



TOWN OF CHRISTIANSBURG
TRADE PERMIT APPLICATION

Permit#:
Date:
<input type="checkbox"/> Residential
<input type="checkbox"/> Commercial

- Framing
 Electrical
 Mechanical
 Plumbing
 Insulation
 Sprinkler
 Fire Alarm
 Cross Connection

Property Address:	(Staff) Parcel ID:
--------------------------	---------------------------

CONTRACTOR	Virginia Contractors License #:	Type: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	Expiration Date:	
	Master Tradesman License #:	Expiration Date:		
	Name:	Company:		
	Email:	Phone:		
	Address:			
	City:	State:	Zip Code:	
	Owner of Property:			

OWNER TENANT AGENT	Name:	Address:	
	City:	Zip:	State:
	Phone:	Email:	

Cost of Construction \$:	Work Classification: <input type="checkbox"/> New <input type="checkbox"/> Alteration/Repair/Remodel <input type="checkbox"/> Addition <input type="checkbox"/> Other
---------------------------	---

Description of work:

*By signing below, I hereby certify that I have the authority to make the foregoing application, that the information given is correct, that the cost of construction listed above includes labor and materials, and that all construction will comply with the Virginia Uniform Statewide Building Code and applicable ordinances. The permit holder is the responsible party for compliance with the VUSBC and other ordinances. **The permit holder is responsible to notify the building department when construction reaches a stage of completion that requires an inspection per Section 113.1.2 of the USBC.***

	Printed Name:	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Contractor <input type="checkbox"/> Authorized Agent	
	Applicant Signature:	Date:	

Staff Use	Permit Fee:	\$
	State Surcharge:	\$
	Total Fee:	\$

Staff	The forgoing application has been <u>APPROVED</u> and this permit granted subject to all regulations pertaining to the same.	
	Building Official:	Date:

VERSION-392022-1