

Building, Planning & Zoning
P.O. BOX 216
WARM SPRINGS, VIRGINIA
24484



65 Courthouse Hill Road
Phone: 540-839-7236
Fax: 540.839.7222

APPLICATION FOR DEMO

Tax Map # _____
Permit # _____

Fee \$ 25.00
"Made out to "Bath County Treasurer"

Please contact the building office with any questions concerning this application. Approval of this application is based upon information submitted by the applicant and the following checklist is a useful tool.

CHECK LIST (for office use)

____ Taxes Current (Yes or No) ____ Contractor's License Checked
____ Zoning ____ Affidavits Signed ____ Tradesman's License Checked

Date: _____

Owner: _____ Phone#: _____

Mailing Address: _____

*DEMO – PROPERTY ADDRESS: _____

*WHAT ARE YOU DEMOING? _____

Directions to Property, if no address (from the Courthouse in Warm Springs):

Property District: _____

Contractor (if applicable):

____ Contractor's State License

#: _____ Class: _____

Phone #: _____ Expiration Date: _____

Tradesman's License: _____ Expiration Date: _____

Contractor's Address:

*Signature of Owner, Contractor, or Agent doing work:

____ Estimated Cost: _____

**DEMOLITION PERMIT
AFFIDAVIT**

I hereby certify that I am the owner of record of the named property, **or** that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his agent and I agree to conform to all applicable laws of this jurisdiction.

Applicant Signature: _____

Applicant Print Name: _____

Parcel of land is located at: _____ &
I have applied for a permit at the Building, Planning, and Zoning Office, the Bath County Courthouse, Warm Springs, Virginia.

I affirm that the following actions have been completed.

- 1- The owner or the owner's agent has obtained a release from all utilities having service connections to the building or structure stating that all service connections and appurtenant equipment have been removed or sealed and plugged in a safe manner.

Power Company (if applicable) Have they been notified? _____

Utility Company: (if applicable) Water Sewage Have they been notified? _____

Gas / Oil Tanks (if applicable) **Tanks - Above Ground or Below Ground?** _____

DEQ - Have they been notified? _____ Please supply us with a copy of soil report.

- 2- Yes ____ No ____ The owner or owner's agent has given written notice to the owners of adjoining lots and to the owners of other lots **(IF)** affected by the temporary removal of utility wires or other facilities caused by demolition.

The County of Bath requires this application to be notarized.

Office personnel:

Signature of and acknowledged by: _____

In the County/City of _____, state of _____ on

the _____ day of _____, 20____,

In the presence of _____.

DEMO PERMIT APPLICATION

Detailed Job description on work to be done:

ASBESTOS AFFIDAVIT
Contractor's Use,
Commercial Building, and
Demo.

NAME OF OWNER (or AGENT) _____

ADDRESS: _____

SITE LOCATION: _____

I certify that the affected portions of the building have been inspected for the presence of asbestos by an individual licensed to perform such inspections pursuant to § 54.1-503 of the Code of Virginia and that no asbestos-containing materials were found or that appropriate response actions will be undertaken in accordance with the requirements of the Clean Air Act National Emission Standard for the Hazardous Air Pollutant (NESHAPS; 40 CFR Part 61, Subpart M), and the asbestos worker protection requirements established by the U. S. Occupational Safety and Health Administration for construction workers (29 CFR 1926.1101).

Visit the Department of Labor for information on asbestos at: http://www.doli.virginia.gov/leadasbestos/leadasbestos_intro.html

Owner or Agent Signature

Date

COUNTY OF BATH, VIRGINIA
SOLID WASTE AFFIDAVIT

I, _____, affirm that I am the owner and/or authorized representative of the owner of a certain tract or parcel of land located at:

_____ having Tax Map Parcel Number: _____ and that I have obtained Building Permit # _____.

I hereby acknowledge and agree that I am fully and entirely responsible for ensuring that all new construction, renovation, remodeling, repairs, etc., and demolition debris is disposed of properly (i.e., recycled where possible and reused) and not allowed to be disposed at the Bath County solid waste receiving sites in the dumpsters and roll-offs or left on the surrounding property. I understand that there will not be a charge for the construction debris at a site designated by the Board of Supervisors if I show the building permit obtained for new construction, renovation, remodeling, repairs, etc., project. There will be a charge for the demolition debris at the rate set forth by the Board of Supervisors and said fee (price per ton) shall be noted on the demolition permit, at the site(s) designated by the Board of Supervisors, which is separate and apart from the charge for the demolition permit.

Signature

Date

Notary:

State of _____

County/City of _____, to-wit:

I, _____, do hereby certify that the foregoing was sworn to and subscribed before me by _____ this _____ day of _____, 20____.

My commission expires: _____

Notary Public



Bath County, Virginia

Zoning Permit Application

65 Courthouse Hill Road
P. O. Box 216
Warm Springs, VA 24484-24484
(540) 839-7236 or toll free (888) 823-1710
Fax: (540) 839-7222

Not all of the items listed below are required. But if known, please supply the information. Additional information may be required to complete your application. Application must be signed and dated. Attach a copy of the Plat or Survey OR draw a sketch on the reverse side. The plat can be obtained in the Clerk's office at the Courthouse.

Applicant Name: _____

Owner Name: _____

Property Address: _____

Proposed Construction/Use (example: Residence; storage, e.g.) _____

Will this serve as a primary residence? Yes _____ or No _____

ZONING USE ONLY

Permit# _____

Tax Map# _____

Acres		Public Sewer Approved	Yes, No or not needed	Principal Structure	Accessory Structure
Zoning District				Front _____	Principal Bldg _____
Building Height		Public Water Approved	Yes, No, or not needed	Sides _____	Sides _____
100 Year Flood Zone	Yes or No			Rear _____	Rear _____
Interior Alterations	Yes or NA	Health Department Permit	Yes, No, or not needed	Frontage _____	
Multiple Lots	Yes or No	Setbacks are to the edge of or from right of way line if right of way exceeds setback line. (i.e., if 50' ROW exists then setback would be 50' not 35') property line to the closest/perpendicular point of structure. This will include covered porches, but excludes decks, steps, and uncovered porches or patios. Setbacks shown on plat must be the same as those shown on the building permit application. If there is a discrepancy, the permit could be delayed.			
Approved _____					
Disapproved _____					

ZONING ADMINISTRATOR/DATE

ZONING ADMINISTRATOR COMMENTS:

I (we), the undersigned, do hereby certify that the information contained herein is correct and true. Applicant's signature hereto signifies their review and understanding of the zoning permit. I (we) further understand that in granting approval of this application, the Zoning Administrator may require that I (we) comply with certain conditions and that such approval shall not be considered valid until these conditions are met.

Applicant Signature: _____ Date: _____