

BUILDING PERMIT APPLICATION
 Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 7-15-16

Application Accepted: BD-2016-00546

GPIN: 7715-30-6202

Issued: 7-22-16

TM# 63-40-0-3-0

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address <u>839 Running Cedar Court</u>		District <u>MANAKIN-SABOT</u>		
	Owner <u>P. Mason Pollard, Jr</u>		Phone # <u>804-208-0573</u>		
	Address <u>425 Shadow Creek Lane, Manakin-Sabot, VA 23103</u>				
	Proposed Use <u>NA</u>	Current Use <u>NA</u>	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreeage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District <u>RR</u>		
	Front Setback <u>55' from Row</u>	Center Line Setback	Rear Setback <u>5'</u>	C.U. Permit <u>None</u>	Variance <u>None</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: [Signature] Date 7/19/16

Applicant/Contact: John ROBERTSON Phone 804-310-7465

Email: JOHN@Homekeepers.ORG

CONTRACTOR INFORMATION	Contractor <u>ROBERTSON + Company Custom Builders Inc</u>		Phone <u>804-750-1948</u>	
	Address <u>8501 Patterson Ave, Richmond, VA 23229</u>			
	Contractor License Number <u>2701-037776</u>	Type <u>A</u>	Expiration <u>11-30-2016</u>	

Description of Work	Scope of Work: <u>4 ft dry stack Retaining wall (2' to 4' max)</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors <u>N/A</u>	Total Sq. Ft. <u>N/A</u>	Finished Sq. Ft. <u>N/A</u>	Unfinished Sq. Ft. <u>N/A</u>	# of Bedrooms <u>N/A</u>

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	<u>\$7,000</u>
Excludes All Trades Permits	

Application Fee	\$ <u>43.50</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>.87</u>
R&D Total	\$ <u>69.37</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

X [Signature]

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 7/21/16

Application Date: 7-8-2016
 Application Accepted: BP-2016-00530
 Old Map Number: 58.32.3.A
 GPIN: 725-33-0619

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address 15075 Capital One Drive, Richmond, VA 23238		District
Owner Capital One		Phone # 804-814-4617
Address 15075 Capital One Drive, Richmond, VA 23238		
Proposed Use Assembly	Current Use Assembly	Existing Buildings on Property Multiple Office Buildings and Parking Decks
Proposed Occupant Load (Commercial) No change to original 3784	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
Side Setback	Side Setback	C O A	Flood Zone
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Kim Gibson	Phone 804-233-6921
Email: kgibson@wmjordan.com	

Contractor W M Jordan Company, Inc.	Phone 804-233-6921
Address P.O. Box 1337, Newport News, VA 23601	
Contractor License Number 2701 004636A	Type Class A
Expiration 10-31-2016	

Description of Work				
Scope of Work: Interior demolition and renovation to select areas of both levels - no change of occupancy or use. <i>Phase I</i>				
SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors 2	Total Sq. Ft. 99,690	Finished Sq. Ft. 134,717	Unfinished Sq. Ft. 0	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	\$536,000
<i>Excludes All Trades Permits</i>	

Application Fee	\$ _____
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>101.68</u>
RLD Total	\$ <u>5185.68</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Kim Gibson

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM: 666.1.2

Application Date: 7-6-16

Application Accepted: BP-2016-00521

GPIN: 7723-26-0038

Issued: 7/20/2016

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address		12829 River Road Rich Va 23238		District	
Owner		Benedictine Society of Va		Phone #	
Address		12829 River Rd Rich Va 23238		804-350-4903	
Proposed Use		Current Use		Existing Buildings on Property	
Proposed Occupant Load (Commercial)		Acreage		Commercial Use	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision		Proffer		Amount:		Date Paid:			
		<input type="checkbox"/> Yes <input type="checkbox"/> No							
New Street Address				Zoning District					
Front Setback		Center Line Setback		Rear Setback		C.U. Permit		Variance	
Side Setback		Side Setback		C O A		Flood Zone			
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:									

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Mark Gentry Phone 804-350-4903

Email: mgentry@richmondmonks.org

CONTRACTOR INFORMATION

Contractor		Phone			
Address					
Contractor License Number		Type		Expiration	

Description of Work

Scope of Work: ~~Install electrical and put up~~ new scoreboard on practice field on back of property

SEWER Public/Private		WATER Public/Private		# of Bathrooms	
# of Floors		Total Sq. Ft.		Finished Sq. Ft.	
				Unfinished Sq. Ft.	
				# of Bedrooms	

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	\$ 25,000
Excludes All Trades Permits	

