



Department of Inspections  
County of Floyd  
120 West Oxford Street PO Box 218 Floyd, VA 24091  
Phone: 540-745-9359 Fax: 540-745-9305

### **Checklist of Documents Needed Prior to Building Permit Issuance**

**You Must Begin Work With-In "6 Months" after the permit is issued or permit will be void. If proposed work is suspended or abandoned for "6 Months", the permit shall be null and void.**

**Copy of your Proposed Building Plans**

**All proposed building plans must be approved by our locality's Building Official prior to permit issuance.**

**Approved Well & Septic Documentation from the Floyd Co. Health Dept.**

**Signed Land Disturbance Form**

**All Proposed Building Plans Must Comply with Our Locality's "Set Back Requirements":**

**35' from edge of Roadways (State Maintained & Private Roadways)  
5' from structures and property lines (Residential Only)**

**Note: Be sure to review our locality's "Subdivision Ordinance", if other requirements must be met.**

### **All Proposed Manufactured Home Building Permits Require:**

- a. Copy of the Manufactured Home Title  
or
- b. Complete Section 18 on the Building Permit Informational Form

**\* 24 Hour Notification, must be given prior to any required inspections \***

**\*Normal Processing time for a permit is 24 to 48 hours \***

**\*No permit will be issued after 4:00PM\***



**Official Use Only**

Permit # \_\_\_\_\_  
Affidavit: YES NO E&S Sheet: \_\_\_\_\_  
Health Dept Info: \_\_\_\_\_ Plat Info: \_\_\_\_\_  
Title if MH: \_\_\_\_\_

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**PERMIT APPLICATION**

**1. Applicant**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company: \_\_\_\_\_ Cell: \_\_\_\_\_  
  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**2. Owner (If different than above)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3. Address of Property**

**(E911 Address will not be issued until a footing inspection is complete)**

Address: \_\_\_\_\_ Tax Map# \_\_\_\_\_  
**(Road driveway comes off of)**  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Magisterial District: \_\_\_\_\_

Subdivision & Lot # (If Applicable): \_\_\_\_\_  
Directions: \_\_\_\_\_

**4. Proposed Work**

- New Dwelling       New Dwelling-Modular       Addition/Renovation
- Garage/Carport     Singlewide                       Doublewide                       Triple wide
- Other (Please Describe): \_\_\_\_\_

**Type of Permits Needed:**  Building     Electrical     Plumbing     Mechanical

## BUILDING PERMIT INFORMATION

### Building Contractor Information

If you put "SELF" you have to sign an affidavit form (See Page 9 & 10 in this packet) that you take responsibilities of the job, the form will be in our office.

**Business Name:** \_\_\_\_\_  
**Contractor's Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_  
**Contractor License Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_  
**Contractor's Address:** \_\_\_\_\_  
**Contractor's Email Address:** \_\_\_\_\_

