

County of Louisa
P.O. Box 160
Louisa, Virginia 23093
(540) 967-3430
Fax: (540) 967-3486



Development Permit

Zoning & Building (Complete the Appropriate Areas)

ZONING PERMIT #: _____

BUILDING PERMIT #: _____

Expiration Date: _____

Owner/Applicant: _____

Address: _____ Phone #: _____

Contractor Name and Address: Louisa Tent Rentals & Accessories, P.O. Box 603 Mineral, VA. 23117 Phone #: 540-894-8714

State License No. _____ A B C Classification _____ Expiration Date: _____

County License No. _____ Date Issued: _____ Expiration Date: _____

Tradesman Certification: _____ Date Issued: _____ Expiration Date: _____

Tax Map No. _____ Parcel No. _____ Lot No. _____ Building No. _____

Magisterial District _____ Present Acreage _____ Proposed Acreage _____

CUP/SEP _____ Variance _____ Disturbed Acreage _____

Zoning Classification _____ Subdivision _____ State Route _____

Deed Book/Page No. _____ Plat Book No. _____ Site Plan _____

Directions to Site: _____

Existing Structures on Property: _____

Class of Work:

- New Building
- Addition
- Repairs/Alteration
- Change of Use
- Other Party Tent for wedding/other

Structure:

- Single-Family
- Commercial/Industrial
- Agricultural
- Modular
- Single-wide Manufactured Home
- Percolation Test (Certification Letter)
- Multi-Family
- Double-wide Manufactured Home
- Other

No. of Bedrooms _____ 100% Reserve Mandatory _____

Type of Water Supply: Public Private (well)

Type of Sewage Disposal: Public Private (septic tank)

I declare that the statements made and the information given on this Application are true, full and correct to the best of my knowledge and belief and I agree to conform to all Zoning and Building Regulations. I give my permission to the County Zoning Administrator, Building Inspector and Sanitation Officer to enter onto this property for appropriate inspection. I also acknowledge the comments made by the Zoning Administrator or designated agent and the setbacks requirements stated on this form.

Signature of Owner or Authorized Agent: _____ Date: _____

Approved by Zoning Administrator or Designated Agent: _____ Date: _____

Nature of Work: Temporary tent permit required for tent over 900 sq ft for wedding/other event taking place.

Value of Job: _____