Application Fee	\$ 229.50
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 4.59
RTD Total	\$ 234.09

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

BUILDING PERMIT APPLICATION

Goochland County Building Inspection Department

P.O. Box 119

Goochland, VA 23063

(804)556-5305 Fax (804)556-5651 TDD (804)556-5300

Application Date: 7-13-16
 Tax Map Number: 39-1-0-15 A
 GPIN Number: 6727-15-7167
 Permit Number: BP-2016-00538
 Fee: 158.42
 Issue Date: ISSUED: 7/20/16

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

SITE ADDRESS <u>1810 HASKIN RD GOOCHLAND VA.</u>		DISTRICT
OWNER <u>FREDERICK HEHHAUSER, JR</u>		PHONE # <u>804-356-7993</u>
ADDRESS <u>1810 HASKIN RD</u> <u>GOOCHLAND VA. 23063</u>		

USE COMPLIANCE REQUIREMENTS

PROPOSED USE <u>det garage</u>	CURRENT USE	EXISTING BUILDINGS ON PROPERTY <u>HOUSE</u>
PROPOSED OCCUPANT LOAD	LOT SIZE <u>3.0 ac</u>	COMMERCIAL USE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
SUBDIVISION	Proffer <u>Y</u> <input checked="" type="checkbox"/> <u>N</u>	Amount: Date Paid:
NEW STREET ADDRESS		ZONING DISTRICT <u>A1</u>
FRONT SETBACK <u>75' OFF ROW</u>	CENTER LINE SETBACK	REAR SETBACK <u>5'</u>
C.U. PERMIT <u>None</u>	VARIANCE <u>None</u>	FLOOD ZONE <u>N/A</u>
SIDE SETBACK <u>5'</u>	SIDE SETBACK <u>5'</u>	CENSUS TRACK
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		

This application requires 2 copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection. Work may be rejected if locations do not match the site plan approved by the Department of Community Development Official.

Planning & Zoning Officer: David [Signature]

CONTRACTOR INFORMATION

CONTRACTOR <u>JUNE CONSTRUCTION INC</u>	PHONE <u>804-305-1700</u>
ADDRESS <u>2600 BROADST RD CHATELAIN SPRING VA. 23065</u>	
CONTRACTOR LICENSE NUMBER <u>2705022469 CLASS A</u>	TYPE <u>CBC ABC</u>
EXPIRATION <u>4-30-17</u>	
SCOPE OF WORK <u>30x32 DETACHED GARAGE</u>	

DESCRIPTION OF WORK

CONSTRUCTION TYPE: <u>WEST GARAGE</u>	ADDING ADDITION <u>Y</u> <input checked="" type="checkbox"/> <u>N</u>
SEWER PUBLIC / <u>PRIVATE</u>	ADDING KITCHEN <u>Y</u> <input checked="" type="checkbox"/> <u>N</u>
WATER PUBLIC / <u>PRIVATE</u>	ADDING BEDROOMS <u>Y</u> <input checked="" type="checkbox"/> <u>N</u>
# OF FLOORS <u>1</u>	TOTAL SQ. FT. <u>960</u>
FINISHED SQ. FT. <u>0</u>	UNFINISHED SQ. FT. <u>960</u>
# OF BEDROOMS <u>0</u>	# OF BATHROOMS FULL <u>0</u> HALF <u>0</u>
USE FOR FARM USE EXEMPTION	ACREAGE

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK
Includes labor, materials, subcontractors, overhead and profit.

BUILDING	<u>20,400</u>
----------	---------------

App. Fee 133.42
 Zoning 25.00
 State Levy —
 Total 158.42

PERMIT FEE SCHEDULE: Fee is based on the building value of the job. \$0 to \$4000 of value\$30.00 Above \$4000 \$4.50 per \$1000 of assessed value. Add 1% state levy to fee.

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature]

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 7/18/16

Application Date: **received**
 7-14-16

Application Accepted: **BP-2016-00541**

Old Map Number: **20-21-0-42-0**

GPIN: **6840-94-2192**

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address	3005 Willow Trace Ln.		District
Owner	Kevin French		Phone #
Address	3005 Willow Trace Ln.		
Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
New Street Address		Zoning District	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
Side Setback	Side Setback	C O A	Flood Zone
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: **Myler Poindexter** Phone **804 495 4646**

Email: **mpoindexter@jesnow.com**

CONTRACTOR INFORMATION	Contractor	JES Construction		Phone	804 495 4646
	Address	2540 Southland dr.			
	Contractor License Number	Type	Expiration		
	220 506 8655	A	4.30.18		

