



# NEW CONSTRUCTION APPLICATION FORMS PACKET

\*\*\*Not included in this packet is an E&S application\*\*\*

Only applicable if applying for an addition to a home or an accessory structure over 2500 sq ft.



## **Agency Involvement & Information**

### **Page County Health Dept. - Health Approval**

- For new homes, well and septic construction permits must be issued prior to the issuance of the building permit. These permits are obtained through the Page County Health Department. They are located at 75 Court Lane, Luray, VA. They can be reached at (540) 743-6528.
- For additions and accessory structures, including farm buildings, an application for evaluation of an existing sewage disposal system and/or water supply must be obtained from the Page County Health Department and an approval from the health department sent to our office.
- For new homes, if you plan on connecting to town water and sewer, please contact the local town office for information regarding tap fees. We will need written verification from the town that the fees have been paid prior to the issuance of the building permit.

### **Virginia Department of Transportation (VDOT) - Entrance Permit**

- If you are creating a new entrance off of a state maintained road, please attach a copy of the approved VDOT entrance permit. They can be reached at (540) 434-2586. We will need this permit prior to the issuance of the building permit.

### **Page County Zoning Dept. - Zoning Permit Application/ Setback Requirements**

- If the property is located in the county, staff will supply you with a zoning permit application and review the application process with you.
- If the property is located within town limits, you will need to contact the local town office for the zoning permit application.
- If the town does not require a zoning permit, we will need that statement in writing from their office.
- If the property is located in the county, staff will provide you the setbacks, which are based on what your property is zoned.
- If the property is located in the town limits, you will need to contact the town office to obtain the setbacks.

### **Page County Treasurer's Office - Taxes**

- A verification slip must be completed by the Treasurer's office that taxes have been paid for the property, and/or that contractor taxes have been paid.
- If the taxes have not been paid, our office cannot issue any permits per the Code of Virginia without the consent of the Treasurer.

### **Page County GIS - 911 Address Application**

- The completed application is submitted to the Page County GIS Department. They are located at 103 S Court Street, Suite F, Luray, VA and can be reached at (540) 743-7316. Their website is:  
<http://pagecounty.virginia.gov/175/Geographical-Info-Systems-GIS>

### **Page County Erosion & Sediment Control – Land Disturbance Permit Application**

- For new homes and additions, you must complete an In Lieu of an Erosion and Sediment Control Plan application. Prior to the issuance of the building permit, a pre-inspection must be completed by our office to ensure the construction entrance and silt fencing are in place (guidelines will be provided on how to do this).

- For other land disturbance, depending upon the amount of land to be disturbed, an under 10,000 or over 10,000 square feet permit may be required. Please ask staff for further details.
- One acre or more of land disturbance requires a storm water permit and plans by a professional engineer.

#### ☐ **Page County Building Inspections Dept. - Building Permit Application/Plan Review**

- When hiring a contractor you must make sure they are properly licensed/certified in Virginia to complete the work. Please provide all contractor information requested on the application. All necessary information can be researched and/or validated online at the Virginia Department of Professional and Occupational Regulation ([www.dpor.virginia.gov](http://www.dpor.virginia.gov)).
- If the property owner is pulling the permits, we will need a Contractor Release form signed for each contractor (General Contractor and Sub-Contractors.) If the General Contractor is pulling the permits, we will need a Contractor Release form signed by each sub-contractor.
- The owner has the option to list themselves as doing the work. However, when building a new home, the owner may perform/supervise no more than one primary residence owned by him/her for his/her own use during any 24-month period. The owner will be required to sign an Owner's Affidavit if they choose this option.
- You can pull electrical, mechanical, and plumbing permits at the same time if you have all of your information as far as contractor and type of work. We will also need contractor release forms completed by each of these contractors.
- Two complete sets of plans are required to be submitted with the permit application. Once approved, we will keep one copy for our records, and the other copy will be given to you to keep on the jobsite.
- If you are constructing a deck or porch, a deck/porch guide will be provided to you. This must be kept on the jobsite at all times.
- We have a sample checklist sheet for Plan Review that will guide you in understanding minimum code requirements that need to be drawn out on the plans.
- All log homes require engineer seal/stamped drawings.
- The review process may take up to two weeks depending on work load status.

If you have code questions or questions about the application forms, please contact our department by phone at (540) 743-6674. Our office is open Monday through Friday 8:00 a.m. to 4:00 p.m. We cannot issue permits after 3:30 p.m.



Lord Fairfax Health District
Page County Health Department

75 Court Lane
Luray, VA 22635

Tel. (540) 743-6528 ~ Fax (540) 743-3811

www.vdh.virginia.gov



Application for Health Department Review from Building Official

(this application must be signed by the Building Official)

For Building Inspections Use only:

The Page County Department of Planning & Community Development hereby requests that the Virginia Department of Health evaluate the onsite sewage system and/or water supply on the property described below for the reasons indicated below.

