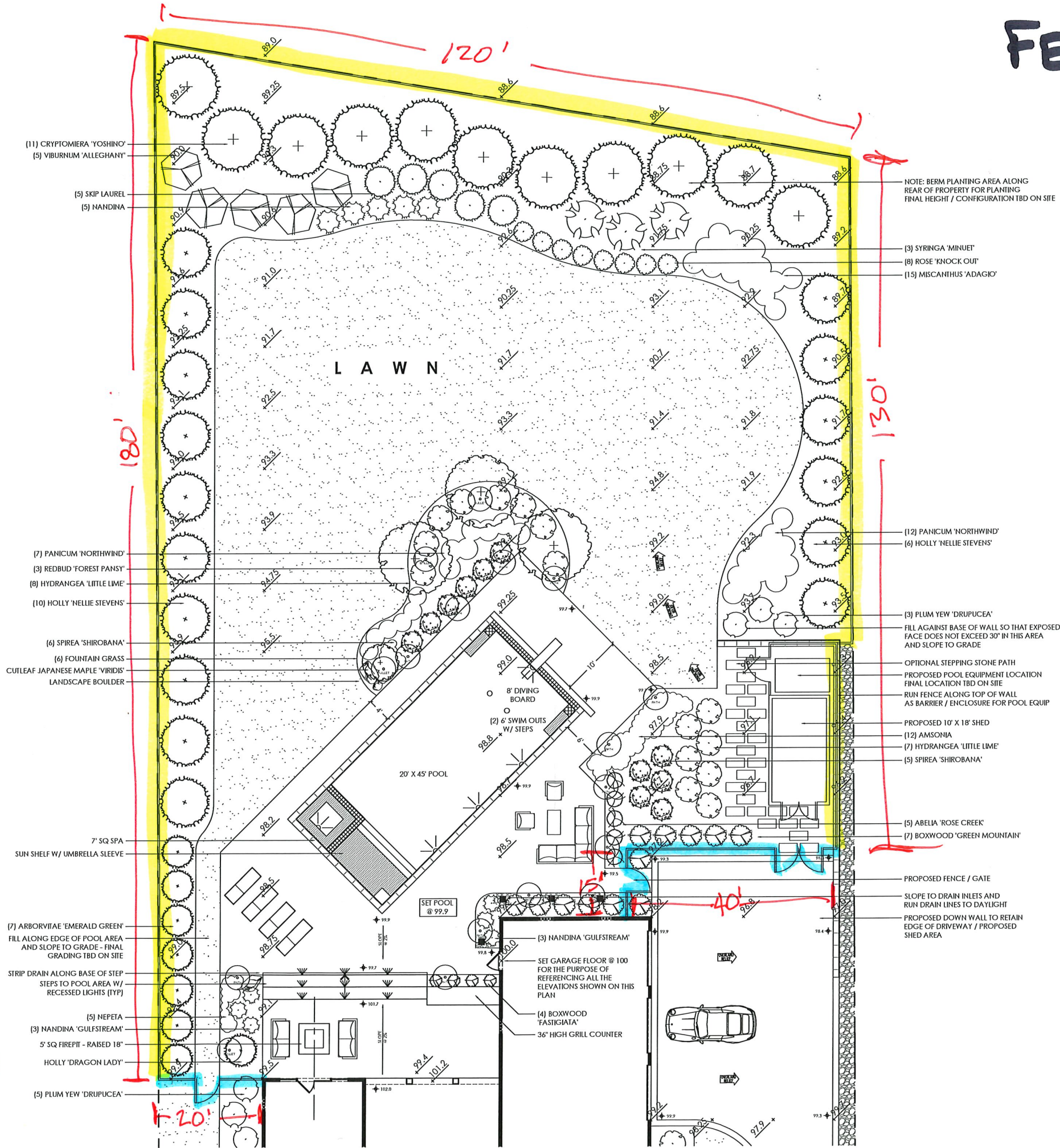


FENCE 1007



4' BLACK CHAIN LINK  
4' BLACK STEEL (TEXAS)

FENCE PLAN.

