ZONING PERMIT APPLICATION
RESIDENTIAL AND COMMERCIAL BUILDING CONSTRUCTION
NON-LAND DISTURBING

(City Code §110-6.20.)

COMMERCIAL: $60.00
RESIDENTIAL $30.00
NON REFUNDABLE FEE

The following procedure is provided to assist you in obtaining the required permit that must be issued PRIOR to receiving a building permit from the Office of Building Code Administration. Please familiarize yourself with these procedures and then prepare: 1) the completed application form, 2) required review fee, 3) one set of building project plans with dimensions, 4) additional materials may be requested if architectural review is required. Bring these documents to the City of Fairfax Zoning Division office at the above address.

ATTENTION:
Visit the Office of Building Code Administration in City Hall room 208 or call 703-385-7830 for more information regarding submission requirements for building, electrical, mechanical and plumbing permits.

The required Zoning Permit will not be issued until steps 1-4 are completed:

1) **Application form.** The applicant submits a completed Zoning Permit application form to the Zoning Division with all information requested on the application filled in.
   - Two (2) signatures are required on the application form:
     - The applicant, and
     - The property owner or owner’s agent affidavit.
   - Some applications will require the additional signatures of: Board of Architectural Review liaison and/or, Bond Administrator.

2) **Zoning Review fee.** This non-refundable fee is due at time of application submission.

3) **Completeness Review.** The application form will be reviewed for completeness within five business days of submission. If more information is required, the applicant will be notified of the additional information that remains outstanding.

4) **Staff Review.** The review for approval may take up to 15 days after the application form is determined complete. In addition to the Zoning Permit, all building projects will require the Office of Building Code Administration review and building inspection.

5) **Permit Issuance**
   - Once approved, the Zoning Permit certificate and stamped plans will be sent to Office of Code Administration.
   - The applicant will receive a call from the Office of Building Code Administration once the Zoning Permit and Building, Mechanical, and/or Electrical Permit applications have been approved.
   - The Zoning office requires no further steps.

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)
ZONING PERMIT APPLICATION
RESIDENTIAL AND COMMERCIAL BUILDING CONSTRUCTION
NON-LAND DISTURBING

PAGE 1 OF 2

JOB LOCATION INFORMATION

Job Location Address___________________________________________________________

Subdivision______________________________________ Lot # ________________________

Building or Shopping Center Name____________________________________________________

RESIDENTIAL BUILDING CONSTRUCTION - $30.00 NON REFUNDABLE FEE (City Code §110-6.20.)

CHECK ALL THAT APPLY
☐ Accessory Dwelling Unit Construction ☐ Electrical ☐ Other Exterior Construction  
(Requires residential accessory use application) (i.e. emergency generator) (i.e. New HVAC)

NON-RESIDENTIAL BUILDING CONSTRUCTION - $60.00 NON REFUNDABLE (City Code §110-6.20.)

CHECK ALL THAT APPLY
☐ New Tenant Alterations ☐ Existing Tenant Alterations ☐ Commercial Common Space Alterations (i.e. bathrooms, lobby)  
☐ Interior Demolition ☐ Landlord Improvements ☐ Electrical (i.e. emergency generator)  
☐ Telecommunication ☐ Mechanical (i.e. New HVAC)  
☐ Other: __________________________________________________________________________

PROPOSED AREA OF WORK: __________________________________________________________

***OFFICE USE ONLY***

Case # __________________ Tax Map Number ___________________________ FP ☑ YES ☐ NO RPA ☑ YES ☐ NO

Receipt # __________________ $30.00 ☑ $60.00 ☑ Approved Tenant ☑ YES ☐ NO Tenant Pentamation # ______________

☐ RL ☐ RM ☐ RH ☐ RT ☐ RT-6 ☐ RMF ☐ CL ☐ CO ☐ CR ☐ CU ☐ CG ☐ IL ☐ IH ☐ PD-M ☐ PD-R ☐ PD-C ☐ PD-1

Has a (CIRCLE ONE) Board of Architectural Review / Rezoning with Proffers / Special Use Permit / Special Exception / Variance

Date of approval ______________________ Proffers Reviewed by ______________________

ATTACH A COPY OF ANY CONDITIONS OR PROFFERS APPROVED OR IMPOSED BY CITY COUNCIL OR THE BOARD OF ZONING APPEALS.

***ZONING OFFICIAL APPROVAL SIGNATURE***

This Application is Approved By_________________________________________ Date____________________

Zoning Official Comments: __________________________________________________________________________

BAR Liaison_________________________________________ Date____________________

BAR Comments: _____________________________________________________________________________________

Bonding Administrator_________________________________________ Date____________________

Bonding Administrator Comments: ____________________________________________________________________
PROPERTY OCCUPANCY INFORMATION

Current Use of Property ________________________________________________________________

Proposed Use of Property ____________________________________________________________

Business Name _______________________________________________________________________

Phone ___________________________ Email ____________________________________________

CONTRACTOR INFORMATION

Contractor Name _____________________________________________________________________

Phone ___________________________ Email ____________________________________________

PROPERTY OWNER/OWNER AGENT SIGNATURE

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.

Property Owner/Agent Signature (REQUIRED) ____________________________________________ Date __________________

Property Owner Name _______________________________________________________________

Address ____________________________________________________________________________

Phone ___________________________ Email ____________________________________________

APPLICANT SIGNATURE

Applicant Signature (REQUIRED) ____________________________________________ Date __________________

Applicant Name ___________________________________________________________________

Address ____________________________________________________________________________

Phone ___________________________ Email ____________________________________________