Building Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Building Permit #: \_\_\_\_\_

For VDH Use only:

Review Type: (see reverse for related State law regarding Safe, Adequate & Proper assessment)

- Safe, Adequate & Proper (SAP) Evaluation Review
Petition for VDH to perform assessment (\$150.00 application fee)
Subject property is Owner's principal place of residence AND Sewage system is a conventional, septic tank system
Private, Licensed Wastewater Professional - Evaluation Assessment and Recommendation attached (\$100.00 application fee)
Non-SAP Courtesy Review for construction impact (Applicant to complete bottom of form) (no application fee)

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Agent/Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Property Physical Address: \_\_\_\_\_

Tax Map #: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Sect. / Blk: \_\_\_\_\_ Lot: \_\_\_\_\_

Information on Existing Structure: Owner's Principal Residence: Yes No # of Bedrooms \_\_\_\_\_

Project Details (include # of Bedrooms if applicable): \_\_\_\_\_

- Proposed construction contains plumbing fixtures: Yes No Basement under Addition: Yes No
Please attach any recent records of system maintenance (Pump-outs or Operation and Maintenance Reports)
Has property been occupied during previous 30-day period: Yes or No
The septic tank and distribution box are uncovered for inspection: Yes or No
If not already, Components will be uncovered by \_\_\_\_\_ (date)

(To prevent potential damage to the system VDH recommends homeowners first contact Miss Utility for marking any underground utilities. The septic tank and distribution box should be carefully uncovered by hand.)

- Uncovering the septic tank and distribution box would cause an undue hardship: Yes or No
Provide reason for hardship: \_\_\_\_\_

(Examples of Hardship: system is relatively new, recently pumped, accurate records exist or excavation would likely damage components.)

For Non-SAP projects, please indicate additional details regarding Proposed Construction:

- Construction of a Free Standing Structure. (garage, pool-house, workshop, etc)
Describe: \_\_\_\_\_ Footprint: \_\_\_\_\_ ft x \_\_\_\_\_ ft
Will the Structure have Plumbing Fixtures? Yes No
Construction of a Swimming Pool. Above Ground: In-ground: Size: \_\_\_\_\_ ft x \_\_\_\_\_ ft

**PLEASE READ CAREFULLY:**

This report is only intended to address the above referenced request and does not address evaluation procedures for sewage systems being sold through real estate transfers, or systems and water supplies being re-used as part of a subdivision process. This document specifically addresses VDH's implementation of §32.1-165 of the *Code of Virginia* and is not to be used for any unauthorized use.

The property boundaries and building locations are clearly marked or identified at the property. I give permission to the Virginia Department of Health to enter the property described, if necessary, for the purpose of processing this application. An accurate sketch of the property, existing structures, wells, sewage disposal systems, and proposed structure(s) is attached.

**Owner or Agent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Site Sketch (may be attached)**

Please indicate proposed addition(s) in relation to existing structure. Show location of **existing septic tank, drainfield area and water supply** and indicate actual or estimated distances between the proposed improvement and the closest septic system component(s). The footprint of proposed addition(s) must be staked or otherwise marked on the property. **Please note:** you may be required to uncover certain sewage components for evaluation.



**Virginia Code § 32.1-165, as amended and effective as of July 1, 2016, provides authority for the procedures outlined herein.** Va. Code § 32.1-165 states, "No county, city, town, or employee thereof shall issue a permit for a building designed for human occupancy without the prior written authorization of the Commissioner or his agent." "Safe, adequate, and proper" means a treatment works that complies with the Board of Health's currently effective regulations. VDH may approve an older sewage system that does not comply with current regulations provided the sewage system (1) complies with the regulatory requirements in effect at the time of its installation, (2) is not failing, and (3) can be expected to function properly given its design and construction for the sewage flow and strength.

