

**Building, Erosion & Sediment Control and Zoning Permit Application**

**Application Date:** \_\_\_\_\_

**Permit No.:** \_\_\_\_\_

Application is hereby made for a Building, Erosion & Sediment and Zoning Permit in accordance with the description and for the purpose set forth herein. This application is made subject to all County and State laws and regulations, which are hereby agreed to by the undersigned and which shall be a condition of this permit.

**PLEASE FILL OUT THIS FORM COMPLETELY- IF NOT, IT WILL BE RETURNED. (Please Print)**

<b>Please Check The Applicable Permit Type Applying For:</b>	<input type="checkbox"/> Building Permit	<input type="checkbox"/> Zoning Permit	<input type="checkbox"/> Erosion & Sediment Permit (Land Disturbing)
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<b>Owner</b>	_____	_____
Name	_____	Daytime Telephone No.
Mailing Address	_____	
E-mail Address	_____	Fax Number

<b>Applicant/Builder</b>	_____	_____
Name	_____	Daytime Telephone No.
<input type="checkbox"/> Same as Owner	_____	
Mailing Address	_____	

<b>Mechanic Lien Agent</b>	_____	_____
Name	_____	Daytime Telephone No.
<input type="checkbox"/> Not Applicable	_____	
Mailing Address	_____	

<b>Property Information</b>	Address/Directions: _____	Frontage: _____		
	Tax Map/Parcel Number: _____	Area (in acres or sq. ft.): _____		
	Current Deed Book/Page Number _____	Existing Use of Property: _____		
	Lot No.: _____	Section _____ of _____	Subdivision _____	
	Magisterial District: _____	Voting District: _____		
	If constructing a new dwelling, are there any other dwellings on the parcel?	Yes _____	No _____	How many? _____
	Other existing structures (number and type): _____			
	Existing structures to be removed (number and type): _____			

**Type of Permit :**

Please Check Appropriate Box(s)

**RESIDENTIAL**

**COMMERCIAL**

- Single Family Dwelling/Modular (circle one)
- Manufactured Home Year: \_\_\_\_\_ Color: \_\_\_\_\_  
Double-wide: \_\_\_\_\_ Single-wide: \_\_\_\_\_
- Commercial/Industrial Structure  
Specify Use: \_\_\_\_\_
- Multi-Family No. of Units \_\_\_\_\_
- Addition (Specify) \_\_\_\_\_
- Garage/Carport
- Shed/Storage Building
- Land Clearing (Area to be Cleared) \_\_\_\_\_
- Alteration (Specify) \_\_\_\_\_
- Reroof

- Replace Siding
- Sign \_\_\_\_\_ Freestanding \_\_\_\_\_ Attached to Building
- Electrical
- Mechanical
- Deck
- Chimney
- Fireplace
- Demolition (Specify) \_\_\_\_\_
- Home Occupation \_\_\_\_\_
- Temporary Use/Structure \_\_\_\_\_
- Verification of Non Conforming \_\_\_\_\_
- Other (Specify) \_\_\_\_\_

**Please Complete All Areas. If An Area Is Not Applicable Write "N/A"**

Building Use: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_ Number of Stories \_\_\_\_\_

Use Group: \_\_\_\_\_ Type of Construction: \_\_\_\_\_

Occupant Load: \_\_\_\_\_ Foundation Construction Type: \_\_\_\_\_

Crawl Space: \_\_\_\_\_ Basement: \_\_\_\_\_ Finished: \_\_\_\_\_ Unfinished: \_\_\_\_\_ Full: \_\_\_\_\_ Partial: \_\_\_\_\_

Exterior Finish Materials: \_\_\_\_\_ Interior Finish Materials: \_\_\_\_\_

Fireplace: Yes or No (Circle One) Fireplace: Type of Construction: \_\_\_\_\_

Chimney or Flue (Circle One) Chimney: Type of Construction: \_\_\_\_\_

Garage/Carport: (Circle One) Detached \_\_\_\_\_ Attached \_\_\_\_\_ (Circle One)

Porches: Yes or No (Circle One) Floor Finish \_\_\_\_\_ Truss Roof or Field Frame \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_ Health Permit No. \_\_\_\_\_ Number of Bathrooms: \_\_\_\_\_

**Electrical / Plumbing / Mechanical**

Show the type and number of each appliance where applicable, (e.g. 1 Electric Washer)

Service Capacity \_\_\_\_\_ New or Existing Service: \_\_\_\_\_ Dishwasher \_\_\_\_\_

Number of Full Bathrooms \_\_\_\_\_ Number of 1/2 Bathrooms \_\_\_\_\_ Handicap Accessible: \_\_\_\_\_ Yes \_\_\_\_\_ No

Air Conditioning \_\_\_\_\_ Type Heat \_\_\_\_\_ Clothes Dryer Hookup \_\_\_\_\_ Clothes Washer Hookup \_\_\_\_\_

Location of Air Handler \_\_\_\_\_ Water Service \_\_\_\_\_ Sewer Service \_\_\_\_\_

Type Water Heater \_\_\_\_\_ Range-Oven \_\_\_\_\_

Additional Information: \_\_\_\_\_

**Structure Information (Square Footage & Height)**

Basement	Garage/Carport
Finished _____	Decks _____
Unfinished _____	Porches _____
1 <sup>st</sup> Floor _____	Height _____
2 <sup>nd</sup> Floor _____	Other (Specify) _____
3 <sup>rd</sup> Floor _____	<b>Estimated Cost:</b> _____

**General Contractor/Subcontractor Information**

**List of General Contractor/Subcontractors:**

*(i.e. HVAC, Electrician, Plumber, Footing, Foundation, Block & Tie-Down of Manufactured Home and Land Disturbing)*

