

COUNTY OF LEE
DEPARTMENT OF BUILDING INSPECTION
APPLICATION TO BUILD, ALTER, OR REMOVE

OWNER'S NAME _____
MAILING ADDRESS _____
PHYSICAL ADDRESS _____
CITY _____ STATE _____
ZIP _____ PHONE _____

NEW _____ ADDITION _____ REMODEL _____ DEMOLISH _____
CHANGE OF USE _____ MOVE STRUCTURE _____ OTHER _____

BUILDING SPECIFICATIONS:

USE OF BUILDING _____ AREA (SQ. FT) _____
DIMENSIONS OF BUILDING: WIDTH: _____ LENGTH: _____
BASEMENT: _____ FINISHED _____ UNFINISHED _____ CARPORT/GARAGE _____
NUMBER OF FLOORS: _____ ESTIMATED VALUE OF WORK \$ _____

<u>ELECTRIC</u>	<u>PLUMBING</u>	<u>MECHANICAL</u>	
SERVICE SIZE _____	#OF BATHS _____	# FURNACE _____	
IF ADDITION WILL ELECT BE INCREASED? _____	#OF FIXTURES _____	# HEATPUMP _____	
WATER AVAILABLE _____	WATER HEATER _____	FIREPLACE _____	
# _____	SEWER AVAILABLE _____	OTHER _____	HEALTH DEPT. ID
	# OF BEDROOMS _____		
TAX MAP REFERENCE # _____			

Building Contractor _____ License # _____
Address _____ Class A () Class B () Class C ()
Phone # _____

Electrical Contractor _____ License # _____
Address _____ Phone # _____

Plumbing Contractor _____ License # _____
Address _____ Phone # _____

Heat Pump Contractor _____ License # _____
Address _____ Phone # _____

Project Location: _____

Was Lot Sold From a Large Tract? _____
If Yes, Who Purchased From: _____
Is Applicant Developing a Subdivision? _____
Is Building Located in a Subdivision? _____
Is Applicant Engaged in Land Disturbing Activity Of More Than 10,000 SQ FT? _____
Is Building Located in Within a Flood Hazard Area? _____

An Affirmative Answer To Any Of The Above May Require The Applicant To Building In Accordance With The Ordinances Of The Lee County Governing The Special Circumstances. Application For Certain Types Of Buildings Are Required By State Law To Be Accompanied By Blueprints Bearing The Seal Of Virginia Registered Architect Or Engineer. Please Inquire With This Department Before Submitting An Application, As Failure To Submit The Required Documents Will Result In Rejection Of This Application.

APPLICANT'S SIGNATURE _____ DATE _____