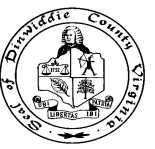


Dinwiddie County Building Inspection  
 P. O. Drawer 70  
 Dinwiddie, Virginia 23841  
 Phone:(804)469-4504 Opt #7  
 Fax (804)469-5322

# ELECTRICAL, PLUMBING, MECHANICAL

## COMMERCIAL & RESIDENTIAL



*The undersigned applicant hereby applies for a permit to do the following work in full compliance with the ordinances of the County of Dinwiddie and the Virginia uniform Statewide Building Code. This permit will be void if work does not commence within six months from the date of issuance. THIS IS AN APPLICATION ONLY, NO WORK IS AUTHORIZED UNTIL PERMIT HAS BEEN APPROVED AND ISSUED, DOUBLE FEE WILL BE CHARGED IF WORK IS STARTED WITHOUT PERMIT.*

**If this work is in conjunction with a Building Permit already issued, enter Building Permit No. in box at right. Note: Detailed plans/drawings are required except for single family dwellings.**

PERMIT NUMBER \_\_\_\_\_

LOCATION OF WORK (Full Address) \_\_\_\_\_

OCCUPANCY TYPE

Single-family Residential \_\_\_\_\_ Non-Residential (describe use of bldg) \_\_\_\_\_

SCOPE OF WORK

**ELECTRICAL**

**PLUMBING**

**MECHANICAL**

WORK TO BE PERFORMED \_\_\_\_\_

COST OF WORK \_\_\_\_\_

TOTAL SQUARE FOOTAGE \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

CONTRACTOR \_\_\_\_\_

Mailing Address \_\_\_\_\_

State Contractor License No. \_\_\_\_\_ A - B - C \_\_\_\_\_ Expiration Date \_\_\_\_\_

Dinwiddie Business License No. \_\_\_\_\_ Phone \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_

Date: \_\_\_\_\_

I authorize you, the merchant, to initiate an electronic debit to my account for the amount rendered on this check plus the legal limit returned check fee if the item is dishonored. The use of a check for payment is my acceptance of this policy.

\_\_\_\_\_  
SIGNATURE

**HOMEOWNER'S AFFIDAVIT: (To be filled in only when Homeowner is the applicant)**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of the tract or parcel of land indicated above and I have applied for this permit. Also I certify that this is my principal residence and actually live there or will live there when work is complete. I affirm that I am familiar with the prerequisites of Section 54.1-1111 of the Code of Virginia and I am not subject to licensure as a contractor.

Permit Fee Calculation - Residential (\$ .06 per Sq. Ft. + \$75.00)

Sq. Ft. \_\_\_\_\_ X \$.06 = \_\_\_\_\_

+ Base Fee \$75.00

State Fee (1.75% of above) \_\_\_\_\_

Total Fee = \_\_\_\_\_

X \_\_\_\_\_ of Permits TOTAL \_\_\_\_\_

Permit Fee Calculation - All Others

Job Cost \_\_\_\_\_ X 1%

+ Base Fee \$75.00

State Tax \_\_\_\_\_

Total Fee = \_\_\_\_\_

\_\_\_\_\_  
BUILDING OFFICIAL

\_\_\_\_\_  
DATE

*(print or type name)*

**\$50 REINSPECTION FEE WILL BE DUE IF JOB IS NOT READY OR OPEN WHEN INSPECTION IS SCHEDULED.**

