Building & Zoning Office P.O. Box 129 Heathsville, Virginia 22473 (804) 580-8910 FAX: (804) 580-8082

Building Permit Application for Northumberland County, Virginia

Date:	Permit Number:	New Address:	
Applicant Name:	Telephone #		
Mailing Address:			
Owner Name:	Telephone #	! :	
Mailing Address:		and the state of t	
	e & Number):		
Contractor Name:			
License #:	Telephone #	#:	
Lien Agent Name & Addı	ress:		
	n past year? If yes, previous owner's name		
Subdivision:	Lot #:		
Description of Project:	NEW ADDITION REMODEL/RE	PAIR Demolition	
Type of Construction:	Dwelling Modular Home Double Wi	See attached addendui ide	
☐ Deck ☐ Garage	Other, explain:		
	# of Stories:# of Rooms:		
	Roofing Type:		
Floor Covering: Carp	et Vinyl Hardwood Cement	Other:	
Type of Heat: Heat Pur	mp	•	
Porch Size:	Garage Size: Dec	ck Size:	
Basement Size:	Building Code: 2018 Chimney/Flue:	YES NO #	
Building Dimension:	Type of skirting:		
	luding decks, porches, etc.):		
Estimated Construction Value: All work will be done in account		k will be done in accordance with proved application and attached	
Signature of Contractor	plans,	plans. A new application must be filed for any change. The homeowner, when listed as	
<u></u>	the c	contractor, will assume the	
Signature of Applicant/Owner	pate utilizing	ibility and will be responsible for a only State Licensed Contractors.	
Building Official, Jerry Rushing		bris must be removed from the v	

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is Applicant

Demolition Addendum for Northumberland County, Virginia

Date of Addendum:	ALL DISCONNECT WORK MUST ACCOMPANY
m - Of What (Ohat - O)	APPLICATION
Type Of Work (Check One)	Power Disconnection Oate:
Commercial Complete C	Disconnect Number:
Governmental Partial/Accessory	Water Disconnection
Residential	Phone Company
SCOPE OF WORK	Sanitary Sewer Lateral and Water Line Capped on
Describe Briefly, but thoroughly)	Private Property at Right of Way Line
	Other Disconnection O Date:
	Septic Tank Disconnect Date:
	Cable Company
	Asbestos Report
POST DEMOLITION USE AND GRADI	NG (required for buildings built prior to 1985)
	Total Cost of Demolition \$
•	(includes cost of all labor and materials for entire project)
	Date:
	Signature:
	hat I am responsible for conveying all information relevant to this application to the property owner and
Signature of Applicant/Owner Printe Owner Must Sign Above if Contractor	d Name of Applicant Contact Phone # Date

54.1-1111. Prerequisites to obtaining building, etc., permit - Any person applying to the building inspector or any other 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 livensed 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 license required by any city, county or town have been paid so to be qualified to bid upon or contract for the work for 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 this section shall be guilty of a Class 3 misdemeanor. (Code 1950, 54-138; 1970, c. 319; 1980, c. 634; 1988, c. 765.)

AFFIDA VIT

I,	of (Address)	affirm	
that I am the owner of a certa	in tract or purcel of land located att	- Control of the state of the s	
	and that I have a	pplied for a building permit. I	
affirm that I am familiar with the	he prerequisites of Section 54.1-1111 of the C	ode of Virginia and I am not	
subject to licensure as a contrac	tor or subcontractor.	•	
	AFFIANT	DATE	
Signed and acknowledged by _	nd acknowledged by in the city/county of <u>Northumbe</u>		
Virginia on the day o	of, 200, in the present		
	WITIVESS	DATE	