## PAGE COUNTY ZONING PERMIT APPLICATION INSTRUCTIONS

- 1) The zoning application fee, as described below, is due when this application is returned:
  - \$45.00 for Residential Accessory Structures, Additions to Accessory Structures, and Decks
  - \$200.00 for Residential New Homes, Additions to Existing Homes, and Porches
  - \$75.00 for Commercial Accessory Structures, Additions to Accessory Structures, and Decks
  - \$300.00 for Commercial New Structures and Additions to Existing Structures
  - \$1600.00 for New Towers and/or Collocating Antennas on an Existing Tower
  - \$90.00 for Signs of any type
- 2) The proposed structure must be staked off on all corners AND the property lines must be flagged. When flagging the property lines, please flag the lines as they pass by the proposed structure. Please use markings that are clearly identifiable. If the property is not staked/flagged at the time of inspection, we will charge you another trip fee which is the same fee as the initial application.
- 3) If the proposed size or location of structure changes after the zoning permit has been issued, an amended application is required and will include a fee equal to the original zoning application. Following the amended application, a zoning inspection will be completed.
- 4) Attach either a survey plat OR a hand drawn sketch of the property. On the plat or sketch, identify the location of all existing structures, proposed structure, proposed setbacks, and any roads/right-of-ways/easements.
- 5) If this application is for a new home, you must provide a copy of the deed to the property.
- 6) If you are creating a new entrance off of a state-maintained road, you must attach a copy of the approved Virginia Department of Transportation (VDOT) entrance permit. For further information on this, please call (540) 434-2586.
- 7) In addition to zoning approval, you will need health approval from the Page County Health Department, including farm buildings. They can be reached at (540) 743-6528.
- 8) A soil and erosion permit may also be required prior to any excavation, as well as a building permit; therefore, no work shall begin prior to making an application for zoning. They can be reached at (540) 743-6674.
- 9) The fee for construction started prior to permit being issued are double the initial fee established per §125-50 of the Page County Zoning Ordinance.
- 10) If work has not been started, zoning permits become null and void after six (6) months from issuance. Permits can be renewed for one additional six (6) month period.
- 11) All zoning applications will be considered according to the order which they are received. Please note the inspection could take up to two weeks.
- 12) Additional information may be required if the Zoning Administrator determines it necessary to ensure conformance with, and to provide enforcement of the Page County Zoning Ordinance.
- 13) If you have any questions, please call our office at (540) 743-1324 or (540) 743-6674, Monday through Friday, between the hours of 8:00 a.m. to 4:00 p.m.

## PAGE COUNTY SETBACK REQUIREMENTS

<u>ZONING DISTRICT</u>	<u>FRONT**</u>	<u>SIDE</u>	<u>REAR</u>	<u>MINIMUM DISTANCE BETWEEN BUILDINGS</u>
<b>AGRICULTURE (A-1)</b> (New Dwelling, Addition to Existing Dwelling, Porch)	50 feet	20 feet	50 feet	5 feet
<b>AGRICULTURE (A-1)</b> (New Accessory Structure, Addition to Existing Accessory Structure, Deck)	50 feet	15 feet	15 feet	5 feet
<b>WOODLAND-CONSERVATION (W-C)</b> (New Dwelling, Addition to Existing Dwelling, Porch)	50 feet	20 feet	50 feet	5 feet
<b>WOODLAND-CONSERVATION (W-C)</b> (New Accessory Structure, Addition to Existing Accessory Structure, Deck)	50 feet	15 feet	15 feet	5 feet
<b>PARKS-RECREATION (P-R)</b> Any land not owned by the US Federal Government or the VA State Government in this district shall be subject to all requirements of the W-C district.	---	---	---	---
<b>COMMERCIAL (C-1)</b> (Any Structures)	40 feet	25 feet	25 feet	30 feet
<b>INDUSTRIAL (I-1)</b> See §125-13 (E) for further setback restrictions in addition to the following:	40 feet	20 feet	20 feet	5 feet
<b>RESIDENTIAL WITH PUBLIC WATER AND SEWER (R)</b> (New Dwelling, Addition to Existing Dwelling, Porch)	35 feet	15 feet	35 feet	5 feet
<b>RESIDENTIAL WITH PUBLIC WATER AND SEWER (R)</b> (New Accessory Structure, Addition to Existing Accessory Structure, Deck)	35 feet	10 feet	10 feet	5 feet
<b>RESIDENTIAL WITH PUBLIC WATER OR SEWER (R)</b> (New Dwelling, Addition to Existing Dwelling, Porch)	35 feet	15 feet	35 feet	5 feet
<b>RESIDENTIAL WITH PUBLIC WATER OR SEWER (R)</b> (New Accessory Structure, Addition to Existing Accessory Structure, Deck)	35 feet	15 feet	15 feet	5 feet
<b>RESIDENTIAL WITH ONSITE WELL AND SEPTIC (R)</b> (New Dwelling, Addition to Existing Dwelling, Porch)	35 feet	15 feet	50 feet	5 feet
<b>RESIDENTIAL WITH ONSITE WELL AND SEPTIC (R)</b> (New Accessory Structure, Addition to Existing Accessory Structure, Deck)	35 feet	15 feet	15 feet	5 feet

**FRONT SETBACK IS FROM THE RIGHT-OF-WAY OF THE ROAD.**

**DECKS, PORCHES, AND ABOVE GROUND POOLS MAY EXTEND NO MORE THAN FIVE FEET INTO ANY YARD SETBACK.**

**NO DETACHED ACCESSORY BUILDING SHALL BE ERECTED WITHIN FIVE (5) FEET OF ANY OTHER BUILDING.**

**PAGE COUNTY ZONING PERMIT APPLICATION**

1) The applicant is the:  Owner    Lessee    Agent for Owner/Lessee

Owner	Lessee (if applicable)
Name:	Name:
Mailing Address:	Mailing Address:
Phone Number:	Phone Number:
Email (Optional):	Email (Optional):

