



BUILDING/LAND USE PERMIT APPLICATION

Department of Building and Zoning
P.O. Box 370, Coeburn, VA 24230

Phone- 276-395-3323

Fax- 276-395-3648

OFFICE USE ONLY

PERMIT #:

MANUFACTURED HOME PERMIT #:

ASSOCIATED PERMIT #

WORK DESCRIPTION	What type of work is to be performed (please select): RESIDENTIAL ☐ COMMERCIAL ☐						
	If a garage is included, what type (please select): ATTACHED ☐ DETACHED ☐						
	What type of property improvement will be made (please describe):						
	IF THIS APPLICATION IS FOR A MANUFACTURED HOME, PLEASE ANSWER THE FOLLOWING:	YEAR MODEL:	NAME OF HOME:	SIZE:	HEAT SOURCE:	SERIAL NUMBER:	PRIVATE LOT OR NAME OF MANUFACTURED PARK:
ID	CONTRACTOR NAME					CONTRACTOR ID #:	
AGENTS	ARCHITECT NAME/ADDRESS (COMMERCIAL ONLY):			ARCHITECT ID #:	PHONE #:		
	DEVELOPER NAME/ADDRESS (COMMERCIAL ONLY):			DEVELOPER ID:	PHONE #:		
	PERSON WHO PREPARED PLANS NAME/ADDRESS (RESIDENTIAL)				PHONE #:		
OWNER	PROPERTY OWNER NAME (FIRST NAME, LAST NAME OR COMPANY NAME):					OWNER PHONE #:	
	PROPERTY OWNER MAILING ADDRESS (SKIP, IF MAILING ADDRESS IS SAME AS JOB LOCATION):						
JOB INFORMATION	ADDRESS/LOCATION OF WORK TO BE PERFORMED (STREET #/STREET NAME)				SECTION:	LOT:	
	LIST NAME AND ADDRESS OF TENANT:						
	What is the estimated cost of STRUCTURAL WORK ONLY (materials and labor)? Do not include the cost of plumbing, mechanical, electrical or other work in this estimate:					ESTIMATED COST OF CONSTRUCTION \$	

WATER AND SEWER	Please select the type of water supply to this property: Town Water ☐ Well ☐				
	Please select the type of disposal used by this property: Town Sewer ☐ Septic ☐				
STRUCTURAL	RESIDENTIAL ONLY				
	BUILDING HEIGHT (AVG. ROOF HEIGHT FROM GRADE)	HOW MANY KITCHENS? (SINK AND 1 MAJOR APPLIANCE = 1 KITCHEN)	NUMBER OF STORIES (EXCLUDING BASEMENT)	WILL THERE BE A BASEMENT?	NUMBER OF BEDROOMS
APPLICANT	APPLICANT NAME (PLEASE PRINT)				
	APPLICANT SIGNATURE:			DATE:	
CONTRACTOR EXEMPTION	COMPLETE THIS SECTION IF YOU ARE EXEMPT FROM BEING A CONTRACTOR Contractor Exemptions-These are common exemptions from being a licensed contractor pursuant to Code of Virginia §54.1-1101: owner or lessee performing work on a commercial building for his or her own use; owner or lessee performing work on not more than one residential building for his or her own use during any 24-month period; students perform work as part of a technical education project for the construction of portable classrooms or single family homes; governmental agencies performing work with its own forces. I submit this statement to be true under penalty of perjury that I am not subject to licensure or certification as a contractor or subcontractor pursuant to chapter 11 of title 54.1 of the Code of Virginia, for the work described on this permit application.				
	SIGNATURE:		DATE:	PLEASE PRINT NAME LEGIBLY:	
	BUILDING PERMIT FEE:		MANUFACTURED HOME PERMIT FEE:		
OFFICE USE ONLY	STATE LEVY:		STATE LEVY MANUFACTURED HOME:		
	TOTAL PERMIT FEE:				
	FLOODPLAIN ZONE?				
	WHAT TOWN ZONE IS THE PROPOSED PROJECT IN?				

1. Attached a sketch/photo of the property with lot measurements.
2. Sketch any existing structures with existing distance from the front, sides and rear to the property line.
3. Sketch new construction with distance to property line front, sides and rear. Note setbacks are a minimum of 25 feet front and rear, 10 feet each side of property line.
4. Include the street the structure will be facing.

I, _____ do hereby affirm that the information in this application is true and correct to the best of my ability.

Approved by: _____
Zoning Official Date