**If this permit is for a "Manufactured Home", only fill out sections 4, 16, 17, & 18**

<p style="text-align: center;"><b><u>1. Footings</u></b></p> <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other _____	<p style="text-align: center;"><b><u>2. Foundation Wall</u></b></p> <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other _____	<p style="text-align: center;"><b><u>3. Wall Size</u></b></p> <input type="checkbox"/> 8 inch <input type="checkbox"/> 10 inch <input type="checkbox"/> 12 inch
<p style="text-align: center;"><b><u>4. Dimensions</u></b>  <small>(Use Outside Dimensions of structure)</small>            1<sup>st</sup> floor: _____            2<sup>nd</sup> floor: _____            Porches/Decks: _____            Basement: _____            Carport: _____            Garage: _____  <input type="checkbox"/> Attached    <input type="checkbox"/> Detached            2<sup>nd</sup> floor of Garage: _____         </p>	<p style="text-align: center;"><b><u>5. # of Floors Above Grade</u></b></p> <input type="checkbox"/> 1 floor <input type="checkbox"/> 1 ½ floors <input type="checkbox"/> 2 floors	<p style="text-align: center;"><b><u>6. Wall Construction</u></b></p> <input type="checkbox"/> 2x4 <input type="checkbox"/> 2x6 <input type="checkbox"/> Log <input type="checkbox"/> Other _____
<p style="text-align: center;"><b><u>7. Floor Construction</u></b></p> <input type="checkbox"/> Joist <input type="checkbox"/> Trusses	<p style="text-align: center;"><b><u>8. Floor Finish</u></b></p> <input type="checkbox"/> Carpet <input type="checkbox"/> Tile <input type="checkbox"/> Wood <input type="checkbox"/> Other _____	<p style="text-align: center;"><b><u>9. Roof Construction</u></b></p> <input type="checkbox"/> Rafters <input type="checkbox"/> Trusses
<p style="text-align: center;"><b><u>10. Roof Covering</u></b></p> <input type="checkbox"/> Metal <input type="checkbox"/> Shingles <input type="checkbox"/> Other _____	<p style="text-align: center;"><b><u>11. # of Rooms</u></b>  <small>(Include unfinished and basement)</small>            Total # of Rooms _____  <small>(Do not include Bathrooms)</small>            Total # of Bathrooms _____            Total # of Bedrooms _____         </p>	<p style="text-align: center;"><b><u>10. Inside Finish</u></b></p> <input type="checkbox"/> Log <input type="checkbox"/> Sheet Rock <input type="checkbox"/> Other _____
<p style="text-align: center;"><b><u>13. Type of Heat</u></b></p> <input type="checkbox"/> Heat Pump <input type="checkbox"/> Gas <input type="checkbox"/> Wood <input type="checkbox"/> Other _____	<p style="text-align: center;"><b><u>14. Fireplaces/Chimneys</u></b>  <small>(# of each)</small>            Fireplaces: _____            Chimneys: _____         </p>	<p style="text-align: center;"><b><u>15. Outside Finish</u></b></p> <input type="checkbox"/> Log <input type="checkbox"/> Brick <input type="checkbox"/> Cedar <input type="checkbox"/> Vinyl <input type="checkbox"/> Other _____
<p style="text-align: center;"><b><u>16. Estimated Cost of Work</u></b></p> \$ _____	<p style="text-align: center;"><b><u>17. Land Disturbed</u></b>  <small>(Count septic/well area, driveway, House site, etc.)</small>            _____ Square feet         </p>	<p style="text-align: center;"><b><u>Mechanics' Lien Agent</u></b></p> _____ Address: _____ _____
<p style="text-align: center;"><b>18. Manufactured Home Info. (Fill out this section or provide a copy of the title)</b></p> Owner name on title: _____ Previous Owner(s) name on title _____ Name of Manufacture Unit: _____ Date of Manufacture Month/Date/Year: _____ VIN # _____		

**ELECTRIC PERMIT INFORMATION**

**Electrical Contractor Information**

If you put “**SELF**” you have to sign an affidavit form (See Page 9 & 10 in this packet) that you take responsibilities of the job, the form will be in our office.

**Business Name:** \_\_\_\_\_

**Contractor’s Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Contractor License Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Contractor’s Address:** \_\_\_\_\_

**Contractor’s Email Address:** \_\_\_\_\_

**Complete Only One Section (A, B, C or D)**

**(A) New Service:**

**Permanent Service:**  200 amp     300 amp     400 amp     2--200 amps  
 Other: \_\_\_\_\_  
 Single Phase                       3 Phase

**Temporary Service:**     100 amp             Other: \_\_\_\_\_

**AEP Work Order Number (Temporary Power) 9 digit #:** \_\_\_\_\_

**AEP Work Order Number (Permanent Power) 9 digit #:** \_\_\_\_\_

*(We will need these numbers before we can fax AEP your service connection request)*

