

TOWN OF QUANTICO
P.O. BOX 152
QUANTICO, VA 22134
703-640-7411

Date: _____

**APPLICATION FOR ZONING PERMIT, ELECTRICAL, MECHANICAL,
PLUMBING, OR DEMOLITION**

APPLICANT:

Owner or Business Name:

Site Address: _____

Phone Number: _____

Email Address: _____

Description of work to be completed: _____

BUILDING:

Height: _____ft. Type of Material: _____

Total _____square feet building will cover. Please provide pictures or sample of material to be used. Also provide 5 copies of plans.

Estimated cost of project/work: \$ _____

Fee charged for plans, back-up paperwork \$ _____

Contractor(s) to perform work:

Name: _____ Phone: _____

Address: _____ Email: _____

Est. of work _____ Type _____ VA License # _____
(electrical, plumbing, mechanical)

Name _____ Applicant Signature _____
(please print)

I hereby certify that I have the authority to make the forgoing application that the information given is correct, that I have read and I understand the applicable zoning ordinances for the zoning district, and that this project will comply with all applicable Codes and Ordinances of Town of Quantico and the State of Virginia.

DATE/received by office personnel: _____

Date: Application Zoning Paperwork approved _____

TOTAL FEE OWED TO TOWN \$ _____