


**APPLICATION FOR PERMIT TO BUILDING INSPECTIONS
GREENE COUNTY, VIRGINIA**

434-985-5204 (BLDG) 434-985-5282 (ZONING) 434-985-1459 (FAX) EMAIL: inspections@gcva.us
P.O. BOX 358, STANARDSVILLE, VA 22973 (40 Celt Rd. Room 226)
www.greenecountyva.gov

PERMIT NUMBER: _____

PERMIT TYPE: _____

1. Applicant: (Name /Company)	
Mailing Address	 Do you want the permit mailed to this address? YES NO
Phone Number:	Or best # to call to pick up?
Email Address:	

2. Property Identification/Property Owner Information:

Check one: Water Source: **Public** **Well** Sewer Source: **Public Sewer** **Private Septic**

Current Property Owner's Name (as listed on Tax Records)	Tax Map Parcel #: Acreage:
*Site Property Street Address:	Subdivision Name: Subdivision Lot #:
*(Note: New Res/Comm Buildings: Address will be assigned during staff review)	Estimated Date of Purchase:

3. Improvement Information:

Check Box:

Description/Explanation of Improvement:	<input type="checkbox"/> New Residence /Accessory Apartment ADU	<input type="checkbox"/> New Commercial
	<input type="checkbox"/> Addition/Deck/Porch/Ramp	<input type="checkbox"/> Generator/Solar___# Panels
	<input type="checkbox"/> Remodel (Res or Commercial)	<input type="checkbox"/> Duplex/Apartments Units
	<input type="checkbox"/> Garage/Shed/Accessory Bldg.	<input type="checkbox"/> Electrical Only
	<input type="checkbox"/> Barn/Farm Use Only	<input type="checkbox"/> Mechanical Only
	<input type="checkbox"/> Pool (In-ground or Above)	<input type="checkbox"/> Plumbing Only
	<input type="checkbox"/> Mobile or Double wide (Year/Make/serial #)	<input type="checkbox"/> Other (Please Explain)
Estimated Value of Project: \$	Is owner acting as contractor? YES or NO	

4.

New Residence Information or Addition/Remodel/Accessory Dwelling Use Information (Fill in boxes that apply the new project)

Dimensions:	Compute Total Finished Square Ft:	Compute Total Unfinished Sq. Ft.:	Number of Stories : _____ (Do Not Include Basement in this number)
Basement: (Circle One) Finished or Unfinished	<u>Finished Basement</u> Square Ft. :	<u>Unfinished Basement</u> Square Ft.:	Finished Sq. Ft. on First Floor: _____ Finishes Sq. Ft. on Second Floor: _____
# of Bedrooms:	# Bathrooms:	Fire Place Type:	Type of Heat:
Garage in Basement: Yes/NO Garage Size:	Attached Garage Size:	Front Porch Size:	Rear/Side Deck Size:

5. New Proposed: Garage/Shed/Deck/Pool/Barn or Other Information:

Size:	Attached or Detached	Will Electric Service Installed:	Siding Type
Total Sq. Ft.:	# of Stories:	Will Plumbing Be Installed:	Estimated Value\$

You can attach copy of State Licenses. All contractors are required to have a County Business license. For more information call 985-5211

6. Contractor Information

COMPLETE MAILING ADDRESS PHONE # VA STATE LIC #/CLASS EXPIRATION

Building Contractor:				
Electrical Contractor:				
Plumbing Contractor:				
Mechanical Contractor:				

Mechanics Lien Information: (Attorney or Closing Company Assigned) Address and Phone #

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P.O. BOX 358, STANARDSVILLE, VA 22973 (40 Celt Rd. Room 226)
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PERMIT NUMBER: _____

PERMIT TYPE: _____

Affidavit for Applying for Permit – Please Read

I affirm that I am the owner/agent of a certain tract above located in Greene County and that I have applied for a permit to erect a structure on said land and/or repair/improve structure on said land. I certify that I have the consensus/approval of all property owners to apply for this permit. This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced. It is my responsibility to insure adherence to all zoning, building and erosion/sediment control regulations applicable in this jurisdiction. I understand that state law prohibits illegal contracting. All contractors need a state and county license.

