

BUILDING PERMIT APPLICATION

Permit Application Center
 12055 Government Center Parkway
 Suite 200
 Fairfax, Virginia 22035-5504
703-222-0801 TTY 711
www.fairfaxcounty.gov/buildingpermits



Permit # _____

Plan # _____

Tax Map # _____

JOB LOCATION

STREET ADDRESS _____
 LOT # _____ BUILDING _____ FLOOR _____ SUITE _____
 SUBDIVISION _____
 TENANT'S NAME _____

OWNER INFORMATION

OWNER TENANT

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ E-MAIL _____

CONTRACTOR INFORMATION

SAME AS OWNER

COMPANY NAME _____ CONTACT ID _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ E-MAIL _____
 STATE CONTRACTOR'S LICENSE # _____ COUNTY BPOL # _____

APPLICANT

NAME _____ CONTACT ID _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ E-MAIL _____

DESIGNATED MECHANICS' LIEN AGENT (Residential Construction Only)

NONE DESIGNATED

NAME _____ PHONE _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____

DESCRIPTION OF WORK

HOUSE TYPE _____
 MASTERFILE NUMBER _____

ESTIMATED COST OF CONSTRUCTION \$ _____

APPLICANT AGREEMENT

Any and all information and/or stamps on the reverse side of this form are a part of this application and must be complied with. I hereby certify that I have authority of the owner 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*

Name and Title (please print)

An Affidavit of Permit Authorization (located on reverse side of application) must be completed by the property owner if the permit is to be issued in the owner's name and another party is submitting the application on behalf of the owner. Please read the note to property owners on this application prior to signing the affidavit.

COUNTY USE ONLY

ROUTING	DATE	APPROVED BY
LICENSING		
ZONING		
SITE		

ROUTING	DATE	APPROVED BY
HEALTH		
SANITATION		
BUILDING		

APPROVED FOR ISSUANCE BY _____ DATE _____ FEE \$ _____

Note to Property Owners

If you have made arrangements with a contractor to do this work, Fairfax County strongly suggests that the contractor be the party to secure the permit. When contractors obtain the permit in their name, they indicate their responsibility for the work. You should avoid obtaining permits in your name for work that will be performed by a contractor. When a permit is issued solely to the owner, enforcement actions against the contractor for code violations become more difficult. Additionally, when a contractor applies for the permit, the county will verify that the contractor is appropriately licensed. If you have any questions concerning this matter, please call the Permits Application Center at 703-222-0801, TTY 711 prior to signing the application.

Expiration of Permits

An issued permit is non-transferable and shall become void if the authorized work has not commenced within six months after issuance, or if the work is suspended for a period of six or more months after having commenced. Requests for permit extensions may be made in writing to the Permits Application Center. Requests must be received prior to the expiration of the permit. Expired permits cannot be extended.

Right of Appeal

Decisions of the Building Official may be appealed to the Fairfax County Board of Building Code Appeals in accordance with the Virginia Uniform Statewide Building Code, the Code of the County of Fairfax and the Board's current procedures. Go to [www.fairfaxcounty.gov/building permits](http://www.fairfaxcounty.gov/building%20permits) for more information.

Notes/Stamps

Affidavit of Permit Authorization

An Affidavit of Permit Authorization (located below) must be completed by the property owner if the permit is to be issued in the owner's name and another party is submitting the application on behalf of the owner. Please read the note above to property owners.

Affidavit of Permit Authorization

When required, this form must be filled out by the property owner and notarized. It must be completed prior to permit issuance. Please read the note to property owners above prior to signing the affidavit.

I _____, owner of the property listed on this permit application, certify that I have granted _____, my duly authorized agent, permission to obtain this permit solely in my name. I understand that the permit will be issued in my name and I accept full responsibility for the work performed.

Signature of Property Owner

Date

State / District of _____:

City / County of _____:

To wit:

I, _____, a Notary Public in and for the aforesaid State / District hereby certify that _____, appeared before me in the State / District and City / County aforesaid and executed

this affidavit on this _____ day of _____, _____
Signature of Notary

My Commission Expires the _____ day of _____, _____.

Certificate #: _____