2) Site Address of Construction: \_\_\_\_\_

3) Please provide detailed directions to the site: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Tax Map Number (Office staff can provide): \_\_\_\_\_

5) Size of Property: \_\_\_\_\_

6) Is property located in a subdivision?    Yes             No  
If yes, which one: \_\_\_\_\_

7) Is property located in the floodplain?    Yes             No

8) Is this application the result of receiving a violation notice?    Yes             No

9) Water and sewage source for the property:  
 Private Well    Private Septic    Public Water    Public Sewer    None

10) Is a new entrance being created off of a state maintained road?    Yes             No

11) Current use of property (Ex: Vacant, Residence, Farming, etc.): \_\_\_\_\_

12) List existing structures that are currently on the property:  
\_\_\_\_\_

13) Proposed Structure (Ex: New Home, Addition, Porch, Deck, Accessory Building, etc.):  
\_\_\_\_\_

14) The proposed structure will be used for the following: Residence, Storage of Hay, Household Storage, etc.  
\_\_\_\_\_

15) Will the proposed structure or property be used for any type of business? Business uses may include, but is not limited to: cabin rental(s), farming operation, home occupation, virtual business, etc.?  
 Yes             No            If yes, please describe of business: \_\_\_\_\_

16) Dimensions of Proposed Structure: \_\_\_\_\_

17) Height of Proposed Structure: \_\_\_\_\_ feet

18) The property is Zoned (Office staff can provide):

- Agriculture (A-1)                       Woodland-Conservation (W-C)                       Residential (R)  
 Commercial (C-1)                       Industrial (I-1)                       Park-Recreation (P-R)

19) Refer to the Page County Setback Requirements (attached) and fill in the required and proposed setbacks for the property.

REQUIRED minimum setbacks:

PROPOSED minimum setbacks:

Front: \_\_\_\_\_ feet

Front: \_\_\_\_\_ feet

Rear: \_\_\_\_\_ feet

Rear: \_\_\_\_\_ feet

Left Side: \_\_\_\_\_ feet

Left Side: \_\_\_\_\_ feet

Right Side: \_\_\_\_\_ feet

Right Side: \_\_\_\_\_ feet

20) Distance to closest building: \_\_\_\_\_ feet

21) Is the proposed structure staked off AND have the property lines been flagged as described on the instruction sheet?

*(NOTE: As stated on the instruction sheet, if the property is not staked and flagged at the time of inspection, a second trip fee, equal to the fee amount for the initial application will be charged).*

Yes                       No      If no, indicate date it will be ready for inspection: \_\_\_\_\_

22) Estimated cost of construction: \_\_\_\_\_

*I (we), the undersigned, do hereby certify that the above information is correct and true. I (we) further understand that in granting approval of this application, the Board of Supervisors and/or Zoning Administrator may require that I (we) comply with certain conditions and that such approval shall not be considered valid until these conditions are met.*

\_\_\_\_\_  
*Signature of Owner (if applicable)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Lessee (if applicable)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Agent for Owner/Lessee (if applicable- see below)*

\_\_\_\_\_  
*Date*

*If agent for owner, please provide the following information:*

*Mailing address of agent for owner:* \_\_\_\_\_

*Phone Number of agent for owner:* \_\_\_\_\_

I, \_\_\_\_\_ hereby certify that the proposed structure is not under or close to any power lines. I understand that this is my responsibility as the owner or applicant and any costs associated to negligence will be my responsibility. **\*\*If you have questions or are uncertain of location of overhead or underground power lines, please contact SVEC at 1-800-234-7832.**

If you do not have a recorded survey plat of the property, draw a site plan below. The following items shall be included on the site plan:

- Roads/ Right-of-Ways/ Driveways/ Easements
- Existing structures currently on the property
- Proposed structure INCLUDING square footage from all property lines, existing structures, AND any right-of-ways/ driveways/easements/roads.



**OFFICE USE ONLY:**

Date Application Received: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Staff initials: \_\_\_\_\_ Application Fee: \_\_\_\_\_

Date Paid: \_\_\_\_\_  Check #: \_\_\_\_\_  Debit Card  Credit Card  Cash

Comments: \_\_\_\_\_

\_\_\_\_\_



Permit #: \_\_\_\_\_

In order to obtain a permit through the Planning, Building & Zoning Department (according to Title 36, Chapter 6 of the Code of Virginia) the Treasurer's Office will verify that taxes are current, or arrangements have been made to handle delinquencies prior to a permit being issued.

