

BROOKE COUNTY
STATE OF WEST VIRGINIA
BUILDING PERMIT APPLICATION

Date _____
Amount Paid _____
Permit # _____
Telephone # _____

APPLICANT INFORMATION:

1. LAND OWNERS NAME AND ADDRESS, IF DIFFERENT FROM ABOVE:

2. CONTRACTORS NAME AND ADDRESS:

3. A. SITE LOCATION:

FLOOD PRONE NOT FLOOD PRONE

**OFFICIAL
USE ONLY**

B. BRIEF DESCRIPTION OF WORK:

C. ESTIMATED COST:

**D. SKETCH OF SITE-Show exact size and location of existing
buildings and structures, if any.**

SEWAGE PERMIT

West Virginia Department of Health Regulations require that
A permit for sewage be issued from the Brooke County Health
Department for your proposed building. The Brooke County
Health Department recommends that an application be com-
pleted and secured before beginning construction.

APPROVAL

DATE

OFFICER