

Building Permit # _____

ELEV Permit # **ELEV** _____



Department of Planning & Community Development
Division of Building Construction Services
400 Granby Street, Norfolk, Virginia (757) 664-6565

Project Address _____ **Unit** _____ **Application date** _____

Applicant: **Owner** **Contractor** **Agent** **Design Prof.**

Property Owner and Occupant Information	Applicant name _____ Phone # _____
Name _____	Elevator Contractor's Name _____ Phone # _____
Address _____	Contractor State License # _____ Class A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>
City/State/Zip _____	Contact Person _____ Phone # _____
Phone # _____ Fax # _____	Address _____
Occupant _____	E-mail Address _____ Other _____

Residential Multiple Family Commercial **Work to be performed on:** Specify occupancy of building _____

TYPE OF WORK New Installation Alteration / Modernization Repair **Project Cost** \$ _____

MAINTENANCE PERMITS Annual Maintenance Inspection Five (5) Year Maintenance Inspection

TYPE OF SYSTEM Elevator travel from _____ to _____ Drive Type _____ Contract load _____ pounds

___ Passenger Contract speed _____ FPM Describe hoistway enclosure _____

___ Freight Travel _____ Number of stops _____ Inside dimensions of car ___ X ___ Emerg. Exit top of car _____

___ Elevator Car safety: ___ Type ___ Type of car buffer _____ Stroke _____ Type of C.W. Buffer _____ Stroke _____

___ Escalator Is space below pit occupied? _____ Type of governor (car) _____ cable size _____

___ Moving Walk Location of governor _____ Slack cable device? Yes ___ No ___

	Cables	No.	Size	Material
___ Dumbwaiter				
___ Wheelchair lift	Hoist			
___ Stairway lift	Car C.W.			
___ Material lift				

Three copies of drawings must be submitted for each unit and attached hereto.

Office Use Only
Approved by: _____
Permit Fee \$ _____
Admin Fee \$ _____
Cash _____ Check# _____
Remarks _____

I agree to work in conformity to the ordinances & regulations of the City of Norfolk and the Uniform Statewide Building Code.

Print name _____ Signature _____ Date _____