Please complete the following:

Contractor/Agent: \_\_\_\_\_

Map/Parcel # (where work will be performed): \_\_\_\_\_

Owners Name: \_\_\_\_\_

Address (where work will be performed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

*TO BE COMPLETED BY THE PAGE COUNTY TREASURER'S OFFICE*

ISSUE PERMIT: \_\_\_\_\_

DENY PERMIT: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Building Permit Application

**Property Location**

E911 Address: \_\_\_\_\_  
 Tax Map Number: \_\_\_\_\_  
 What is currently on the property? \_\_\_\_\_  
 Directions to Property: \_\_\_\_\_

Permit #: _____
Date Received: _____
Staff Initials: _____

The applicant is the: <input type="checkbox"/> Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Agent for Owner/Lessee		Code Year: <input type="checkbox"/> 2015
<b>Owner</b>	<b>General Contractor</b>	
Name: _____	Name: _____	
Mailing Address: _____	Mailing Address: _____	
Phone Number: _____	Phone Number: _____	
Email (Optional): _____	Email (Optional): _____	
	State Lic. #: _____	Exp Date: _____
<b>Lessee if applicable</b>	<b>Mechanic's Lien Agent</b>	
Name: _____	Name: _____	
Mailing Address: _____	Mailing Address: _____	
Phone Number: _____	Phone Number: _____	

Description of work to be completed: _____		
Intended Use: _____	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<input type="checkbox"/> Change of Use from _____ to _____
<input type="checkbox"/> New Home <input type="checkbox"/> Addition <input type="checkbox"/> Accessory <input type="checkbox"/> Alteration <input type="checkbox"/> Remodel/Repair <input type="checkbox"/> Foundation Only <input type="checkbox"/> Masonry Chimney/Fireplace		
<input type="checkbox"/> Stick Built <input type="checkbox"/> Modular (# sections _____) <input type="checkbox"/> Singlewide <input type="checkbox"/> Doublewide <input type="checkbox"/> Above Ground Pool <input type="checkbox"/> In Ground Pool		
Water/Sewer: <input type="checkbox"/> Public Water <input type="checkbox"/> Public Sewer <input type="checkbox"/> Onsite Well <input type="checkbox"/> Onsite Septic <input type="checkbox"/> Community Well		

Dimensions of Structure: Length _____ x Width _____ Height _____		Total Square Footage: _____
No. of Stories: _____	Basement: _____ x _____ <input type="checkbox"/> Finished <input type="checkbox"/> CS only	Garage: _____ x _____ # of cars: _____
Decks: Front: _____ x _____ Rear: _____ x _____ Side: _____ x _____		Porches: Front: _____ x _____ Rear: _____ x _____ Side: _____ x _____

Exterior Features (New Construction)	Interior Features (New Construction)
Foundation: <input type="checkbox"/> Cinderblock <input type="checkbox"/> Concrete <input type="checkbox"/> Superior Walls <input type="checkbox"/> Other: _____	# of rooms: _____ Bedrooms: _____ Bathrooms: _____ ½ Baths: _____
Walls: <input type="checkbox"/> Frame <input type="checkbox"/> Brick <input type="checkbox"/> Alum <input type="checkbox"/> Vinyl <input type="checkbox"/> Log <input type="checkbox"/> Stone <input type="checkbox"/> Cedar <input type="checkbox"/> Other: _____	Walls: <input type="checkbox"/> Drywall <input type="checkbox"/> Paneled <input type="checkbox"/> Plaster <input type="checkbox"/> Other: _____
Roof: <input type="checkbox"/> Gable <input type="checkbox"/> Hip <input type="checkbox"/> Flat/Shed <input type="checkbox"/> Other: _____	Floors: <input type="checkbox"/> Wood <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Concrete <input type="checkbox"/> Tile
Roofing Material: <input type="checkbox"/> Asphalt <input type="checkbox"/> Metal <input type="checkbox"/> Other: _____	Heat: <input type="checkbox"/> Forced Air <input type="checkbox"/> Baseboard <input type="checkbox"/> Hot Water <input type="checkbox"/> Floor Furnace <input type="checkbox"/> Wall Furnace <input type="checkbox"/> Space Heat <input type="checkbox"/> Heat Pump <input type="checkbox"/> Radiant Floor
Skirting (Manufactured Home): _____	Fuel: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Wood/Coal <input type="checkbox"/> None

