



PRINCE WILLIAM COUNTY
Department of Development Services – Building Development Division

BUILDING PERMIT APPLICATION

Version 2021-0907

Master Plan/Shell # _____

ADR # **ADR** _____

Zoning # **ZNA** _____

Project Name _____

Payment Method: Cash or Check _____

<i>Staff Use Only</i>			
Plan # BPR		Permit # BLD	
Approved By:	Date Approved:	IVR PIN #	
Use Group:	Type Const:	Work Code:	
VCC-IBC ___	VEBC-IEBC ___	VRC-IRC ___	Code Year:
Suppression Req'd: Y / N	Provided: Y / N	Date Issued:	Issued By:

LOCATION OF PROPERTY

Subdivision _____ Section _____ Block _____ Landbay _____ Phase _____ Lot _____

Property Address _____

Name of Property Owner _____ Phone # _____

APPLICANT: CHECK BOX TO IDENTIFY PERMIT HOLDER

**** All Contacts must have a Registered [ePortal](#) account to be added to the Permit****

Owner/Lessee _____ Email Address _____

Contractor _____ Address _____

Phone # _____ Email Address _____

State Registration # _____ Class _____ Prince William County License # _____

Master Name _____ Cert # _____ Home Improvement Contractor's License # _____

FOR ALL RESIDENTIAL CONSTRUCTION, EXCEPT MULTI-FAMILY RENTAL, IT IS OPTIONAL TO PROVIDE THE NAME, ADDRESS AND TELEPHONE OF THE OWNER'S DESIGNATED LIEN AGENT. NO RESPONSE WILL BE MARKED AS "NONE DESIGNATED". Lien Agent _____

Address _____ Phone _____

TYPE OF CONSTRUCTION: Residential Comm/Office Comm/Mercantile Industrial Public/Institutional Other _____

TYPE OF IMPROVEMENT: New Addition Deck Swimming Pool Alteration/Repair Finished Basement Tenant Layout

Solar/PV Other / Project Scope _____

**** VALUE OF WORK OR CONTRACT COST: \$ _____ ****

TYPE OF UNIT: Single Family Townhouse Townhouse (Condo) Duplex Multi-Family Condo Other _____

NUMBER OF DWELLING UNITS: _____ WATER SUPPLY: Public Private LOT IN FLOOD PLAIN: Yes No

NUMBER OF STORIES: _____ SEWER DISP: Public Private BASEMENT: Yes No

NUMBER OF BEDROOMS: _____ MASONRY CHIMNEY: Yes No FOOD PREP AREA: Yes No

NUMBER OF BATHROOMS: Full: _____ Half: _____ GARAGE: Attached Detached None EGRESS EXISTING: Yes No

I HEREBY CERTIFY THAT I HAVE THE AUTHORITY TO MAKE THE FOREGOING APPLICATION, THAT THE INFORMATION GIVEN IS CORRECT, 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. I REQUEST THAT A CERTIFICATE OF USE AND OCCUPANCY BE ISSUED UPON COMPLETION OF THE WORK AUTHORIZED BY THE PERMIT, PROVIDED ALL OTHER REQUIREMENTS HAVE BEEN SATISFIED.

PRINT NAME _____

OWNER CONTRACTOR AUTHORIZED AGENT

TELEPHONE NUMBER _____

DATE _____

SIGNATURE _____

By checking this box, I agree to electronically signing this form.

<i>Staff Use Only</i>		
Health Dept Approval:	# Bedrooms:	
Square Feet or Value:	Rate:	
Filing Fee Paid \$	Rcpt. #	
Permit Fee \$		
Resub Fee \$	FMO Fee \$	Spec Insp Fee \$
OP Fee \$	Lot Escrow \$	Lot Grading Insp \$
Remaining Fee Due \$		Rcpt. #

NOTICE FOR NEW CONSTRUCTION: DETACHED GARAGES, DECKS AND SWIMMING POOLS REQUIRE A SEPARATE BUILDING PERMIT APPLICATION. THIS PERMIT DOES NOT INCLUDE ELECTRICAL, GAS, MECHANICAL OR PLUMBING INSTALLATIONS.