



City of Fairfax, Virginia

FIRE DEPARTMENT / CODE ADMINISTRATION

10455 Armstrong Street • Room 208 • Fairfax, VA 22030-3630

P 703.385.7830 • www.fairfaxva.gov/code

BUILDING PERMIT APPLICATION v2018

-Office Use Only-

PERMIT # _____

Date Issued: _____

Dep. Inv # _____ Dep. Paid \$ _____

Bal. Inv # _____ Bal. Paid \$ _____

PERMIT TO BE ISSUED TO: CONTRACTOR OWNER TENANT

JOB LOCATION INFORMATION

Address:	Suite/Flr #:
Subdivision:	Lot #

BUILDING OWNER INFORMATION

Owner Name:	
Address:	Telephone:

CONTRACTOR INFORMATION

Company Name:			
Address:			
Telephone:	Fax:	Email:	
VA Contractor Lic#	Expire Date:	City of Fairfax Business Lic#	

TENANT INFORMATION

Name:		
Telephone:	Fax:	Email:

TYPE OF CONSTRUCTION

<input type="checkbox"/> New Structure	<input type="checkbox"/> Foundation Only	<input type="checkbox"/> Addition	<input type="checkbox"/> Demolition	<input type="checkbox"/> Alteration	<input type="checkbox"/> Deck	<input type="checkbox"/> Sign
**Occupant intends to occupy structure during alteration/addition construction: YES <input type="checkbox"/> NO <input type="checkbox"/>						

DESCRIPTION/AREA OF WORK

Est. Cost of Building/Structural Work: \$ _____

MECHANIC'S LIEN AGENT INFORMATION

None Designated

Name:	
Address:	Telephone:

RESIDENTIAL

Single Family Detached <input type="checkbox"/>	Single Family Attached <input type="checkbox"/>
Code Used:	Use Group:
Construction Type:	

COMMERICAL

Proposed Use:	Previous Use:
Code Used:	Use Group:
Construction Type:	Occupant Load:

Square Feet of New Structures:

Basement: _____	1 st Flr: _____	2 nd Flr: _____	3 rd Flr: _____	Garage: _____	Porch: _____	Deck: _____	Roof: _____
Finished Basement <input type="checkbox"/>	Unfinished Basement <input type="checkbox"/>	Sprinkler System <input type="checkbox"/>	Fire Alarm <input type="checkbox"/>				

The request for use of personal information on this form is subject to the Privacy Protection Act of 1976 and the Freedom of Information Act

I hereby certify that I have authority of the owner to make this application that the information is complete, and that if a permit is issued, the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations including private building restrictions, if any, which relate to the property. He/She and the company or organization named and represented herein is duly registered or exempt from registration in accord with the provisions of Chapter 7 of the Code of Virginia. I further certify that if I am acting as an **agent** for a properly licensed contractor, or contractor exempt from registration, I have his/her authority to apply for this application.

Applicant Signature: _____

Date: _____

Contact Person's Name:	Phone:	Fax:
Email Address:		

-Office Use Only-

Building Plan Review Approval: _____

Approved for: Building _____ Electric _____ Gas _____ Mechanical _____ Plumbing _____

Zoning Approval: _____ Date: _____