



RESIDENTIAL BUILDING PERMIT APPLICATION

Rockingham County Community Development
 20 E Gay St
 Harrisonburg VA, 22802
 Office (540) 564-3030

New Home
 Addition
 Remodel
 Garage
 Storage Building
 Accessory Structure
 Mobile Home
 Other

Contractor Information

Company Name: _____
 License No: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone No: _____ Fax No: _____
 Email: _____

Applicant Information

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone No: _____ Fax No: _____
 Email: _____

Property Owner Information

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone No: _____ Fax No: _____
 Email: _____

Mechanic's Lien Agent

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone No: _____ Fax No: _____

Location of Work

Tax Map No: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Zoning: _____ Subdivision: _____
 Acreage: _____

Located within a town? Yes No
 Do you have zoning approval from town? Yes No

Water Supply

County
 Well
 Public
 Town

Sewage Disposal

County
 Septic
 Public
 Town

*****DISCLAIMER*** Parcels 1 acre or less will require a survey after footer inspection. Towns, R4 & R5 are exempt.**

Project Description:

New Single Family & Additions Sq. Footage	1 st floor _____ 2 nd floor _____
	Basement _____ <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished
	Garage _____
	Bonus Room _____ <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished
	Porch(es) _____ Deck(s) _____
	Foundation Type _____
	No. of Bedrooms: _____
	No of Bathrooms: _____
	Estimated Cost of project: \$ _____

Manufactured Homes	<input type="checkbox"/> Doublewide <input type="checkbox"/> Singlewide
	<input type="checkbox"/> Piers <input type="checkbox"/> Permanent Foundation
	Size _____ Year _____ Model _____
	Porch(es) _____ Deck(s) _____
	No. of Bedrooms: _____
	No of Bathrooms: _____
	Foundation Type _____
	Will you have a Heat pump/Central Air? <input type="checkbox"/> Yes <input type="checkbox"/> No
Mobile Home Park: _____	
	Estimated cost of project \$ _____

Subcontractors	<input type="checkbox"/> Electrical Permit
	Name of Contractor: _____
	◦New Home
	<input type="checkbox"/> 200 amp <input type="checkbox"/> 400 amp <input type="checkbox"/> 600 amp
	Will you need a temporary power pole? <input type="checkbox"/> Yes <input type="checkbox"/> No
	◦Existing Structure
	<input type="checkbox"/> Service Upgrade/Panel Change
	<input type="checkbox"/> Re-wiring Sq. Ft. _____
	<input type="checkbox"/> Generator
	◦Power Company
	<input type="checkbox"/> SVEC <input type="checkbox"/> Virginia Dominion Power
	◦Solar
	<input type="checkbox"/> Ground Mount <input type="checkbox"/> Roof Mount kW: _____
	<input type="checkbox"/> Mechanical Permit
	Name of Contractor: _____
<input type="checkbox"/> Plumbing Permit	
Name of Contractor: _____	
<input type="checkbox"/> Tank Permit	
Name of Contractor: _____	
Size of Tank: _____ No. of Tanks: _____	
<input type="checkbox"/> Above Ground <input type="checkbox"/> Underground	
<input type="checkbox"/> Interior Line <input type="checkbox"/> Exterior Line	