



BUCKINGHAM COUNTY BUILDING PERMIT APPLICATION

APPROVED ZONING PERMIT MUST BE INCLUDED WITH THIS APPLICATION

Application is hereby made for a permit: (1) to erect/alter a building or structure, as shown herein or located as shown in accompanying plans; (2) change the use of a building or structure. The information that follows is part of this application. It will be relied upon for the issuance of a Building Permit and/or Certificate of Occupancy. It is understood and agreed by this applicant, such as might, or would operate to cause disapproval of this application, shall constitute sufficient grounds for revocations of permit. Please see attached Building Permit Checklist for more information regarding the building permit process.

APPLICATION MAY BE REJECTED IF NOT COMPLETE

NAME ON PERMIT (print): _____ **EMAIL:** _____

ADDRESS: _____

CITY, STATE: _____ **PHONE#** _____

LANDOWNER: _____ **EMAIL:** _____

ADDRESS: _____

CITY, STATE: _____ **PHONE#** _____

DIRECTIONS TO SITE: (see guidelines-page 2): _____

WILL YOU BECOME A NEW RESIDENT OF BUCKINGHAM COUNTY?

TAX MAP NUMBER: _____ **# OF ACRES** _____ **ZONING DISTRICT:** _____

IS THIS IN A SUBDIVISION? _____ **IF YES, NAME OF SUBDIVISION:** _____

MAGISTERIAL DISTRICT:

IS PROPOSED CONSTRUCTION IN THE FLOOD ZONE?

IF YES, WHAT FLOOD DISTRICT _____

DAM BREAK INUNDATION ZONE (DBIZ): _____ **IF YES, I UNDERSTAND WHAT THE DBIZ IS AND THE PETER FRANCISCO S&WCD WILL BE NOTIFIED, INITIAL:** _____ **DATE:** _____

UTILITIES: Will the intended/alterd structure have plumbing:

WATER: () EXISTING () NEW () NA, IF NEW () PUBLIC () PRIVATE

SEPTIC: () EXISTING () NEW () NA, IF NEW () PUBLIC () PRIVATE

UTILITIES (CONTINUED):

WILL THE INTENDED/ALTERED STRUCTURE HAVE ELECTRICITY?

POWER COMPANY:

CLASSIFICATION OF WORK: (select description)

- ☐ ALTERATION (remodel)
☐ ADDITION
☐ NEW CONSTRUCTION

☐ TEMPORARY STRUCTURE

☐ TENT

☐ OTHER, (SPECIFY) _____

NATURE OF WORK: (select description)**REMODEL/ADDITION-RESIDENTIAL:**

- ☐ REMODEL
☐ ADDITION-LIVING SPACE
☐ ADDITION-PORCH/DECK

DWELLING-NEW:

- ☐ ONE & TWO FAMILY
☐ APARTMENT
☐ SINGLE FAMILY
☐ MOBILE HOME-SINGLWIDE (SW) HUD
☐ MOBILE HOME-MULTI SECTIONAL (DW), (TW) HUD
☐ MODULAR (Va. Industrialized Building)

DWELLING-REPLACEMENT

- ☐ REPLACE SW WITH SW
☐ REPLACE SW WITH DW
☐ REPLACE SW WITH MODULAR
☐ REPLACE SW WITH STICK BUILT
☐ REPLACE DW WITH SW
☐ REPLACE DW WITH DW
☐ REPLACE DW WITH MODULAR
☐ REPAC DW WITH STICK BUILT
☐ REPLACE STICK BUILT WITH _____

COMMERCIAL:

- ☐ REMODEL
☐ ADDITION
☐ NEW CONSTRUCTION

CHURCH:

- ☐ SANCTUARY
☐ CONSTRUCTION (other than sanctuary describe)

CARPORIT/GARAGE:

