



Department of Development Services
 Building Safety Division
 300 Park Avenue, Suite 300W, Falls Church, VA 22046
 Phone: 703-248-5080 (TTY 711) Fax: 703-248-5214

BUILDING PERMIT APPLICATION

PERMIT No. _____

ADDRESS OF BUILDING

Street Address _____ Unit # _____ Falls Church, VA Zip Code _____

APPLICANT: CONTRACTOR OWNER

BUILDING OWNER INFORMATION

Name _____		Phone <input type="checkbox"/> H <input type="checkbox"/> O <input type="checkbox"/> C _____		Name _____		Phone <input type="checkbox"/> H <input type="checkbox"/> O <input type="checkbox"/> C _____	
Address _____				Address _____			
City _____		State _____	Zip Code _____	City _____		State _____	Zip Code _____

VA State Contractor's License Number _____ Class A B C Expiration Date _____

TENANT/LESSEE INFORMATION NONE

Falls Church Customer Number (if known): _____

Mechanic's Lien Agent: None Designated Designated on MLA Addendum

Total Job Cost _____ Cost for Building Only (exclude trades) _____

Name _____		Phone <input type="checkbox"/> H <input type="checkbox"/> O <input type="checkbox"/> C _____	
Address _____			
City _____		State _____	Zip Code _____

ARCHITECT ENGINEER PLAN PREPARER INFORMATION

Name _____		Phone <input type="checkbox"/> H <input type="checkbox"/> O <input type="checkbox"/> C _____		License # _____		
Address _____				City _____	State _____	Zip Code _____

TYPE OF WORK

USE AND OCCUPANCY CLASSIFICATION

- Exterior Work:**
 Demolition (check no other box)
 New Primary Building
New Accessory Building:
 Detached Garage Shed
 Other _____
 Addition (incl. attached garage)
 Pool
 Deck/Porch (Plat Required)
 Fence (Plat Required)
 Sump Pump (Plat Required)
 Sign
 Foundation Only
 Crane or Hoist
 Temporary Trailer
 Temporary Stand
- Interior Work:**
Remodel Finished Space:
 Kitchen Bath
 Other Existing Space
Finish Unfinished Space:
 Basement Attic
 Garage Other
Add:
 Full Bath Half Bath
 Bedroom Fireplace
 Kitchen Other
Elevator:
 Install Repair
- Check All That Apply
Give Details Below*

- | | |
|---|---|
| <input type="checkbox"/> A-1 Theater | <input type="checkbox"/> I-1 Institutional, Residence Care, Halfway House |
| <input type="checkbox"/> A-2 Restaurant, Nightclub | <input type="checkbox"/> I-2 Institutional, Hospital |
| <input type="checkbox"/> A-3 Church, Museum, Gym, Lecture Hall, Library | <input type="checkbox"/> I-3 Institutional, Jail |
| <input type="checkbox"/> A-4 Indoor Arena, Pool | <input type="checkbox"/> I-4 Institutional, Child Care |
| <input type="checkbox"/> A-5 Outdoor Viewing, Bleacher Stadium | <input type="checkbox"/> M Mercantile |
| <input type="checkbox"/> B Business | <input type="checkbox"/> R-1 Hotel, Boarding House |
| <input type="checkbox"/> E Educational, Day Care | <input type="checkbox"/> R-2 Apartments, Condos |
| <input type="checkbox"/> F-1 Factory Industrial, Moderate Hazard | <input type="checkbox"/> R-3 1 & 2 Family (Comm. Code/IBC) |
| <input type="checkbox"/> F-2 Factory Industrial, Low Hazard | <input type="checkbox"/> R-4 Residential Care, Assisted Living |
| <input type="checkbox"/> H-1 Hazardous, Explosives | <input type="checkbox"/> R-5 1 & 2 Family (Resid. Code/IRC) |
| <input type="checkbox"/> H-2 Hazardous, Flammable | <input type="checkbox"/> S-1 Storage, Moderate Hazard |
| <input type="checkbox"/> H-3 Hazardous, Combustible | <input type="checkbox"/> S-2 Storage, Low Hazard |
| <input type="checkbox"/> H-4 Hazardous, Health Hazard | |

SCOPE AND DESCRIPTION OF WORK

If any work will take place outside the building, you must submit the addendum form, Permit for Exterior Work

TYPE OF CONSTRUCTION

FIRE SUPPRESSION

DIMENSIONS

<input type="checkbox"/> 1A <input type="checkbox"/> 1B Non-Combustible Protected <input type="checkbox"/> 2A <input type="checkbox"/> 2B Non-Combustible Unprotected <input type="checkbox"/> 3A <input type="checkbox"/> 3B Combustible/Non-Combustible <input type="checkbox"/> 4 Heavy Timber <input type="checkbox"/> 5A <input type="checkbox"/> 5B Combustible	Will/Does This Building Have A Sprinkler System? <input type="checkbox"/> Yes <input type="checkbox"/> No Will/Does This Building Have A Fire Alarm? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Area Of Work (ft ²): _____ Is There A Basement? <input type="checkbox"/> Yes <input type="checkbox"/> No # Of Stories (excl. basement): _____
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