Est Value of Construction (Materials & Labor): \$ _____
---

<b>Electrical Permit</b>		<b>Work Request #:</b> _____	
Contractor Name: _____		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
Mailing Address: _____		<input type="checkbox"/> Stick Built <input type="checkbox"/> Modular <input type="checkbox"/> Manufactured	
Phone Number: _____		<input type="checkbox"/> New Home <input type="checkbox"/> Addition <input type="checkbox"/> Garage <input type="checkbox"/> Accessory <input type="checkbox"/> Pool	
Email (Optional): _____		<input type="checkbox"/> New Service <input type="checkbox"/> Upgrade <input type="checkbox"/> Reconnect <input type="checkbox"/> Remodel/Repair	
State Lic #: _____ Exp Date: _____		<input type="checkbox"/> Interior Wiring <input type="checkbox"/> Utility Pole <input type="checkbox"/> Temp. Pole <input type="checkbox"/> Sign	
<b>Size of Service:</b> _____ amps		<input type="checkbox"/> Standby Generator <input type="checkbox"/> Constr. Trailer <input type="checkbox"/> Sub-Panel (# _____)	
<i>Commercial Applicants Only</i>		<input type="checkbox"/> Alarm System # _____ Pull Stations <input type="checkbox"/> Alarm Test <input type="checkbox"/> Sewer Pump	
Motors: _____ Sub-Panels: _____ Panelboards: _____		<input type="checkbox"/> Solar (# of panels _____) <input type="checkbox"/> Battery Back Up	
Receptacles: _____ Lights: _____ Switches: _____ Pole Lights: _____		<b>Est Value of Work (Materials &amp; Labor):</b> \$ _____	

<b>Mechanical Permit</b>		<b>New Installs must provide a load calculation prior to inspection</b>	
Contractor Name: _____		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
Mailing Address: _____		<input type="checkbox"/> Stick Built <input type="checkbox"/> Modular <input type="checkbox"/> Manufactured	
Phone Number: _____		<input type="checkbox"/> New Home <input type="checkbox"/> Addition <input type="checkbox"/> Garage <input type="checkbox"/> Accessory	
Email (Optional): _____		Non-Fuel Fired System:	
State Lic #: _____ Exp Date: _____		<input type="checkbox"/> Heat Pump/AC Unit (# units _____) <input type="checkbox"/> Ductwork <input type="checkbox"/> Load calc. prov	
<i>Commercial Applicants Only</i>		<input type="checkbox"/> Mini-Split System -- Condensers # _____ Evaporators # _____	
<input type="checkbox"/> Hood System <input type="checkbox"/> Hood Test		Fuel Fired System:	
<input type="checkbox"/> Sprinkler System		Appliances # _____ <input type="checkbox"/> Tank <input type="checkbox"/> Exterior Line <input type="checkbox"/> Interior Line	
<input type="checkbox"/> Standpipe - <input type="checkbox"/> Wet <input type="checkbox"/> Dry		<input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Furnace <input type="checkbox"/> Boiler - BTUs _____	
<input type="checkbox"/> Fire Pump <input type="checkbox"/> Test		<input type="checkbox"/> Chimney/Fireplace (gas vent non-masonry) <input type="checkbox"/> Chimney Liner/Relining	
Elevators: _____ Freight Lift: _____ Chair Lift: _____ Escalator: _____		<b>Est Value of Work (Materials &amp; Labor):</b> \$ _____	
Dumbwaiter: _____ Hoist Way: _____ Man Lift: _____ Conveyor: _____			

<b>Plumbing Permit</b>			
Contractor Name: _____		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
Mailing Address: _____		<input type="checkbox"/> Stick Built <input type="checkbox"/> Modular/Manufactured Tie-In	
Phone Number: _____		<input type="checkbox"/> New Home <input type="checkbox"/> Addition <input type="checkbox"/> Garage <input type="checkbox"/> Accessory	
Email (Optional): _____		<input type="checkbox"/> New Plumbing <input type="checkbox"/> Remodel    # of Plumbed Rooms _____	
State Lic #: _____ Exp Date: _____		<input type="checkbox"/> Basement/Garage Rough-In <input type="checkbox"/> Groundworks Only	
<i>Commercial Applicants Only</i>		<input type="checkbox"/> Town Water/Sewer Connection (Town of _____)	
# Fixtures: _____ # Drains: _____ # Traps: _____		<b>Est Value of Work (Materials &amp; Labor):</b> \$ _____	
# Sewer Connections: _____			

<b>Office Use Only</b>	Calculations:
Plans Reviewed and Approved By: _____	I, _____ hereby certify that the proposed structure is not under or close to any power lines. I understand that this is my responsibility as the owner or applicant and any costs associated to negligence will be my responsibility. ** If you have questions or are uncertain of location of overhead or underground power lines, please contact SVEC at 1-800-234-7832. **
<b>Fees:</b>	
Review _____	
Building _____	
Electrical _____	
Mechanical _____	
Plumbing _____	
Penalty _____	
In Lieu Of _____	
<b>Total Fees:</b> \$ _____	
<input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash <input type="checkbox"/> DC <input type="checkbox"/> CC	
Verified taxes paid _____	

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct and that the construction will conform to the regulations in the Uniform Statewide Building Code.