- ☐ CARPORT ☐ ATTACHED ☐ DETACHED
☐ GARAGE ☐ ATTACHED ☐ DETACHED
☐ GARAGE WITH LIVING SPACE
☐ ABOVE ☐ ATTACHED (same level)

ACCESSORY STRUCTURE-shelter/storage

- ☐ SHED (greater than 256 sq. ft.)
☐ site built
☐ pre-fab
☐ MOBILE HOME-WORKSHOP/STORAGE
☐ FARM USE STRUCTURE: *Must complete Farm Structure Affidavit*

SWIMMING POOL:

- ☐ INGROUND
☐ ABOVE GROUND

MISCELLANEOUS/OTHER:

- ☐ DEMOLITION:
☐ residential ☐ commercial
☐ ELECTRICAL: (describe in "OTHER")
☐ new ☐ replacement ☐ upgrade
☐ PLUMBING: (describe in "OTHER")
☐ new ☐ replacement ☐ upgrade
☐ MECHANICAL: (describe in "OTHER")
☐ new ☐ replacement ☐ upgrade
☐ STORAGE TANK
☐ ABOVE GROUND ☐ BELOW GROUND
 PRODUCT _____
☐ REMOVAL OF STORAGE TANK
☐ ABOVE GROUND ☐ BELOW GROUND
 PRODUCT _____

ALTERNATIVE ENERGY SOURCE:

- ☐ SOLAR ARAYS
☐ ROOF MOUNTED
☐ GROUND MOUNTED
☐ WIND TURBINE
☐ ROOF MOUNTED
☐ GROUND MOUNTED

OTHER: (describe) _____

IF THIS IS A DWELLING UNIT REMODEL HOW MANY NEW BEDROOMS_____

IF THIS IS A NEW DWELLING UNIT, HOW MANY BEDROOMS_____

SQUARE FOOTAGE OF STRUCTURE WITH DIMENSIONS:

BASEMENT:_____X_____

1ST FLOOR:_____X_____

2ND FLOOR:_____X_____

3RD FLOOR:_____X_____

ATTIC/LOFT:_____X_____

OTHER (specify)_____

NUMBER OF FEET FROM PROPERTY LINE TO STRUCTURE:

FRONT:_____ BACK:_____ SIDE:_____ SIDE:_____

ESTIMATED COST OF CONSTRUCTION, including labor and materials at current market value:_____

EXISTING STRUCTURES ON THE PROPERTY:

Number of dwellings on site:_____ Number of pre-existing bedrooms:_____

List any other structures/buildings currently on site:_____

IF A NEW DWELLING IS REPLACING A DWELLING CURRENTLY ON PROPERTY (if applicable): Please supply the following information, concerning the dwelling that is being replaced:

What type of dwelling is being replaced?
(singlewide, doublewide, modular, stick built):_____ How many bedrooms:_____

If sw, dw, modular please provide serial number:_____ Year:_____

Make/Model:_____ Length:_____ Width:_____

Describe what will happen to the structure/building being replaced:_____

IS THERE A MECHANICS LIEN AGENT?

IF YES, Name:_____

Address:_____ City, State:_____ Zip:_____

Phone:_____ Fax:_____

Email:_____

PERSON PERFORMING THE WORK:_____ **PHONE#**_____

LICENSE#_____ EMAIL_____

ADDRESS:_____

PRINT/SIGN:

Issuance of a Building Permit shall not be held to permit or to be an approval of the violation of any provisions of any county ordinances and codes or any state laws. I hereby acknowledge that I have read this application and know the same to be true and agree to comply with all county ordinances and state laws regulating building construction and use.

NOTICE Applicants are notified that incomplete applications may cause delays. Please complete all information as requested.

