

ELEVATOR CERTIFICATION PERMIT APPLICATION**To certify passenger or freight elevators and escalators in new or existing buildings.**_____
Project Address_____
Contractor / Inspector_____
Owner Name_____
Phone No._____
License No._____
Address_____
Individual, Partnership or Corporation_____
City_____
Phone No._____
Phone No._____
License No.**Installation Description**

- ☐ New ☐ Addition
☐ Alteration ☐ Repair
☐ Replace

Additional information: _____

_____**Elevator Description**

Number of units _____

Number of building stories _____

- ☐ Passenger elevator
☐ Freight elevator
☐ Escalator
☐ Other _____

Building Description

- ☐ Office ☐ Apartment ☐ Retail
☐ Warehouse ☐ Theatre ☐ Garage
☐ Nursing home ☐ Hospital ☐ Church
☐ Restaurant ☐ Gas Station ☐ Factory
☐ Other _____

Please indicate the specific location of elevator in relation to the building.

_____**Fees**

Permit Fee.....\$ 35.00

Permits can be issued by mail when accompanied by amount due and self-addressed envelope.

This permit is granted on condition that the proposed work conforms to the requirements of the Virginia Uniform Statewide Building Code and all applicable laws and ordinances. A copy of the inspection report must be included with application.

Applicant's Signature_____
Date