

**ALL APPLICATIONS REQUIRE TWO SETS OF PLANS AT SUBMISSION**

Initial Application                       Revision to existing application

Project Address: \_\_\_\_\_ Permit #: \_\_\_\_\_

Scope of work: \_\_\_\_\_

Estimated Value of Construction (materials & labor):                      \$ \_\_\_\_\_

Owner: \_\_\_\_\_

Lessee: _____	*Contractor: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
	VA Contr. Lic #: _____

\*Contact the Commissioner of Revenue (540) 667-1815 for your City of Winchester Business License.

Lien Agent                      Name: \_\_\_\_\_

   Address: \_\_\_\_\_

   Phone: \_\_\_\_\_

   Email: \_\_\_\_\_

**ZONING** – please complete this section to assist with the Zoning determination which is necessary and will be completed prior to the building plan review.

Zoning District: _____	Tax Map #: _____	<small>The setback is the distance from the structure / building to the property line on each side that is relevant for this application.</small>	
Setbacks from property lines:	Front: _____	Rear: _____	Left: _____      Right: _____
Existing Structures (please list): _____			
Site Plan Required (Circle one):	Yes    No	Site Plan #: _____	Approval Date: _____
Historic District (Circle one):	Yes    No	BAR Case #: _____	Approval Date: _____
Corridor Enhancement Dist.:	Yes    No	CE Case #: _____	Approval Date: _____
Flood Plain (Circle one):	Yes    No	Case #: _____	Approval Date: _____

**Zoning Staff Only:**

Setbacks per code:                      Front: \_\_\_\_\_      Rear: \_\_\_\_\_      Left: \_\_\_\_\_      Right: \_\_\_\_\_

Easements: \_\_\_\_\_

**Building Department - This application only requires information for the specific project that is being applied for. Additional property information is not necessary.**

**Plans are reviewed with the 2018 USBC.**

<input type="checkbox"/> Work has not started	<input type="checkbox"/> Work has started	<input type="checkbox"/> Work has been completed	<input type="checkbox"/> Emergency Repair
<input type="checkbox"/> New Construction	<input type="checkbox"/> Single Family Dwelling	<input type="checkbox"/> 1 <sup>st</sup> floor – SF - _____	<input type="checkbox"/> Porch
<input type="checkbox"/> Addition	<input type="checkbox"/> Duplex	<input type="checkbox"/> 2 <sup>nd</sup> floor – SF - _____	...Square feet _____
<input type="checkbox"/> Alteration – Interior	<input type="checkbox"/> Townhouse 3-4 units	<input type="checkbox"/> 3 <sup>rd</sup> floor – SF - _____	...Height above grade _____
<input type="checkbox"/> Alteration – Exterior	<input type="checkbox"/> Townhouse 5+ units	<input type="checkbox"/> Basement	<input type="checkbox"/> Deck
<input type="checkbox"/> Demo – interior/Exterior		... Finished – SF - _____	...Square feet _____
<input type="checkbox"/> Foundation Only	Foundation Type	... Unfinished – SF - _____	...Height above grade _____
<input type="checkbox"/> Prefabricated Home	<input type="checkbox"/> ... Crawlspace	<input type="checkbox"/> Bedrooms - # _____	<input type="checkbox"/> Carport – SF - _____
<input type="checkbox"/> Repair	<input type="checkbox"/> ... Basement	<input type="checkbox"/> Bathrooms	<input type="checkbox"/> Garage
<input type="checkbox"/> Roof	<input type="checkbox"/> ... Slab on Grade	...Full # _____	...Attached – SF - _____
		...Half # _____	...Detached – SF - _____
<input type="checkbox"/> Plumbing (separate permit)	<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Total Rooms - # _____	<input type="checkbox"/> Stairs / Ramps
<input type="checkbox"/> Mechanical (separate permit)	<input type="checkbox"/> Asbestos	<input type="checkbox"/> Chimney - # _____	
<input type="checkbox"/> Electrical (separate permit-MDIA)	<input type="checkbox"/> Elevator and/or Shaft	... Masonry or Prefab (circle)	<input type="checkbox"/> Square footage of project
<input type="checkbox"/> Gas (separate permit)	<input type="checkbox"/> Pool – Above Ground	<input type="checkbox"/> Fireplace - # _____	>>> _____
<input type="checkbox"/> ... Natural Gas	<input type="checkbox"/> Pool – In Ground	... Masonry or Prefab (circle)	<input type="checkbox"/> Solar Array - Roof
<input type="checkbox"/> ... LP Gas	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Other _____	<input type="checkbox"/> Solar Array - Ground
<input type="checkbox"/> Revised Plans	<input type="checkbox"/> Storage Tank - Install		
	<input type="checkbox"/> Storage Tank - Removal		

Pages: \_\_\_\_\_ Square Feet: \_\_\_\_\_

**Owner Affidavit** When the owner is acting as the contractor, by the signing of this application: I hereby affirm that I have read Title 54 of the Code of Virginia and fully understand the contents thereof; that I am not subject to licensure as a contractor or subcontractor. I further affirm that I will be solely responsible for all construction on the described property allowed by the permit hereby issued.

Person Applying for Permit:  Owner  Lessee  Contractor  Agent

I hereby agree to comply with all provisions of the Virginia Uniform Statewide Building Code, the Zoning Ordinance, and other ordinances or policies as adopted by the City of Winchester, Virginia.

Note: If Lessee or Agent is applying for the permit, an approval letter/document must be submitted by the Owner.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Date: \_\_\_\_\_

Email application to: [carolyn.barrett@winchesterva.gov](mailto:carolyn.barrett@winchesterva.gov)