

Craig County Building/Zoning Permit		Application # _____			
P.O. Box 308, New Castle VA 24127		NEW CONSTRUCTION / ADDITIONS / MOBILE HOMES			
108 Court Street	Phone: 540-864-5010	# Fireplaces:			
sholth@craigcountyva.gov	Fax: 540-864-5590	# Bedrooms:			
Note: Permit will expire if the work does not begin within 6 months or is not completed within 3 years of the date it is issued.		# Full Baths:			
		# Half Baths:			
		# Stories:			
		# Units:			
Date of Application: _____		Is Construction in Flood Plain? Yes ___ No ___ If yes, ask for Code of Ordinances 50-85			
TYPE OF WORK (circle)		Water Source: (circle)			
New Construction	Alteration	Public	Well		
Addition	Demolition	Public	Septic		
CATEGORY OF CONSTRUCTION (circle)		Water/Sewage/Well/Septic #			
Single Family Dwelling	Patio Home				
Manufactured Home	Multi-family(Duplex)				
Accessory Structure (describe)		Heat Type:	Heat Pump	Gas	Elec.
Other (describe)			Wood Stove	Solar	Oil
SCOPE OF WORK (Describe briefly)			Hot Water		
			Other		
		Foundation Type:		Slab	Crawl
		(Circle One)		Basement	
		All Construction:			
		Living Area:		Sq. Feet	
		Garage Area		Sq. Feet	
		Basement: (unfinished)		Sq. Feet	
		Carport Area:		Sq. Feet	
		Deck Area:		Sq. Feet	
		Covered Porch:		Sq. Feet	
		Gazebo / Storage/Barn		Sq. Feet	
PROPERTY OWNER		MANUFACTURED HOME ONLY			
Name:		Type (circle)	Single	Double	Triple
Mailing address:		Manufacturer:			
City / State / Zip		Year			
Phone:	Cell:	Cost:	\$		
APPLICANT (if other than owner)		Permit fees are based on square footage.			
Business name:		Sq. Footage: _____			
Contractor name:		Value of Build: _____			
Address:		Zoning Fee: _____			
City / State / Zip		Cost of Permit: _____			
Lic#	Class License				
Phone	Exp.Date:				

OWNERS AFFIDAVIT: (complete if applicant is not a licensed cont.) I affirm that I am the owner of the property described in this application and that I am familiar with the prerequisites of Section 54.1-111 of the Code of Virginia, as amended, and I am not subject to licensure as a contractor or subcontractor or subcontractor. I am also aware that it is a violation of State Law to hire or award a contract to an unlicensed contractor.

I hereby certify that I am the owner of the record of the herein described property, or that the proposed work has been authorized by the owner of record and that I have been authorized to make this application as a designated agent. I agree to conform to all applicable state and local regulations, rules and policies and such shall be deemed a condition entering into the exercise of the permit. In addition, if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the area(s) described herein at any reasonable hour for the purpose of enforcing the provisions of the applicable code(s).

APPLICANT: _____ DATE: _____

Directions to Site from New Castle: _____

Craig County Virginia – Building Permit Request – Application Data

Plot plan must be completed and approved prior to permit being issued.

Tax Map Parcel # _____ Zoning District _____

1. Show adjoining streets or roads to property and driveways.
2. Draw the lot(s) or parcel of land
3. Draw proposed structure(s) on the property:
 - a. show dimensions (in feet) of structure, porches, carports, garages, out buildings and basements
 - b. show setbacks (in feet) from proposed structure to front, back right and left sides of lot line
4. Show location of sewer, or proposed septic tank & well
5. Show location of power
6. Show any existing buildings or structures on property

Name: _____ (on application)

Owners Affidavit: I hereby affirm that I have measured the distances of the above setbacks and they are true and correct as stated in drawing. If measurements are found to be incorrect, I will remedy the required setbacks at my own expense.

Name: _____ **Date:** _____
Owner (or licensed contractor)

COUNTY OF CRAIG
P.O. Box 308
New Castle, Virginia 24127
540-864-5010 Phone
540-864-5590 Fax

**Agreement in Lieu of
Erosion and Sediment Control of a single-family residence**

I _____, hereby understand that in lieu of submission of an Official Erosion and Sediment Control Plan, I agree to comply with the **County of Craig's Erosion and Sediment Control Ordinance**. These requirements shall be based on the conservation standards contained in the Virginia Department of Conservation and Recreation's Erosion and Sediment Control Handbook.

