



CERTIFICATE OF OCCUPANCY EXISTING

You may apply for a Certificate of Occupancy on the a Permit

Portal: norfolkvapermits.force.com

Select Building Permit, Residential,
and COE. (Certificate of Occupancy
for an Existing Building)

Required documents:

- 1- Completed Building Application;
- 2- Letter from the property owner (if different from applicant);
- 3- Floor plan of existing conditions drawn to scale with dimensions;
- 4- Information required on plans:
 - a. Total number of occupants
 - b. Number of occupants non-related
 - c. The age range of occupants non-related
 - d. Indicate if capable of self-preservation
 - e. Special needs/ handicap
 - f. Length of stay
 - g. Length of supervision
 - h. Number of staff

Zoning approval required

After the Zoning inspection and then final building inspection is approved and closed, a minimum of 48-hours will be required before a Certificate of Occupancy Existing is issued.



INSTRUCTIONS TO APPLY FOR A PERMIT

The Development Service Center expanded the online portal system to allow citizens and contractors to apply for all permit types. This is a TWO step process.

FIRST: Apply for your building permit online at:

norfolkvapermits.force.com

Select Building Permit then Residential and then COE. (Certificate of Occupancy Existing)

SECOND: Once you've received your permit number, your documents must be submitted into one .pdf to:

planreviewpermits@norfolk.gov

**Please make sure that when submitting emails, include the address of the property and permit number in the subject line.*

All plumbing, electrical, and mechanical permits shall be permitted separately.

**Your documents (application packet and supporting plans and specs)
must be submitted in ONE .pdf.**



Residential Building Permit Application

810 Union Street, Norfolk, VA 23510

(757) 664-6565

Application Date

____/____/____

Permit Number

Please apply for a building permit online at norfolkvapermits.force.com. Once you've completed the online process and received your permit number, your documents must be submitted into one .pdf. at this email address: planreviewpermits@norfolk.gov

APPLICANT

Homeowner

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

(initial) I ELECT to participate in the Tax Abatement program

(Initial) I DECLINE to participate in the Tax Abatement program

CONTRACTOR _____ AGENT _____ DESIGNER _____

VA License # _____

Class: A B C Tradesman

Company

Name _____

Address _____

City/State/Zip _____

Contact Name _____

Phone _____

Email _____

Location of Work: _____ Unit/Lot _____

Work Type: New Structure Repair/Alteration Addition Demolition Solar Panels
Pool Above Ground In Ground Pool Barrier Request CO Proposed Occ Load

Work Description _____

Project Cost \$ _____ Sq Ft _____ Use Group _____ Previous Use _____ Construction Type _____

I agree to work in conformity with the ordinances and regulations of the City of Norfolk and the Virginia Uniform Statewide Building Code. VUBC edition 20

Signature _____

Print Name _____

Date _____

CITY DEPARTMENT STAMPS

Mechanics Lien Agent Not Designated

Name _____

Address _____

Phone _____

Email _____

Building Safety Division
Development Services Center
810 Union Street, 1st Floor
Norfolk, Virginia 23510
(757) 664-6565



NOTE: THIS DOCUMENT CONTAINS IMPORTANT INFORMATION CONCERNING THE VIRGINIA CONTRACTOR'S LICENSING LAW. PLEASE READ CAREFULLY BEFORE SIGNING.

PROPERTY OWNER/CONTRACTOR LICENSURE AFFIDAVIT

I _____ of _____ (mailing address)
Affirm that I am the property owner and/or contractor for the owner of a certain tract or parcel of land located in the City of Norfolk at _____ and that I have applied for a building permit to erect a structure on said land or repair or improve an existing structure on said land.

I affirm that I am aware of the provisions of Title 54.1, Chapter 11, of the Code of Virginia that requires a contractor to be properly licensed before he may bid or undertake contracting work of \$1,000 or more. I further certify that I am familiar with the responsibilities of an awarding authority specified in Section 54.1111 of the Code which prohibits any awarding authority from issuing permits or allowing the issuance of such permits to any contractor not properly licensed under the provisions of the Code, and that to do so would constitute the commission of a misdemeanor.

