. Value of Mechanical Work: \$ _____</p>	<p>F. WATER SUPPLY</p> <p>1. <input type="checkbox"/> Public 2. <input type="checkbox"/> Private</p>	<p>G. SEWAGE</p> <p>1. <input type="checkbox"/> Public 2. <input type="checkbox"/> Private</p>
<p>H. PLUMBING INFORMATION</p> <p>1. <input type="checkbox"/> Water Lateral 2. <input type="checkbox"/> Sewer Lateral 3. # of Bedrooms _____ 4. # of Bathrooms: Full _____ Half _____ 5. Value of Plumbing Work: \$ _____</p>	<p>I. ELECTRICAL INFORMATION</p> <p>1. <input type="checkbox"/> Temporary/Change of Service 2. <input type="checkbox"/> Other Specify: _____ 3. Power Company: _____ 4. Size of Service: _____ 5. Value of Electrical Work: \$ _____</p>		
<p>J. BUILDING SIZE:</p> <p>1st Floor: _____ X _____ = _____ Sq Ft Garage: _____ X _____ = _____ Sq Ft 2nd Floor: _____ X _____ = _____ Sq Ft Unfinished: _____ X _____ = _____ Sq Ft Basement: _____ X _____ = _____ Sq Ft Exterior: _____ X _____ = _____ Sq Ft</p> <p>TOTAL SQUARE FEET: _____ HEIGHT: _____ Vertical Feet</p>			

Contractors

General: _____ Address: _____ License: _____

Plumber: _____ Address: _____ License: _____

Electrician: _____ Address: _____ License: _____

Mechanical: _____ Address: _____ License: _____

Other: _____

MECHANICS LIEN AGENT: _____

OFFICE USE ONLY

Tax Map # _____	Zoning: _____	Election District: _____	Flood Zone _____	E & S _____
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THE PROPERTY SHOWING THE STRUCTURE LOCATION AND DISTANCE TO PROPERTY LINES IS REQUIRED WITH THIS APPLICATION.

CERTIFICATION STATEMENT

The undersigned applying for a building permit hereby certifies that the information given on this application is true and correct to the best of his/her knowledge and belief and further agrees to comply with all zoning and construction regulations of the County of Greensville and to notify the Building Department **TWENTY-FOUR (24) HOURS** in advance of any inspections to be made and before making any changes to the approved construction plans.

I hereby verify that I am aware that according to Section 120 of the Virginia Uniform Statewide Building Code a final inspection and a certificate of Use and Occupancy issued by the Building Official is required before the work covered by the permit may be used or occupied and that a violation of this law constitutes a misdemeanor and upon conviction shall be punishable by a fine or not more than one thousand dollars (\$1,000).

OWNER OR OWNER'S AGENT: _____
DATE: _____ PHONE #: _____

The following affidavit is required when the owner's doing his/her own work.

I, _____ of (address) _____ _____ affirm that I am the owner of a certain tract or parcel of land located at _____ and I have applied for a building permit. I affirm that I am familiar with the prerequisite of Section 54. 1- 111 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor. _____ (Affidavit)			
Signed and acknowledged by _____ in the County of Greensville Virginia on the _____ day of _____ 20 _____ in the presence of the undersigned witness. _____ (Witness)			
FOR OFFICE USE ONLY			
Bldg Fee: _____	Electrical Fee: _____	Plumbing Fee: _____	
Mechn. Fee: _____	2% Surcharge: _____	Total Building Fee: _____	
Zoning Fee: _____		GRAND TOTAL: _____	
DEPARTMENT APPROVALS			
DEPARTMENT	APPROVED	DATE	DISAPPROVED
PLANNING: _____			
BUILDING: _____			
E911 STREET ADDRESS (new): _____			

Comments: _____