Description of Work	Scope of Work: (2) crawl space supports and 8' of I-beam				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	3846.00
Excludes All Trades Permits	

Application Fee	\$ 30.00
Zoning Fee	\$-----
Septic/Well Fee	\$-----
State Levy Fee	\$.60
RLD Total	\$ 30.60

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: **Myler Poindexter**

BP-2016-00536

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

ISSUED 7/18/2016

Application Date: 7/13/16

Application Accepted: 7/13/16

Old Map Number: 48-13-0-A-1

GPIN: 7726-69-659

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 1771 Three Chopt Rd		District
	Owner STUART ROBINSON		Phone # 804-218-3581
	Address 1771 Three Chopt Rd. Manakin Sabot, VA 23233		
	Proposed Use	Current Use	Existing Buildings on Property Main house and Detached garage
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A2		
	Front Setback 75' 6" ROW	Center Line Setback	Rear Setback 35'	C.U. Permit None	Variance None
	Side Setback 20'	Side Setback 24'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Floyd Date: 7/14/16

Applicant/Contact: Carlos Rios Phone: 804-304-4725

Email: c.r.homes@comcast.net

CONTRACTOR INFORMATION	Contractor Carlos Rios / See R Homes Construction		Phone 804-304-4725
	Address 3109 Mountain Rd, Glen Allen VA 23060		
	Contractor License Number 2705112579	Type Class "A" CBC RBC	Expiration 1-31-17

Description of Work	Scope of Work: Build a self-standing treated wood deck with a roof 20'x5' attached to main house roof with rafters.				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
	# of Floors Tri-level	Total Sq. Ft. 7,800 10,347	Finished Sq. Ft. 7,800	Unfinished Sq. Ft. 1003 sq ft	# of Bedrooms 3

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	10,000
Excludes All Trades Permits	

Application Fee	\$ 57.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$ -
State Levy Fee	\$ 1.14
RLD	\$ 83.14

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Carlos Rios

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 7-11-16

Application Accepted: BP-2016-00533

Old Map Number: 32-1-50

GPIN: 60778-74-9263

Issued 7/18/16

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 2380 RED STONE DR		District	
	Owner STEVE + SANDRA CREEKMORE		Phone # 804-556-3171	
	Address 2380 RED STONE DR MAIDENS 23102			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District A2		
Front Setback 55' OFF ROW	Center Line Setback -	Rear Setback 35'	C.U. Permit None	Variance None
Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Floyd Date: 7/13/16

Applicant/Contact: CLASSIC CONSTRUCTION - JUSTON STILTONER Phone: 804-794-5690
 Email: J.STILTONER@CLASSICCONSTRUCTIONEXT.COM 543-0761

CONTRACTOR INFORMATION	Contractor CLASSIC CONSTRUCTION		Phone 804-794-5690	
	Address 11622 BUSY ST RICHMOND VA 23236			
	Contractor License Number 2705062408	Type CLASS A	Expiration 4-30-17	

Description of Work	Scope of Work: DEMO EXISTING DECK BUILD NEW SMALLER DECK USING COMPOSITE DECKING, VINYL RAILING. 16X16 NEW SIZE			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. 256	Finished Sq. Ft.	Unfinished Sq. Ft. 256
			# of Bedrooms	

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	15,000
Excludes All Trades Permits	

Application Fee	\$ 79.50
Zoning Fee	25.00
Septic/Well Fee	\$
State Levy Fee	\$ 1.59
RED Total	\$ 106.09

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature]

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 5/13/16 **received** 518-16
 Application Accepted: DP-2016-00411
 Old Map Number: TM# 58-1-0-109-A
 GPIN: 7725-37-7775-9998

Issued: 7/18/2016

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address: 1717 Hockett Rd 12804 Tuckard Creek Parkway		District
	Owner: SBA Communications/ Rich, VA 23238		Phone #: 704 527 0003 x4118
	Address: 4402 G Stuart Andrew Blvd Charlotte, NC 28217		
	Proposed Use: cell tower	Current Use	Existing Buildings on Property
Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District: M1		
	Front Setback: 75' off Row	Center Line Setback	Rear Setback: 10'	C.U. Permit: 2011-00012	Variance: N/A
	Side Setback: 10'	Side Setback: 10'	COA: N/A	Flood Zone: N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David T. Ford Date: 6/13/16

Applicant/Contact: Luke Vincignerra Phone: 704-527-0003 x4118
 Email: vincignerra@shasite.com

CONTRACTOR INFORMATION	Contractor: Signal Point Systems	Phone:
	Address: 270 Shiloh Rd Ste 100 Kennesaw GA 30144	
	Contractor License Number: 2705056731	Type: Bldg, Etc

Description of Work	Scope of Work: antennas on existing cell tower				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	10,000
Excludes All Trades Permits	

Fee Pd. owed \$50.00

Application Fee	\$ 87.00
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 1.74
R-LD Total	\$ 88.74

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature]

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 7/18/16

Application Date: 6/11/16
 Application Accepted: BP-2016-00456
 Old Map Number: SN-35-14
 GPIN: M05-SA-0414

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 910 Merchant Lee Place Manakin Sabot, VA 23103		District	
	Owner Anthony Scott Sawyer		Phone # 804 387 9853	
	Address			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	Side Setback	Side Setback	COA	Flood Zone
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.			

