Southampton County VA. Residential Permit Application

24283 Cheroenhaka Rd. Courtland VA. 23837 (757)742-6777

Permits requested: Building ____ Electrical ____ Plumbing ____ Mechanical _____
Gas ____ Demolition ____ Garage _____ Pool ____ Shed over 256 sq ft ____ Carport _____

Structures & related work is: New ____ Existing ____ Addition ____ Manufactured Home ____
Modular Home ____ Renovation ____ Repairs ____ Accessory Structure _____

Contractor: DPOR License# _____Class ____ Email_____
Contractors Name _____ Phone _____
Adress:_____

Property owner: Name _____Phone _____
Address _____Email _____

Lien Agent: Name _____Phone _____
Address _____Email _____

Address of proposed work: _____
Tax map#: _____ Zone: _____ Town of: _____ (special zoning within town limits)

Description of proposed work:_____
_____
_____
_____
_____Sq. Ft. _____ # Bedrooms ____ # Bathrooms ____

Sewage: New septic _____ Existing septic _____ Town _____ Water: Well _____ Town _____

*Site plans: Required for any new structures or work outside of the existing building's footprint. Recorded plat with commissioner's stamp is required for new subdivisions.

*VDOT Entrance Permit or waiver: Required for all new dwelling units.

*Soil Report: For All new dwelling units & additions over 40% of the existing dwelling unit.

*Building Plans: This application shall be accompanied by the construction documents from the list on page two.

Total cost of proposed work including materials & labor: _____

Applicants Signature _____ Print _____ Date_____

Residential Plan Submittal Guidelines
Southampton County Community Development

24283 Cheroenhaka Road Courtland VA. 23837 (757) 742-6777

The following items must be included with all residential permit Applications and additions at the time of submittal.
Check all that apply.

Address: _____

The application will not be reviewed if all items have not been included:

Electronic permit documents are preferred. Will accept hard copy at office or by mail.

Included	N/A	
○	○	Completed Permit application with all required information including contractor, owner, a clear and concise description of work, project cost to (include all trades) for the building permit value. Contractor & Southampton County Business License
○	○	Name, address, and occupation of the plan preparer on the top sheet of both copies of each plan submitted, if other than a Registered Design Professional.
○	○	If permit is to be obtained by the owner, a signed license exemption affidavit is required.
○	○	Complete all of the following E&S form: Agreement in Lieu of an Erosion and Sediment Control Plan
○	○	Completed Zoning Application & submit a site plan showing home or addition, existing structures and dimensions from lot lines, shrink swell soils report for new homes & additions over 40% showing boring location and copies of all plan documents If on well and septic, provide a copy of the Health Department Report. If located in a Special Flood Hazard Area provide a licensed surveyor's Flood Elevation Certificate.

The Required Construction Plans and Documents shall include the following:
*Check all that apply or check N/A if not applicable.

○	◉	All sheets numbered and drawn to a minimum ¼ "= 1' scale.
○	○	Full house cross section showing load path and at critical construction.
○	○	Elevation drawings. Details such as roof pitch, floor elevations above grade, and finish materials shall be clearly noted.
○	○	A footing & foundation plan showing all dimensions. The details or notes must reflect requirements of the submitted soil report where applicable as well as code requirements.
○	○	Engineered foundations are required when it has been determined that moderate or high shrink swell soils exist.
○	○	Show all floor and room dimensions. Label all rooms.
○	○	Detailed wall or building sections showing all structural elements, conformity to the VRC (including Chapter 11 energy code requirements) or evidence supplied to verify proposed alternate construction. Typical exterior wall sections shall clearly show crawl, attic, and

vaulted ceiling ventilation and roof tie-downs as required by the code.

