



Department of Inspections County of Floyd
202 East Main Street.
PO Box 218 Floyd, VA 24091

PERMIT APPLICATION

Official Use Only

Permit # _____

E&S Sheet: _____ Health Dept Info: _____

Deed/Plat Info: _____ Title of MH: _____

MLA "Mechanics' Lien Agent" Info; Specify on

Building Permit Informational Form or Enter N/A

APPLICANT

Name: _____ Phone: _____
Company: _____ Cell: _____
Address: _____ City: _____ State _____ Zip _____
E-mail Address: _____

OWNER (If different than above)

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip _____
E-mail Address: _____

ADDRESS OF PROPERTY

(E911 will NOT be issued until a footing inspection is complete)

Address: _____ City: _____ State: _____ Zip _____
Tax Map # _____
Magisterial District: _____
Subdivision & Lot # _____
Directions: _____

PROPOSED WORK

- | | |
|-----------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> New Dwelling | <input type="checkbox"/> New Dwelling- Modular |
| <input type="checkbox"/> Garage/Carport | <input type="checkbox"/> Addition/Renovation |
| <input type="checkbox"/> Singlewide | <input type="checkbox"/> Doublewide <input type="checkbox"/> Triplewide |
| <input type="checkbox"/> Other _____ | |

Permits needed:

☐ Building ☐ Electrical ☐ Plumbing ☐ Mechanical

BUILDING PERMIT INFORMATION

Building Contractor Information

Business Name: _____
 Contractor's Name: _____
 Contractors License: _____
 Contractor's Address: _____
 Contractor's E-mail Address: _____

If this permit is for a Manufactured Home, only fill out sections 4, 16, 17, & 19

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Footings <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other _____ | 2. Foundation Wall <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other _____ | 3. Wall Size <input type="checkbox"/> 8 inches <input type="checkbox"/> 10 inches <input type="checkbox"/> 12 inches |
| 4. Dimensions <small>(use outside dimensions)</small> 1 st Floor _____ 2 nd Floor _____ Porches/Deck _____ Basement _____ Carport _____ Garage _____ <input type="checkbox"/> Attached <input type="checkbox"/> Detached 2 nd Floor Garage _____ | 5. # of Floors Above Grade <input type="checkbox"/> 1 Floor <input type="checkbox"/> 1 ½ Floors <input type="checkbox"/> 2 Floors | 6. Wall Construction <input type="checkbox"/> 2x4 <input type="checkbox"/> 2x6 <input type="checkbox"/> Log <input type="checkbox"/> Other _____ |
| 7. Floor Construction <input type="checkbox"/> Joist <input type="checkbox"/> Trusses | 8. Floor Finish <input type="checkbox"/> Carpet <input type="checkbox"/> Tile <input type="checkbox"/> Wood <input type="checkbox"/> Other _____ | 9. Roof Construction <input type="checkbox"/> Rafters <input type="checkbox"/> Trusses |
| 10. Roof Covering <input type="checkbox"/> Metal <input type="checkbox"/> Shingles <input type="checkbox"/> Other _____ | 11. # of Rooms <small>(Include unfinished & basement)</small> Total # of Rooms _____ <small>(do NOT include bathrooms)</small> Total # of Bathrooms _____ Total # of Bedrooms _____ | 12. Inside Finish <input type="checkbox"/> Sheet Rock <input type="checkbox"/> Log <input type="checkbox"/> Other _____ |
| 13. Type of Heat <input type="checkbox"/> Heat Pump <input type="checkbox"/> Wood <input type="checkbox"/> Gas <input type="checkbox"/> Other | 14. Fireplaces/Chimneys Fireplaces _____ Chimneys _____ | 15. Exterior Finish <input type="checkbox"/> Log <input type="checkbox"/> Brick <input type="checkbox"/> Cedar <input type="checkbox"/> Vinyl <input type="checkbox"/> Other _____ |
| 16. Estimated Cost of Work \$ _____ | 17. Land Disturbed <small>(Count septic/well area, driveway, house site, etc.)</small> _____ Square Feet | 18. Mechanics' Lien Agent _____ Address: _____ _____ |
| 19. Manufactured Home Info. Fill out this section or provide a copy of the title Owner name on title: _____ Previous Owner(s) name on title: _____ Name of Manufacture Unit _____ Date of Manufacture Month/Date/Year _____ VIN# _____ | | |

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|-----------------------------------------------------------------------------|
| APPLICATION FOR PARCEL APPROVAL PRIOR TO ISSUANCE OF BUILDING PERMIT |
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Part 1

To confirm that the subject parcel conforms to the Floyd County Subdivision Ordinance (Section 3-1-1g and h), anyone seeking a Building Permit must show one of the following (please place a check in the appropriate box):

☐ An approved Plat of Survey (NOT A LOTLINE REVISION) or Subdivision Plat (copies of those recorded may be obtained at the Courthouse);

--OR--

☐ That the parcel was created legally prior to October 22, 2002 (show copy of recorded deed).

Please attach the appropriate document and complete Part 2 below.

Part 2

As owner or authorized agent of the owner, I certify that the information reported above is true and accurate. By my signature I accept legal responsibility for this affirmation and understand that penalties may be imposed if the statement is incorrect.

Owner or Authorized Agent

Date

STATE OF _____

COUNTY/CITY OF _____, to wit.

I _____, a Notary Public of and for the State and County, does hereby state that _____ did appear before me this _____ day of _____, 20____, and acknowledge the foregoing document by executing the same.

Notary Public

My Commission Expires: _____