THINGS NEEDED BEFORE YOU OBTAIN A LOCATION IMPROVEMENT PERMIT

□ Tax receipt for property you wish to obtain a permit for:

- Obtained at the Sheriff's office 304-624-8685.
- If the property does not belong to you or is co-owned, you need a notarized statement from property owner or co-owner that gives permission to construct.

If using a contractor and sub-contractors, you must provide their name, a copy of their
 West Virginia License, and a Certificate of Insurance

□ If you are constructing in a subdivision:

- You need to submit the name and location of subdivision
- Check your deed to see what is permissible within the subdivision.
- If applicable, a notarized letter of approval for the construction from the Home Owners Association.

Call before you dig! It's the law in WV, confirmation number from Miss Utility of West
 Virginia 1-800-245-4848. You must give them a minimum of forty-eight (48) business
 hours' notice before you dig.

□ If your driveway will access a public roadway you need to obtain a driveway permit from Department of Highways

- Print out WV Department of Highways permit application.
- O Encroachment Permit Form MM-109*
- Address: P.O. Box 4220 Clarksburg, WV 26302-4220, on Meadowbrook Road, across from the Meadowbrook Mall
- o Phone: 304-842-1575

Obtain a permit from the Health Department if you are installing a septic system and/or well water.

- Print out Health Department Verification for Harrison County Location
 Improvement Permit Involving Installation or Modification of Sewage System
 following this check off list.
- o Address: 330 West Main Street, Clarksburg WV
- o Phone:304-623-9308
- □ Verification of water and sewage
 - If you are getting water and sewage from a city or a PSD, you must submit a receipt verifying that you have tapped into their line.

□ Permit Fees

0	Demolition of buildings or structures\$0.00
0	Additions or remodeling to a building or structure costing less than \$2500.00\$0.00
0	Normal maintenance to a building or structure such as Windows, doors, steps into a building or painting\$0.00
0	Use of land for agricultural purposes\$0.00
0	Land altering activities\$25.00
0	Residential\$25.00
0	Remodeling of kitchen and/or bathroom and construction of any additional rooms\$25.00
0	Commercial/Industrial\$250.00
0	Building Residential or Commercial within the Floodplain\$250.00
0	Use of land for agricultural purposes in floodplain\$25.00
0	Any activity in floodplain\$250.00

IF YOU HAVE ANY QUESTIONS PLEASE CALL THE HARRISON COUNTY PLANNING DEPARTMENT @ 304-624-8690.

Location Improvement Permit Application Harrison County Planning Department 301 West Main Street, Clarksburg, WV 26301 Sixth Floor Office (304)-624-8690

Permit No	FIRM Panel No
Date Permit Issued	Flood ProneYesNo
Date Permit Started	Floodplain Management Ordinance:
Date Finish:	Complies
Receipt No:	Does Not Comply
Fee Amt:	Not Applicable
Proposed Construction or Land Use Code:	
	Subdivision Ordinance:
	Complies
	Does Not Comply
Employee Signature	Not Applicable

This application maybe updated from to time without updating the Ordinance.

Do Not Write Above This Line

Identification:

Name:______Address: _______

Phone#s:_____

Identification of Property: If you are not the property owner, you need to bring in a notarized statement from the property owner(s) allowing you to proceed with construction or land use activities.

District:

Date/From Whom Purchased/Leased:

Deed Book/Page:_____

Tax Map/Parcel:

Subdivision Name and Lot No._____

Describe existing buildings/usage:

Proposed Construction/ Land Use (ex. building a new home, setting a mobile home or modular home, commercial buildings or putting in utilities)

Describe your project

Additions, Alterations, Conversions (ex. addition to existing home, new windows, sidewalks, any type of improvement to
home, or demolition)
Describe your project:

Demolition projects must provide a hazardous material inspection and a mediation plan for any hazardous materials, inc	cluding
but not limited to asbestos, heavy metals, etc.	

Contractors/General & Sub: (copy of contractor's license or verification of current and valid license from Division of Labor is required before a permit can be issued). Must list all subcontractors and submit a copy of their WV License

Contractor: Address:			
WV Lic#	WV LIC#	WV LIc#	
Contractor:	Contractor:	Contractor:	
Address <u>:</u>			
WV Lic#	WV LIc#	WV LIc#	

List and Attach All Required Permit	S
Ms. Utilities Confirmation #	
Sewage- Tap Receipt	or/Septic Permit
Tap Water- Receipt	or/ Well Water Permit
Department Of Highwaysyes	no and name of person you talked to
Other	

Applicant Certification:

- 1. I (we), the owner(s) of the property on which the intended improvements are to be constructed, hereby certify: The information is true and accurate;
- 2. It is understood that construction must be started within six (6)months from the date of the approved application permit;
- 3. It is understood that the County personnel may inspect the property and/or activities identified on this application to ensure compliance;

I (we) ensure that this construction and intended use complies with all restrictive covenants applying to the subject real estate and understand and acknowledge that I (we) assume full responsibility for compliance with any such private land use covenants and that a violation thereof may result in legal sanctions by court injunction and damages irrespective of the issuance of this permit by the Harrison County Planning Department.

Applicant

Date

Applicant

Date

Health Department Verification For Harrison County Location Improvement Permit Involving Installation or Modification Of Sewage System

Section A: To be completed by applicant

Name:	
Mailing Address:	
Phone#:	
Nature of Project:	
D	o Not Write Below This Line
Section B: To be completed by Health depar	rtment 304-623-9308
The project specified abovedoes Department.	does not require a permit from the Harrison Clarksburg Health
Check which of the following applies:	
New system to be installed; permit r	equired
Modification to existing system; per	mit required
Subdivision required	
Existing system installed prior to July	
Existing system installed since July 1	, 1970; Permit must be obtained
Existing system installed since July 1	
	Date Issued
Name issued under:	
Comments <u>:</u>	
Date	Health Department Official

Affidavit

State of West Virginia, County of, to-wit:
over the age of (18) years and, after being first duly sworn, do depose and say:
That I am exempt from the" West Virginia Contractors Licensing Act", as defined in West Virginia Code 21-11-1, for the following reason(s): (check as applicable)
1. Work done exclusively by employees of the United States Government, the State of
West Virginia, a county, municipality, or municipal corporation, and any governmental subdivision or agency thereof;
2. The sale or installation of a finished product, material or article or merchandise which is not
actually fabricated into and does not become a permanent fixed part of the structure;
3. Work performed personally by an owner or leaser of real property on property the primary use
of which is for agricultural or farming enterprise;
4. Work performed by a public utility company and its employees regulated by the West Virginia Public Service
Commission.
5. Repair work contracted for the owner of the equipment on an emergency basis in order to
maintain or restore the operation of such equipment;
6. Work performed by an employer's regular employees, for which the employees are paid
Regular wages and not a contract price, on business property owned or leased by the employer;
7. Work personally performed on a structure by the owner or occupant thereof, and
8. Work performed when the specifications for such work have been developed or approved by
the owner of a facility by registered professional engineers licensed pursuant to the laws of
this State when the work to be performed because of its specialized nature or process cannot
be reasonably or timely contracted for within the general area of the facility.

Affiant

Taken, subscribed and sworn to before this ______day of _____

My commission expires:_____

Notary Public