REAR YARD LAYOUT  
SCALE 1/8" = 1'-0"

REAR YARD LAYOUT

Permit #: \_\_\_\_\_



## TOWN OF WARRENTON

Department of Community Development

PO BOX 341  
WARRENTON, VIRGINIA 20188  
http://www.warrentonva.gov  
Permittech@warrentonva.gov  
(540) 347-2405

### BUILDING / ZONING PERMIT

#### PROPERTY INFORMATION

Property Owner: Nicholas & Angela Bottini  
Email: nickb@comdor-dist.com Telephone: 571-334-3400  
Parcel Address: 266 Falmouth Street  
Property ID: 6984-51-4876-0000 Acres: \_\_\_\_\_ Lot #: \_\_\_\_\_ of \_\_\_\_\_ Subdivision

#### TENANT/BUSINESS INFORMATION (if applicable)

Tenant/Business Name: \_\_\_\_\_  
Tenant Address/Suite: \_\_\_\_\_  
Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

#### APPLICANT INFORMATION

Name: Same as Property Information  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Owner ☒ Lessee ☐ Contractor ☐ Agent ☐ Other: \_\_\_\_\_

#### PROPOSED WORK

Scope of Work (select all that apply):

<i>Zoning Only</i>	<i>Building &amp; Zoning</i>		
<input type="checkbox"/> Confirmation Letter	<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Fire Alarm/Suppression	<input type="checkbox"/> New Finished/Unfinished
<input type="checkbox"/> Determination Letter	<input type="checkbox"/> Addition	<input type="checkbox"/> Fireworks	<input type="checkbox"/> Other: _____
<input checked="" type="checkbox"/> Fence	<input type="checkbox"/> Alteration	<input type="checkbox"/> Fire Sprinkler	<input type="checkbox"/> Plumbing
<input type="checkbox"/> New Address	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Gas	<input type="checkbox"/> Repair/Replacement
<input type="checkbox"/> Temporary Use	<input type="checkbox"/> Demolition	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Retaining Wall
<input type="checkbox"/> Text Amendment	<input type="checkbox"/> Electrical	<input type="checkbox"/> Moving Structure	<input type="checkbox"/> Swimming Pool
<input type="checkbox"/> Shed (>256 sqft)	<input type="checkbox"/> Elevator	<input type="checkbox"/> New Building	<input type="checkbox"/> Sign

Amendment to Existing Permit? If Yes, List Permit #: \_\_\_\_\_

Describe in detail the proposed work being done: [note: if use of building is being changed or if joint use is being added, enter all new proposed use(s) and also define existing use(s).]

Fence perimeter of rear yard. 4'0" Black painted steel fence from house to side property line on both sides with two 4'0" wide single gates and one 8'0" wide double gate. 4'0" Black chain link fence at property line around balance of rear yard.  
Fence and property location details attached.

#### UTILITY INFORMATION (building permits only)

Water: Private ☐ Public ☐ Septic/Sewer: Public ☐ Private ☐ Electrical: Private ☐ Public ☐  
Electrical Provider \_\_\_\_\_ Amps \_\_\_\_\_ New or Existing Service \_\_\_\_\_



Permit #: \_\_\_\_\_

MECHANIC'S LIEN AGENT (building permits only)

☒ No Mechanic's Lien Agent Requested

☐ Yes Mechanic's Lien Agent Requested

Mechanic's Lien Agent Name: \_\_\_\_\_

Address & Phone: \_\_\_\_\_

CONSTRUCTION INFORMATION (building permits only)

If residential, how many bedrooms total will exist upon completion of construction? \_\_\_\_\_

Structure Height: \_\_\_\_\_ ft. (Measured from average finished grade) Number of Stories: \_\_\_\_\_

Building Code Used: \_\_\_\_\_ VA Residential Code Year: \_\_\_\_\_ VA Construction Code Year: \_\_\_\_\_

Valuation of work: \$ \_\_\_\_\_

RESIDENTIAL (Square Footage)			COMMERCIAL (Square Footage)	
Existing/New	Existing/New	Existing/New	Existing/New	Existing/New
____/____ 1 <sup>st</sup> floor	____/____ Garage Attached	____/____ Porch	____/____ 1 <sup>st</sup> floor	____/____ Porch
____/____ 2 <sup>nd</sup> floor	____/____ Garage Detached	____/____ Deck	____/____ 2 <sup>nd</sup> floor	____/____ Deck
____/____ 3 <sup>rd</sup> floor	____/____ Carport	____/____ Stoop	____/____ 3 <sup>rd</sup> floor	____/____ # Fireplace
____/____ Basement Finished	____/____ Walk-Up	____/____ Pool	____/____ 4 <sup>th</sup> floor	____/____ Pool
____/____ Basement Unfin.	____/____ LPG Tank	____/____ Shed	____/____ Other	____/____ Signs
____/____ #LPG Fireplaces	UST- AST/ Gallons	____/____ Other	____/____ Other	____/____ Other
____/____ #Wood Fireplaces	____/____ #Oil Tank	____/____ TOTAL	____/____	____/____ TOTAL

APPLICANT CERTIFICATION

I hereby certify that:

