

DATE: \_\_\_\_\_

PERMIT # \_\_\_\_\_

**APPLICATION FOR PERMIT**  
**(please complete the *Deck Application Permit* if applying for a deck only)**

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

Address: \_\_\_\_\_

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

• **Owner's are allowed to act as their own contractor provided DPOR Title 54 Owner Contractor Definition is met.**

\*Contractor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

**\*NOTE:** If you have never obtained permits in Frederick County please attach a copy of your **state contractor's** license. Any jobs over \$25,000 will also need a **Frederick County Business License** unless you are building in the Town of Middletown or the Town of Stephens City. You would then need that town's business license. All businesses in Frederick County are required to have a Frederick County Business Licenses regardless of the job value.

**LOCATION OF JOBSITE**

Subdivision: \_\_\_\_\_ Lot Number \_\_\_\_\_

Street Address: \_\_\_\_\_

Tax Map Identification Number of the Property (Required for all new dwellings) \_\_\_\_\_

Directions to the job site: \_\_\_\_\_

**SETBACKS** (Please indicate the actual distance measured from the structure to the property lines)

Front \_\_\_\_\_ Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_

**TYPE OF PERMIT APPLYING FOR:**

\_\_\_\_\_ Building \_\_\_\_\_ Electrical \_\_\_\_\_ Mechanical \_\_\_\_\_ Plumbing \_\_\_\_\_ Sign

**\*NOTE\* Please separate plans by trade. See page 3, footnote 1**

PERMIT FOR: \_\_\_\_\_

*I hereby agree to comply with all provisions of the Virginia Uniform Statewide Building Code and the Zoning Ordinance as adopted by the County of Frederick.*

Applicant (*signature*) \_\_\_\_\_

(*print*) \_\_\_\_\_

Applicant is: \_\_\_\_\_ Contractor \_\_\_\_\_ Owner \_\_\_\_\_ Agent\* \_\_\_\_\_ Engineer/Architect

\*Agents, please note that a signed authorization from the owner or contractor must be attached.

\*Agent Name (print) \_\_\_\_\_ \*Agent Contact Number \_\_\_\_\_

\*Agent Address (print) \_\_\_\_\_

**Name \_\_\_\_\_ and daytime telephone number \_\_\_\_\_**

**for questions on the permit application and/or construction documents/plans.**

**Email address: \_\_\_\_\_**

**BUILDING INFORMATION NEEDED FOR PERMITS**

**WATER SUPPLY/SEWAGE DISPOSAL SYSTEM**

Public Water/Sewer System Private Well/Septic

**MECHANICS LIEN AGENT:** \_\_\_\_\_ **yes** \_\_\_\_\_ **no** (if yes, please complete below)

Mechanics Lien Agent: \_\_\_\_\_

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

**RESIDENTIAL JOB VALUE:** \_\_\_\_\_

- New One & Two-Family Dwelling New Mobile/Manufacturer Home  
New Modular/Industrialized Home Residential Remodeling Residential Addition  
Residential Demolition (requires a letter from the utility providers (gas/electric) confirming the electric/gas has been removed)

Master Plan Number (if applicable) \_\_\_\_\_

Building Size (Dimensions) \_\_\_\_\_

Total Square Footage of Living Space \_\_\_\_\_

First Floor \_\_\_\_\_ Second Floor \_\_\_\_\_ Bonus Room \_\_\_\_\_

Total Square Footage of Basement \_\_\_\_\_

Unfinished Square Footage \_\_\_\_\_ Finished Square Footage \_\_\_\_\_

Number of Stories \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_ Number of Bathrooms \_\_\_\_\_

Total Number of Rooms \_\_\_\_\_

Garage Detached Attached Size of Garage \_\_\_\_\_

Deck 1 – Length \_\_\_\_\_ Width \_\_\_\_\_ Total Square Footage \_\_\_\_\_

Deck 2 – Length \_\_\_\_\_ Width \_\_\_\_\_ Total Square Footage \_\_\_\_\_

Porch – Length \_\_\_\_\_ Width \_\_\_\_\_ Total Square Footage \_\_\_\_\_

Masonry Chimney/Fireplaces \_\_\_\_\_

**MOBILE HOMES**

Make \_\_\_\_\_ Model \_\_\_\_\_

Year \_\_\_\_\_ Serial Number \_\_\_\_\_

Length \_\_\_\_\_ Width \_\_\_\_\_ Number of Bedrooms \_\_\_\_\_

Number of Bathrooms \_\_\_\_\_ Type of Heat \_\_\_\_\_

**COMMERCIAL JOB VALUE:** \_\_\_\_\_

New Addition Remodeling

Demolition (requires a letter from the utility providers (gas/electric) confirming the electric/gas has been removed. Additionally, Demolition/Additions/Remodeling permits on buildings constructed prior to January 1, 1985 requires Asbestos affidavit)

