

City of Manassas
9027 Center Street, P.O. Box 560, Manassas, VA 20110
Application for Building and/or Zoning Permit

Development Services
Phone: 703-257-8278
Fax: 703-257-5831

Permit No: _____
Application Date: _____

Building: Approved Rejected* Date: _____ Building Official _____
Zoning: Approved Rejected* Date: _____ Zoning Administrator _____

*Reason for Rejection _____

Notice to Applicant: Do Not Write Above This Line

1. Building Location:
Address _____
Street and Number _____ Zip Code _____ Floor _____ Suite _____
Tenant's Name _____ Telephone # _____

2. Name of Owner _____ Telephone # _____
Address _____
Street and Number _____ City _____ Zip Code _____

3. Name of Contractor: _____
Address _____
Street and Number _____ City _____ Zip Code _____ Telephone Number _____
City of Manassas Business License No. _____
State of Virginia Contractor's License No. _____ A B C EXEMPT

4. Name of Applicant (Architect, Engineer, Agent): _____
Address _____

5. Type of Improvement New Structure Addition Alteration Repair Demolition Move Building Foundation Only Other
Building Code Used: IBC IRC
10. Use Group of Building _____
11. Construction Type _____
12. Asbestos Abatement Report Received Yes No

6. Cost Estimate of work performed (Mat'l & Labor)
Building..... \$ _____
Electrical \$ _____
Plumbing \$ _____
Mechanical \$ _____
Other \$ _____
Total Cost..... \$ _____
13. The land is zoned _____
Conditions/Restrictions: _____

7. Mechanics Lien Agent: Name _____
Address _____
Telephone No. _____
 No Lien Agent Assigned
14. Number of Off Street Parking Spaces _____
Any person aggrieved by this decision of the Zoning Administrator may appeal provided such appeal is filed within 30 days in accordance with section 15.2-2311 of the VA State Code. Date _____

8. Total Floor Area (Sq. Ft.) Including Basement: _____
Overall Dimensions of Structure: Height _____ Width _____ Depth _____

9. Description of Work to be Performed: _____

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make application as his authorized agent. I agree to conform to all applicable laws of this jurisdiction. For the work described in this application, I further certify that the code official or his authorized representative shall have the authority to enter areas covered by such permit at any reasonable time to enforce the provisions of the code, and that all information provided for the issuance of this permit is true and accurate.

Signature of Applicant/Agent _____ E-Mail _____ Phone Number _____
Responsible Person or Agent in Charge of Work _____ Phone Number _____ Date _____