\_\_\_\_\_  
Applicant's Name (Printed)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



---

**CONSTRUCTION DOCUMENT REQUIREMENTS FOR SUBMITTAL**  
**All information provided on the construction plans shall be clear and legible.**

Plans review will be delayed if all the required information is not documented on the plans. Residential and Commercial plans shall include the following details:

**DRAWINGS SIZE/PLANS**

- Clear and legible plans – minimum ¼” scale or equivalent
- Provide 2 Sets of Plans
- Plans must be signed by the individual (not company) responsible for the design, including the Individual’s occupation and address (54.1-402 Code of Virginia)

**FOOTING**

- Width and thickness of the footing
- Details shall include foundation wall information
- Location of all columns, pier footings
- Piers footings and columns shall be sized to accommodate all point loads
- Slab thickness if applicable

**FOUNDATION**

- Type (i.e. Poured, CMU, etc.)
- Foundation wall width, height, and footprint dimension
- Details shall include reinforcement size/location and drainage system type and details
- Amount backfill against basement walls
- All point loads shall be identified

**FLOOR FRAMING**

- Type, Lumber Grade, Nominal Size, and on-center spacing required for all framing members
- Direction of run for framing members
- Plan details shall show entire floor framing system of each floor level. All beam, girders and the location of bearing points.
- Provide copies of all manufactured *beam* details, if applicable
- Provide copy of manufactured floor system showing each floor level, if applicable
- Habitable attics require a minimum of 30 lb. per square foot floor loading
- All point loads shall be identified

**WALL FRAMING**

- Stud nominal size, height, and on center spacing
- Bearing and nonbearing wall locations
- Opening sizes/door and window sizes
- All wall headers identified
- Window and Door Schedule
- Wind bracing plan identifying design approach, wall identification and length, panel location, nailing patterns and wall headers identified
- Walls more than 12’ in height required a Virginia Registered Design Professional to design the wall framing for wind bracing
- All point loads shall be identified

**ROOF FRAMING**

- Rafter nominal size, on center spacing, and length
- Direction of run for framing members
- Collar ties and/Oor ceiling joist nominal size, spacing, and length
- Ridge(s) identified
- All hips, valleys, gables, and bearing points identified

- Manufacturer’s design showing truss location and design for Engineered Roof Truss System
- Detailed individual truss details are required for all designs with more than one ridge line
- Overbuild(s) rafter size and spacing
- All point loads shall be identified

**FLOOR PLANS**

- Floor plan(s) show each level of the structure, including basements, unfinished areas, habitable attics, and bonus rooms
- All rooms/areas labeled to identify the use, i.e. bedroom, kitchen, recreation rooms
- All window and door locations clearly marked
- Habitable Attic areas 70 square foot or larger and 7’ ceiling heights require code compliant stairs

**ELEVATIONS**

- Details shall include exterior elevations indicating wall/floor heights. Elevations shall include windows and door locations.

**ENERGY CODE REQUIREMENTS**

- All projects (new & remodels) for all heated/conditioned areas require compliance with the R-values in the table to the right
- The buildings thermal envelope shall be represented on the drawings
- Unheated structures and areas such as garages, sunrooms, and seasonal structures that are not conditioned shall be clearly identified as such
- Basement remodeling projects shall clearly identify any existing insulation and any additional or new insulation being installed. Indicate the new and existing insulation R-values.
- Heating and cooling equipment to be sized in accordance with ACCA Manual S based on building loads calculated in accordance with ACCA Manual J or other approved heating and cooling calculation methodologies. Ducts and air handlers outside the building thermal envelope shall be pressure tested to determine air leakage.

Building Assemblies	Minimum R-Value
Walls (R-value)	R-15 or R-13 +R-1 <sup>H</sup>
Floors (R-value)	19
Ceiling (R-value) <sup>B</sup>	38
Ceiling (R-value) <sup>C</sup>	30
Basement Walls (R-value)	10 continuous or 13 cavity fill
Crawl Space Walls (Conditioned) <sup>C</sup>	10 continuous or 13 cavity fill
Concrete Slab (less than 24” below grade)	10, 2 ft
Slab (R-value) – Heated	15, 2 ft
Mass Wall (R-value) <sup>D</sup>	8/13 <sup>F</sup>
Windows (U-factor) <sup>E</sup>	0.35
Skylights (U-factor) <sup>E</sup>	0.55 max
Doors (U-factor) <sup>E</sup>	0.35
Hinged vertical attic access doors	R-5
Pull down attic access stairs	R-5 Rigid 75% of panel area

**MODULAR HOMES**

- Plans must be approved by a compliance assurance agency
- Plans must be labeled and dated with the approval date
- All work performed on-site or by others shall be detailed as required for new construction listed above (basement, porches, crawlspaces, unfinished area, garages, etc.)