Landowner (print): _____ Date _____

Landowner (sign): _____ Date _____

Applicant(s): _____ Date _____

Applicant(s)(sign) : _____ Date _____

PLEASE NOTE A COPY OF THE POWER OF ATTORNEY CAN BE ACCEPTED IN PLACE OF LANDOWNER SIGNATURE

OFFICE USE ONLY

Permitting:

Taxes checked: () Paid () Owed

Copy of Plans: () Received () N/A

VDOT Approval () Received () N/A

VDH Approval () Received () N/A

Additional Documentation or Comments: _____

Permit Technician's Signature _____ Date: _____

PLANS HAVE BEEN REVIEWED UNDER THE 2021 VIRGINIA UNIFORM STATE WIDE BUILDING CODE, part 1 sec 101.2

All structures and building construction is subject to field and site inspections for final code compliance.

PLAN APPROVAL: () No Exceptions taken () Plans Rejected () No Exceptions taken w/comments:

Building Official: _____ Date: _____

**Buckingham County Building Permit Checklist
2021 Virginia Uniform State Wide Building Code**

****A SEPARATE APPROVED ZONING PERMIT MUST BE INCLUDED WITH THE BUILDING PERMIT APPLICATION****

The following items can be submitted to the Building Inspection Office @ 13380 W. James Anderson Hwy.
Buckingham, VA 23921 or by fax (434-969-1638) or email to:

Lexi Baird- Permit Technician (434) 969-4243 ext. 2
lbaird@buckinghamcounty.virginia.gov

Thomas W. Ranson-Building Official (434) 969-4243 (7AM-9AM)
transon@buckinghamcounty.virginia.gov

INSTRUCTIONS FOR A BUILDING PERMIT

The following are required to obtain a building permit:

1. An approved zoning permit from the zoning department
nedmondston@buckinghamcounty.virginia.gov (434) 969-4242
2. An approved Virginia Department of Health permit. (434) 969-4244
Chambers, Deonte (VDH) Deonte.Chambers@vdh.virginia.gov
David.Waldrep@vdh.virginia.gov
3. Driveway Entrance Permit from VDOT (800) 367-7623.
4. Mechanics Lien Agent (if applicable)
5. Copy of Contractor's License performing work
6. Building Plans to include but not limited to:
 - a. Footing/Foundation design
 - b. Exterior Wall Design
 - c. Roof Structure Design
 - d. Location of Electrical/Panel Box/Disconnects with Smoke Detectors
Lighting and Receptacles
 - e. HVAC design with Manual J & Manual S (this does not apply to manufactured
or modular homes)
 - f. Insulation R value, floors, walls and ceiling

INSPECTIONS REQUIRED

IT SHALL BE THE PERMIT HOLDERS RESPONSIBILITY TO REQUEST THE REQUIRED INSPECTIONS PRIOR TO OCCUPYING OR USING THE BUILDING OR STRUCTURE

PER THE UNIFORM STATEWIDE BUILDING CODE SECTION 113.3 MINIMUM INSPECTIONS:

1. Inspection of footing excavations and reinforcement material for concrete footings prior to the placement of concrete.
2. Inspection of foundation systems during phases of construction.
3. Inspection of preparatory work prior to the placement of concrete.
4. Inspection of structural members and fasteners prior to concealment.
5. Inspection of electrical, mechanical and plumbing materials, *equipment* and systems prior to concealment.
6. Inspection of energy conservation material prior to concealment.
7. Final inspection.

PRIOR TO SCHEDULING A FINAL INSPECTION FOR THE PERMIT ISSUED, WHICH ARE SUBJECT TO VDH REGULATIONS, A COMPLETION STATEMENT FROM THE VIRGINIA DEPARTMENT OF HEALTH SHALL BE SUBMITTED TO THE BUILDING INSPECTION OFFICE AND ON FILE

REQUIREMENTS FOR CERTIFICATE OF OCCUPANCY

1. Completion Statement from the Virginia Department of Health for Well/Septic.
2. A Passing Final Building Inspection.
3. Bacterial Water Test.
4. *Duct Leakage Affidavit*.
5. *Blower Door Test*.
6. Radon Test

Only Applies to Site Built and Modular Homes