



Application #: _____

ZONING PERMIT APPLICATION
COMMERCIAL BUILDING CONSTRUCTION – LAND DISTURBING
- \$60.00 NON REFUNDABLE FEE -

Please submit the following:

- A completed Zoning Permit application
- \$60.00 Non-Refundable fee
- One (1) set of building plans (of the 4 sets requested by Code Administration)

JOB LOCATION INFORMATION

Job Location Address: _____

APPLICANT INFORMATION

Name: _____

Address: _____

Phone: _____ Email: _____

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 zoning ordinance, the building code, applicable laws and regulations including private building restrictions, if any, which relate to the property. I further certify that if I am acting as an agent for the owner of the property, I have his/her authority to apply for this application.

Applicant Signature: **(REQUIRED)** _____ Date: _____

PROPERTY OWNER INFORMATION (Same as Applicant)

Name: _____

Address: _____

Phone: _____ Email: _____

TYPE OF CONSTRUCTION:

CHECK ALL THAT APPLIES:

New Structure Addition Demolition of Structure

Other: _____

DESCRIPTON OF WORK:

Scope of Work: _____

Approved Site Plan # (Major, Minor, Revision, Amendment or POD): _____

Approved Board of Architectural Review #: _____

The City of Fairfax is committed to the letter and spirit of the Americans with Disabilities Act. To request a reasonable accommodation for any type of disability, please call 703-385-7930, (TTY 711)

OFFICE USE ONLY

Receipt # _____ \$60.00

Building Permit # _____

FP YES NO RPA YES NO Tax Map # _____

Zone (Check One): CL CO CR CU CG IL IH PDM PD-R PD-M PD-C PD-I OTHER _____

BAR Approval: Date of approval _____ Reviewed by _____

Special Approval: (CIRCLE) Rezoning (Proffers)/ Special Exception / Variance /Administrative Adjustment/ Other

Case # _____ Date of approval _____ Reviewed by _____ Date _____

ZONING OFFICE APPROVAL SIGNATURE

This Application is Approved By _____ Date _____
Zoning Official

Conditions/Remarks: