



LOCATION OF WORK	ADDRESS:	
PROPERTY OWNER INFORMATION	NAME:	
	ADDRESS:	
	CITY/STATE/ZIP:	
	PHONE NUMBER:	

<b>TYPE OF BUILDING</b>	<b>PROPOSED USE</b>	<b>COMMERCIAL</b>	<b>PLANNING &amp; ZONING</b>
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ADDITION <input type="checkbox"/> REMODEL <input type="checkbox"/> REPAIR <input type="checkbox"/> FOUNDATION <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> PLUMBING <input type="checkbox"/> OCCUPIED ADDITION	<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> ONE FAMILY <input type="checkbox"/> TWO OR MORE FAMILY <input type="checkbox"/> HOTEL/MOTEL/DORMITORY <input type="checkbox"/> OTHER	<input type="checkbox"/> ASSEMBLY <input type="checkbox"/> BUSINESS <input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> FACTORY/INDUSTRIAL <input type="checkbox"/> STORAGE <input type="checkbox"/> UTILITY	<input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> ADDITION <input type="checkbox"/> FENCE <input type="checkbox"/> CARPORT <input type="checkbox"/> PARKING <input type="checkbox"/> SIGNS <input type="checkbox"/> MULTIFAMILY RENTAL

			<b>DESCRIPTION OF WORK BEING DONE:</b>
COST OF IMPROVEMENTS	BUILDING	\$	
	ELECTRICAL	\$	
	PLUMBING	\$	
	MECHANICAL/HVAC	\$	
	OTHER	\$	
	TOTAL COST	\$	

<input type="checkbox"/> Check HERE if Property Owner is performing the work			CONTRACTOR NAME & PHONE #
CONTRACTORS INFORMATION	GENERAL CONTRACTOR	CITY LICENSE # STATE LICENSE #	
	ELECTRICAL	JOURNEYMAN # MASTER #	
	MECHANICAL/HVAC	HVAC TECH #	
	PLUMBING	JOURNEYMAN # MASTER #	
	OTHER		

**ALL APPLICANTS**

**ASBESTOS/LEAD ABATEMENT AND REMOVAL-** As owner or Authorized Agent of the owner, I understand that the State of West Virginia has laws regulating the inspection and abatement of asbestos and lead containing materials, and that I am responsible for the abatement of such material prior to remodeling, demolition, or the removal of roofing materials as per State law.

**ELECTRICAL PERMIT STATEMENT-** As Owner or Authorized Agent of the owner, I understand that Allegheny Power has rules and regulations governing meter and service drop attachment locations, and that I will meet with any Allegheny Power Representative for those locations prior to an inspection from the City of Westover if applicable.

**POOL/SPA/HOT TUB STATEMENT-** As owner or Authorized Agent of the owner, I understand receipt of the ICC (International Code Council) Code requirements (also part of the WV State Building Code), for the general installation of swimming pools, spas and hot tubs, and I agree to install, construct, alter, after, or modify said swimming pool/spa/hot tub, in accordance with said Code.

I hereby certify that the work is authorized by the owner of record, and that I have been authorized by the owner to make this application as his/her authorized agent, and we agree to conform to all applicable laws of this jurisdiction.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved By

\_\_\_\_\_  
Date

\_\_\_\_\_  
Planning Dept.

\_\_\_\_\_  
Date

**Please provide any plans or drawings that will be helpful in approving this building permit.**

**Before digging or otherwise disturbing the earth, call 1-800-245-4848 to notify any buried facility owners, a free service. "It's the law in West Virginia."**