

MECHANIC'S LIEN AGENT
NAME
ADDRESS
CITY/ST/ZIP
PHONE

TOWN OF WYTHEVILLE
 150 EAST MONROE STREET
 P. O. BOX 533
 WYTHEVILLE, VA 24382
 276-223-3339

DATE ISSUED	PERMIT NO.
WORK MUST BEGIN WITHIN 6 MONTHS OF THIS DATE. PERMITS MAY EXPIRE OR BE REVOKED DUE TO IN-ACTIVITY OR NO INSPECTIONS IN A 6-MONTH PERIOD.	
APPROVED BY	

I. LOCATION OF BUILDING
 911 Physical Address _____ Subdivision/Lot _____ / _____
 N S E W side of _____ N S E W from intersection of _____
 Zone _____ YARD REQUIRED/ACTUAL: Front _____ / _____ Left _____ / _____ Right _____ / _____ Rear _____ / _____

II. TYPE AND COST OF BUILDING (All applicants complete Parts A-D)

A. TYPE OF IMPROVEMENT	B. OWNERSHIP	NON-RESIDENTIAL
1. <input type="checkbox"/> New Building	7. <input type="checkbox"/> Private (individual, corporation, non-profit institution, etc.)	13. <input type="checkbox"/> Church, other religious
2. <input type="checkbox"/> Addition	8. <input type="checkbox"/> Public (federal, state, or local government)	14. <input type="checkbox"/> Industrial
3. <input type="checkbox"/> Renovation		15. <input type="checkbox"/> Medical (hospital, physician, etc.)
4. <input type="checkbox"/> Excavation, grading	C. PROPOSED OR CURRENT USE	16. <input type="checkbox"/> Office, bank, professional
5. <input type="checkbox"/> Demolition (indicate most recent use in Part C)	RESIDENTIAL	17. <input type="checkbox"/> Restaurants
6. <input type="checkbox"/> Other _____	9. <input type="checkbox"/> One family	18. <input type="checkbox"/> Stores, retail
	10. <input type="checkbox"/> Two or more families (Enter number of units _____)	19. <input type="checkbox"/> School, library, other educational
	11. <input type="checkbox"/> Hotel, motel, or dormitory (No. of rooms _____)	20. <input type="checkbox"/> Service station, repair garage
	12. <input type="checkbox"/> Other (Specify _____)	21. <input type="checkbox"/> Signs DECAL NO. _____
		22. <input type="checkbox"/> Other _____

D. COST (Omit cents)	ESTIMATED COST OF WORK	PERMIT FEE	SURCHARGE	TOTAL PERMIT FEES
23. Cost of construction (PM08) <i>To be installed but not included in above cost</i>	\$ _____	\$ _____	\$ _____	\$ _____
a. Electrical (PM10)	\$ _____	\$ _____	\$ _____	\$ _____
b. Plumbing (PM12)	\$ _____	\$ _____	\$ _____	\$ _____
c. Mechanical (PM29)	\$ _____	\$ _____	\$ _____	\$ _____
d. Sign, other _____ (PM35)	\$ _____	\$ _____	\$ _____	\$ _____
24. Total estimated value of improvements (including all costs and value of materials and/or labor furnished without cost)	\$ _____	\$ _____	\$ _____	\$ _____

III. FOR NEW BUILDINGS AND ADDITIONS (Complete E-K)

E. PRINCIPAL TYPE OF FRAME	G. PRINCIPLE TYPE OF HEATING FUEL	I. TYPE OF SEWAGE DISPOSAL
25. <input type="checkbox"/> Masonry (wall bearing)	33. <input type="checkbox"/> Gas	39. <input type="checkbox"/> Public
26. <input type="checkbox"/> Wood frame	34. <input type="checkbox"/> Oil	40. <input type="checkbox"/> Individual (septic tank, etc.)
27. <input type="checkbox"/> Structural steel	35. <input type="checkbox"/> Electricity	Application No. _____
28. <input type="checkbox"/> Reinforced concrete	36. <input type="checkbox"/> Other (specify _____)	J. TYPE OF WATER SUPPLY
29. <input type="checkbox"/> Other (specify) _____		41. <input type="checkbox"/> Public
F. DIMENSIONS	H. RESIDENTIAL BUILDINGS ONLY	42. <input type="checkbox"/> Individual (well, etc.)
30. Number of stories _____	37. Number of bedrooms _____	Application No. _____
31. Total square feet of all floor areas based on exterior dimensions _____	38. Number of bathrooms _____	K. OFF-STREET PARKING
32. Total land area sq.ft. _____	Full _____	43. Enclosed _____
	Partial _____	44. Outdoors _____

IV. IDENTIFICATION

1. Owner name _____ Phone _____
 Mailing address _____
 City, State, Zip _____

2. Contractor name _____ Phone _____
 Mailing address _____ CLASS _____ EXPIRATION DATE _____
 City, State, Zip _____ LICENSE NO. _____

3. Architect/Engineer _____ Phone _____
 Mailing address _____
 City, State, Zip _____

The owner of this building and the undersigned agree to conform to all applicable codes and ordinances of the Town of Wytheville. NOTES: 1. Call for inspection before pouring any concrete. 2. A Certificate of Occupancy may be necessary and will be issued upon completion of construction provided compliance is made with terms of approved application.

Signature of applicant	Address	Date
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