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Anthony Scott Sawyer Phone: 804 387 9853
 Email: _____

CONTRACTOR INFORMATION	Contractor Anthony Scott Sawyer		Phone	
	Address 910 Merchant Lee Pl Manakin Sabot, VA 23103			
	Contractor License Number owner	Type	Expiration	

Description of Work	Scope of Work: Finish attic into Home Theater existing				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 714	Finished Sq. Ft. 714	Unfinished Sq. Ft.	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	* \$ 3,500
Excludes All Trades Permits	

Application Fee	\$ 30.00
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$.60
RD Total	\$ 30.60

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: AS

BUILDING PERMIT APPLICATION
 Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 7-6-16

Application Accepted: BP-2016-00517

GPIN: 6757-46-8337

Issued: 7.12.2016

TM# 42-7-0-A-1

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address	1855 Cedar Pt. Rd. - Goochland		District
Owner	JOANNIE BALDWIN		Phone # 804-556-4676
Address	1855 Cedar Pt. Rd.		
Proposed Use	Current Use	Existing Buildings on Property	
Sunroom	Deck	House	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
New Street Address		Zoning District	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
Side Setback	Side Setback	C O A	Flood Zone
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: THOMAS RANSONE Phone: 804-874-4707

Email: TRANSONE@MAC.COM

CONTRACTOR INFORMATION	Contractor	T. COURTLAND CO.		Phone
	Address	2821 EARLSWOOD RD MILLCROFT, VA.		
	Contractor License Number	Type	Expiration	
	2705057858	BLD.	8-31-16	

Description of Work	Scope of Work:				
	convert existing deck to sun room				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	1	264	264	264	

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	\$14000
Excludes All Trades Permits	

Application Fee	\$ 75.00
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 1.50
RLD Total:	\$ 76.50

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

X

BUILDING PERMIT APPLICATION

Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 7.12.16

Application Date: 7-11-16

Application Accepted: BP-2016-00526

Old Map Number: 16-1-0-62-0

GPIN: 6800-15-9637

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address 2956 TABSCOTT RD, COLUMBIA, VA 23038		District
Owner DORIS F. MCKENZIE		Phone # 804-457-3255
Address 3255 TABSCOTT RD, COLUMBIA, VA 23038		
Proposed Use RESIDENTIAL	Current Use RESIDENTIAL	Existing Buildings on Property SINGLE FAMILY HOME
Proposed Occupant Load (Commercial)	Acreage 1.87	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District A-1	
Front Setback 75' 000 property line	Center Line Setback	Rear Setback 35	C.U. Permit
Side Setback 5	Side Setback 5	COA	Flood Zone
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: D. Baines Date: 7-11-2016

Applicant/Contact: DORIS F. MCKENZIE	Phone 804-457-3255
Email: drmk17@gmail.com	

CONTRACTOR INFORMATION	Contractor		Phone
	Address		
	Contractor License Number	Type	Expiration

Description of Work	Scope of Work: INSTALL METAL 2 CAR CARPORT OVER PARKING PAD ALREADY ON PROPERTY. 24' X 26' WITH BRACING GABLE ENDS AND ANCHOR BOLTS				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors NONE	Total Sq. Ft. NONE	Finished Sq. Ft.	Unfinished Sq. Ft. 624	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

624

Building	*1,942.79	9,360.00
Excludes All Trades Permits		

Application Fee	\$ 54.12
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 1.08
Total	\$ 80.20

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Doris F. McKenzie

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 7-7-16
 Application Accepted: BP-2016-00525
 Old Map Number: 63.40.3
 GPIN: 7715-30-6202

Issued 7.12.16

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address <u>839 Running Cedar Court</u>		District <u>MANAKIN-SABOT</u>		
	Owner <u>P. Mason Powell Jr</u>		Phone # <u>804-708-0573</u>		
	Address <u>425 SHADOW CREEK LANE, MANAKIN-SABOT, VA 23103</u>				
	Proposed Use <u>GARDEN PERGOLA</u>	Current Use <u>N/A</u>	Existing Buildings on Property <u>Single Family Home</u>		
	Proposed Occupant Load (Commercial) <u>N.A.</u>	Acreage <u>N.A.</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District <u>RR</u>	
	Front Setback <u>55' off ROW</u>	Center Line Setback <u>---</u>	Rear Setback <u>35'</u>	C.U. Permit <u>None</u>	Variance <u>None</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	C O A <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.				