I affirm that I am duly licensed under the terms of Title 54.1, Chapter 11, Code of Virginia to carry out or superintend this work; OR I am not subject to licensure as a contractor, subcontractor, or owner-developer pursuant to such title. I affirm that I have paid in full any license fees required by any county, city, or town so as to qualify me to bid upon or contract for the work for which this permit has been applied.

"Class A Contractors" perform or manage construction, removal, repair, or improvements when (i) the total value referred to in a single contract or project is \$120,000 or more, or (ii) the total value of all such construction, removal, repair, or improvements undertaken by such person within any 12-month period is \$750,000 or more.

"Class B Contractors" perform or manage construction, removal, or repair, or improvements when (i) the total value referred to in a single contract or project is \$10,000 or more, but less than \$120,000, or (ii) the total value of all such construction, removal, repair or improvements undertaken by such person within any 12-month period is \$150,000 or more, but less than \$750,000.

"Class C Contractors" perform or manage construction, removal, repair, or improvements when (i) the total value referred to in a single contract or project is over \$1,000 but less than \$10,000, or (ii) the total value of all such construction, removal, repair, or improvements undertaken by such person within any 12-month period is less than \$150,000. The Board shall require a master tradesmen license as a condition of licensure for electrical, plumbing, and heating, ventilation and air conditioning contractors.

This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if the construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be compiled with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Property Owner or Contractor

Printed Name: _____

Home Address: _____

Signature

Date

Drawings are for illustrative purposes only and are not to be used for construction. The services of a professional architect or engineer may be needed depending on the complexity of the project.

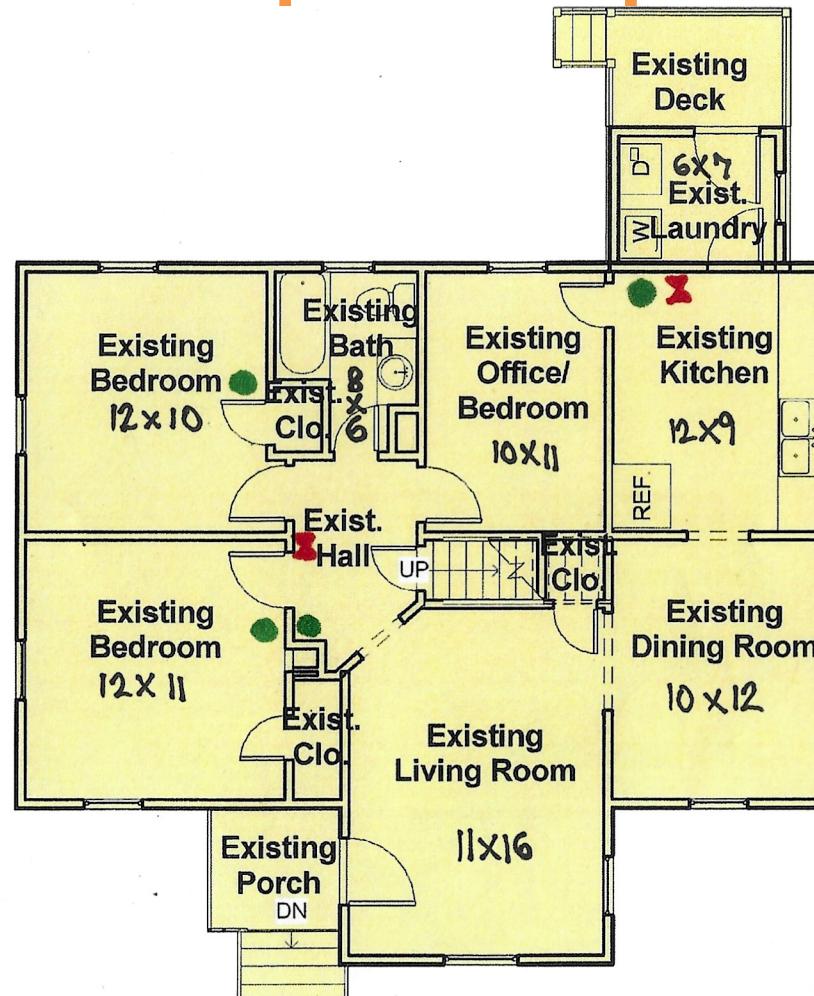


N O R F O L K
Neighborhood Design and Resource Center

Existing
New

1.	# of Occupants	2-3
2.	Age of occupants	18-65
3.	Capable of self-preservation	yes
4.	Length of stay	24 hrs
5.	Type of Supervision	24 hrs
6.	# of Staff	2