**(B) Running Additional Wiring: (AEP is not involved)**

What is the existing electric service? :  200 amp             300 amp             400 amp  
 2--200 amps             Other: \_\_\_\_\_

**(C) Upgrading Existing Service:**

60 amp to 100 amp  
 100 amp to 200 amp  
 200 amp to 400 amp  
 Other: \_\_\_\_\_

**AEP Work Order Number (Disconnect) 9 digit #:** \_\_\_\_\_

**(Reconnect) 9 digit #:** \_\_\_\_\_

**(D) Alternative Service:**

Solar  
 Photovoltaic  
 Other: \_\_\_\_\_

## PLUMBING PERMIT INFORMATION

### Plumbing Contractor Information

If you put “**SELF**”, you must sign an affidavit form (See Page 9 & 10 in this packet) in which states that you take responsibilities of the job, the form will be in our office.

**Business Name:** \_\_\_\_\_

**Contractor’s Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Contractor License Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Contractor’s Address:** \_\_\_\_\_

**Contractor’s Email Address:** \_\_\_\_\_

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### Provide the number of fixtures for each of the following:

**Make sure you also count the fixtures that are to be placed in the basement and or attached/detached garage area, (finished or unfinished).**

**Kitchen sink:** \_\_\_\_\_

**Bathtubs:** \_\_\_\_\_

**Bathroom sink (his/her sink count as 1):** \_\_\_\_\_

**Hot tub/Jacuzzi** \_\_\_\_\_

**Commodes:** \_\_\_\_\_

**Urinal:** \_\_\_\_\_

**Number of shower stalls (without tub):** \_\_\_\_\_

**Laundry sink:** \_\_\_\_\_

**Water heater:** \_\_\_\_\_

**Washer:** \_\_\_\_\_

**Town Water Connect** \_\_\_\_\_

**Town Sewer Connect** \_\_\_\_\_

**Floor drains in basement and or garage:** \_\_\_\_\_

**Other:** \_\_\_\_\_

## MECHANICAL PERMIT INFORMATION

### Mechanical Contractor Information

If you put “**SELF**” you have to sign an affidavit form (See Page 9 & 10 in this packet) that you take responsibilities of the job, the form will be in our office.

**Business Name:** \_\_\_\_\_

**Contractor’s Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Contractor License Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Contractor’s Address:** \_\_\_\_\_

**Contractor’s Email Address:** \_\_\_\_\_

# **Erosion and Sediment Control Agreement**

Agreement in Lieu of an Erosion and Sediment control plan for single family dwelling.  
Please initial beside the appropriate land disturbance selection, for each individual build uniquely differs from another when it comes to land disturbance.

\_\_\_\_\_ All disturbed property will be less than 10,000 sq. ft.  
**(Total Land Disturbance Shall Include House-Site, Drive, and Septic)**

\_\_\_\_\_ All disturbed property will be greater than 10,000 sq. ft.

As a minimum, all disturbed areas that will remain dormant (Ungraded) for more than thirty (30) days, shall be temporarily mulched and seeded with (Rye, Oats, Fescue, etc.)

Permanent seeding shall be applied within seven (7) days after final grade.

Please follow proper Erosion & Sediment Control procedures per Floyd County Erosion and Sediment Control Ordinance, in order to prevent erosion and sediment from running off/of your property and onto your neighbors' property, which consequently could lead to complaints being forwarded to the County office.

Failure to comply with such requirements within seven (7) weekdays following notice by the Floyd County Erosion and Sediment Control Inspector, could result in citation for the violation of the Floyd County Erosion and Sediment Control Ordinance.

Signature of Landowner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature and Title of Responsible Party "If Not Landowner":

\_\_\_\_\_ Date: \_\_\_\_\_

Certified Responsible Land Disturber Certificate Number "If Applicable": \_\_\_\_\_



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**Application for Parcel Approval prior to Issuance of Building Permit**

**Part 1**

To confirm that the subject parcel conforms to the Floyd County Subdivision Ordinance (Section 3-1-1g and h), anyone seeking a Building Permit must show one of the following (please place a check in the appropriate circle):

An approved Plat of Survey (NOT A LOTLINE REVISION) or Subdivision Plat (copies of those recorded may be obtained at the Courthouse);

**--OR--**

That the parcel was created legally prior to October 22, 2002 (show copy of recorded deed).

