



## Department of Community Development

Building Inspections Division

21 South Bruffey Street

P.O. Box 869

Salem, VA 24153

Phone: **540-375-3036** Fax: **540-375-4042**

Email: [communitydev@salemva.gov](mailto:communitydev@salemva.gov)

# COMMERCIAL PERMIT APPLICATION PACKET

## New Commercial

1. Two (2) sets of sealed (architect or engineer) plans, including all Electrical, Mechanical, and Plumbing drawings.
2. One digital (PDF) copy of sealed (architect or engineer) plans, including all Electrical, Mechanical, and Plumbing drawings e-mailed to [communitydev@salemva.gov](mailto:communitydev@salemva.gov) or on CD.
3. Approved Site Plan.
4. Completed application.
5. Shrink-swell soil test results.
6. If located in the floodplain, preconstruction Certificate of Elevation\*
7. Erosion and Sediment Control Permit.
8. Stormwater Pollution Prevention Plan (SWPPP) if part of a common plan of development or sale.
9. **NOTE: All utilities must be run in separate trenches with a five-foot separation between each.**

## Addition/Upfit

1. Two (2) sets of sealed (architect or engineer) plans, including all Electrical, Mechanical, and Plumbing drawings.
2. One digital (PDF) copy of sealed (architect or engineer) plans, including all Electrical, Mechanical, and Plumbing drawings e-mailed to [communitydev@salemva.gov](mailto:communitydev@salemva.gov) or on CD.
3. Approved Site Plan (if needed).
4. Completed Application
5. Asbestos Certification.
6. Accessibility Compliance

- **PLEASE NOTE: If a preconstruction Certificate of Elevation is required, then BEFORE a Certificate of Occupancy is issued, we must receive a post construction Certificate of Elevation.**



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Permit Number: \_\_\_\_\_

## COMMERCIAL PERMIT APPLICATION

Date of Application: \_\_\_\_\_

<b>TYPE OF WORK (check one)</b>		<b>NEW CONSTRUCTION/ADDITIONS</b>	
New Construction	Alteration		
Addition	Demolition	New Building Area: _____ Sq. Feet	
<b>CATEGORY OF CONSTRUCTION</b>		No. of Stories: _____	
		No. of Units: _____	
Building Primary Use: _____ Building Secondary Use: _____ Accessory Structure: (describe) _____ Other: (describe) _____		<b>FLOODZONE (check one)</b>	
		Floodway _____ Zone AE (100 yr)	
		X (500 yr) _____ None	
		<b>ASBESTOS</b>	
<b>SCOPE OF WORK (describe briefly, but thoroughly)</b>		Was structure built prior to January 1, 1985?    Y    N	
		<b>If Yes, Asbestos Survey Must Be Submitted</b>	
		<b>ZONING</b>	
		Zoning District: _____	
		Site Plan/Survey Compliant:            YES            NO	
		Setbacks:    Front: _____    Rear: _____    Right: _____    Left: _____	
		Height: _____    Approval: _____	
<b>JOB SITE INFORMATION</b>			
Job Address: _____			
City/State/Zip: _____			
Development Name: _____			
Tax Map/Parcel #: _____			
Existing Use: _____		Proposed Use: _____	
Lot #: _____	Block #: _____	Section #: _____	
<b>OWNER INFORMATION</b>			
Name: _____			
Mailing Address: _____			
City/State/Zip: _____			
Phone #: (    )                      Cell: (    )                      E-mail: _____			
<b>CONTRACTOR INFORMATION</b>			
Contractor Name: _____			
Address: _____			
City/State/Zip: _____			
Phone #: (    )                      Cell: (    )                      E-mail: _____			
State License #: _____		E-mail: _____	
Expiration Date: _____		City License # _____	
<b>APPLICANT INFORMATION (if other than the owner or contractor)</b>			
Applicant Name: _____			
Letter From Owner Giving Permission To Pull Permit: _____		YES                      NO	
Address: _____			
City/State/Zip: _____			
Phone #: (    )                      Fax: (    )                      E-mail: _____			
Cell: (    )                      E-mail: _____			

**ALTERATIONS/DEMOLITIONS**

Permit fees are based on the value of work performed including equipment, labor overhead and profit.

