



**PRINCE WILLIAM COUNTY**  
**Department of Development Services – Building Development Division**

**BUILDING PERMIT APPLICATION**

Version 2020-0607

Master Plan/Shell # \_\_\_\_\_

ADR # **ADR** \_\_\_\_\_

Zoning # **ZNA** \_\_\_\_\_

Project Name \_\_\_\_\_

Payment Method: Cash or Check \_\_\_\_\_

<i>Staff Use Only</i>			
Plan # <b>BPR</b>		Permit # <b>BLD</b>	
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 \*\* For an online ePortal account, please submit a [Contact Information Form](#) for each contact \*\***

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

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.**