Total Square Footage of Building \_\_\_\_\_

Building Size \_\_\_\_\_

Number of Stories \_\_\_\_\_

Number of Bathrooms \_\_\_\_\_

Total Number of Rooms \_\_\_\_\_

Use Group \_\_\_\_\_

Occupant Load \_\_\_\_\_

**Upon request, Technical Review Committee meetings for projects with site plans and pre-permit evaluations of existing structures prior to renovations, additions and change of use are available**

**Permit Application**  
**Page Three**

**SIGNS (please provide the following information for each sign) JOB VALUE TOTAL** \_\_\_\_\_

Type of Sign  Wall Sign Size (Dimensions) \_\_\_\_\_  
Square Footage of Front of Structure (if wall sign) \_\_\_\_\_  
 Freestanding\* (provide height measured from ground to top of sign) \_\_\_\_\_ feet  
Sign Size (Dimensions) \_\_\_\_\_  
Sign Reads: \_\_\_\_\_

\*Freestanding signs require a plat/drawing showing the location of the sign and the distance from the property line/roadway(s). All lighted signs shall have be labeled and listed

**ELECTRICAL PERMIT JOB VALUE:** \_\_\_\_\_

**RESIDENTIAL**

Amp Service \_\_\_\_\_  New  Upgrade  Reconnection  
For Additions/Remodeling: Number of Switches \_\_\_\_\_ Lights \_\_\_\_\_ Receptacles \_\_\_\_\_  
Size of sub-panel if adding one \_\_\_\_\_

**COMMERCIAL (please list equipment below and provide 2 sets of plans<sup>1</sup>) JOB VALUE:** \_\_\_\_\_

Amp Service \_\_\_\_\_ Number of Switches \_\_\_\_\_ Lights \_\_\_\_\_ Receptacles \_\_\_\_\_  
(Quantities are required for permit submittal and shall be received prior to review of plans)  
Size of sub-panel if adding one \_\_\_\_\_

<sup>1</sup>Fire Alarm (please provide 4 sets of plans<sup>1</sup> and equipment specifications)  
(Commercial - List all equipment, motors, and wiring – attached sheet if needed)

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**PLUMBING PERMIT: JOB VALUE:** \_\_\_\_\_

Residential  Commercial (please provide 2 sets of the plans<sup>1</sup>)

(list number of fixtures by each)

_____ Bath Sink/Basins	_____ Dishwasher	_____ Floor Drains	_____ Fountains
_____ Garbage Disposal	_____ Grease Traps	_____ Laundry Tub	_____ Lawn Faucets
_____ Sewer Pump	_____ Sewer Service	_____ Shower Stall	_____ Kitchen Sinks
_____ Sump Pumps	_____ Whirlpools Tubs	_____ Urinals	_____ Wash Machine
_____ Toilet/Water Closet	_____ Water Heater	_____ Water Service	_____ Well Pump
_____ Other _____			

**MECHANICAL PERMIT JOB VALUE:** \_\_\_\_\_

**RESIDENTIAL**  **COMMERCIAL** (list number of fixtures & provide 2 sets of plans<sup>1</sup>)

\_\_\_\_\_ Heat Pump \_\_\_\_\_ Gas Furnace \_\_\_\_\_ A C Unit \_\_\_\_\_ Gas Piping \_\_\_\_\_ Gas Range  
\_\_\_\_\_ Gas Logs \_\_\_\_\_ Gas Water Heater \_\_\_\_\_ Other \_\_\_\_\_  
\_\_\_\_\_ Size of Tanks Under 500 Gal. \_\_\_\_\_

\_\_\_\_\_ <sup>1</sup>Sprinkler System (list type) \_\_\_\_\_ (please provide 4 sets of plans\* and equipment specifications)  
(list all equipment giving btu's and tons)

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<sup>1</sup>All commercial jobs for building, signs, electrical, plumbing and mechanical will need to **submit 2 sets of plans. Please separate plans by trade.** Fire alarm and fire suppression systems **require 4 sets.** Residential building permits under the *Virginia Residential Code* will need to submit 1 set of plans.