

ORANGE COUNTY

BUILDING & DEVELOPMENT SERVICES

COMMUNITY DEVELOPMENT
BUILDING
128 W. Main Street
Orange, VA 22960



OFFICE: (540) 672-4574
FAX: (540) 672-0164
orangecountyva.gov

PERMIT APPLICATION

(Complete the Appropriate Areas)

Applicant Name: _____ Phone: _____
Mailing Address: _____
Email Address: _____

Application must be made by the Landowner or with his/her permission. If Applicant is not the Landowner, attach (1) a completed Authorized Agent Affidavit (2) a letter of permission from the landowner (3) a signed contract or agreement of work to be done OR (4) a copy of the contract to purchase the property, if applicable.

Same as Applicant

Landowner Name: _____ Phone: _____
Mailing Address: _____
Project Address/Location: _____

Tax Parcel #: _____ Size of Parcel: _____ Zoning: _____

Responsible Land Disturber: _____ License Number _____ Exp. _____
Mailing Address: _____ Ph. Number _____
Total Land Disturbance Calculation: _____ E&S Permit needed: Yes ___/No ___

ZONING PERMIT:

Check applicable box for permit being requested:

(Each structure/use requires a separate permit application)

<input type="checkbox"/> Single-family dwelling - # of bedrooms _____ <input type="checkbox"/> Two-family dwelling - # of bedrooms _____ <input type="checkbox"/> Non-residential/commercial structure (principal): _____ <input type="checkbox"/> Non-residential/commercial structure (accessory): _____ <input type="checkbox"/> Commercial change of use: _____ <input type="checkbox"/> Other structure/use: _____	<input type="checkbox"/> Residential accessory structure (shed, deck, etc.): Type: _____ Size: _____ <input type="checkbox"/> Townhouses - # of units in structure: _____ <input type="checkbox"/> Manufactured home - # of bedrooms _____ Year: _____ Serial #: _____ HUD #: _____ <input type="checkbox"/> Used
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Minimum submittal requirements for Zoning Permit (NOT APPLICABLE FOR BUILDING PERMIT):

<input type="checkbox"/>	REQUIRED	An administrative site plan* OR 8.5"x11" copy of an approved minor/major site plan
<input type="checkbox"/>	<input type="checkbox"/> N/A	An authorized agent affidavit (or other written permission if applicant is not the landowner)
<input type="checkbox"/>	<input type="checkbox"/> N/A	A VDOT Land Use (Entrance) Permit (or other VDOT approval) for entrances onto state roads
<input type="checkbox"/>	<input type="checkbox"/> N/A	All application materials and bond materials for erosion and sediment control permitting

* See administrative site plan checklist for what must be shown on this type of plan

RESIDENTIAL BUILDING PERMIT:

OR

COMMERCIAL BUILDING PERMIT:

Contractor Company Name: _____ Phone: _____

VA State License # _____ Expiration: _____ (A COPY OF LICENSE IS REQUIRED)

Mailing Address: _____

Email Address: _____ N/A

Mechanic Lien Agent: _____ Phone: _____

Mailing Address: _____

Email Address: _____ N/A

Health Department Permit Number & Date: _____

Site Address (Include Township or Subdivision Name & Lot Number): _____

Directions to Site: _____

Estimated Cost of Project _____

Brief Description of Project: _____

Fill in any blanks that may apply:

Bedrooms: _____ Bathrooms: _____ Number or Tenant Spaces/Apartments: _____ Stories: _____

Garage: _____ Decks/Porches: _____ Fireplaces: _____ Type of Heat: _____ Air Condition: _____

Basement: _____ Heated: _____ Finished: _____ Type of Exterior: Combustible or Noncombustible

Crawlspace: _____ Conditioned: yes or no Overall Size (length x width): _____

Water: Public or Private / Sewer: Public or Private Fire Sprinkler System: _____ Alarm System: _____

Underground Tank: _____ Pool/Hot Tub: _____ Commercial Kitchen Hood: _____ Hood Suppression: _____

Other Miscellaneous Info: _____

Signature of applicant: _____ Date: _____

NOTE: Applications without required fees or site plans will NOT be accepted.