



CITY OF STAUNTON VIRGINIA

PO Box 58, Staunton, VA 24402-0058

116 West Beverley Street
Staunton, VA 24401
540-332-3862
Fax 540-332-3807
Planning and Inspection
Department

APPLICATION FOR ELECTRICAL /PLUMBING/ MECHANICAL PERMIT
CIRCLE ONE

Date: _____

Address where work is to be done: _____

Cost of work to be done: _____

Commercial-square footage: _____

Contractor (if applicable): _____

State License #: _____ Class: _____ Expiration Date: _____

Address: _____

Telephone: _____ Email: _____

Owner: _____

Address: _____

Telephone: _____ Email: _____

General description of work to be done: _____

Is the scope of the work part of an existing project? _____

Signature of Owner, Contractor, or Agent: _____

- I have included a self-addressed stamped envelope for the permit to be returned by regular mail.
I would like the permit to be emailed to me at the email address indicated above.
I would like to be notified by phone when the permit is ready so I may pick up permit in person.

Please call the Planning & Inspections Department to verify permit amount due.

Permit Issued by: _____ (initial)

Fee collected: \$ _____ / _____ check, # _____ / _____ cash