



TOWN OF OCCOQUAN
 314 Mill Street, PO Box 195
 Occoquan, VA 22125
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 www.occoquanva.gov

Building Permit Application for a One or Two Family Dwelling


(This Section for Official Use Only)					
Building Permit Number: _____		Date Applied: _____		Building Official: _____	
SECTION 1: SITE INFORMATION					
1.1 Property Address: _____ 1.1a Is this an accepted street? Yes _____ No _____			1.2 Assessors Map & Parcel Numbers _____ Map Number _____ Parcel Number _____		
1.3 Zoning Information: Zoning District _____ Proposed Use _____			1.4 Property Dimensions: Lot Area (sq. ft.) _____ Frontage (ft.) _____		
1.5 Building Setbacks (ft.)					
Front Yard		Side Yards		Rear Yard	
Required	Provided	Required	Provided	Required	Provided
1.6 Water Supply: Public _____ Private _____		1.7 Flood Zone Information: Zone: _____ Outside Flood Zone? Check if yes _____		1.8 Sewage Disposal System: Municipal _____ On Site System _____	
1.8 BZA Approval: __Yes__No__N/A If Yes, date of Approval: _____		1.9 ARB Approval: __Yes__No__N/A If Yes, date of Approval: _____		1.10 HOA Approval: __Yes__No__N/A If Yes, date of Approval: _____	
SECTION 2: PROPERTY OWNERSHIP					
Owner of Record:					
Name (Print) (First, Last) _____			Email Address _____		
Street Address _____		State _____ Zip Code _____		Telephone Number _____	
SECTION 3: DESCRIPTION OF PROPOSED WORK (Check all that apply)					
New Construction _____	Existing Building _____	Owner-Occupied _____	Repair(s) _____	Alteration(s) _____	
Addition _____	Demolition _____	Accessory Bldg. _____	Number of Units _____	Other _____ Specify _____	
Brief Description of Proposed Work: _____ _____ _____ _____					

SECTION 3 (cont.): DESCRIPTION OF PROPOSED WORK

When substantial work is planned, provide the information below:

Total floor area (sq. ft.) _____ (including garage, finished basement/attics, decks or porch)
 Gross living area (sq. ft.) _____ Habitable room count _____
 Number of fireplaces _____ Number of bedrooms _____
 Number of bathrooms _____ Number of half/baths _____
 Type of heating system _____ Number of decks/ porches _____
 Type of cooling system _____ Enclosed _____ Open _____

SECTION 4: ESTIMATED CONSTRUCTION COSTS

Item	Estimated Costs: (Labor & Materials)	4.1a Official Use Only	
4.1 Building	\$	Indicate how fee is determined: <i>From Fee Schedule:</i>	
4.2 Electrical	\$	Plan Review Fees	\$
4.3 Plumbing	\$	Permit Fees	\$
4.4 Mechanical (HVAC)	\$	Additional Inspections	\$
4.5 Fire Suppression	\$	Other Fees	\$
4.6 Total Project Cost	\$	Building Permit Administrative Fee <i>(non-refundable)</i>	\$
		Total All Fees	\$
		Check No. _____ Check Amount _____ Cash Amount _____	
		____ Paid in Full ____ Outstanding Balance Due: \$ _____	
<i>(The paid Administrative Fee will be deducted from total fee for any granted Permit)</i>			

SECTION 5: CONSTRUCTION SERVICES

5.1 Contractors License

Name of License Holder

No. and Street

City/ Town, State, Zip Code

Telephone

Email Address

License Number

Expiration Date

List License Type (A, B, or C):

SECTION 6a: OWNER AUTHORIZATION TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

I, as Owner of the subject property, hereby authorize _____
to act on my behalf, in all matters relative to work authorized by this building permit application.

Printed Owner's Name

Date

Owner's Signature

SECTION 6b: OWNER OR AUTHORIZED AGENT DECLARATION

By entering my name below, I hereby attest under the pains of penalties of perjury that all of the information contained in this application is true and accurate to the best of my knowledge and understanding.

Printed Name

Date

Signature

