

PERMIT IS TO BE DISPLAYED ON THE JOB SITE. A FINAL INSPECTION IS REQUIRED

Permit No.: 117-B-08

THE TOWN OF CHRISTIANSBURG  
(540) 382-6128

Planning Zoning: RSW  
Engineering: [Signature]  
Building Dept: [Signature]

DATE: 3/28/2008

Parcel ID # 013738

APPLICATION FOR: Building / ZONING PERMIT

Phone Number: (540) 239-6346

Name of Applicant: SAM'S BROTHERS

Owner of Building: PATRICIA BURK

Mailing Address: PO BOX 945

City: RADFORD

State: VA Zip: 24143

Building Code used: CABO:  BOCA:  Edition: 2003

CUP/Variance: \_\_\_\_\_

Tax Parcel: 557- (7) -5A

Has Been Surveyed:  Surveyor: \_\_\_\_\_

Plat Attached: N/A

Location of Construction: 260 ROSEHILL DR SW  
(Street Address)

Zoning: R-1

Subdivision: Rose Hill Addition

Lot No: pt. 5

Section: \_\_\_\_\_

Off Street Parking: Z

Type of Construction:  Single Family  Duplex  Townhouse  Apartment  Business  Industrial  Public  
 New  Addition  Repair  Remodel  Storage Building  Other

Description: ADDING 2 12X12 ADDITIONS. EXPANDING KITCHEN AND MASTER BEDROOM

Project Information: Site Plan: \_\_\_\_\_ Construction Cost: \$47,000.00 Type of Heat: HVAC

Setbacks: Front: 35' Right Side: 13' Left Side: 13' Rear: 35' Height of Building: < 35'

Material in: Foundation Walls: Block Outside Walls: Vinyl Roof: Shingles

Floors:  Hardwood  Carpet  Ceramic Tile  Vinyl

Number of Bedrooms: 1

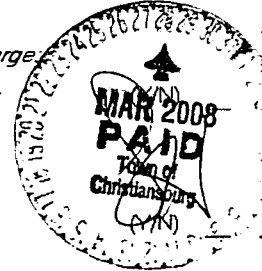
Bathrooms: 1

Fireplaces: \_\_\_\_\_

Kitchen Sinks: \_\_\_\_\_

	Square Footage
Size of Basement (Finished)	<u>0</u>
Size of Basement (Unfinished)	<u>0</u>
Size of 1st Floor	<u>288</u>
Size of 2nd Floor	<u>0</u>
Size of Carport/ Garage	<u>0</u>
Deck or Storage Square	<u>0</u>
<b>Total:</b>	<b><u>288</u></b>

Permit Fee:	<u>\$48.96</u>
State Surcharge:	<u>\$0.86</u>
Total Paid:	<u>\$49.82</u>
Water Fee:	<u>\$0.00</u>
Sewer Fee:	<u>\$0.00</u>
Total Paid:	<u>\$0.00</u>



Applicant Desires the Following Utilities:

Water Size Line: N/A  Sewer Size Line: N/A  Septic  Sprinkler System Size Line: N/A

Name of Contractor: SAME

Phone Number: 540

Fax Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

St: \_\_\_\_\_

Zip: \_\_\_\_\_

Virginia Contractors License: 2705115782

Class: A

Expiration Date: 5-31-09

The undersigned owner/agent hereby applies for a Permit as stated above and certifies that he/she is duly authorized by the Owner to make such application; and further certifies that all Building, Zoning, Soil Erosion Sedimentation Control restrictions and regulations pertaining to the same will be met. It shall be the responsibility of the undersigned to notify the Building Official to make or cause to be made any necessary inspections. The attached forms are hereby made part of the permit application:

Affidavit: N/A Mechanic's Lien: None Designated E.S.: N/A Septic Tank (Permit Attached): N/A

(Where Town Sewer not available)

Signature of Owner/ Agent: \_\_\_\_\_

LARRY SAMS

(Signature)

The forgoing application has been approved/disapproved and this permit granted subject to all regulations pertaining to the same.

Town Manager: \_\_\_\_\_

Date: 3-31-08

Building Official: [Signature]

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File/ (Owner/Contractor) Final

(Circle One)

Final Inspection By: \_\_\_\_\_

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

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Floors:  Hardwood  Carpet  Ceramic Tile  Vinyl

Number of Bedrooms: 1 Bathrooms: 1 Fireplaces: Kitchen Sinks:

	Square Footage
Size of Basement (Finished)	0
Size of Basement (Unfinished)	0
Size of 1st Floor	288
Size of 2nd Floor	0
Size of Carport/Garage	0
Deck or Storage Square	0
<b>Total</b>	<b>288</b>

Permit Fee:

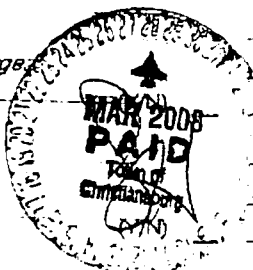
State Surcharges:

Total Paid:

Water Fee:

SEWER FEE:

Total Paid:



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Name of Contractor: SAME Phone Number: 540 Fax Number:

Mailing Address: City: St: Zip:

Virginia Contractors License: 2705115782 Class: A Expiration Date: 5-31-09

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File/Owner/Contractor/Final: (Circle One) Final Inspection By: [Signature] Date: [Date]