



**CITY OF HARRISONBURG
COMMUNITY
DEVELOPMENT**

BUILDING PERMIT APPLICATION

<https://www.harrisonburgva.gov/building-permit>

This is a PERMIT APPLICATION only. Submittal and payment of an application for a Building Permit is not an approval.
NO WORK MAY BEGIN UNTIL THE PERMIT IS ISSUED.

APPLICANT INFORMATION

Applicant Name _____ Telephone _____
 Mailing Address (if different from property address) _____ E-Mail _____
 City _____ State _____ Zip _____

Applicant is the: Owner Contractor Lessee/Renter Other: _____
 Work performed by: Owner/Occupant Contractor NOTE: Contractors must present valid DPOR & Harrisonburg Business Licenses.

An applicant acting as their own contractor assumes all liability, damages, and all other responsibilities of the work. The applicant is responsible for knowledge of the code requirements, corrections to plans resulting from the plan review process, corrections of violations found resulting from required inspections and obtention of certificate(s) of occupancy. It should also be understood that when an applicant constructs, or re-models their own residence, they are required to reside in that same structure for a period of not less than 24 months.

PERMIT TYPE

- | | | |
|--|--|--|
| <input type="checkbox"/> New Building | <input type="checkbox"/> Building Shell | <input type="checkbox"/> Retaining Wall |
| <input type="checkbox"/> Building Addition | <input type="checkbox"/> Detached Garage | <input type="checkbox"/> Solar Energy System |
| <input type="checkbox"/> Building Alteration | <input type="checkbox"/> Swimming Pool | <input type="checkbox"/> Tent |
| <input type="checkbox"/> Roof | <input type="checkbox"/> Deck | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Tower | <input type="checkbox"/> Shed | |

PROPERTY INFORMATION

Property Address _____ Residential: ___ Yes / ___ No

SCOPE OF WORK

Code cycle (year): _____

Building Use Group: _____	Existing Use: _____	Below Grade/Found Type: _____
Secondary Use Group: _____	Proposed Use: _____	Total Construction Value: _____
Construction Type: _____	Dwelling Units Added: _____	\$ _____
# Floors: _____	Below Grade Finished Floor Area: _____	Decks, Unfin Basements, etc. Area: _____
1 st Floor Area: _____	3 rd Floor (+ Above) Area: _____	Total Building Area: _____
2 nd Floor Area: _____	Attached Garage Area: _____	

DESCRIPTION (Detailed)

I hereby certify that this proposed work will be done with the owner's consent, and I acknowledge that I have read this application and the statements herein and agree that the work will be done as stated.

Applicant Signature: _____

OFFICE USE ONLY

Fee: \$ _____ State Levy: \$ _____ Total: \$ _____

Paid: Yes No

Received by: _____

CONTRACTOR LICENSES

Contractor's DPOR Registration # _____ License Class: _____

Harrisonburg Business License # _____

PROJECT CONTACTS

Contact Type (Owner, Engineer, Contractor, MLA, Etc.)

Name

Company

Address

City State Zip

Telephone

E-Mail

Contact Type (Owner, Engineer, Contractor, MLA, Etc.)

Name

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