



County of Cumberland
Building Inspections Department
P.O. Box 110 Cumberland, VA. 23040-0110

Building Inspections (804) 492-9114

Email: mtate@cumberlandcounty.virginia.gov

SIGN APPLICATION

Application Date: _____

Permit Number: _____

Please check the applicable permit type applying for: Electrical Signage (Plans are required to be submitted with application)

Owner: _____

Name Daytime Telephone No.

Mailing Address

Email

Contractor:
(subs pg. 2)

Name Daytime Telephone No.

Mailing Address

Email

Property Information

Location/Address: _____

Tax Map/Parcel Number: _____ Acres: _____

Zoning District: _____

Signs

Ground Mount: ____ (____ x ____) Roof Mount: ____ (____ x ____)

Electrical: _____

Additional Information: _____

Estimated Cost: Sign \$ _____ Electrical \$ _____

Name of Power Company you are with: _____

Name account is in: _____ Account number: _____

Work/Project number given by Power Company to do work: _____

General Contractor/ Subcontractor Information

List all General Contractors/Subcontractors Below:

Name/Type License State Contractor's License Number State Tradesman Certification Number Cumberland County Business License Number

Contractor Signature _____ **Date** _____

Sub-Contractor Signature _____ **Date** _____

Owner' Affidavit

I, (signature here->) _____ of _____ affirm that I am the owner of certain tract or parcel of land located at: _____, and that I am applying for a building permit. I affirm that I am familiar with the prerequisites of 54.1-1111 of the code of Virginia and I am not subject to licensure as a contractor or subcontractor.

Signature: _____ Date: _____

Owner Certification

I hereby acknowledge that I have read this application and know this information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Owners Signature: _____ Date: _____

OFFICE USE ONLY

		<u>Permit Fee</u>		
	<u>Residential</u>		<u>Commercial</u>	
Electrical	_____		Electrical	_____
Structure	_____		Structure	_____
Subtotal	_____		Subtotal	_____
2% State Levy	_____		2% State Levy	_____
Total	_____		Total	_____

Taxes:

- Currently passed due: NO ok to proceed / Yes , Paid & ok to proceed
- Pulled w/parent permit: OK to proceed
- Ok per zoning approval: OK to proceed

Business License:

- Has license, ok to proceed per _____
- Needs a license , Ok now to proceed , per _____

Construction Type	_____	Fire Sprinkler	_____
Use Group	_____	Fire Alarm	_____
# of Stories	_____	Modification	_____
Occupant Load	_____		
Code Edition	_____		
Approval	_____		Date _____
	Building	Official	