



P.O. Box 209
6 East Pennsylvania Avenue
Lovettsville, Virginia 20180
(540) 822-5788

Occupancy Permit Application

Property Owner's Name: _____ **Fee: \$75**

Address (Mailing) _____ E-Mail: _____

Town/City: _____ State: _____ Zip: _____

Telephone: Work _____ Mobile _____ Fax _____

Owner's Representative (If Applicable): _____

Address (Mailing) _____ E-Mail: _____

Town/City: _____ State: _____ Zip: _____

Telephone: Work _____ Mobile _____ Fax _____

Subject Parcel Information:

Location (Street Address) _____ Subdivision & Lot Number _____

PIN (Property Identification Number) _____ Zoning District _____

NOTE: Please be aware that all Loudoun County final building inspections must be completed before the Town will sign the Occupancy Permit. The Town typically requires 1 to 5 days to complete its final zoning inspection.

I hereby certify that this application in all its parts, including the accompanying development plan proposal, is complete, correct and in compliance with the applicable Town of Lovettsville Ordinances, to the best of my knowledge. I acknowledge responsibility for all engineering, legal, zoning and planning review fees incurred by the Town in connection with the review of this application, and all outstanding debts owed to the Town of Lovettsville and Loudoun County have been paid prior to filing this application.

Signature of Property Owner
or Owner's Representative

Print Name of Property Owner
or Owner's Representative

Date

Zoning Inspection Checklist (Office Use Only)

- | | |
|--|---|
| <input type="checkbox"/> Final as-built survey/plans submitted demonstrating all zoning requirements have been met (including building setbacks, height, lot coverage, etc.) | <input type="checkbox"/> Placement of address number (visible from street) |
| <input type="checkbox"/> Wall Check approved by Zoning Administrator | <input type="checkbox"/> Driveway/sidewalk paving completed |
| <input type="checkbox"/> County Building Dept. Certificate of Occupancy sign-off sheet provided | <input type="checkbox"/> Number/sizes of parking spaces |
| <input type="checkbox"/> Placement of mailbox (not hanging over street) | <input type="checkbox"/> Landscaping/grass seeding or sodding completed |
| | <input type="checkbox"/> Lateral inspections, sketches & forms have been completed by Utility Dept. |
| | <input type="checkbox"/> Water meter installed & accessible for meter readings |

Approved by the Zoning Administrator: _____ Date: _____

Denied by the Zoning Administrator: _____ Date: _____

➤ (If Denied, Please Resubmit New Application & Fee)

NOTES:

Date Application Received _____ Application Complete _____ Application Fee Paid _____

Loudoun County Personal Property Taxes Paid _____ All Fees/Taxes Owed to Town Have Been Paid (Including Auto Decal) _____