

101 COURT CIRCLE · P.O. BOX 1000
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CLAYTON S. WOOLARD
Building Official

T. RICHARD ENGLISH
Environmental Compliance Agent

HOPE D. MOTHERSHEAD
Director of Planning and Zoning

Building Permit Application General Information Sheet

Property Owner's Name: _____

Mailing Address: _____

Phone Number: (____) _____ Email Address: _____

Project Location: _____

Project Description: _____

Square Footage (If Applicable): _____

Estimated Construction Costs:

Building: \$ _____	Electrical: \$ _____
Plumbing: \$ _____	Mechanical: \$ _____
Gas: \$ _____	Sprinkler: \$ _____
Other: \$ _____	

Power Company (if applicable) _____ Dominion _____ Northern Neck Electric Cooperative

Contractor Name: _____

Mailing Address: _____

Phone Number: (____) _____ Email Address: _____

Contractor License Number: _____

Mechanics Lien Agent Name: _____

Mailing Address: _____

Phone Number: (____) _____