



# BUILDING PLAN REVISION

CITY OF WAYNESBORO, BUILDING & ZONING DEPARTMENT

## A.) CLASS OF WORK:

- Residential Single Family
- Residential Multi-Family
- Commercial
- Industrial
- New Construction
- Addition/Deck/Patio
- Alterations
- Change of Use

Does the revision affect the  Interior -or-  Exterior? (\$50.00 fee for residential, \$100.00 fee for commercial plan revisions)

## B.) SITE INFORMATION:

Physical Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_  
(Printed)

Property Owner of Record: \_\_\_\_\_ Phone #: \_\_\_\_\_  
(Printed)

Owner's Mailing Address (if different): \_\_\_\_\_  
(Printed)

Owner's Email Address: \_\_\_\_\_

Occupant/Tenant: \_\_\_\_\_

## C.) APPLICANT INFORMATION:

Applicant Name: \_\_\_\_\_  
(Printed)

- Property Owner
- \*Duly Authorized Tenant/Lessee
- Contractor (please attach a copy of your VA Contractor's License)

Contractor license #: \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Tradesman license #: \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Printed)

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

\* Power of Attorney Form is required.

## D.) MECHANIC'S LIEN AGENT INFORMATION:

Agent Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## E.) ARCHITECT OR DESIGNER INFORMATION:

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

PERMIT #

ADDRESS:

**F.) Description of Proposed Changes:** Please provide a brief description of what is being changed.

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**G.) SIGNATURES:**

To be completed by applicant:     Licensed Contractor                                       Owner                       Authorized agent for Owner  
     Registered Design Professional                                       Lessee

I hereby submit this application for a building permit, and acknowledge that the plans, specifications, and other information attached hereto, together with the statements made hereon, are all a part of this application, and acknowledge that I have read these statements and agree, that when the permit herein applied for is issued that the work will be done as stated and as shown on the attached plans and specifications and as required by city ordinances, and state laws and regulations. Failure to comply with any part or terms of this application shall be sufficient cause to revoke the permit so issued. I hereby authorize the building inspector to enter upon my property during normal business hours to inspect the work authorized by this permit.

_____ Signature of Licensed Contractor	_____ * Signature of owner, agent, lessee, or design professional
_____ Print or type name	_____ Print or type name
_____ Date	_____ Date
_____ E-mail address	_____ E-mail address

**H.) BUILDING PLANS:** (Two sets of revised residential buildings plans are required. Three sets of revised plans are required for commercial and industrial uses. The revisions should be clearly indicated).

**FOR OFFICE USE ONLY:**

Invoice #:

VALIDATION:

**BUILDING:**     Approved     Denied    By: \_\_\_\_\_    Date: \_\_\_\_\_

**ZONING:**      Approved     Denied    By: \_\_\_\_\_    Date: \_\_\_\_\_

CODE USED TO REVIEW APPLICATION:     2018 VRC     2015 VRC     2018 VCC     2015 VCC     2018 VEBC

NO REVIEW – SUBJECT TO FIELD INSPECTIONS

CONSTRUCTION TYPE: \_\_\_\_\_ OCCUPANCY TYPE: \_\_\_\_\_ OCCUPANCY LOAD: \_\_\_\_\_

PLAN STORAGE: \_\_\_\_\_