As a minimum, I understand the following measures must be addressed:

1. Silt fencing shall be properly installed downhill from any and all disturbed areas and around all soil stockpiles.
2. Construction entrances consisting of VDOT #1, course aggregate stone shall be installed at the access point off any existing public or private Right-of-Way.
3. All denuded areas on the property shall be stabilized with permanent seeding within 7 days of final grading. If an area is not of final grade but is to be left bare for more than thirty days the area shall be temporarily seeded.
4. Pipe inlet and outlet protection shall be provided around all culvert inlets and outlets.

I understand that periodic site inspections can and will be made by the County of Craig Erosion and Sediment Control Program Manager or his/her authorized agents to ensure that all E & S measures have been implemented and are adequately functioning. Failure to comply with such requirements within the specified time could result in enforcement actions for violation of the County of Craig Erosion and Sediment Control Ordinance. Enforcement actions are, but not limited to, "Stop Work Order", revocation of permit and legal action.

Initials: _____.

By signing this Agreement, you acknowledge that the landowner is ultimately responsible for ensuring that all Erosion and Sediment Control measures are properly installed and periodically maintained. I hereby grant permission to enter this property for the purposes of inspection and to my knowledge the information I have provided on both sides of this form is correct and accurate.

BUILDING PERMIT # _____

Name: _____

Signature: _____

Date: _____

DIRECTIONS TO PROPERTY:

- All erosion controls are to be installed prior to any land disturbing activity.
- The County of Craig shall notify the owner/contractor of any E & S violations. Craig County will also identify corrective action(s) and a date at which these violations are to be corrected.

CONTACT INFORMATION:

Applicant: _____

Address _____ City: _____ VA _____

Telephone Number: _____ Cell: _____

Tax Map # _____ Slope/Grade _____ Hydrologic ID: _____

Type of Project: Single Family Dwelling including driveway and Septic System
 Detached Building Driveway Land Clearing
 Other: _____

Area to be disturbed: _____ (square feet)
(43,560 sq ft = 1 acre)

I _____, hereby understand that if I disturb greater than one (!) acre, or if constructing in a residential subdivision developed by another party, a Virginia Storm water Management Program Permit must be obtained from the Virginia Department of S=Conservation and Recreation (DCR). Failure to obtain this permit could result in strict enforcement from DCR. For more information, www.dcr.virginia.gov/sw/vsmp.htm or contact DCR at (804) 786-3998.

Department of Conservation and Recreation Storm water Permitting
203 Governor Street, Suite 206
Richmond, VA 23129

=====

OFFICE USE ONLY:

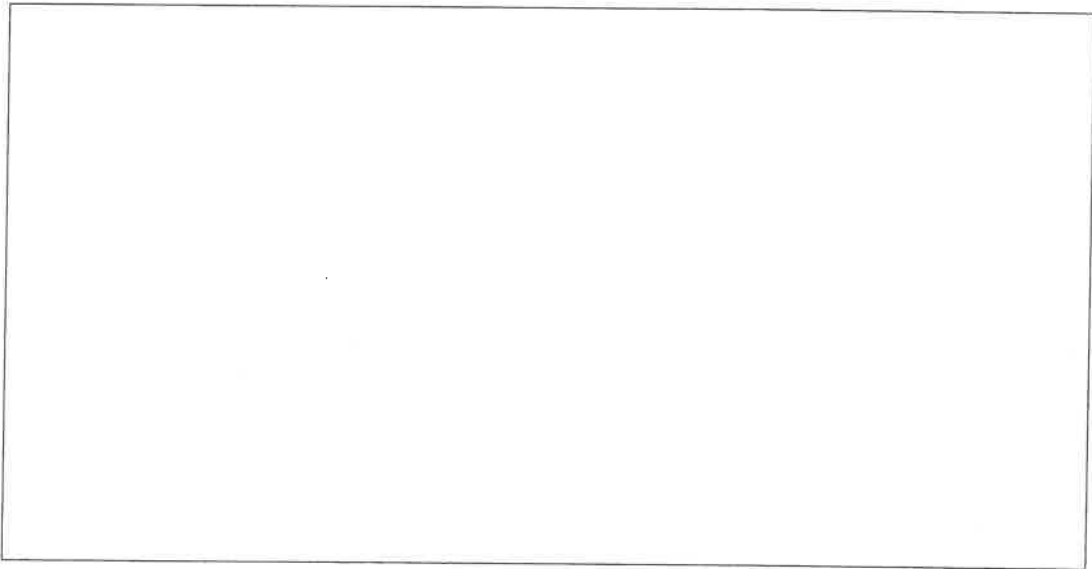
Reviewed by: _____ Date _____

VSMP Permit Required: (Yes) (No)

