



Development Services Application

Date: _____



1. Please identify the property on which the proposed activity will occur:

Tax ID number: _____

Street address: _____

City, State, Zip: _____

Other means of description: _____

2. Please identify who the applicant is:

Owner Tenant General Contractor

Design Professional – (Architect / Engineer / Etc.)

Other: _____

3. Please identify the owner(s) of the subject property:

Owner's name: _____

Mailing address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

4. If the applicant is not the owner, please provide the following:

Applicant's name: _____

Mailing address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

Please check the box by all permit types, listed below, required for your project:

- 1** Building -Needed to build a new structure, add to, alter, or demolish an existing structure, perform any electrical, plumbing, HVAC work, install a sign, pool, retaining wall, tower, antenna, storage tank, amusement device or elevator.
- 2** Land Use -Needed for any structure to be built or placed on a property.
How much land will you be disturbing? _____ ft²
- 3** Erosion & Sediment Control -Needed if disturbing 10,000ft.² up to 1 acre of land on a property not within 200ft. of any state waterway or if disturbing 3,000ft.² or more on a property where land disturbance is within 200ft. of any state waterway.
- 4** Storm Water -Future requirement.

Description of Work: _____

Directions to the property: _____

I hereby certify that the proposed work is authorized by the owner(s) of record and that I have been authorized by the owner(s) to make this application as an authorized agent and I agree to conform to all statutes and regulations identified on the back of this document.

Signature of Property Owner
Or Authorized Agent

Printed Name of Property Owner
Or Authorized Agent



Development Services Application

Please identify all applicable statutes & regulations by checking the appropriate box(s):

I hereby certify that I am the owner of record of the herein described property, or that the proposed work has been authorized by the owner of record and that I have been authorized to make this application as a designated agent. I agree to conform to all applicable state and local regulations, rules and policies and such shall be deemed a condition entering into the exercise of the permit. In addition, if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the area(s) described herein at any reasonable hour for the purpose of enforcing the provisions of the applicable code(s). I affirm that the information given in this application is correct at the time of submittal. I recognize any changes to the information given in this application require written notification to Franklin County Development Services.

Property ownership, as verified through Franklin County Real Estate Tax Records, will reflect the permit holder. If the permit is to be issued in another name, a signed letter from the existing property owner(s) giving permission for the specific structure on the property is required. The Real Estate Tax Identification number, subdivision name and lot number (if applicable) for the property is to be included in this letter. This statement is to be signed and dated by all property owner(s).

I realize that NO OCCUPANCY can be made until all final inspections are completed, approved and a CERTIFICATE OF OCCUPANCY has been obtained. I understand that if I occupy, or allow occupancy, in any manner, I am not in compliance with the "Virginia Uniform Statewide Building Code" and hereby I am giving permission for the Franklin County Inspections Department to have my electric meter disconnected and removed. *Manufactured HUD homes may be occupied for up to 60 days

I am requesting and approving authorization to be notified of inspection results by phone and/or e-mail.

Phone: _____ Email: _____

I am requesting Mechanics Lien agent be added to this permit.

Business Name: _____ Phone: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

I am acting as Self-Contractor, have fully completed the Development Services Self Affidavit form, and affirm that I am familiar with the prerequisites of Section 54.1-1111 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor. I realize that I am liable to ensure all contractors and or subcontractors performing more than \$1000.00 work on my project are licensed by the State Board of Contractors in accordance with the Code of Virginia Section 54.1-1115. Failure to do so constitutes the commission of a Class 1 misdemeanor.