



# WILLIAM & MARY and VIMS

## PROJECT PERMIT (ANNUAL PERMIT) FORM

### Part 1 - Permit Applicant Action

Project Name: \_\_\_\_\_ Project or Work Order No. \_\_\_\_\_  
 Project Manager: \_\_\_\_\_ Location (Campus): \_\_\_\_\_  
 Building Code Edition: \_\_\_\_\_ Construction Start Date: \_\_\_\_\_  
 Accessibility Standards: \_\_\_\_\_ Substantial Completion Date: \_\_\_\_\_

PROJECT DESCRIPTION *(Brief description of the nature or extent of the work, and approximate schedule or dates project requires completion)*

HAZARDOUS MATERIALS STATEMENT *(Language to be aligned with CPSM 4.12.2)*

CONTRACTOR INFORMATION *(List licensed Class, A.B.C., Fire Sprinkler, Fire Suppression contractors, as required)*

<u>Trade:</u>	<u>Contractor Name (Company)</u>	<u>License Number:</u>	<u>Phone Number:</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERMIT APPLICANT

_____	_____	_____	_____
<i>Applicant Name</i>	<i>Applicant Title/Department</i>	<i>Date of Application</i>	<i>Signature of Applicant</i>

### Part 2 - Building Official Action

REQUIRED INSPECTIONS *(Inspections to be performed by University Construction Manager-Inspector, EH&S, or State Fire Marshal Inspector, as applicable)*

<div style="border: 1px solid black; height: 80px;"></div>	<input type="checkbox"/> Architectural <input type="checkbox"/> Roof <input type="checkbox"/> Framing / Structural <input type="checkbox"/> Fire Alarm <input type="checkbox"/> Mechanical <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Plumbing <input type="checkbox"/> State Fire Marshal (SFMO) Required <input type="checkbox"/> Electrical <input type="checkbox"/> Other: _____
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PERMIT APPROVAL  
*(W&M or VIMS Annual Permit Holder / UBO)*

_____	_____	_____
<i>Name of Permit Approver</i>	<i>Date of Approval</i>	<i>Signature of Approver</i>

### Part 3 - Inspection Reviews and Permit Closeout

CERTIFICATION OF INSPECTION COMPLETION

<input type="checkbox"/> Architectural	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Fire Alarm	
<input type="checkbox"/> Framing/Structural	<input type="checkbox"/> Electrical	<input type="checkbox"/> Fire Sprinkler	
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Roof	<input type="checkbox"/> Other (noted above)	

*Project Inspector Signature and Date Signed*

*By initialing in the applicable box, it is confirmed inspections have occurred the work is substantially complete to the satisfaction of the project inspector.*

PERMIT CLOSEOUT REQUEST *(by Permit Applicant or authorized representative)*

_____	_____	_____	_____
<i>Applicant Name</i>	<i>Applicant Title/Department</i>	<i>Date of Application</i>	<i>Signature of Applicant</i>

PERMIT CLOSEOUT APPROVAL

_____	_____	_____
<i>(W&amp;M or VIMS Annual Permit Holder / UBO)</i>	<i>Name of Permit Approver</i>	<i>Date of Approval</i>
		<i>Signature of Approver</i>