- ○ ○ Provide Roof plans. Specify and show all members such as rafters, hips, valleys, post supports, braces, purlins, knee walls and structural ridge beams at cathedral ceilings and hurricane uplift connectors.
- ○ ○ Provide floor, LVL, and roof truss plans from the manufacturers/supplier if applicable. Cut sheets for each truss and engineered beam must be included – copies engineer calculations sheets for all LVLs and steel beams.
- ○ ○ Provide venting calculations for crawl space and attic spaces.
- ○ ○ Ceiling heights shall be noted on the wall section or the elevations.
- ○ ○ All framing members including deck members, such as joists, double joists, beams, headers, girders, posts and columns, are to be labeled as to material, grade, location, direction, size and span on floor and foundation plans.
- ○ ○ All load paths shall be clearly shown from the roof to the foundation. Structural elements such as bearing walls, concentrated loads. Structural elements exceeding the limits of the Code R301 or otherwise not conforming to R301 will need a structural analysis from a Professional Engineer or Registered Architect. Alternate materials and systems from those prescribed in the VRC must be shown to be equivalent in accordance with Section R301.1.3 and VRC 112.2.
- ○ ○ Wall bracing must be clearly indicated as to method, length of panels, and location.
- ○ ○ Provide copy of wall bracing analysis worksheet.
- ○ ○ Show stem wall, portal frame and stair details on plans.
- ○ ○ Roof tie down design in accordance with R802.11.1 and connector chart with nail count if needed.
- ○ ○ Window and door sizes are to be labeled on plan or schedule provided.
- ○ ○ Type of fireplace, dimensions and non-combustible hearth materials shall be clearly noted.
- ○ ○ Masonry veneers and chimneys supported by wood frame construction require a design sealed by a Professional Engineer or Registered Architect.
- ○ ○ All elevation and plan options, and details <u>not</u> pertaining to actual proposed construction shall be clearly marked out.
- ○ ○ Specify if building deck to: “2015 Deck Guide with affidivt” or submit plans

Applicant Signature: _____ Date: _____

Contact information: email _____ Phone# _____

ResPlanSubGL.doc

Southampton County

DEPARTMENT OF COMMUNITY DEVELOPMENT

ZONING CLEARANCE APPLICATION

Payment Method Check/Cash _____ Credit Card

_____ FEE:__ $40.00____ DATE: _____

APPLICANT NAME: _____

ADDRESS: _____

PHONE (HOME): _____ (BUSINESS):_____

EMAIL ADDRESS: _____

PROPERTY ADDRESS: _____ ZONED: _____

CURRENT/PRIOR USE: _____

OWNER (If other than applicant) : _____PHONE:_____

OWNER ADDRESS: _____

NEW BUSINESS NAME IF APPLICABLE: _____

DESCRIBE PROPOSED USE: (also attach narrative) _____

HEALTH DEPARTMENT APPROVAL NEEDED: YES: ☐ NO ☐

SITE PLAN REQUIRED: YES: ☐ NO: ☐

FLOOR PLAN LAYOUT: YES: ☐ NO: ☐

IS PROPERTY LOCATED IN THE SPECIAL FLOOD HAZARD AREA? (100 year flood plain) YES: ☐ NO: ☐

THE APPLICANT/OWNER IS RESPONSIBLE FOR OBTAINING ALL APPLICABLE STATE AND/OR FEDERAL PERMITS REGULATING THE USE OF THE PROPERTY. IT IS UNDERSTOOD THAT NO CHANGE IN USE SHALL BE MADE WITHOUT THE APPROVAL OF THE ZONING ADMINISTRATOR.

