

BUILDING PERMIT APPLICATION



PERMIT
NUMBER

P.O. Box 150, New Kent, VA 23124, **Phone:** 804-966-9680, **Fax:** 804-966-8510
www.co.new-kent.va.us **Inspections:** 804-966-8572

PROPERTY OWNER

Name: _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____
Email: _____

CONTRACTOR

Name: _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____
VA Contractor's No: _____ Class: _____
Expiration: _____ Email: _____

MECHANICS LIEN AGENT

Name: _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____

PROPERTY INFORMATION

Address: _____
Project Cost: _____ Structure Height: _____

STATE NATURE OF PROPOSED WORK

SETBACKS

Front: _____ Rear: _____ Right: _____ Left: _____

APPLICANTS ARE RESPONSIBLE FOR COMPLYING WITH THEIR SUBDIVISION'S CONVENANTS/REGULATIONS. I CERTIFY THAT ALL INFORMATION PROVIDED FOR IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I HEREBY AGREE TO COMPLY WITH ALL PROVISIONS OF THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE AND WITH REGULATIONS IN THE BUILDING CODE, ZONING ORDINANCE AND HEALTH DEPARTMENT OF THE COUNTY OF NEW KENT. THIS PERMIT BECOMES INVALID IF AUTHORIZED WORK IS NOT COMMENCED WITHIN SIX MONTHS AFTER ISSUANCE.

SIGNATURE OF APPLICANT/AGENT/OWNER

DATE

PERMITS MUST BE OBTAINED BEFORE WORK IS COMMENCED. PERMIT FEES COULD BE DOUBLED FOR ANY WORK PERFORMED BEFORE PERMIT IS OBTAINED.

OFFICE ONLY

Permit Fee: \$ _____ Surcharge: _____ Zoning: _____
Date: _____ Check Cash

COMMISSIONER OF REVENUE OFFICE

Commissioner of Revenue: _____ Date: _____
Business License: Yes No N/A

DESCRIPTION OF PROPERTY

Tax Map Parcel Number: _____ Lot No.: _____ Zone: _____ Block: _____
District: _____ Subdivision: _____ Section: _____
Use Group: _____

AFFIDAVIT

I affirm that I am the owner of the tract or parcel of land identified above and that I have applied for a building permit. I affirm that I am familiar with the prerequisites of Section 54.1-111 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor. I hereby certify that I will be responsible for all work performed under this permit.

Affiant

COMMONWEALTH OF VIRGINIA
CITY/COUNTY OF _____:

I certify that the foregoing instrument was executed and acknowledged before me this _____ day of _____, 20____, by _____.

Witness

54.1-1111 Prerequisites to obtaining building, etc., permit. - Any person applying to the building inspector or any authority of a city, county or town in this Commonwealth, charged with the duty of issuing building or other permits for the construction of any building, highway, sewer, or structure, or any removal, grading or improvement shall furnish prior to the issuance of the permit, either (I) satisfactory proof to such inspector or authority that he is duly licensed or registered under the terms of this chapter to carry out or superintend the same, or (ii) file a written statement, supported by an affidavit, that he is not subject to licensure or registration as a contractor or subcontractor pursuant to this chapter. The applicant shall also furnish satisfactory proof that the taxes or licenses required by any city, county or town have been paid so as to be qualified to bid upon or contract for the work which the permit has been applied.

It shall be unlawful for the building inspector or other authority to issue or allow the issuance of such permits unless the applicant has furnished evidence of being either exempt from the provisions of this chapter or licensed or registered under this chapter to carry out or superintend the work for which such permits have been applied.

The building inspector, or other such authority, violating the terms of the section shall be guilty of a Class 3 misdemeanor. (Code 1950,54-138; 1970,c.319; 1980,c.634; 1988,c.765.)

SEPTIC CERTIFICATION

I certify that there will be no interference with the existing septic tank and drain field lines / nor with the area designated as reserve repair area caused by the proposed project, accessory structures, additions, or alterations, etc. of the structure. I furthermore accept full responsibility in the event that any interference with the septic system does occur.

SIGNATURE OF APPLICANT/AGENT/OWNER

DATE

BUILDING OFFICIAL DATE
 APPROVED DISAPPROVED

