

**County of Lee  
Department of Building Safety & Inspection**

**Application for Accessory Building / Storage Building**

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Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Manufacturer /Contractor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_

VA Contractor's Registration # \_\_\_\_\_

Dimensions of Building: Length \_\_\_\_\_ x Width \_\_\_\_\_  
Square Ft. \_\_\_\_\_

Building Use \_\_\_\_\_

Utility \_\_\_\_\_ Residential \_\_\_\_\_ Commercial \_\_\_\_\_

**Location Specifications**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Cost \_\_\_\_\_

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Application is hereby made for a building permit for an accessory building in accordance with the description and for the purpose herein set forth. This application is made subject to all County and/or Town, State Laws, Ordinance, Rules and Regulations now in force, affecting or relating thereto and which shall be agreed to by the undersigned applicant and which shall be deemed a condition entering into the exercise of the permit.

**Applicant's Signature** \_\_\_\_\_