**ACCESSORY STRUCTURE**

- Structures 256 square feet and larger require a permanent foundation detail
- Virginia Registered Design required on all metal building structures and carports
- Pole buildings exceeding 400 square foot in area required design professional to design the structure

**COMMERCIAL BUILDING PLANS (not required for Single Family Dwellings)**

- In addition to the above requirements, commercial projects shall include:
- Current Model Code edition
- Design Loads of the structure (Section 1603)
  - Wind loads 115 v<sup>ult</sup>
  - 35 lb ground snow (40 Pg in higher elevations)
  - Seismic Category B
  - Risk Category Section
  - Design Load Bearing Value of Soil
- Floor Live Loads
- Use Group as defined in Virginia Construction Code Section 302
- Type of Construction as defined in Virginia Construction Code Section 601
- Height and area (proposed and allowed) per Virginia Construction Section 503
- Required fire protection systems as listed in Virginia Construction Code Section 901
- Plans are sealed by a Virginia Registered Design Professional as required under Virginia Code 54.1-402
- Occupant load of tenant area(s) and total building occupant load (T1004.1.2)
- Floor design loads as required for the use of the space
- Fire exiting plan that clearly identifies the required exits, number of occupants traveling to the exit, and total travel distance for the occupants.
- Floor Plan indicating the use of each area/room; Dimensions of all rooms, hallways, and doors measured from finished materials
- Fire resistive construction and fire protection systems. Full details of firewalls, fire partitions, etc. (ex: UL Design details for nailing patterns, drywall installation, size of air space, etc.)
- Door Schedule indication size of door, hardware and rating
- ICC ANSI A117.1 Accessible Provisions:
  - Dimension the floor plan and provide measurements from finished materials for hallways, corridors, ramps, stairways, etc.
  - Restroom floorplan and elevations (min ¼" scale or larger; please provide dimensions if not to scale)
  - Depth and width, measured from finished material to finished material on restroom partitions, if provided
  - On-Center spacing of fixtures from finished walls to other fixtures or walls
  - Provide a 60" turning radius inside restroom
  - Provide clear floor space for required accessible fixtures including water closets, sinks, urinals
  - Interior wall elevation detailing mirror height, sink height, grab bar locations
  - Clear floor approach for all doors (404.2.3.2)
  - Customer Service Counters maximum height is 36" for a minimum of 36" length





County of Page, Virginia  
Planning & Community Development  
103 South Court St., Suite B  
Luray, VA 22835

### CONTRACTOR RELEASE

Date: \_\_\_\_\_ Permit #: \_\_\_\_\_

I hereby attest that I, \_\_\_\_\_  
(Name of Contractor/Business)

have contracted with \_\_\_\_\_,  
(Name of General Contractor)

to complete \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Description of Work)

at property located at \_\_\_\_\_.  
(Site Address – 911 Address)

The value of my work for this project is \$ \_\_\_\_\_.

Furthermore, I authorize the general contractor (named above) to obtain any necessary permits as required by the *USBC Code Section 108.1* and **ONLY** for the work as described above.

\_\_\_\_\_  
Signature of Contractor Date

\_\_\_\_\_  
Contractor's Mailing Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
State Contractor License # Tradesman Certification #





County of Page, Virginia  
 Planning & Community Development  
 103 South Court St., Suite B  
 Luray, VA 22835

## Owners Affidavit

This Document contains important information concerning contractors.

*Please read carefully before signing:*

Property Owner's Name: \_\_\_\_\_

Property Address of Project: \_\_\_\_\_

Tax Map#: \_\_\_\_\_

Primary Address if different from project address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

I am applying for a building permit to lawfully erect a structure on said land and/or to repair or improve said property.

\_\_\_\_\_ Initial **I have listed myself as Contractor on the above project, however, I understand that if, *at any time*, I hire someone else to do any type of work for the building permit which I am requesting, I am to *notify the Department of Building & Zoning*, to advise and provide the contact information of the hired Contractor (name, address, and Contractors License Number).**

\_\_\_\_\_ Initial **I understand that before hiring labor to assist with the project for which this permit is being requested, I must verify they are properly licensed to do business in Page County by confirming the following:**

- I pay them for this job, either, by contract amount or by hourly rate
- Current/unexpired Page County Contractors License Card (issued by Commissioner of Revenue at time of business license issuance)

\_\_\_\_\_ Initial **Additionally, I understand I am required to verify they have a current Virginia State Contractors License before hiring them if the pay exceeds \$1,000, either by contract amount or by hourly rate.**

**I understand any false statements or misrepresentation on my building permit application or plan on which permit approval is based may result in the Page County Building Official REVOKING my permit.**

*I hereby certify that I have read and understand the above notice. Furthermore, I understand that hiring unlicensed Contractors is a violation of Section 54.1-115 of the State Code of Virginia, and constitutes the charge of a Class 1 misdemeanor.*

\_\_\_\_\_  
 Owner (signature)

\_\_\_\_\_  
 Owner (print)

Date: \_\_\_\_\_