SIGNED: _____DATE_____
APPLICANT

OFFICE USE ONLY

APPROVED: ☐ CONDITIONAL APPROVAL: ☐ DENIED: ☐ REASON FOR DENIAL: _____

_____

CONDITIONS: _____

_____

SIGNED: _____DATE:_____
ZONING OFFICER

SOUTHAMPTON COUNTY
DEPARTMENT OF COMMUNITY DEVELOPMENT
24283 CHEROENHAKA ROAD, COURTLAND, VA 23837 757-742-6777

Southampton County Health Department Application for Site Improvements

OWNER _____ PHONE NUMBER _____

AGENT _____ PHONE NUMBER _____

MAILING ADDRESS_____

LOCATION OF PROPERTY _____

TAX MAP_____ BLK/SECT. _____ LOT _____

If Residential, Current # Bedrooms: _____ Proposed # Bedrooms _____
If Non-residential, Current Use: _____

PROPOSED Use or Site Improvements _____

_____

_____

The property boundaries and building locations are clearly marked or identified at the property. I give permission to the Virginia Department of Health to enter the property described, if necessary, for the purpose of processing this application. An accurate sketch of the property, existing structures, wells, sewage disposal systems and proposed structure(s) is attached. I understand I may have to uncover parts of the sewage system in order for the Health Department to perform this evaluation.

_____ _____
Signature of Owner/Agent Date

BUILDING/ZONING REVIEW

Planning/Zoning hereby requests that the Virginia Department of Health evaluate the onsite sewage system and/or water supply on the property described to determine whether:

_____ The existing/proposed onsite system sewage disposal system is safe, adequate and proper (SAP) for the proposed use (see §32.1-165 of the *Code of Virginia*). Structures designed for human occupancy.

_____ For pools, decks, garages, pole barns, sidewalk installations, and other structures not designed for human occupancy, the local building official may ask VDH to determine whether proposed construction will interfere with the existing sewage system's function.

_____ _____
BUILDING/ZONING REPRESENTATIVE Date

HEALTH DEPARTMENT EVALUATION

Is the existing system onsite sewage system safe, adequate and proper or approvable as nonconforming for the proposed use pursuant to Va. Code §32.1-165? _____ Yes _____No _____ Not applicable
There is no guarantee given or implied this sewage disposal system will continue to function properly in the future. In the event of a sewage disposal system malfunction, the owner will be responsible for any repairs or other actions deemed necessary by the Department to correct the situation.

_____ **Courtesy Review** There is no guarantee given or implied the proposed construction will not interfere with any components of the sewage disposal system and/or water supply. The Department is simply performing a courtesy review for the locality to try to identify any potential conflicts based on information available. In the event of damage to a sewage disposal system or well during construction, the owner will be responsible for any repairs or other actions deemed necessary by the Department to correct the situation.

COMMENTS _____

_____

_____

_____ _____
SIGNATURE HEALTH DEPARTMENT OFFICIAL Date

Southampton County
Community Development Office
Planning – Building Inspections – Zoning-Environmental Services

AGREEMENT IN LIEU OF AN EROSION AND SEDIMENT CONTROL PLAN FOR A SINGLE FAMILY RESIDENCE

Land Disturbing Permit No._____
Building Permit No._____
Address_____
Lot No._____

In lieu of submission of an erosion and sediment control plan for the construction of this single family dwelling, I agree to comply with any reasonable requirements determined necessary by the Southampton County Community Development Office, representing either the Environmental Engineer or Building Official. Such requirements shall be based on the conservation standards contained in the Southampton County Erosion and Sediment Control Ordinance, and shall represent the minimum practices necessary to provide adequate control of erosion and sedimentation on or resulting from this project.

In addition to the below measures, all denuded areas on the lot shall be stabilized within 15 days of final grading with permanent vegetation or a protective ground cover suitable for the time of year.

I further understand that failure to comply with such requirements within three working days following notice by the Southampton County Community Development Office could result in citation for violation of the Southampton County Erosion and Sediment Control Ordinances.

Measures Specified by Plan Approving Authority:

☐ **Install and maintain construction entrance and silt fence per Virginia Erosion and Sediment Control Handbook.**

☐ **Other:**_____
_____
_____

Signature of Landowner: _____

Party Responsible for Erosion Control: _____
(If different from Landowner)

Approved By: _____Date_____