Planning & Zoning Officer: [Signature] Date 7/11/16

Applicant/Contact: John Robertson Phone 804-310-7465
 Email: John @ Homekeepers, org

CONTRACTOR INFORMATION	Contractor <u>Robertson + Company Custom Builders</u>		Phone <u>804-750-1948</u>	
	Address <u>8501 Patterson Avenue, Henrico VA 23229</u>			
	Contractor License Number <u>2701-037776</u>	Type <u>A</u>	Expiration <u>11-30-2016</u>	

Description of Work	Scope of Work: <u>FREE STANDING PERGOLA GARDEN FEATURES</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>432</u>	<u>N/A</u>

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		Application Fee	\$ <u>19.50</u>
Building	<u>\$15,000</u>	Zoning Fee	\$ -----
Excludes All Trades Permits		Septic/Well Fee	\$ -----
		State Levy Fee	\$ <u>1.54</u>
		RLD Total	\$ <u>106.09</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: [Signature]

received
6/29/16

BUILDING PERMIT APPLICATION
 Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay
 TM# 12-1-0-52-A

Application Date: 6/29/16
 Application Accepted: BP-2016-00500
 GPIN: 6832-43-0174
 Issued: 7-12-2016

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 4398 THREE CHOOT RD. GUM SPRING, VA. 23065		District 23065			
	Owner STEVEN CARVER / LAURA FLOWERS		Phone # (434) 962-3487			
	Address SAME AS ABOVE					
	Proposed Use PRIMARY RESIDENCE	Current Use PRIMARY RESIDENCE	Existing Buildings on Property			
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount:	Date Paid:
	New Street Address				Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance	
	Side Setback	Side Setback	C O A		Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:					
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.					

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Steven Carver Phone: 434) 962-3487

Email:

CONTRACTOR INFORMATION	Contractor OWNER		Phone	
	Address SAME			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: FINISH EXISTING BASEMENT, ADDS ONE BEDROOM & BATHROOM				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	15,000
Excludes All Trades Permits	

Application Fee	\$ 79.50
Zoning Fee	\$ 0
Septic/Well Fee	\$
State Levy Fee	\$ 1.59
RLD	\$ 81.09

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

BUILDING PERMIT APPLICATION

Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued: 7.12.2016

Application Date: 7/5/16
 Application Accepted: DP-2016-00514
 Old Map Number: 48-1-0-56-0
 GPIN: 7138-20-0579

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 7029 Benhall Circle		District	
	Owner MR & Mrs Rex Hockemeyer CD Eagle Homes		Phone # 804-929-1074	
	Address 7029 Benhall Circle, Glen Allen, VA 23059			
	Proposed Use Dwelling / Deck	Current Use Dwelling	Existing Buildings on Property Dwellings	
	Proposed Occupant Load (Commercial)	Acreage 10,190 SQ FT	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Parkside Village		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	
	New Street Address		Zoning District RPUD	
	Front Setback 30' from Pave	Center Line Setback	Rear Setback 50' B/S	C.U. Permit None
	Side Setback 20' B/S	Side Setback 20' B/S	COA N/A	Variance None
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Ford Date: 7/7/16

Applicant/Contact: Add A Deck Inc. Steve Murphy Phone: 804-285-4239
 Email: SMURPHY@addadeck.com

CONTRACTOR INFORMATION	Contractor ADD A Deck Inc.		Phone 804-285-4239	
	Address 6408 Mallory Dr Henrico VA 23226			
	Contractor License Number 2701-033201A	Type CLASS A	Expiration 11/2016	

Description of Work	Scope of Work: <u>Build Deck & Steps on rear of dwelling</u>				
	SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 265	Finished Sq. Ft.	Unfinished Sq. Ft. 265	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	\$ 15,900.00
Excludes All Trades Permits	

Application Fee	\$ 83.50
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 1.67
RLD Total	\$ 110.22

