



**\*\*\*MUST BE FILLED OUT COMPLETELY\*\*\***

# CITY OF WILLIAMSBURG APPLICATION FOR BUILDING PERMIT

401 Lafayette Street, Williamsburg, Virginia 23185-3617 (757) 220-6136, Fax (757) 220-6134

APPLICATION # \_\_\_\_\_ PERMIT # \_\_\_\_\_ DATE RECEIVED \_\_\_\_/\_\_\_\_/\_\_\_\_  
ARB APPROVAL \_\_\_\_\_ ZONING APPROVAL \_\_\_\_\_

**\*\*Va. Law 54.1-1111: Proof of valid state contractor and local business license required at time of permit application\*\***

STREET ADDRESS/LOCATION \_\_\_\_\_ PREPARED DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

SUBDIVISION \_\_\_\_\_ ELECTRIC SERVICE: ABOVE \_\_\_\_ UNDERGROUND \_\_\_\_

<b>CONTRACTOR</b> _____	<b>PROPERTY OWNER</b> _____
ADDRESS _____	ADDRESS _____
CITY / ZIP CODE _____	CITY / STATE _____
PHONE _____	ZIP CODE _____
JOB CONTACT _____	PHONE _____
E-MAIL ADDRESS _____	E-MAIL ADDRESS _____

STATE REGISTRATION # \_\_\_\_\_ CLASS: A B C WORK TYPE \_\_\_\_\_ EXPIRATION \_\_\_\_\_

BUSINESS LICENSE LOCALITY \_\_\_\_\_ NUMBER \_\_\_\_\_ EXPIRATION \_\_\_\_\_

TOTAL JOB VALUE \$ \_\_\_\_\_

<b>ARCHITECT/ENGINEER/DESIGNER OF RECORD</b>	<b>MECHANICS LIEN AGENT (For 1-4 Family Dwelling Units Only)</b>
NAME _____	NAME _____
ADDRESS _____	ADDRESS _____
PHONE _____	PHONE _____ NONE DESIGNATED _____

WORK TYPE(S): \_\_\_\_ NEW STRUCTURE \_\_\_\_ ADDITION \_\_\_\_ CHANGE OF USE \_\_\_\_ ALTERATION/REPAIR \_\_\_\_ DEMOLITION

**BRIEF DESCRIPTION OF WORK:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICANT IS THE: \_\_\_\_ OWNER \_\_\_\_ CONTRACTOR \_\_\_\_ ARCHITECT/ENGINEER \_\_\_\_ LEASEHOLDER \_\_\_\_ OTHER: \_\_\_\_\_

APPLICANT: SIGNATURE \_\_\_\_\_ APPLICANT PRINTED NAME \_\_\_\_\_

## **COMPLETE THIS INFORMATION: NEW CONSTRUCTION, BUILDING ADDITIONS, RENOVATIONS, CHANGE OF USE**

SQUARE FOOTAGE PER FLOOR FOR NEW CONSTRUCTION/ADDITIONS/RENOVATED AREA:

FINISHED AREA: B: \_\_\_\_\_ 1<sup>ST</sup>: \_\_\_\_\_ 2<sup>ND</sup>: \_\_\_\_\_ 3<sup>RD</sup>: \_\_\_\_\_ 4<sup>TH</sup>: \_\_\_\_\_ 5<sup>TH</sup>: \_\_\_\_\_ TOTAL: \_\_\_\_\_

UNFINISHED AREA: B: \_\_\_\_\_ 1<sup>ST</sup>: \_\_\_\_\_ 2<sup>ND</sup>: \_\_\_\_\_ 3<sup>RD</sup>: \_\_\_\_\_ 4<sup>TH</sup>: \_\_\_\_\_ Garage: \_\_\_\_\_ TOTAL: \_\_\_\_\_

(Unfinished area includes garages, carports, accessory structures, future finished space not heated/cooled/wired at time of construction)

STRUCTURE HEIGHT: \_\_\_\_\_ TOTAL BUILDING AREA: \_\_\_\_\_

PROPOSED BUILDING USE GROUP: A B E F H I M R S U # \_\_\_\_\_ CONSTRUCTION TYPE: 1A 1B 2A 2B 3A 3B 4 5A 5B

FIRE SPRINKLER SYSTEM \_\_\_\_ Yes \_\_\_\_ No FIRE ALARM SYSTEM \_\_\_\_ Yes \_\_\_\_ No FIRE DETECTION SYSTEM \_\_\_\_ Yes \_\_\_\_ No

## **COMPLETE THIS INFORMATION: NEW CONSTRUCTION AND BUILDING ADDITIONS**

BUILDING SETBACKS (In feet): Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Left: \_\_\_\_\_ Right: \_\_\_\_\_

PROVIDED: \_\_\_\_ Decks \_\_\_\_ Porches \_\_\_\_ Carport \_\_\_\_ Central Heat \_\_\_\_ Central Air Conditioning

Total # of Rooms: \_\_\_\_ # of Bedrooms: \_\_\_\_ # of Full Baths: \_\_\_\_ # of 1/2 Baths: \_\_\_\_ # Fireplaces: \_\_\_\_ # Chimneys: \_\_\_\_

Type of Foundation: Crawlspace \_\_\_\_ Slab: \_\_\_\_\_

ROOFING: Asphalt Fiberglass Wood Other EXTERIOR: Vinyl Brick Wood Stucco Other revised 7/2022