Name/Type License	State Contractor's License Number	State Tradesman Certification Number	Caroline County Business License Number

**I Certify that all current licenses and certifications required by the State of Virginia and the County of Caroline are on file in the Caroline County Department of Planning & Community Development. Please notify this office immediately of any changes to the above-noted subcontractors.**

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Date

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**ALL BUILDERS OR OWNER-DEVELOPERS THAT CONTRACT TO BUILD FOR OTHERS  
 ON PROPERTY THAT THE BUILDER OR OWNER-DEVELOPER OWNS, MUST BE LICENSED  
 UNDER THE PROVISIONS OF § 54.1-1100 CODE OF VIRGINIA**

**PUBLIC NOTICE**

A landowner may, without a license, on his own property build one house for his own use in a twenty-four month period, or build a house as a gift to an immediate family member, if the family member lives in the house twenty-four months.

Owners building industrial or manufacturing facilities on their own property are not required to be licensed.

Owner-Developers that contract with a Class "A" building contractor to build a house and then sell the completed house to others are not required to be licensed.

Licensing information may be obtained from:  
 State Board for Contractors  
 3600 West Broad St.  
 Richmond, VA 23230-4917  
 (804) 367-8511

Complaints Regarding Unlicensed contractors may be sent to:  
 Criminal Investigation Section  
 Dept. of Professional & Occupational Regulation  
 3600 West Broad St.  
 Richmond, VA 23230-4917  
 (804) 367-2195

**OWNER'S AFFIDAVIT**

I, \_\_\_\_\_, of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract or parcel of land located at: \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am familiar with the prerequisites of §54.1-111 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor. I also affirm that I will be responsible for meeting the code standards.

I further affirm that I will:

- reside in this house for at least 24 months
- give this house to an immediate family member and they will live in this house for at least 24 months
- Other (Explain) \_\_\_\_\_

\_\_\_\_\_  
(Affiant)

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, of Virginia on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. In the presence of the undersigned witness.

\_\_\_\_\_  
(Witness)

**Applicant Received Informational Handout**

**Applicant Certification**

I hereby certify that I have the authority to make the foregoing application, that the information given is correct, including any attached plans or drawings, and that all construction will conform with all applicable state and county laws, ordinances and regulations with regard to zoning, health and building. Failure to do so shall automatically render this permit invalid. I understand that construction requires a building permit issued by the Caroline County Building Official. I understand that construction must commence within 6 months of the issuance of this permit or the permit is rendered void. I agree to notify the Zoning Administrator within ten (10) days of completion of the work so that an inspection may be made and a Certificate of Occupancy may be issued. I further understand that the land may not be used or occupied, and buildings structurally altered or erected may not be used or changed in use, until the Certificate of Occupancy is issued.

**Revocation of Permit:** The code official may revoke a permit or approval issued under the provisions of the USBC in case of any false statement, misrepresentation of fact or incorrect information supplied by the applicant in the application or construction documents on which the permit or approval was based.

\_\_\_\_\_  
Date  
-----  
\_\_\_\_\_  
Owner or Applicant Signature

Do Not Write Below This Line  
**BUILDING/ZONING/LAND DISTURBING  
ROUTING SLIP**

1. **ZONING**

Zoning District: \_\_\_\_\_  Conditional  Unconditional Rezoning Case # \_\_\_\_\_ (If Applicable)

Use: \_\_\_\_\_ Chesapeake Bay District: None \_\_\_\_\_ RMA \_\_\_\_\_ RPA \_\_\_\_\_

Front Yard: Proposed \_\_\_\_\_ Required \_\_\_\_\_ Flood Hazard District: Yes \_\_\_\_\_ No \_\_\_\_\_ F.I.R.M. No. \_\_\_\_\_

Left Sideyard: Proposed \_\_\_\_\_ Required \_\_\_\_\_ Highway Corridor \_\_\_\_\_

Right Sideyard: Proposed \_\_\_\_\_ Required \_\_\_\_\_ VDOT Entrance Permit \_\_\_\_\_

Rear Yard: Proposed \_\_\_\_\_ Required \_\_\_\_\_ Historic Resource \_\_\_\_\_

Comments: \_\_\_\_\_

E & S Fee \$ \_\_\_\_\_  
Zoning Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Proffer Fee \$ \_\_\_\_\_

Approved: \_\_\_\_\_  
Zoning Administrator Date

2. **BUILDING**

Permit Fee

**Residential**

**Commercial/Industrial**

Permit Fee \_\_\_\_\_  
Electrical \_\_\_\_\_  
Plumbing \_\_\_\_\_  
Mechanical \_\_\_\_\_  
Porch \_\_\_\_\_  
Deck \_\_\_\_\_  
Garage \_\_\_\_\_  
Fireplace \_\_\_\_\_  
**Subtotal** \_\_\_\_\_  
1-3/4% State Levy \_\_\_\_\_  
**Total** \_\_\_\_\_

Permit Fee \_\_\_\_\_  
Plan Review \_\_\_\_\_  
Electrical \_\_\_\_\_  
Plumbing \_\_\_\_\_  
Mechanical \_\_\_\_\_  
Fire Suppression System \_\_\_\_\_  
Hood Suppression System \_\_\_\_\_  
Alarm \_\_\_\_\_  
Other (Specify) \_\_\_\_\_  
**Subtotal** \_\_\_\_\_  
1-3/4% State Levy \_\_\_\_\_  
**Total** \_\_\_\_\_

Comments: \_\_\_\_\_

Approved: \_\_\_\_\_  
Building Official Date