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Steve Murphy

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

ISSUED 7.12.16

Application Date: *7-6-16*

Application Accepted: *BP-2016-00523*

GPIN: *6726-28-1426*

Issued: *TM# 39-1-0-78-0*

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address <i>1501 STOKES STATION RD</i>		District <i>LICK</i>	
	Owner <i>SHELIA VAUGHAN</i>		Phone #	
	Address <i>SAME</i>			
	Proposed Use <i>RESIDENTIAL</i>	Current Use <i>RES.</i>	Existing Buildings on Property <i>YES</i>	
	Proposed Occupant Load (Commercial) <i>NA</i>	Acreeage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	Side Setback	Side Setback	C O A	Flood Zone
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: *LEIGH GORDON* Phone *804-972-3877*

Email: _____

CONTRACTOR INFORMATION	Contractor <i>GORDON BROTHERS CONSI. LLC</i>		Phone <i>804-972-3877</i>	
	Address <i>1820 ROCK CASTLE RD. GOOCHLAND VA 23063</i>			
	Contractor License Number <i>2705144137</i>	Type <i>"A"</i>	Expiration <i>12-31-17</i>	

Description of Work	Scope of Work: <i>REBUILD PORCH IN EXACT LOCATION DUE TO STORM DAMAGE FROM FALLING TREE & REPAIR - REPLACE ROOF</i>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <i>NA</i>	
	# of Floors <i>NA</i>	Total Sq. Ft. <i>NA</i>	Finished Sq. Ft.	Unfinished Sq. Ft.
		# of Bedrooms		

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		<i>Fee waived storm damage</i>	Application Fee \$ _____
Building	<i>\$15,000.00</i>		Zoning Fee \$ _____
Excludes All Trades Permits			Septic/Well Fee \$ _____
		State Levy Fee \$ _____	
		RLD \$ _____	

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

X

received
6-28-16

BUILDING PERMIT APPLICATION
Goochland County Building Inspection Department
P O Box 119
Goochland VA 23063
(804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 6/27/16
Application Accepted: 6/27/16-00491
Old Map Number: 711# 62-38-0-20-0
GPIN: 7704-75-7745

Issued 7.11.2016

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 208 MAYMONT WAY MANASSAS SABOT		District	
	Owner JEFFREY GROSS		Phone # 690-9976	
	Address 208 MAYMONT WAY			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acres	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision The Park @ Manassas Wood		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	
	New Street Address		Amount:	
	Zoning District RPLD		Date Paid:	
	Front Setback 98' 30' off pavement	Center Line Setback	Rear Setback 40' 50' B/S	C.U. Permit
	Side Setback 35' 20' B/S 94'	Side Setback	COA	Flood Zone
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: D. Barnes Date: 6-29-2016

Applicant/Contact: Donald Weaver Phone: 804-437-0094
Email:

CONTRACTOR INFORMATION	Contractor Peck Creations of Richmond		Phone 804-320-2212	
	Address 1855 Huguenot Trail Powhatan VA. 23139			
	Contractor License Number 2705120631	Type A	Expiration 10/31/16	

Description of Work	Scope of Work: INSTALL NEW 16' X 16' SCREENED PORCH ON EXISTING DECK				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft. 256	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	21,000
Excludes All Trades Permits	

Application Fee	\$ 106.50
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 2.13
RLD Total	\$ 108.63

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Donald C. Weaver

received
6-24-16

BUILDING PERMIT APPLICATION
Goochland County Department Of Building Inspection
P O Box 119
Goochland VA 23063
(804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM# 63-37-OB-0

Application Date: 6-24-16
Application Accepted: BP-2016-00488
GPIN: 7723-08-5934
Issued: 7.8.2016

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 380 FLAG STATION RD		District		
	Owner BEN JOHNSON		Phone # 370-2881		
	Address 380 FLAG STATION RD				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage 3.16	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District A 2	
	Front Setback 55' off RUL	Center Line Setback	Rear Setback 5'	C.U. Permit None	Variance None
	Side Setback 5'	Side Setback 5'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Floyd Date: 6/29/16

Applicant/Contact: ULTIMATE POOLS / Steve Lowers Phone: 749-4706

Email:

CONTRACTOR INFORMATION	Contractor ULTIMATE POOLS		Phone	
	Address 2175 LANIER LN ROCKVILLE, VA 23146			
	Contractor License Number 2705026339	Type RFB RBC CBC	Expiration 2-28-17	

Description of Work	Scope of Work: INGROUND 15X32 POOL WITH AUTO COVER ASTM 1346-F				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 480	Finished Sq. Ft.	Unfinished Sq. Ft. 480	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	30,000
Excludes All Trades Permits	

Application Fee	\$ 147.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 2.94
RLD Total	\$ 174.94

