

TRADE PERMIT APPLICATION

Permit # _____

Washington County Building & Development Services



1 Government Center Place, Suite A
Abingdon, VA 24210

Phone: 276-525-1340 Fax: 276-525-1309
www.buildhelp@washcova.com

TYPE OF WORK

- Electrical Plumbing
 Mechanical Fire Safety Renewal

CATEGORY OF CONSTRUCTION

- Residential Commercial

WORK DESCRIPTION

JOB SITE INFORMATION

Job Address: _____

City/State/Zip: _____, _____, _____

Tax Map/Parcel # _____

General Contractor: _____

Project Name: _____

PROPERTY OWNER

Name: _____

Mailing Address: _____

City/State/Zip: _____, _____, _____

Phone #: (____) _____

APPLICANT (Check if) Owner **Contractor** **Renter**

Applicant Name: _____

Phone: _____ Cell: _____

Email: _____

Applicant Signature: _____

Date: _____

ELECTRICAL PERMIT

Additional Wiring: Temporary Pole:
 Repair Service: New Service:
 Service Change: Replace/Repair Equip:
 Amps: _____ Work Order # _____
 AEP BVU BTES
 Overhead Underground

Contractor Name: _____

State License #: _____

Estimated Cost of Construction \$ _____

MECHANICAL PERMIT

	New	Replace	Repair
HVAC Equipment			
Gas Logs			
Commercial Hood			

Contractor Name: _____

State License #: _____

Estimated Cost of Construction \$ _____

FUEL GAS PERMIT

	New	Replace	Replace
Fuel/Gas			

Contractor Name: _____

State License #: _____

Estimated Cost of Construction \$ _____

PLUMBING PERMIT

	New	Replace	Repair
Waterline			
Sewer Line			

Contractor Name: _____

State License #: _____

Estimated Cost: _____

FIRE SAFETY PERMIT

	New	Replace	Repair
Fire Alarm			
Hood Suppression			
Fire Sprinkler			

Contractor Name: _____

State License #: _____

Estimated Cost of Construction \$ _____

I hereby certify that I am the owner of the record 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 hat 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).

FOR COUNTY USE ONLY

DATE APPLICATION RECEIVED: _____ RECEIVED BY: _____
 BUILDING PERMIT FEE \$ _____ ZONING COMPLIANCE FEE \$ _____ TOTAL FEE AMOUNT \$ _____
 PARCEL ZONING: _____ FH DISTRICT: YES- NO- AIR SAFETY DISTRICT: YES- NO- MAG. DISTRICT: _____