

**BUILDING PERMIT
APPLICATION
CITY OF WESTON, WV**



**102 W. 2nd St.
Weston, WV 26452
Phone: (304)269-6141
Fax: (304)269-7842**

| TYPE OF WORK | |
|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Remodel/Addition | <input type="checkbox"/> Electrical/Plumbing/Mechanical/Sign |
| CATEGORY OF CONSTRUCTION | |
| <input type="checkbox"/> Single-Family Dwelling | <input type="checkbox"/> Commercial/Industrial |
| <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Apartment Building |
| <input type="checkbox"/> Electrical Inspection | <input type="checkbox"/> Multi-Family Dwelling |
| JOB SITE, LOCATION AND APPLICANT INFORMATION PHYSICAL ADDRESS OF WORK | |
| NAME: _____ | |
| MAILING ADDRESS: _____ | |
| CITY STATE ZIP CODE: _____ | |
| PHONE # () _____ | |
| FAX # () _____ | |
| DISCONNECT# _____ RECONNECT # _____ | |
| DESCRIPTION OF WORK (SUBMIT PLANS FOR ALL CONTRACTORS) | |
| _____ | |
| _____ | |
| _____ | |
| _____ | |
| AREA UNDER CONSTRUCTION IN A FLOOD AREA? YES _____ NO _____ | |
| APPROVED BY THE FLOOD PLAIN MANAGER | |
| YES _____ NO _____ N/A _____ DATE APPROVED __/__/_____ | |
| CONTRACT ATTACHED YES _____ NO _____ | |
| CONTRACTOR | |
| BUSINESS NAME: _____ | |
| CONTACT NAME: _____ | |
| ADDRESS: _____ | |
| CITY STATE ZIP CODE: _____ | |
| PHONE () _____ FAX () _____ | |
| WV LICENSE # _____ CITY BUS. LICENSE # _____ | |
| SUB-CONTRACTOR | |
| BUSINESS NAME: _____ | |
| CONTACT NAME: _____ | |
| ADDRESS: _____ | |
| CITY STATE ZIP CODE: _____ | |

| |
|----------------------------|
| APPLICANT SIGNATURE: _____ |
|----------------------------|

| BUILDING PERMIT FEES | | |
|---|------------|--------------------------|
| Permit Fees* are based on the value of the work performed. Indicate the value (rounding to the nearest dollar) of all materials and labor work indicated on this application. | | |
| PERMITS MAY TAKE UP TO 3 BUSINESS DAYS TO BE APPROVED | | |
| Permit Fee Schedule: \$15 Permit Fee +\$5 for each \$1000 of total job cost. | | |
| OFFICE USE TYPE OF WORK | TOTAL COST | OFFICE USE PERMIT FEE |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| TOTAL JOB COST: | | |
| Inspections are required on foundations, footings, electrical and plumbing. Please contact our Building Inspector Mike Starett to schedule all inspections. | | |
| OFFICE USE ONLY | | |
| CUSTOMER ACCOUNT: | | |
| CITY FEES CURRENT: YES _____ NO _____ | | |
| NOTES: | | |
| | | |
| CONTRACTOR ACCOUNT: | | |
| CITY FEES CURRENT: YES _____ NO _____ | | |
| B & O FEES CURRENT: YES _____ NO _____ | | |
| LICENSE CURRENT: YES _____ NO _____ | | |
| NOTES: | | |
| | | |
| PHONE: () _____ FAX: () _____ | | |
| WV LIC # _____ CITY LIC # _____ | | |
| PERMIT EXPIRES SIX MONTHS FROM ISSUE DATE AND PERMIT MUST BE POSTED IN A VISIBLE AREA ON THE PROPERTY. | | |
| DATE: _____ | | |