

**RESIDENTIAL BUILDING/ZONING PERMIT APPLICATION**

Building Department 100 East Main Street
 Christiansburg, Virginia 24073
 Phone:540-382-6120 / Fax:540-381-7238

Permit #:
 Date:
 Owner Tenant
 Contractor Owner's Agent

Applicant complete boxes 1-13 then sign at box 14**Affidavit Attached**

1	Applicant Name:		
2	Mailing Address:	City/State/Zip:	
3	Phone:	Fax:	E-mail:
4	Contractor's License #:	Class:	Expires:
5	Owner Name:	Owner Address:	
6	Phone:	E-mail:	
7	Location of Construction:		
8	Building Type: Single Family <input type="checkbox"/> Townhouse <input type="checkbox"/> Duplex <input type="checkbox"/> Accessory Structure <input type="checkbox"/> Other <input type="checkbox"/>		
9	Work Classification: New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Remodel <input type="checkbox"/> Other <input type="checkbox"/>		
10	Code Edition:	Construction Cost:	
11	Description:		
12	Total Square Footage:		# Bedrooms:
	Basement Finished:	Garage Attached:	# Full Baths:
	Basement Unfinished:	Garage Detached:	# Half Baths:
	1 st Floor:	Deck(s):	# Stories:
	2 nd Floor:	Porch(s):	Heat Source: Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other <input type="checkbox"/>
	3 rd Floor:	Habitable Attic:	Uninhabitable Attic:
13	Mechanics Lien Agent Information		City/Zip/State:
	Name:		Phone Number:
	Address:		None Designated: <input type="checkbox"/>
Staff Use only: Planning/Zoning			
Zoning:		Parcel ID:	Map ID: Site Plan: Yes <input type="checkbox"/> No <input type="checkbox"/>
Subdivision:		Lot #:	Section:
Front:	Rear:	Left:	Right: Height:
Remarks:			
14	Applicant Name (Print):		
Signature:		Date:	
The forgoing application has been approved/disapproved and this permit granted is subject to all regulations pertaining to the same.			
Building Official:			Date:
Permit Fee:	I HEREBY CERTIFY THAT I HAVE THE AUTHORITY TO MAKE THE FOREGOING APPLICATION, AND THAT THE INFORMATION GIVEN IS CORRECT, AND THAT ALL CONSTRUCTION WILL COMPLY WITH THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE (VUSBC) AND APPLICABLE ORDINANCES. THE PERMIT HOLDER IS THE RESPONSIBLE PARTY FOR COMPLIANCE WITH THE VUSBC AND OTHER ORDINANCES. I FURTHER UNDERSTAND THAT I AM RESPONSIBLE FOR ENSURING ALL REQUIRED INSPECTIONS ARE REQUESTED AND PERFORMED.		
State Surcharge:			
Water Fee:			
Sewer Fee:			
Total Fee:			