

**CITY OF BUENA VISTA** Department of Planning & Community Development Building Inspections Office 2039 Sycamore Avenue Buena Vista VA 24416

Alan McMahan, CBO, MPA Building Official (540) 261-8635 inspector@bvcity.org

## **COMMERCIAL PLUMBING PERMIT APPLICATION**

(Please complete all applicable sections)

PERMIT #	APPLICATIO	N DATE:		Application is hereby made for a building permit in accordance with the description and for the purposes hereinafter set forth. This application is made subject to all City and State laws, ordinances, rules and regulations now in						
	APPLICABLE	E VUSBC:								
ASSOCIATED BUILDING PERMIT #:			force or that may hereafter be enacted affecting or regulating thereto and which are hereby agreed to by the undersigned applicant and which shall be deemed a condition entering into							
INSTRUCTIONS										
Submit completed application with two (2) comple construction documents.			lete sets of	provisions of applicable codes. The work conducted un						
New buildings and additions to existing buildings requi Zoning Construction Permit before obtaining a Building Pe Commercial buildings and large developments may requ Site Plan and/or and Erosion and Sediment Control Plan.			ling Permit. y require a	t. purpose of determining compliance with applicable State a						
DESCRIPTION OF WORK										
Please describe the work to be performed										
JOB LOCATION										
Street Address:			Tax M	ap #:						
Section:		Block:				:				
Job Site Name:										
OWNER OF RECORD										
An Owner's Affiday our office or visit ou				e will ass	ume r	responsibility for the proposed work. Contact				
Name: Email Addre			ess:							
Address:										
City:		State:				Zip:				
Home or Cell Phone:										
I hereby certify that I am the owner or that I have the authority of the owner to make application, that the information given is correct and that the use and construction shall conform to the City Health, Building and Zoning ordinances which are imposed on the property.										
SIGNATURE OF OWNER / AUTHORIZED AGENT										
PRINTED NAME OF OWNER / AUTHORIZED AGENT										
ASBESTOS CERTIFICATION										

I hereby certify that the portions of the building comply with NESHAP and OSHA standards or				nspected/tested and an	y response	actions taken shall			
Signature of Owner/Applicant									
Printed Name of Owner/Applicant									
GENERAL CONTRACTOR									
Company Name:									
Address:	City:	ty:		State:		Zip:			
Phone #:	Fax #:								
Email Address: Do		Dominion Power Inquiry #:							
APPLICANT/ SUBCONTRACTOR									
Company Name:									
Address:		City:		State: Z		Zip:			
Phone #:		Fax #:		Email:					
Master Tradesman Card #:		•	VA Contractors License #:						
Master Tradesman Signature:									
Master Tradesman Printed Name:									
EQUIPMENT TO BE INSTALLED									
Check Items Below Applicable to Job									
□Installation ⊠Alteration □Repair ⊠ Replacement □ Other □Gas Piping (LP) □ Gas Piping (Natural)									
GAS APPLIANCES		No.	GAS APPLIANCES		No.				
Boiler			Gas Logs						
Clothes Dryer			Range With/Without Oven						
Furnace			Gas Water Heater						
Generator			Other						
Piping Length									
			TOTAL GA	S APPLIANCES:					
Check Items Below Applicable to Jo	ob								
☐ Installation (New) □ Alteration □ Repairs □ Replacement □ Water Service (New) □ Water Service (Replace)									
□Building Sewer (New) □Building Sewer (Replace) □Water Heater (Replace) □Other									
PLUMBING FIXTURES		o. of fixtures	PLUMBING FIXTURES			No. of fixtures			
Bath Tub			Laundry Tub						
Drinking Fountain			Lavatory						
Clothes Washer			Service Sink						
Dish Washer			Shower						
Electric Water Heater			Sump Pump						
Floor Drain			Water Closet						
Garbage Disposal			<b>Roof Drains</b>						

Kitchen Sink		Urinal						
Backflow Preventers Other								
TOTAL PLUMBING FIXTURES:								
ESTIMATED CONSTRUCTION COST (for proposed work):								
For Office Use Only								
PERMIT FEE	<b>PERMIT FEE*</b>							
If the Estimated Construction Cost is less than \$1,000,000, then   Multiply that amountx .004 to determine permit fee								
OR								
If the Estimated Construction Code is multiply that amount								

## POST PERMIT SO IT IS VISIBLE FROM THE STREET

## **Submission Checklist**

- A <u>completed</u> Commercial Plumbing Permit Application
- Current Contractor licensing information
- Two sets of construction documents drawn to scale with sufficient detail and clarity to indicate the nature and extent of the work proposed. \*Construction documents may be required to bear the stamp/seal of a registered design professional, either in accordance with \$54.1-406 of the Code of Virginia, or as required by the Building Official.
- Completed and signed Owner/Builder Affidavit, if applicable