Please attach the appropriate document and complete Part 2 below.

**Part 2**

**Owner's Statement**

As owner or authorized agent of the owner, I certify that the information reported above is true and accurate. By my signature I accept legal responsibility for this affirmation and understand that penalties may be imposed if the statement is incorrect.

\_\_\_\_\_  
Owner or Authorized Agent

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_  
COUNTY/CITY OF \_\_\_\_\_, to wit.

I, \_\_\_\_\_, a Notary Public of and for the State and County,  
does hereby state that \_\_\_\_\_ did appear before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and acknowledge the foregoing document by  
executing the same.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_.



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The Floyd County Building Inspector performs inspections on all construction in all areas of Floyd County.

Inspections may be scheduled Monday thru Friday by calling our office at (540) 745-9359.

A **24 hour notice** must be given in advance on ALL inspections. **NO inspections will be made on the same day of the call in.** It is helpful if you give us your building permit number and the name of the owner of the project. We realize your project is important and timing is critical. We do our best to respond as quickly as possible. Inspections are not performed on weekends.

**\*\*PLEASE NOTE** – A re-inspection fee will be added if work is not complete for inspection or accessible upon arrival, unless weather related. If you call in for a footer inspection and you have already poured concrete, you will be asked to dig the footer back out and after that has been completed you will need to call back for a re-inspection. (There will be a re-inspection fee)

**The fee for re-inspection is \$25.00 plus 2% State Surcharge.**

I have acknowledged the above statement and understand that I am to give a 24 hour notice of all inspections. I also understand that there is a fee for re-inspection if work was not completed when the inspector arrives. I will also relay this letter to my sub-contractor and/or homeowner.

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**OWNER/AGENT SIGNATURE**

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**DATE**



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To All Homeowners:

By signing the affidavit form you are **RESPONSIBLE** for all the construction that is performed. If you have any complaints about the person you have hired to perform any job, it is between you and that person. If any work is done wrong, the violation goes against you, not the person that you had hired.

You are also required to call in our office for all needed inspections and a final inspection for a certificate of occupancy after the job is completed. ***A CERTIFICATE OF OCCUPANCY MUST BE OBTAINED PRIOR TO THE OCCUPANCY OF ANY BUILDING OR STRUCTURE.***

The contractor should obtain any necessary permits. This should be spelled out in your contract; otherwise, you may be held legally responsible for failure to obtain any required permits. The contractor will then be required to call in for all inspections and final for a certificate of occupancy.

**PLEASE NOTE:**

*All contractors are required to hold a license issued by the Board for Contractors. Failure to hold a required license is a violation of the statutes and can result in prosecution. Homeowners who utilize unlicensed contractors forfeit their right to access the Contractor Transaction Recovery Fund and do not receive any protection from the board.*

Our office recommends you to go to the Department of Professional and Occupational Regulation website at [www.dpor.virginia.gov](http://www.dpor.virginia.gov) to make sure the contractor you had hired is properly licensed to perform the work you want. Also, you can review a copy of their license on line and make sure there are no violations against the person you are considering to hire.

Please call our office at 540-745-9359 if you have any questions.

BUILDING PERMIT # \_\_\_\_\_  
ELECTRICAL PERMIT # \_\_\_\_\_  
PLUMBING PERMIT # \_\_\_\_\_  
MECHANICAL PERMIT # \_\_\_\_\_  
MANUFACTURE HOME PERMIT # \_\_\_\_\_

## AFFIDAVIT

I \_\_\_\_\_ of (address) \_\_\_\_\_

\_\_\_\_\_ affirm that I am the owner of a certain  
tract or parcel of land located at: \_\_\_\_\_

and that I have applied for a building permit. I affirm that I am familiar with the  
prerequisites of §54.1-111 of the Code of Virginia and I am not subject to  
licensure as a contractor or subcontractor.

