

**PERMIT APPLICATION**

Permit Application Center  
12055 Government Center Parkway  
Suite 230  
Fairfax, Virginia 22035-5504  
**703-222-0801, TTY 711**  
*www.fairfaxcounty.gov/buildingpermits*



county use only

Parent

Building # \_\_\_\_\_   
Mechanical # \_\_\_\_\_   
Electrical # \_\_\_\_\_   
Plumbing # \_\_\_\_\_   
Appliance # \_\_\_\_\_

Tax Map # \_\_\_\_\_ Parent # \_\_\_\_\_ Plan # \_\_\_\_\_

**Job Location**

Street Address \_\_\_\_\_  
Lot Number \_\_\_\_\_ Building \_\_\_\_\_ Floor \_\_\_\_\_ Suite \_\_\_\_\_  
Tenant's Name \_\_\_\_\_ Subdivision \_\_\_\_\_

**Owner Information**

Name \_\_\_\_\_  Owner  Tenant  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Contractor Information**

Company Name \_\_\_\_\_  Same as Owner  
Address \_\_\_\_\_ Contractor ID # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
State Contractor's License # \_\_\_\_\_ County BPOL # \_\_\_\_\_

**Applicant Information**

Name \_\_\_\_\_ Contact ID # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Designated Mechanics Lien Agent (residential only)**

Name \_\_\_\_\_  None Designated  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Description of Work**

Estimated Cost \$ \_\_\_\_\_ House Type \_\_\_\_\_ Masterfile Number \_\_\_\_\_

I hereby certify that I have authority to make this application, that the information is complete and correct, and that the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations which relate to the property.

Signature of Owner, Master or Agent \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

**COUNTY USE ONLY**

Licensing \_\_\_\_\_ Health \_\_\_\_\_ Wastewater \_\_\_\_\_  
Zoning \_\_\_\_\_ Site \_\_\_\_\_ Building \_\_\_\_\_

**Approved for issuance by \_\_\_\_\_ Date \_\_\_\_\_ Fee \$ \_\_\_\_\_**