



Building Permits Information

Following information required with application for Permits on all One & Two Family Dwelling and Accessory Structures

- 1. Approved Zoning permit issued by Department of Community Development.**
- 2. Geotechnical evaluation Soil Test to determine soil's characteristics at particular location of building.**
- 3. Two copy of building plans for review.**
- 4. Stamped drawing for all engineered structural members (Trusses TJI Floor Systems est.)**
- 5. County of King William Health Department Well and Septic Permits
On lots were public water and sewer may not be required or available.**



Permit Number:

BUILDING PERMIT APPLICATION

Owner _____
Address _____

Contractor _____
Address _____

Phone:() _____
Email: _____

Va Contractor's No: _____ Class _____
Exp. _____ Phone:() _____
Email: _____

Mechanics Lien Agent: _____
Address: _____

Phone:() _____

Project Cost: _____

Structure Height: _____

Property Address: _____

Tax Map No: _____

State Nature of Proposed Work:

Total Gross Area: _____ Sq ft.

SETBACKS: Please indicate distances from location of structure to each property line:

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 OF THE TOWN OF WEST POINT AND HEALTH DEPARTMENT OF THE COUNTY OF KING WILLIAM. THIS PERMIT BECOMES INVALID IF AUTHORIZED WORK IS NOT COMMENCED WITHIN SIX MONTHS AFTER ISSUANCE. RENEWAL OF PERMIT REQUIRED IN ONE YEAR.

DATE _____

APPLICANT/AGENT/OWNER

OFFICE USE ONLY

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

Business License? ____ yes ____ no ____ n/a

Paid to _____ Date _____

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 WAIVER

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

_____ DATE _____
APPLICANT/AGENT/OWNER

Building Official
Date _____
Approved/Disapproved