



RESIDENTIAL PERMIT APPLICATION

Roanoke County / Town of Vinton - Development Services
5204 Bernard Dr. / P.O. Box 29800 Phone 540-772-2065
Roanoke, VA 24018 Fax 540-772 2108



APPLICATION # _____

Check Appropriate Boxes			
<input type="checkbox"/> New	<input type="checkbox"/> Alteration	<input type="checkbox"/> Addition	<input type="checkbox"/> Demolition (Disturbed area _____ s.f.)
<input type="checkbox"/> Single Family	<input type="checkbox"/> Duplex	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Mobile Home
<input type="checkbox"/> Single Family (attached)		<input type="checkbox"/> Accessory Structure _____	

PROPERTY INFORMATION	Job Address:				
	Subdivision:		Lot#:	Tax Map#:	Zoning:
	Owner(s):			Phone:	
	Mailing Address:			Cell:	
				E-mail:	
APPLICANT INFORMATION	Applicant (if other than owner):			Phone:	
	Applicant Address:			Cell:	
			Fax:	E-mail:	
	State License #:		Expiration Date:	County License #:	

PROJECT DESCRIPTION	Briefly, but thoroughly, describe the proposed work. You may attach additional sheets if necessary.	

NEW SINGLE FAMILY & ADDITIONS INFORMATION:	Building Height:	# Fireplaces:
	Living Area (Include Fin. Basement) (Sq. Ft.):	# Bedrooms:
	Garage Area (Sq. Ft.):	# Full Bathroom:
	Unfinished Basement Area (Sq. Ft.):	# Half Bathroom
	Carport Area (Sq. Ft.):	# Stories:
	Deck Area (Sq. Ft.):	# Units:
	Covered Porch (Sq. Ft.):	Foundation
	Gazebo/ Storage Bld. (Sq. Ft.):	<input type="checkbox"/> Slab <input type="checkbox"/> Crawl <input type="checkbox"/> Basement

Heat Source	
<input type="checkbox"/> Heat Pump	
<input type="checkbox"/> Gas	
<input type="checkbox"/> Electric	
<input type="checkbox"/> Wood Stove	
<input type="checkbox"/> Solar	
<input type="checkbox"/> Other _____	
Water Source	
<input type="checkbox"/> Public Water	
<input type="checkbox"/> Well	
Sewage	
<input type="checkbox"/> Public Sewer	
<input type="checkbox"/> Septic	

MANUFACTURED HOME INFORMATION:	<input type="checkbox"/> Single-wide (under 19')
	<input type="checkbox"/> Double-wide
	<input type="checkbox"/> Triple-wide
	Manufacturer:
Year:	
Est. Cost: _____	

I hereby certify that I am the owner of the record of the herein described property, or that the proposed work has been authorized by the owner of record and that I that I have been authorized to make this application as a designated agent. I agree to conform to all applicable state and local regulations, rules and policies and such shall be deemed a condition entering into the exercise of the permit. In addition, if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the area(s) described herein at any reasonable hour for the purpose of enforcing the provisions of the applicable code(s).

Signature: _____ Date: _____

ALTERATIONS & DEMOLITION INFORMATION:

Estimated cost should include all electrical, plumbing, and mechanical work. Including equipment, labor, overhead and profit.

Estimated Cost:

\$ _____

OFFICE USE ONLY

FEMA ☐ YES ☐ NO