

GOVERNMENT OF THE VIRGIN ISLANDS

Building Authority

Permit Application

Building Permit No: _____

Demolition Permit No: _____

LDCA #: _____

Application Date: _____

LDCA Date: _____

The undersigned respectfully makes application for a Building Permit in accordance with section 6 of the Building ordinance.

Name of Applicant: _____

Applicant Address: _____

Applicant Phone: _____ Fax: _____ Email: _____

Agent's Name: _____

Agent's Address: _____

Agent's Phone: _____ Fax: _____ Email: _____

Agent's Signature: _____

Contractor's Name: _____ Phone: _____ Email: _____

Cadastral Section: _____ Parcel No: _____ Site Location: _____

Type of Development/ Improvement
 Commercial Institutional Industrial Residential other _____

Type of Work: (Check each item that applies)

___ Construct ___ Enclose
 ___ Install ___ Alter
 ___ Add ___ Replace
 ___ Repair
 ___ Other _____

___ New Building ___ Mechanical ___ Patio ___ Tenant Renovation
 ___ New Addition ___ Gas ___ Screen Enclosure. ___ Landscape
 ___ Roofing ___ Fence ___ Paving ___ Hurricane Protection
 ___ Electrical ___ Sign ___ Utilities ___ Other _____
 ___ Plumbing ___ Pool/Spa ___ Excavation ___ Retaining Wall

Demolition	<u>Have Utilities Been Disconnected</u>		
Water	Gas	Electricity	Phone
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Adjacent property owners have been notified of my intent Yes No

Sanitary arrangement if to be used as dwelling _____

Present Use _____ Proposed Use _____

No. of Buildings (Existing) _____ (Proposed) _____

No of Units (Apartments/Condos) _____ (Proposed) _____

Total Building Square Footage _____ Water Storage Facilities _____

Estimated Cost of Completed Building: _____ No. of Stories _____

Application is hereby made to obtain a permit to execute work as indicated. I certify that no work has been prior to the issuance of a permit and all work will be performed to meet the standards of all laws regulating construction in the Virgin Islands.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction in the Virgin Islands.

Applicant's Signature: _____ Date: _____

FOR BUILDING AUTHORITY USE ONLY:

Approved <input type="checkbox"/>	Disapproved <input type="checkbox"/>	<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;">Building Authority Representative</div>
Building Permit No: <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>	Approval Date: <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block; text-align: center;">DD/MM/YYYY</div>	
Signature: _____	Date: <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block; text-align: center;">DD/MM/YYYY</div>	
Clerk of Works, Building Authority		