

**PERMIT APPLICATION**

Permit Application Center  
 12055 Government Center Parkway  
 Suite 230  
 Fairfax, Virginia 22035-5504  
**703-222-0801, TTY 711**  
*www.fairfaxcounty.gov/buildingpermits*



county use only

Parent

Building # \_\_\_\_\_   
 Mechanical # \_\_\_\_\_   
 Electrical # \_\_\_\_\_   
 Plumbing # \_\_\_\_\_   
 Appliance # \_\_\_\_\_

Tax Map # \_\_\_\_\_ Parent # \_\_\_\_\_ Plan # \_\_\_\_\_

**Job Location**

Street Address \_\_\_\_\_  
 Lot Number \_\_\_\_\_ Building \_\_\_\_\_ Floor \_\_\_\_\_ Suite \_\_\_\_\_  
 Tenant's Name \_\_\_\_\_ Subdivision \_\_\_\_\_

**Owner Information**

Name \_\_\_\_\_  Owner  Tenant  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**Contractor Information**

Company Name \_\_\_\_\_  Same as Owner  
 Address \_\_\_\_\_ Contractor ID # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 State Contractor's License # \_\_\_\_\_ County BPOL # \_\_\_\_\_

**Applicant Information**

Name \_\_\_\_\_ Contact ID # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**Designated Mechanics Lien Agent (residential only)**

Name \_\_\_\_\_  None Designated  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**Description of Work**

Estimated Cost \$ \_\_\_\_\_ House Type \_\_\_\_\_ Masterfile Number \_\_\_\_\_

I hereby certify that I have authority to make this application, that the information is complete and correct, and that the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations which relate to the property.

Signature of Owner, Master or Agent \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

**COUNTY USE ONLY**

Licensing \_\_\_\_\_ Health \_\_\_\_\_ Wastewater \_\_\_\_\_  
 Zoning \_\_\_\_\_ Site \_\_\_\_\_ Building \_\_\_\_\_

**Approved for issuance by** \_\_\_\_\_ **Date** \_\_\_\_\_ **Fee \$** \_\_\_\_\_