SITE PLAN / GRADING SKETCH

Include any:

- **Live water courses and drainage areas**
- **Cut and Fill Operations**
- **Locations of erosion and sediment control measures**
- **General topography**



Craig County Building Department

PO BOX 308

108 Court Street • New Castle, VA 24127

540-864-5010 • Fax 540-864-5590

Plan Requirements for One and Two Family Dwellings

FOOTING:

1) *Sketch of layout showing:*

- a. Grade level doors if present
- b. Location and dimension of all thickened slabs, piers, etc.
- c. Location and size of lintels (if used)

2) *Typical Section of Displaying*

- a. Depth (18 inch minimum)
- b. Reinforcement
- c. Thickness

FOUNDATION:

1) *Sketch of layout showing:*

- a. Unbalanced fill height
- b. Size of masonry units used (specify if to be filled) or thickness of wall and compressive strength of concrete if a poured wall is to be used
- c. Size and spacing of reinforcement (if used)
- d. Location of anchor bolts
- e. Location and dimension of all openings
- f. If crawl space list number, size and location of vents
- g. Method of waterproofing

FRAMING:

1) *Plan view for each floor and roof detailing all members, beams, columns (size, span, length, spacing, grade and species of lumber)*

NOTE: as alternative to plan views a commentary may be submitted

NOTE: if engineered materials are used (trusses, tji's, lvs, etc.) spec sheets must be provided for framing inspection.

FLOOR PLANS:

1) *Floor plans for each level showing:*

- a. All rooms labeled with intended use (areas intended for future use labeled)
- b. Location of smoke detectors
- c. Location of electric service and all sub panels
- d. Location of HVAC equipment
- e. Location of water heater
- f. Sizes of all egress components
- g. Kitchen layout

MATERIAL SPECIFICATIONS:

1) *Size of Electric Service and Sub Panels*

2) *Size and Type of HVAC equipment*

3) *R-Value of insulation to be used (floor, wall, ceiling)*

4) *Type of Siding and Roofing*

**CRAIG COUNTY BUILDING DEPARTMENT
PLANS REVIEW FOR SINGLE FAMILY RESIDENCE**

ALL APPLICANTS FOR SINGLE FAMILY DWELLINGS MUST SUBMIT ONE SET OF DRAWINGS FOR REVIEW PRIOR TO ISSUANCE OF A BUILDING PERMIT. PLEASE ANSWER "YES OR NO" TO THE FOLLOWING QUESTIONS. ANY QUESTIONS ANSWERED "NO" NEEDS TO BE REVIEWED WITH THIS DEPARTMENT PRIOR TO THE ISSUANCE OF ANY PERMITS.

		Yes	No
1.	Dimensions of buildings and distance to property line on site plan.		
2.	Wall section showing from the footings to the roof ridge line that supplies the following information.		
	A. Size of footings showing 24" frost line depth.		
	B. Trusses or rafters and joist with sizing and spans.		
	C. Wall framing. Show all braced wall requirements.		
	D. Roof framing and coverings.		
	E. Insulation for floors, walls and roof.		
3.	Floor plan that shows dimensions of rooms, whether finished or unfinished and the proposed use of the room.		
4.	Windows, size and safety glazing, if required.		
5.	Show all openings with header size or engineered member.		
6.	Stairways showing risers, treads, guards and rails.		
7.	Access and size of openings to attics and crawl spaces.		
8.	Ventilation in crawl spaces and attics.		
9.	If there is a garage attached to or within 6 feet of residence, show fire ratings for walls, ceilings and structural members if required.		
10.	Location of meter, electrical panels and disconnects.		
11.	Location of smoke detectors, GFCI and arc fault protected outlets.		
12.	Type of HVAC systems and locations.		
13.	Exhaust systems for kitchen and bathrooms.		
14.	Location and type of any supplemental heating or cooling systems.		
15.	Furnish size and type of material to be used for water and DWV lines.		
16.	Show treated lumber where required.		
17.	Show wall bracing where required.		

Property Owner: _____

Signature of Owner _____ Date _____