Remarks:

Total Estimated Cost: \$ \_\_\_\_\_

**Special Inspections required per Section 17-1 of 2015 VCC**

**TRADE PERMITS INVOLVED (check all that apply)**

**Each Trade Will Need Individual Permits**

ELECTRICAL	PLUMBING	LP GAS
MECHANICAL	SIGN	CROSS-CONNECTION
FIRE SAFETY:	Sprinkler	Alarm
		Hood

Permit fees are based on the value of work performed including equipment, labor overhead and profit.

**Estimate Cost Breakdown**

Building	\$ _____
Electrical	\$ _____
Plumbing	\$ _____
Mechanical	\$ _____
Fire: Alarm	\$ _____
Sprinkler	\$ _____
Hood	\$ _____
Cross Connection	\$ _____
LP Gas	\$ _____
Sign	\$ _____
<b>TOTAL:</b>	<b>\$ _____</b>

**CERTIFICATION**

I understand that this permit will become null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced. I understand that by obtaining this permit, it may be necessary for certain City of Salem Officials to visit my property in conjunction with required inspections, tax assessments, etc.

I understand that all work is to conform to the current edition of the Virginia Uniform Statewide Building Code.

I further understand that all permit holders shall call for all required inspections as required by code. I must provide the *job address*, *inspection type*, as well as the *permit number* or the inspection may be rejected.

I hereby certify that I am the owner of record of the herein described property, or that the proposed work has been authorized by the owner of record and that I have been authorized to make this application as a designated agent. I agree to conform to all applicable state and local regulations, rules and policies and such shall be deemed a condition entering into the exercise of the permit. In addition, if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the area(s) described herein at any reasonable hour for the purpose of enforcing the provisions of the applicable code(s).

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

**OWNERS AFFIDAVIT: (Complete if Owner is Not a Licensed Contractor)**

I affirm that I am the owner of the property described in this application and that I am familiar with the prerequisites of Section 54.1-111 of the Code of Virginia, as amended, and I am not subject to licensure as a contractor or subcontractor. I am also aware that it is a violation of State Law to hire or award a contract to an unlicensed contractor.

SIGNED: (Must be Notarized if Owner is Not Present in Person) \_\_\_\_\_

Subscribed and sworn before me in the \_\_\_\_\_ of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My commission expires \_\_\_\_\_ Notary Public \_\_\_\_\_



**CITY OF SALEM, VIRGINIA**  
COMMUNITY DEVELOPMENT

**CHARLES E. VAN ALLMAN, JR., PE**  
DIRECTOR

**TROY D. LOVING, CBO**  
BUILDING OFFICIAL

**CERTIFICATION OF SETBACK COMPLIANCE**

I, \_\_\_\_\_ (owner/developer/builder), of a lot known as \_\_\_\_\_  
\_\_\_\_\_ (address / tax map number) **DO HEREBY**  
**CERTIFY** that the setbacks of this project conform to all applicable standards contained within  
the City of Salem Zoning Ordinance.

I understand that the City of Salem suggests all applicants for building permits to secure a  
survey as soon as possible to verify that the location of all structures complies with all setback  
and yard requirements of the zoning ordinance.

If subsequent to my completing this form, the structure is found to be not in compliance  
with the City of Salem setback and/or yard requirements, I understand that it shall be the property  
owners' responsibility to make any such structural or legal subdivision modification requirements  
to bring the structure into compliance.