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

6-21-16

BUILDING PERMIT APPLICATION
 Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 6/21/16
 Application Accepted: BP-2016-00474
 GPIN: 7723 08 5934
 Issued: 7.8.2016

TM # 63-32-0-B-0

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 380 Flagstation Road		District		
	Owner B. J. Johnson		Phone #		
	Address 380 Flagstation Rd. Richmond VA 23238				
	Proposed Use Pool	Current Use Residential	Existing Buildings on Property House		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District A2/R1	
	Front Setback 40' at low	Center Line Setback	Rear Setback 5'	C.U. Permit N/A	Variance N/A
	Side Setback 5'	Side Setback 5'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Floyd Date: 6/24/16

Applicant/Contact: John Ray Phone: 804-564-1753
 Email: john@dcg-llc.net

CONTRACTOR INFORMATION	Contractor Dynamic Construction Group, LLC		Phone 804-5641753	
	Address 2419 Branford Drive, Henrico, VA 23228			
	Contractor License Number 2705 118965A	Type CBC-RBL-HH-EIE/10/31/2017	Expiration	

Description of Work	Scope of Work: Footings - cm u retaining walls (wala 48") - Pool Deck Footings - Slabs - masonry walls For Pool - Pool Permit By other			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. 1,287.	Finished Sq. Ft.	Unfinished Sq. Ft. 1,287.
			# of Bedrooms	

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	\$22,580
Excludes All Trades Permits	

Application Fee	\$ 90.88
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 2.27
BLD Total	\$ 140.88

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.



received
6-27-16
6/27/2016

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 6/27/2016
 Application Accepted: BP-2016-00496
 Old Map Number: 43-1-0-67-B
 GPIN: 6777-49-4755

Issued 7.8.16

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address <u>1805 Hawk Town Road</u>		District		
	Owner <u>Charles Lowery</u>		Phone # <u>(804) 556-0658</u>		
	Address <u>1805 Hawk Town Road</u>				
	Proposed Use <u>Garage</u>	Current Use	Existing Buildings on Property <u>House</u>		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District <u>A 2</u>		
	Front Setback <u>55' off ROW</u>	Center Line Setback	Rear Setback <u>5'</u>	C.U. Permit <u>None</u>	Variance <u>None</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: <u>5' setback must be survey located</u>	

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: [Signature] Date 6/29/16

Applicant/Contact: Chuck Lowery - OWNER Phone (540) 455-8007
 Email: kenton13@verizon.net

CONTRACTOR INFORMATION	Contractor <u>Carolina Carpets, Inc</u>	Phone <u>800-670-4262</u>
	Address <u>P O Box 1263 Dobson, NC 27017</u>	
	Contractor License Number <u>032260</u>	Type

Description of Work	Scope of Work: <u>Install Steel Building (Garage) Approx 624 Sq. Ft. 24x26</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. <u>624</u>	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>624</u>	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	<u>\$6,000 - \$7,000 6,100.⁰⁰</u>
Excludes All Trades Permits	

Application Fee	\$ <u>54.12</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>1.08</u>
RFD Total	\$ <u>80.20</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature]

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 7.7.16

Application Accepted:

BP-2016-00479

Old Map Number:

S8.25.A.1

GPIN:

7715-34-9803

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address 315 Perrow Lane Manakin Sabot Va 23103 District BROOK RUN

Owner Denise Flinn Phone #

Address 315 Perrow Lane Manakin Sabot Va 23103

Proposed Use Current Use Existing Buildings on Property

Proposed Occupant Load (Commercial) Acreage Commercial Use
 Yes No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision Proffer Amount: Date Paid:
 Yes No

New Street Address Zoning District RR

Front Setback 55' off Row Center Line Setback Rear Setback 5' C.U. Permit N/A Variance N/A

Side Setback 5' Side Setback 35' off COA Flood Zone N/A

APPROVED REJECTED COMMENTS: ROW

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer [Signature] Date 6/24/16

Applicant/Contact: Phone

Email:

CONTRACTOR INFORMATION

Contractor Exquisite pools Phone 804-749-4400

Address 17099 Chisholm Tr L

Contractor License Number 2705752021 Type Class A Expiration 10-31-2017

DESCRIPTION OF WORK

Scope of Work:
Swimming pool with Auto cover + barrier

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. <u>567</u>	Finished Sq. Ft. <u>567</u>	Unfinished Sq. Ft. <u>567</u>	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	<u>36,920</u>
Excludes All Trades Permits	

Application Fee	\$ <u>177.69</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>3.55</u>
BLD Total	\$ <u>206.24</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. **REVIEWED BY:**

[Signature]