- I have read and examined this application and know the information provided is true and correct.
- I acknowledge that the granting of a permit does not presume to give authority to violate or cancel the provisions of any local or state law regulating construction or the performance of construction, and by applying for this permit I hereby agree to adhere to all Town and State laws.
- I acknowledge that an application for a permit for any proposed work shall be deemed to have been abandoned six months after the date of filing unless such application has been pursued in good faith or a permit has been issued.
- I acknowledge that the Building/Zoning Official shall be permitted to revoke a permit if work on the site authorized by the permit is not commenced within six months after issuance of the permit, or if the authorized work on the site is suspended or abandoned for a period of six months after the permit is issued. I acknowledge that the permit holder is responsible to call for an inspection within the 1<sup>st</sup> six months as proof work has commenced. Inspections will be required at six month intervals as proof of continuance of construction and shall extend the permit six months from that date. If no inspections are performed within the six month interval a request for an extension of the permits may be made, with additional fees charged.
- I acknowledge that the Building Official shall be permitted to require a three year time limit to complete construction of new detached single-family dwellings, additions to detached single-family dwellings and residential accessory structures. The time limit shall begin from the issuance date of the permit.
- I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as their agent. \_\_\_\_\_ Agent's Initials

*Nicholas & Angela Bottini* 9-29-25  
9/29/25  
Signature & Date

Nicholas & Angela Bottini  
Print Name

# FENCE 4027

Permit #:\_\_\_\_\_

<div><div>Type of Contractor:</div><div><div><input type="checkbox"/> Building</div><div><input type="checkbox"/> Electrical</div><div><input type="checkbox"/> Plumbing</div><div><input type="checkbox"/> Mechanical</div><div><input type="checkbox"/> Gas Fitting</div><div><input type="checkbox"/> Outside Line</div><div><input type="checkbox"/> Inside Line</div><div><input type="checkbox"/> Tank Installation</div></div></div>	<div><div>Name of Contractor:</div><div>Superior Fence &amp; Rail</div></div> <div><div>Mailing Address:</div><div>8417 Terminal Rd Bay C, Lorton, VA 22079</div></div> <div><div>Phone Number:</div><div>(571) 491-4738</div><div><div>EMAIL:</div><div></div></div></div> <div><div>State Contractor's License No:</div><div></div><div><div>Class:</div><div><input type="checkbox"/>A <input type="checkbox"/>B <input type="checkbox"/>C</div></div></div> <div><div>Classification:</div><div></div><div><div>Expiration Date:</div><div>___/___/___</div></div><div><div>Business License #</div><div></div></div></div> <div><div>Description of Work AND Valuation of work:</div><div>Supply and install 400' of chain link fence and 75' of steel fence with three gates</div><div></div><div></div></div>
<div><div>Type of Contractor:</div><div><div><input type="checkbox"/> Building</div><div><input type="checkbox"/> Electrical</div><div><input type="checkbox"/> Plumbing</div><div><input type="checkbox"/> Mechanical</div><div><input type="checkbox"/> Gas Fitting</div><div><input type="checkbox"/> Outside Line</div><div><input type="checkbox"/> Inside Line</div><div><input type="checkbox"/> Tank Installation</div></div></div>	<div><div>Name of Contractor:</div><div></div></div> <div><div>Mailing Address:</div><div></div></div> <div><div>Phone Number:</div><div></div><div><div>EMAIL:</div><div></div></div></div> <div><div>State Contractor's License No:</div><div></div><div><div>Class:</div><div><input type="checkbox"/>A <input type="checkbox"/>B <input type="checkbox"/>C</div></div></div> <div><div>Classification:</div><div></div><div><div>Expiration Date:</div><div>___/___/___</div></div><div><div>Business License #</div><div></div></div></div> <div><div>Description of Work AND Valuation of work:</div><div></div><div></div><div></div></div>
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Permit #: \_\_\_\_\_

FOR OFFICIAL USE ONLY: Zoning					
<input type="checkbox"/>	APPROVED	<input type="checkbox"/>	DENIED	Date Received: _____	Zoning District: _____
Notes/Restrictions:					
					Fee Due: \$ _____
Zoning Administrator/Staff Signature & Date					Date Paid: _____