I acknowledge that such a violation is a self-imposed condition rather than an unnecessary  
hardship, since a survey or other actions within my control could have been avoided or alleviated  
this condition.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_



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## **REQUEST FOR UTILITIES**

## **PRIOR TO OCCUPANCY**

In signing this application, I am fully aware that the electrical and water services are installed for test purposes only. I am fully aware that the occupancy of this structure without all final inspections being made is a violation of the Statewide Building Code and will result in the services being discontinued immediately.

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APPLICANT

---

BUILDING OFFICIAL/REP

---

DATE

---

LOCATION OF STRUCTURE



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BUILDING OFFICIAL

October 1, 2010

To Whom It May Concern:

**Re: Certified Plat Requirements**

When building permits are issued, certified plats are required showing the location of buildings as they relate to the City's setback requirements. During the building phase, the builder often shifts the corners or adds overhangs, cantilevers, decks, etc., that change the footprints of the structure on the lot. The problem then arises when a lender does an "as built" survey and discovers the structure to be in conflict with the setback requirements.

To focus on this potential problem, an occupancy permit will be issued only after the land surveyor certifies that all setback requirements have been met in the finished product. Copies of the setback requirements for the various zonings are available in the Community Development Department office located at 21 S. Bruffey Street, Salem, Virginia.

If you have any questions regarding this matter, please feel free to contact our office at (540) 375-3036.

Sincerely,

Troy D. Loving, CBO  
Building Official



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Must have property line removed before Final Inspection

I, \_\_\_\_\_ (owner/developer/builder), of a lot known as  
\_\_\_\_\_ (address/tax map number) **DO HEREBY CERTIFY** that

I am responsible for providing a certified plat to the Building Inspections office showing that my lot line has been vacated. Before I can get a final inspection for this permit this information must be shown on the plat.

I acknowledge that such a violation could result in my having to take down anything new that is crossing a lot line.

SIGNED: \_\_\_\_\_ DATE \_\_\_\_\_



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October 1, 2010

To Whom It May Concern:

All Building Permits must be posted at least five (5) feet from the finished grade on construction sites and must be maintained until all final inspections are made.

If, at the time of inspection, Building Permits are not properly posted as described above, the inspection will not be performed. If it is necessary for the inspector to make another trip to the site as a result of the permit not being properly posted, a \$30.00 re-inspection fee will be required prior to subsequent inspections being performed.

The Building Permit must be also be posted in a location where the inspectors are able to access it and post inspections without walking through mud. This will help us help you keep the interior of the structure free of mud from our shoes. If the permit is posted in an area which is prone to becoming muddy during periods of rain or snow, gravel or other suitable materials must be used.

If you have any questions regarding these requirements, please contact our office at (540) 375-3036.

Sincerely,

Troy D. Loving, CBO  
Building Official



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# ASBESTOS CERTIFICATION

PERMIT # \_\_\_\_\_

## Commercial Structure Alterations/Tenant Up Fit/Additions

DATE: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

Please reference VUSBC sections 108.1 (3) and 110.3 to see the extent to compliance and the exceptions as they apply to your alteration/repair or tenant layout project. The undersigned party hereby certifies that the structure located at the above referenced address has been inspected for asbestos by personnel qualified in accordance with §54.1-503 of the Code of Virginia to identify the presence of asbestos and that the results of the inspection are as follows:

- No asbestos was detected.
- Asbestos was detected and response actions to abate any risk to human health are complete.\* **Please indicate local permit number for asbestos abatement:** \_\_\_\_\_
- Asbestos was detected or is assumed to be present and response actions to abate any risk to human health will be undertaken as a part of the renovation or demolition.\* **Separate local permit is required to be obtained for asbestos abatement, per VUSBC section 108.1.**

### EXCEPTIONS:

An inspection was not performed on the structure because it qualifies for the following exemption(s):

- The original building permit for this structure was issued later than January 1, 1985.
- Residential housing with four or fewer units  
*(not applicable when in conjunction with commercial development(s))*
- The total amount of suspected asbestos containing materials does not exceed 260 lineal feet on pipes or 160 square feet on any other part of the facility. This exception does not apply to facilities used as schools, as stated in Code of Virginia Section §54.1-503.