- Carbon Monoxide detector
- Smoke detector
- Fire extinguisher



1 First Floor
1/8" = 1'-0"

Scale

1/8" = 1'-0"

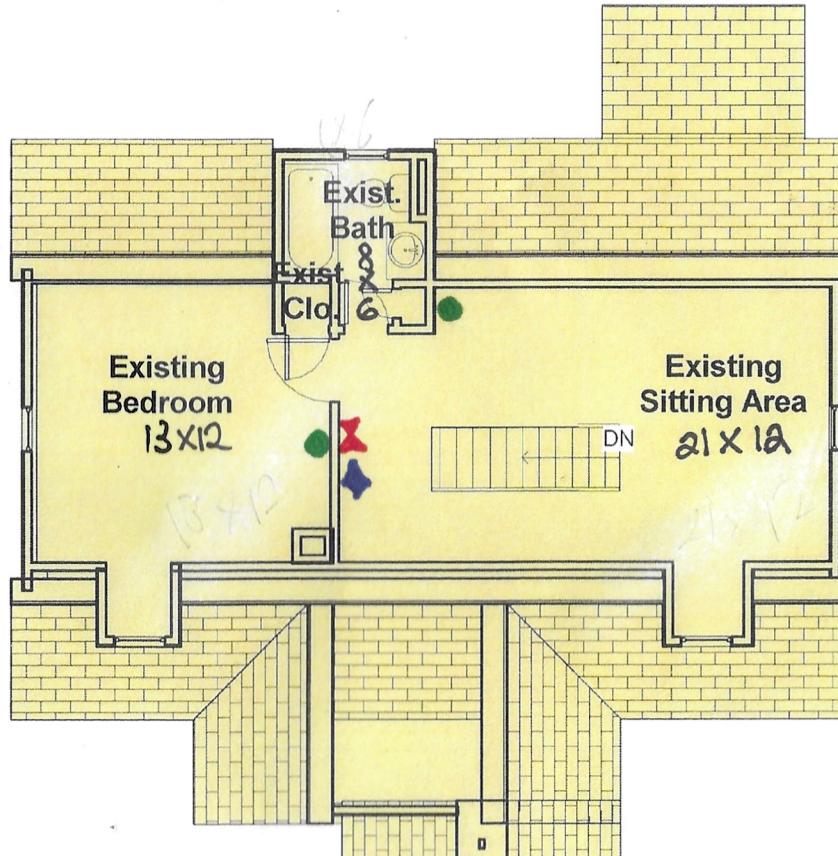
Existing First Floor Plan
Newton Residence
6915 Pugh Street
Sharon Turner,RA
01/11/10

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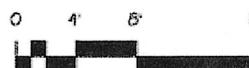
- Existing
- New



Sample Example



① Second Floor
1/8" = 1'-0"



Scale

1/8" = 1'-0"

Existing Second Floor Plan
Newton Residence
6915 Pugh Street
Sharon Turner, RA
01/11/10

Sample Example, please use for reference

PROJECT ADDRESS

APPLICANT CONTACT INFORMATION

PROVIDE EACH
WINDOW SIZE AND TYPE

KITCHEN 9'-0" X 10'-0"

BATH
6'-0" X
10'-4"

CLOSET
6'-0" X
6'-10"

MASTER
BEDROOM
12'-8" X 12'-8"

REAR DECK

BEDROOM #2
11'-6" X 9'-10"

LAUNDRY
6'-2" X 5'-10"

LIVING RM
13'-10" X 20'-0"

GARAGE
25'-0" X 21'-0"

DINING RM
9'-0" X 11'-8"

BEDROOM #3
11'-6" X 9'-10"

1. NUMBER OF NON-RELATED OCCUPANTS
2. AGE OF OCCUPANTS
3. CAPABLE OF SELF PRESERVATION

3

18-65
YES

4. LENGTH OF STAY
5. TYPE OF SUPERVISION
6. NUMBER OF STAFF

24 HOURS
24 HOURS
2

CARBON MONOXIDE ALARM



SMOKE DETECTOR



FIRE EXTINGUISHER

SAMPLE CERTIFICATE OF OCCUPANCY EXISTING CONDITIONS