Owner signature \_\_\_\_\_ Date \_\_\_\_\_

STATE OF \_\_\_\_\_  
COUNTY/CITY OF \_\_\_\_\_, to wit.

I, \_\_\_\_\_, a Notary Public of and for the aforementioned  
State and County do hereby state that \_\_\_\_\_ did appear before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, and acknowledge the foregoing  
document by executing the same.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_.

<http://leg1.state.va.us>

**§54.1-1111.** Prerequisites to obtaining building, etc., permit.

Any person applying to the building inspector or any other authority of a county, city, or town in this Commonwealth, charged with the duty of issuing building or other permits for the construction of any building, highway, sewer, or structure, or any removal, grading or improvement shall furnish prior to the issuance of the permit, either (I) satisfactory proof to such inspector or authority that he is duly licensed or certified under the terms of this chapter to carry out or superintend the same, or (II) file a written statement, supported by an affidavit, that he is not subject to licensure or certification as a contractor or subcontractor pursuant to this chapter. The applicant shall also furnish satisfactory proof that the taxes or license fees required by any county, city, or town have been paid so as to be qualified to bid upon or contract for the work for which the permit has been applied.

It shall be unlawful for the building inspector or other authority to issue or allow the issuance of such permits unless the applicant has furnished his license or certificate number issued pursuant to this chapter or evidence of being exempt from the provisions of this chapter.

The building inspector, or other such authority, violating the terms of this section shall be guilty of a Class 3 misdemeanor.

(Code 1950, § 54-138; 1970, c. 319; 1980, c. 634; 1988, c. 765; 1990, c. 911; 1991, c. 151; 1992, c. 713; 1995, c. 771; 1998, c. 754.)

# AEP – RESIDENTIAL ELECTRIC SERVICE GUIDE

## HOW TO APPLY FOR NEW RESIDENTIAL ELECTRIC SERVICE

1. Apply for building permit.
2. Call **AEP “CALL CENTER”** at **1-800-956-4237** and give the following information. (Call Center is open 24 hours/day, 365 days/year).
  - ❖ **Service name, street name, lot number. \*MAKE SURE THIS NAME AND ADDRESS ARE THE SAME AS ON THE BUILDING/ELECTRICAL PERMIT**
  - ❖ Phone number (pager, cell phone if applicable) for home and work.
  - ❖ Location of service site (landmarks, streets, roads, etc.) for AEP personnel to find site.
  - ❖ Do you want this service **overhead or underground**? In most cases there is no charge for an overhead service to a residence with an occupancy permit from the county building inspector. There is almost always a charge for underground service. An underground agreement would have to be signed and payment received before a work order is issued.
  - ❖ Is this a **temporary** service? Temporary service is not always readily available. **If this is a temporary service, you will need to make another application for permanent service.** This can be done at the same time as the temporary application.
  - ❖ What has to be done to serve you? Do you know how close you are to an existing power line? Will AEP need to cross other properties to get to yours? When extending power line, AEP is required to secure a right-of-way easement from every property owner involved.
  - ❖ When will you need service? Sufficient advance notice needs to be given to meet a realistic service date. Design on your service will begin shortly after your application is received, **however, Virginia state law requires that prior to electrical service being installed, we must receive an approved electrical inspection from the town/county inspector before final connections can be made.**
  - ❖ **Write down the AEP order number(s)** from the call center for future reference.

**\*\*\*AEP does not need a 911 address to set your application up for new service.** If they say that you have to have an address he/she is not correct. Any problems at all when you call please get their full name and their extension number, (yes, they do have an extension number) and call our office at 540-745-9359 or have them to call and we will be glad to get things straight with them.