FOR OFFICIAL USE ONLY: BUILDING							
Notes/Restrictions:							
FEES:	Minimum Submittal Fee:		Building:		Mechanical:	Virginia Fee Levy: \$ _____	
	# _____	\$ _____	# _____	\$ _____	# _____		\$ _____
	# _____	\$ _____	# _____	\$ _____	# _____		\$ _____
	# _____	\$ _____	# _____	\$ _____ E	# _____		\$ _____
	# _____	\$ _____	# _____	\$ _____	Certificate of Occupancy:		
	\$ _____		# _____	\$ _____ P	# _____	\$ _____	Total Building Fees: \$ _____
			# _____	\$ _____ V	# _____	\$ _____	
			# _____	\$ _____	# _____	\$ _____	- Less Amount Paid:
			# _____	\$ _____	# _____	\$ _____	\$ _____
	Photocopies: Black						
# _____	\$ _____						
# _____	\$ _____						

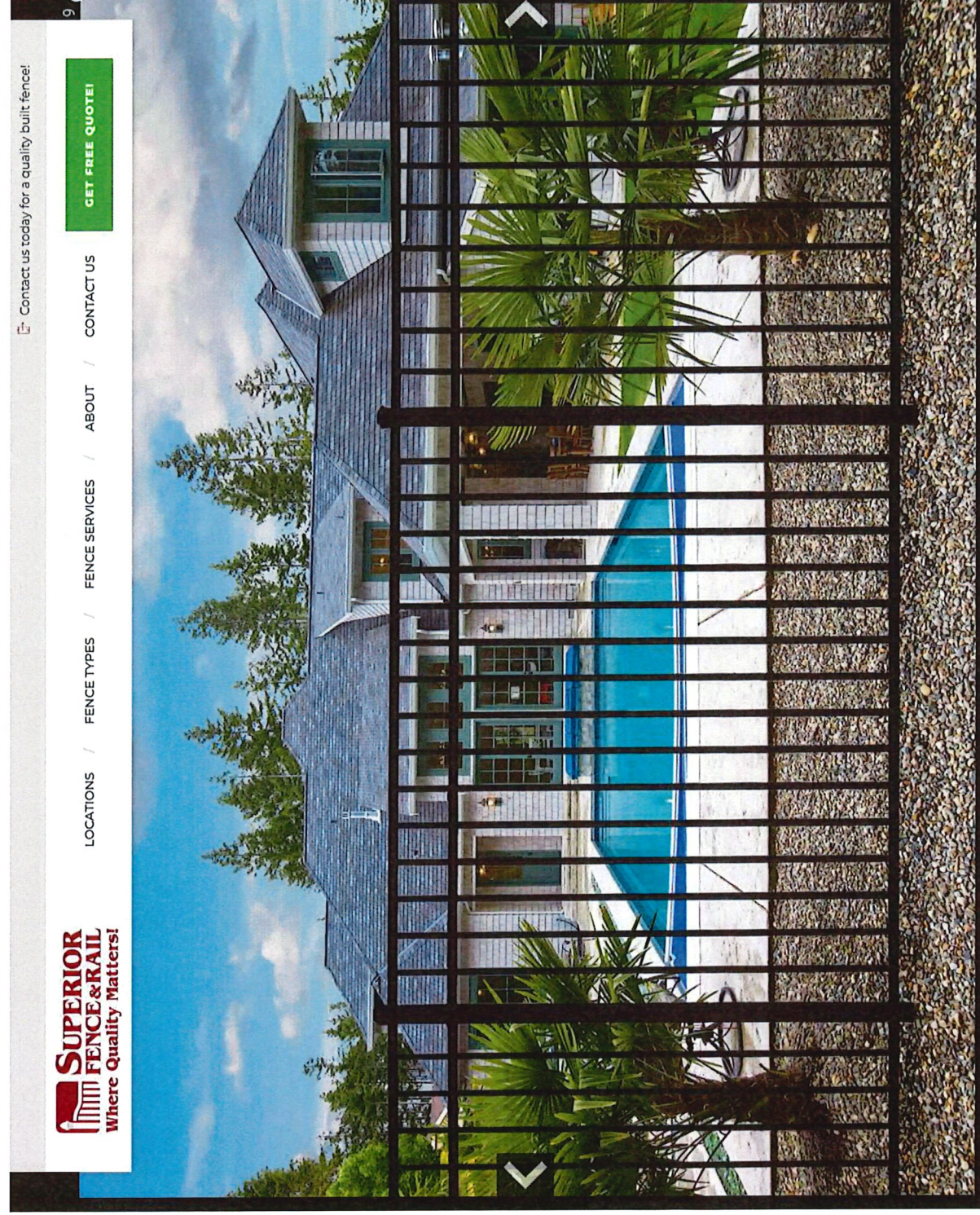
TOTAL FEES DUE (Building/Zoning Combined): \_\_\_\_\_

Date Paid: \_\_\_\_\_



4'0" STEEL BLACK (TEXAS)

FENCE 6007





4'0" Black Chain Link

FENCE 7 of 7