<b>Owner or Agent Signature:</b>	<b>Date:</b>
<b>Owner or Agent Signature:</b>	<b>Date:</b>
<b>Print Name (Owner):</b>	
<b>Print Name (Agent):</b>	

\*By signing this form, I certify that I am the owner of the property or the owner's agent, duly authorized to sign for the owner. **The owner must certify that abatement areas meet required clearance levels prior to re-occupancy, per VUSBC section 110.3.**

\*\*The Virginia Department of Labor and Industry (DOLI) has comprehensive regulations to control the hazards of asbestos. Specifically, DOLI enforces the 1926.1101 Asbestos construction standard and the Asbestos NESHAP regulations under 40 CFR 61, Subpart M. These regulations require building owners and contractors to inspect structures for the presence of asbestos regardless of the age of the building. Questions regarding the 1926.1101 and Asbestos NESHAP inspection requirements, disturbance or removal of asbestos should be forwarded to DOLI. For information about DOLI's asbestos inspection requirements call 540-562-3580 ext. 131.



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# ACCESSIBILITY COMPLIANCE

## Commercial Structure Alterations/Tenant Up-Fit

DATE: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

Please reference International Rehabilitation Code 2012 Section 410 - Accessibility for Existing Buildings, including section 410.6 - Alterations Affecting an Area Containing a Primary Function, to see the extent to compliance and the exceptions as they apply to your alteration/repair or tenant layout project. The existing space is not required to be 100% accessible, but all new work is required to be accessible, per IBC Chapter 11 and ANSI A117.1.

- Existing space is already 100% accessible; accessibility upgrades are not required.
- The space is not 100% accessible; up to 20% of the total construction cost has been allocated for accessibility upgrades to the existing space as shown below.

This is to certify that the total cost of the alterations to the above referenced project is:

\$

Per International Rehabilitation Code sec. 410.7 - 20% of the total construction, which has been allocated for alterations to the accessible route the primary function area, is:

\$

<u>ACCESSIBLE ELEMENT</u>	<u>COST</u>
<b>TOTAL COST OF ACCESSIBLE ALTERATIONS:</b>	

- The renovation is exempt from the accessibility requirements required under Section 410.7 for the following reason:
  - The alteration is limited solely to windows, hardware, operating controls, electrical outlets and signs
  - The alteration is limited solely to mechanical, electrical, or fire protection systems
  - The alteration is solely for the purpose of increasing accessibility
  - The alteration does not involve an area of primary function

<b>Applicant's Name:</b>			
<b>Applicant's Address:</b>		<b>City:</b>	<b>State:</b>
		<b>Zip Code:</b>	
<b>Phone Number:</b>	<b>Fax Number:</b>	<b>Email:</b>	
<b>Print Name:</b>		<b>Signature:</b>	

\*By signing this form, I certify that I am the owner of the property or the owner's agent, duly authorized to sign for the owner. Last Updated: 12/22/2014



**CITY OF SALEM, VIRGINIA**  
COMMUNITY DEVELOPMENT

**CHARLES E. VAN ALLMAN, JR., PE**  
DIRECTOR

**TROY D. LOVING, CBO**  
BUILDING OFFICIAL

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

**NOTICE OF WAIVER**

I \_\_\_\_\_, owner/tenant/contractor of \_\_\_\_\_

Salem, Virginia, hereby affirm that the structure constructed according to Building Permit \_\_\_\_\_

is located on a public easement. In the event that any need arises that the City of Salem must access said easement, I/we will not hold the City responsible for any damages. I/We fully understand that if the structure has to be moved that it is my responsibility to reset the structure. Furthermore, the City is not responsible for any monetary costs in conjunction with accessing the easement.

Owner/Tenant/Contractor: \_\_\_\_\_