

Tazewell County, Virginia



RECEIVED DATE _____

Department of Building Safety
 173 Main Street, Tazewell, Virginia 24651
 Phone #: 276-385-1215
 Fax #: 276-988-0811
Miscellaneous Building Application

Owner Name or Agent: _____

Last
First
Middle Initial

(PROJECT) Physical Address: _____

City/Town
State
Zip Code

Telephone: _____ Cell Phone: _____ EMAIL: _____

County Tax Parcel #: _____ Estimated Cost of Construction: \$ _____

Town Permit # (if applicable): _____ Town of: _____

PSA _____ Water/Sewer Town _____ Water/Sewer or Private Well/Septic _____

HD Approval by: _____ Date: _____ HD Permit #: _____

If Manufacture Home will the home be in a mobile home park: YES__ NO__

Type of Work: REMODEL:___ HVAC:___ ELECTRICAL:___ / ___ AMPS PLUMBING:___ SIGN:___

DECK/PORCH:___ OUTBUILDING:___ OTHER:___

Scope of Work in Detail: _____

Will the disturbed area be 10,000 Sq Ft or more? _____

(IF THE DISTURBED AREAS IS 10,000 OR OVER IT WILL REQUIRE ENGINEERING APPROVAL BEFORE PERMIT CAN BE ISSUED)

Erosion and Sediment Screening Form is Required For:

UNDERGOURND TANK REMOVAL OR INSTALLATION__ TOWER__ POOL__

Width _____ Length _____ Height _____ Color _____ TOTAL SQ.FT _____

CONTRACTOR NAME	LICENSE #	TRADESMAN #
SUBCONTRACTOR NAME	LICENSE #	TRADESMAN #

Plan Sheets and Cross Sections are Required for Minor Projects

I affirm all information on this application is true and accurate. I will inform the Building Official of any and all changes made to this approved application.

DATE: _____

Signature _____

OFFICE USE			
Plans Submitted: YES _____ NO _____	APPROVED _____ DENIED _____		
Use Group _____	Type _____	Code Year _____	District _____
Zoning _____	Enterprise Zone: Yes _____ No _____	Flood Plain Type _____	
Permit Number _____	Permit Fee \$ _____		