

Town of Virginia City, Montana
Development Permit Application
(Under Ordinance No. 503)

Development Permits are required for any exterior alteration (fences, decks, windows, etc.) or erection/modification to a building or structure within the Town of Virginia City, Montana that adds less than 100 square feet to the building footprint.

Name of Applicant: _____

Physical Address: Block #:_____ Lot #:_____

(Available in Town Office and at the Courthouse)

Mailing Address (of applicant): _____

Design Review District: _____

(Historic Downtown Commercial, Historic Viewshed Commercial, Historic Residential, Historic Viewshed Residential, or Non-Historic Residential)

Description of New Construction, Erection, Alteration, or Modification:

Information to be included (determined at pre-application meeting):

- Photographs: **Yes** **No** **Historic**

Document present site/conditions and surroundings that will be affected by this project. Neighboring buildings may need to be shown in cases of additions, to show their relationship/size/scale/etc.

- Drawings: **Yes** **No**

May be hand-drawn or computer generated. Drawings should accurately represent changes to present conditions.

- Samples: **Yes** **No**

Any materials used in construction **that will be visible on exterior** should be listed. Documentation as appropriate such as: manufacturers' brochures or samples such as shingles, pictures of lighting fixtures or other exterior ornaments/decorations and descriptions of materials such as "gray stone from local quarry".

Pre-Application Meeting (with Historic Preservation Officer):

Signature: _____ Date: _____

Signature of Applicant: _____

Received by Town Clerk/Treasurer:

___ Two Completed Applications
___ Photographs: #___
___ Drawings: #___
___ Description of Materials (list)
___ Samples: #___ Type: _____

___ \$35 Permit Application Fee **Total payment due with application**
Clerk/Treasurer: _____ Date Accepted: _____ Check #: _____

Public Works Director: _____

Comment: _____

Fire Chief: _____

Comment: _____

Historic Preservation Officer: _____

Comment: _____

Historic Preservation Advisory Committee

Chairman: _____

Comment: _____

Town Council

Mayor: _____ **Date:** _____

Clerk/Treasurer (Attest): _____ **Date:** _____

Comment: _____

Board of Adjustment

Chairman: _____

Comments: _____

Date Permit Issued: _____ * **VALID 1 YEAR FROM DATE** *

Town Clerk/Treasurer: _____

Project Inspected for Completion: _____ **Date:** _____