

# COMMERCIAL CHANGES

## County of Stafford

Department of Public Works  
PO Box 339  
1300 Courthouse Rd.  
Stafford, Virginia  
22555-0339  
(540) 658-8650  
www.co.stafford.va.us



RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

R/E TAXES CURRENT: \_\_\_\_\_

A/P: \_\_\_\_\_

PARENT #: \_\_\_\_\_

### JOB LOCATION

STREET ADDRESS: \_\_\_\_\_

TAX MAP #: \_\_\_\_\_ SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_

SUBDIVISION/DEVELOPMENT: \_\_\_\_\_

### CURRENT OWNER INFORMATION

NAME: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### BUILDING CONTRACTOR INFORMATION

CONTRACTOR/ COMPANY: \_\_\_\_\_ OR ATTACH OWNER AFFIDAVIT

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRINT NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

VIRGINIA CONTRACTORS LICENSE #: \_\_\_\_\_

LICENSE CLASS: \_\_\_\_\_ LICENSE DESIGNATION: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.

### TENANT INFORMATION

N/A  SAME AS OWNER

NAME: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### APPLICANT INFORMATION

SAME AS CONTRACTOR  SAME AS OWNER

NAME: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**TOTAL VALUATION**DECLARED PROJECT VALUE \$ \_\_\_\_\_  
(Total contract value)CALCULATED PROJECT VALUE \$ \_\_\_\_\_  
(Per ICC)**DESCRIPTION OF WORK****USBC EDITION:** \_\_\_\_\_

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**PROJECT INFORMATION**

SELECT APPROPRIATE FIELD OR ENTER QUANTITY WHERE REQUIRED

_____ ADDITION	_____ OP ONLY
_____ AIR STRUCTURE	_____ PORCH
_____ ALTERATIONS	_____ RAMP
_____ # ANTENNAS	_____ ROOF (SHINGLES ONLY)
_____ BUILD OUT	_____ ROOF (STRUCTURE)
_____ CANOPY	_____ SHED
_____ DECK	_____ SHELTER/PAVILION
_____ DOCK	_____ SYSTEMS FURN/SHELVING
_____ FAÇADE	_____ TEMP BUSINESS FACILITY
_____ FOUNDATION ONLY	_____ TOWER HEIGHT: _____
_____ GARAGE/CARPORT	_____ WHITE BOX
_____ MEZZANINE	_____ _____

**SQUARE FOOTAGE OF INVOLVED AREA**
Basement: \_\_\_\_\_  
1st Floor: \_\_\_\_\_  
2nd Floor: \_\_\_\_\_  
3rd Floor: \_\_\_\_\_  
4th Floor: \_\_\_\_\_  
Garage/Carport: \_\_\_\_\_  
Decks/Porches: \_\_\_\_\_  
Stoops: \_\_\_\_\_  
Other: \_\_\_\_\_  
**Total:** \_\_\_\_\_
**TIF INFORMATION**

# of ROOMS (Hotel, Motel, Rest Home, Cabins)	_____
# of STUDENTS (Private School or Daycare Center)	_____
# of HANGERS (Airports)	_____
# of HOLES (Golf Course)	_____

**TIME LIMITATION OF APPLICATION****Virginia Uniform Statewide Building Code 108.8**

An application for a permit for any proposed work shall be deemed to have been abandoned six months after the date of filing unless such application has been pursued in good faith or a permit has been issued, except that the building official is authorized to grant one or more extensions of time if a justifiable cause is demonstrated.

APPLICANT INITIALS: \_\_\_\_\_

**APPLICANT AGREEMENT**

All information on this form is part of the application and must be complied with. I hereby certify that I have authority to make this application, that the information is complete and correct and that the work performed and equipment installed will conform to the Virginia Uniform Statewide Building Code and other applicable laws and regulations which relate to the property.

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ISSUANCE OF PLANS OR APPROVED DOCUMENTS (COMPLETE AT PERMIT ISSUANCE)**

I have received county approved plans or documents.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICE USE ONLY**