Last Name:	Fee:	Permit No. ————	
Make All	Checks Payable to: Hardy County Sheriff's Office	Application Date:	
	HARDY COUNTY		

IMPROVEMENT LOCATION PERMIT APLICATION

www.hardycounty.com

Applicant Information:	Property Ow	vner Information:	
Name:	Name: ——		
Address:	Address:		
Phone Number:Address of Construction Site (Reference Road Name		per: parks, 9-1-1 Addresses.	
Is Property For Resale? YES \(\square\) NO \(\square\) Contractor or Builder Information :	Property Ide	ntification Informatio	<u>on</u> :
Name:	Taxing District:Zone:		ne:
Address:	Tax Map:	Parcel:	Ac.:
WV License No	Deed Book: -	Page No.:	
Type of New Construction: ☐ Manufactured Home- Type:	Cost of Const	truction:	
□ Permanent Residence □ Seasonal/ Secondary Home	Start Date: -	Ending 1	Date: ——
□ Recreational Cabin □ Condominium/ Townhouse- Units:	Length:	Width:	
☐ Multi-Family Unit- Units: ————————————————————————————————————	New Construction Information:		
□ Porch Size: ——— □ Deck Size: □ Swimming Pool- Diameter:	Number of Stories : $\Box 1.0$ $\Box 1.5$ $\Box 2.0$ $\Box 2.5$		
☐ Addition-Used As:	Exterior Wal	ls: □ Brick	
□ Storage Building Size: ———		\Box Frame	
□Commercial Building Use:		\square Siding	
□ Industrial Building Use:	_ Basement: □None		
□Agricultural Building Use: ————		□Part	
□Poultry House:		\Box Full	
Name of Grower:		□Crawl Space	
Other Construction:	Fuel Type:	\Box Gas	□Solar
New Construction Living Accommodations:		□Electric	□Oil
Other Rooms:		□Coal	\square Wood
Number of Bedrooms: ———		\square None	
Number of Full Baths: ————	Heating System Type:		
Number of Half Baths: ————	□Warm .	Air □Electric	
Family Room/ Living Room: ————	□Hot Wa	ater □Heat Pum	p
Attic Room/ Loft: ————	□None		
MANUFACTURED HO	MES OR MODU	LAR HOMES	
Year Built: ——— Manufacturer:	Purchase D	ate:Co	ost: ———

Width: _____ Length: ____ Installer Permit Number: _____

FLOODPLAIN INFORMATION

1	100 Year Flood Zone: Yes □ No □ Zone:
	RE:DATE:
HEALTH	I DEPARTMENT INFORMATION
Well Installer:	ater: YES NO Natural Spring Cistern Well Permit Number: Septic Permit Number:
Original Property Owner when the system	n was installed:
Was the septic system approved by the Ha	ardy County Health Department: YES \square NO \square
COUNTY SANITARIAN:	DATE:
DEPARTMENT (OF HIGHWAYS PERMIT INFORMATION
Does your driveway enter off a State main	ntained road? YES \square NO \square
Name of Road:	
Permit No.:	Issue Date:
DEPARTMENT OF HIGHWAY	SIGNATURE:
other owner of real property shall give no	ate Code 11-3-3A. It states that any person, corporation, associative in writing to the Assessor's Office sixty (60) days after son in violation of 11-3-3A shall be guilty of a misdemeanor and
In addition, this form is used to verify if the	he property is located in a flood zone. Any property located in a loon completed per FEMA Regulations and the Hardy County Floon
	alth Regulations can also be charged with a misdemeanor and progre, before any construction is to start, the permit for a sewer systemer.
TRUE AND ACCURATE. I (WE), THE O INTENDED IMPROVEMENTS OR CONSTRUCTION AND INTENDED USE APPLYING TO THE SUBJECT REAL ES ACKNOWLEDGE THAT I (WE) ASSUM ANY SUCH PRIVATE LAND USE COVE	IES THAT THE INFORMATION CONTAINED HEREIN IS OWNER (S) OF THE PROPERTY ON WHICH THE STRUCTION IS TO BE HEREBY INSURE THAT THIS COMPLIES WITH ALL RESTRICTIVE COVENANTS STATE. AND, I (WE) AGREE, UNDERSTAND AND E FULL RESPONSIBILITY FOR COMPLIANCE WITH MANTS AND THAT A VIOLATION THEREOF MAY OURT INJUNCTION AND DAMAGES IRRESPECTIVE OF THE HARDY COUNTY COMMISSION.
CICNED	DATE
SIGNED: Property Owner	
Property Owner	DATE —