Signature of Owner/Authorized Agent _____

Date: _____

Print Name: _____

BELOW FOR OFFICE USE ONLY:

Zoning Type:	Zoning Notes:	E&S Review
Zoning Adm. Signature:		Approval Signature:
Approval Date:		Approval Date:
		Notes:
Building Official Signature:	Notes:	
Approval Date:	Plan File Number:	Code Reviewed Under Code:
Commercial Occupant Load:	Construction Type:	Use Group:

Fees/Charges/Payments:

Account # for Treasurer

OFFICE NOTES/INTAKE NOTES:

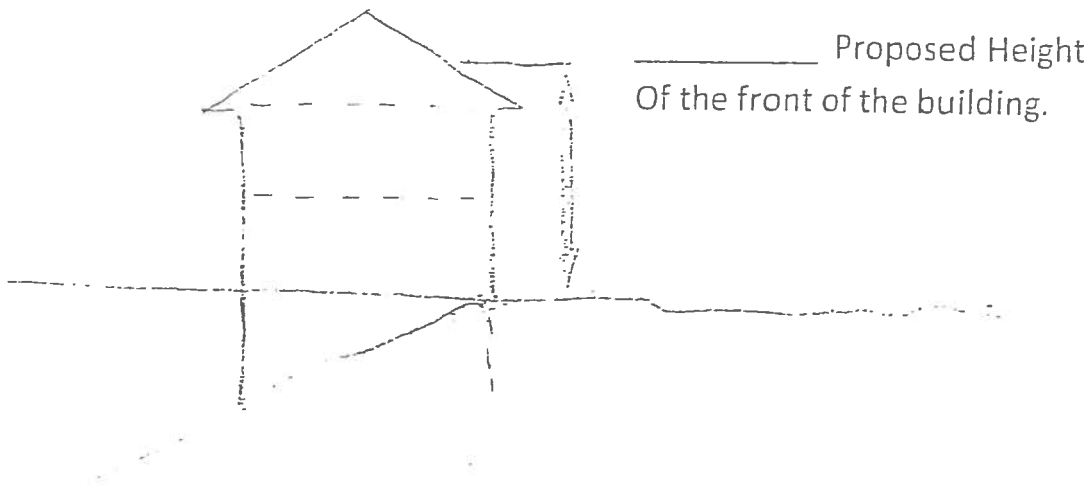
Accessory Use/Other	\$	Garage/Deck/Storage Bldg/Other
Building	\$	Finished Areas
Unfinished Areas	\$	Basement/Storage Areas
Electrical	\$	
Plumbing	\$	
Mechanical /Gas	\$	
Subtotal	\$	3-100-013030-0008
2.0% State Surcharge	\$	3-100-013030-0033
Zoning Review	\$	3-100-013030-0006
Assign Address	\$	3-100-013030-0006
Septic Review Fee	\$	3-100-013030-0018
Erosion Fee (E&S)	\$	3-100-013030-0032
S W M Fee	\$	3-100-013030-0035
Proffer Payment	\$	3-100-013030-0019
TOTAL DUE		

<u>DATE PAID</u>	<u>RECEIPT #</u>	<u>CHECK</u>	<u>CASH</u>	<u>CARD</u>	<u>STAFF</u>	<u>PAYEE NAME:</u>

BUILDING HEIGHTS -

The height shall be measured from the average elevation of the ground surface along the front of the building on a lot.

Please indicate the height on the proposed structure of the drawing below:



Height Regulations:

Zoning District: Height (feet)

R-1, B-1, B-2 and B-3	35
A-1, C-1, and R-2	40
M-1	50
M-2	60
SR	50 average height to ensure community
PUD	unrestricted

**ADDITIONS, GARAGES, DECKS, PORCHES, SHEDS, POOLS,
ACCESSORY STRUCTURES, GROUND SOLAR
SUBMITTAL CHECK LIST**

- Complete Application: All areas of the application need to be completed. Please call our office to get a price quote if you plan to mail in or submit on line.
- Contractor's Information: A copy of contractor's state license must be submitted.
Owners can act as their own general contractor.
A copy of all subcontractor's state license must be submitted.
A copy of contractor's Greene County business license. (434-985-5211) must be submitted.
- Building Plans: Two sets of plans showing structural components. Please complete a height form. We prefer plans 11x17 or smaller.
- Site Sketch: Site sketches must be drawn on a copy of a survey plat. Current surveys are located in Clerk's Office. Show all buildings located on property, show location of proposed buildings and the distance to the property lines of new construction. The distance should be shown to the front, sides and rear property lines. Zoning inspections will be done therefore all property lines and corners must be clearly marked prior to calling for footing inspection. You can call the Clerk's Office at 434-985-5208 to obtain a copy of your plat if there is record.
- Private Septic: The Health Department must complete and sign off approval on the construction for existing sewage disposal form. The approval must be submitted with your building permit application. The Health Department can be reached at 434-985-2262.
This septic requirement DOES NOT apply to decks or portable sheds.

REV: 2/7/2022

To pay on line: <https://pay.paygov.us/EndUser/PaymentAgency.aspx?ttid=20714>

There may be additional forms to complete in our office upon arrival.

The Building Permit application will NOT be accepted for review if the above requirements are not submitted with the application packet. Payment is due at the time of submittal by check, cash or credit card.