



TOWN OF IRVINGTON

P.O. Box 174
 Irvington, VA 22480
 (804) 438-6230
info@irvingtonva.gov

ZONING PERMIT APPLICATION FORM (\$100 Fee)

Application is hereby made for a Zoning Permit in accordance with the description and for the purpose hereinafter set forth. This application is made subject to all local and state laws and ordinances with which applicant agrees to comply, and which shall be deemed a condition unto the exercise of this permit. Application must be made in duplicate with two (2) copies of drawing; showing lot size and location of structure with side yards and front and rear setbacks.

 Applicant Name Name of Property Owner (if different)

 Property Location

Applicant Contact Information	Email	Home Phone	Mobile Phone
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Contractor Contact Information	Email	Home Phone	Mobile Phone
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Tax Map Parcel Number	Zoning Classification
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Nature of Construction	Approximate # of Feet
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 Site Location(s)

<input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	Side of State Road # (i.e. Route 200)	Nearest Cross Street
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I, or, we, hereby covenant to restore any and all damages to sidewalks, streets, alleys, sewers, gas mains, water mains, electric installation and adjoining property which may result. I hereby certify I have the authority to make the foregoing application, that the information given is correct and that the construction will conform with the regulations in the Virginia Building Code, Zoning Ordinances, and private building restrictions if any, which may be imposed upon the above property by deed.

Applicant(s) Signature	Date
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For Office Use Only	
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
_____ Permit Number	
\$100 Fee Collected? Yes _____ No Fee Collected _____	
Conditions _____	
Zoning Administrator _____	Date _____