



BUILDING/LAND USE PERMIT APPLICATION

Department of Building and Zoning
 P.O. Box 370, Coeburn, VA 24230
 Phone- 276-395-3323
 Fax- 276-395-3648

OFFICE USE ONLY

PERMIT #:
MANUFACTURED HOME PERMIT #:
ASSOCIATED PERMIT #

WORK DESCRIPTION	What type of work is to be performed (please select): RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/>							
	If a garage is included, what type (please select): ATTACHED <input type="checkbox"/> DETACHED <input type="checkbox"/>							
	What type of property improvement will be made (please describe):							
	IF THIS APPLICATION IS FOR A MANUFACTURED HOME, PLEASE ANSWER THE FOLLOWING:	YEAR MODEL:	NAME OF HOME:	SIZE:	HEAT SOURCE:	SERIAL NUMBER:	PRIVATE LOT OR NAME OF MANUFACTURED PARK:	
ID	CONTRACTOR NAME				CONTRACTOR ID #:			
	ARCHITECT NAME/ADDRESS (COMMERCIAL ONLY):		ARCHITECT ID #:	PHONE #:				
AGENTS	DEVELOPER NAME/ADDRESS (COMMERCIAL ONLY):		DEVELOPER ID:	PHONE #:				
	PERSON WHO PREPARED PLANS NAME/ADDRESS (RESIDENTIAL)				PHONE #:			
	PROPERTY OWNER NAME (FIRST NAME, LAST NAME OR COMPANY NAME):				OWNER PHONE #:			
OWNER	PROPERTY OWNER MAILING ADDRESS (SKIP, IF MAILING ADDRESS IS SAME AS JOB LOCATION):							
	ADDRESS/LOCATION OF WORK TO BE PERFORMED (STREET #/STREET NAME)				SECTION:	LOT:		
JOB INFORMATION	LIST NAME AND ADDRESS OF TENANT:							
	What is the estimated cost of STRUCTURAL WORK ONLY (materials and labor)? Do not include the cost of plumbing, mechanical, electrical or other work in this estimate:				ESTIMATED COST OF CONSTRUCTION			
					\$			

1. Attached a sketch/photo of the property with lot measurements.
2. Sketch any existing structures with existing distance from the front, sides and rear to the property line.
3. Sketch new construction with distance to property line front, sides and rear. Note setbacks are a minimum of 25 feet front and rear, 10 feet each side of property line.
4. Include the street the structure will be facing.

I, _____ do hereby affirm that the information in this application is true and correct to the best of my ability.

Approved by: _____ Date _____
Zoning Official