BUILDING PERMIT APPLICATION Goochland County Department Of Building Inspection P O Box 119 Goochland VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay TM# 4-3-0-20-0	Application Date: 6-21-16
	Application Accepted: EP-2016-00473
	GPIN: 6803-92-6940
	Issued: 7-7-16

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 4599 SLIPPERY ROCK LANE		District		
	Owner OVASKA, STEVEN J.		Phone # 804-385-6075		
	Address 4599 SLIPPERY ROCK LANE				
	Proposed Use RESIDENTIAL	Current Use RESIDENTIAL	Existing Buildings on Property HOUSE, WORKSHOP		
	Proposed Occupant Load (Commercial)	Acreage 3.45 AC.	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A1		
	Front Setback 75' OFF RW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variance N/A
	Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone	N/A
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer David Floyd Date 6/24/16

Applicant/Contact: STEVEN OVASKA - OWNER	Phone 804-385-6075
Email: OVASKASTJ@GMAIL.COM	

CONTRACTOR INFORMATION	Contractor	Phone
	Address	
	Contractor License Number	Type (No Elec. or Plumbing on Parcel)

Description of Work	Scope of Work: REMOVE ENCLOSED PORCH, BULD 40'x17'3" ADDITION, AND ADD ROOF TO FRONT PATIO.				
	SEWER Public/Private	WATER Public/Private	0.75	1	# of Bathrooms 2 TOTAL
	# of Floors 1	Total Sq. Ft. 890	Finished Sq. Ft. 690	Unfinished Sq. Ft. 200	# of Bedrooms 2

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK Building \$ 42,000 Excludes All Trades Permits		Application Fee \$ 207.53 Zoning Fee \$ 25.00 Septic/Well Fee \$ State Levy Fee \$ 4.15 RLD Total \$ 236.68
--------------------------------------------------------------------	--	-------------------------------------------------------------------------------------------------------------------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 5-18-16 367
 Application Accepted: BP-2016-00000
 Old Map Number: 33-8-5
 GPIN: 60998-36-6495

Issued 7-6-2016

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION

Site Address: 2559 TURKEY CREEK RD., OILVILLE District: LICKINGTONE
 Owner: ZEHM, LLC Phone #:
 Address: 2740 KENMONT TERRACE, MIDLOTHIAN, VA. 23113
 Proposed Use: MANUF. Current Use: VACANT Existing Buildings on Property: 2
 Proposed Occupant Load (Commercial): Acreage: 3.92 Commercial Use: Yes No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Proffer: Yes No Amount: Date Paid:
 New Street Address: Zoning District: M1
 Front Setback: 75' off ROW Center Line Setback: Rear Setback: 10' C.U. Permit: Variance:
 Side Setback: 10' Side Setback: 10' C O A: Flood Zone:

APPROVED REJECTED COMMENTS:

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Floyd Date: 5/27/16

Applicant/Contact: Ryan Bradley Phone: 804-569-6185 x101
 Email: rbradley@graybrae.com

CONTRACTOR INFORMATION
 Contractor: Graybrae Construction, Inc. Phone: 804-569-6185 x101
 Address: 8420-F Meadowbridge Rd, Mechanicsville, VA 23116
 Contractor License Number: 2705 052 125 Type: A Expiration:

Description of Work
 Scope of Work: T-I DEMO/REMOVE 3 OH DOORS, WIDEN OPENINGS, & INSTALL NEW OH DOORS (2 EXTERIOR & 1 INT. FIRE SHUTTER). COORDINATE NEW ELECT. SERVICE AND DISTRIBUTION FOR OWNER EQUIP. COMPRESSED AIR, DUST COLLECTOR - Much tenancy

SEWER Public/Private	WATER Public/Private	- NO CHANGE		# of Bathrooms
# of Floors: 2	Total Sq. Ft.: 20,415	Finished Sq. Ft.: 20,415	Unfinished Sq. Ft.: -	# of Bedrooms: 0

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		Total \$334.09	Application Fee	\$ 234.09
Building	\$25,000 (NO TRADES)		Zoning Fee	\$ 100.00
Excludes All Trades Permits			Septic/Well Fee	\$ -
			State Levy Fee	\$ 4.59
			PLD	\$ -

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Ryan Bradley

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM: 47.28.2

Application Date: 6-17-16

Application Accepted: BP-2016-00464

GPIN: 7716-69-6883

Issued: 7.5.16

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 2005 Sycamore Creek Manakin Sabot		District	
	Owner Brett Stansley		23103	
	Address Same		Phone # 804-363-0415	
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	
	New Street Address		Amount:	
	Zoning District R1		Date Paid:	
	Front Setback 40' At Row	Center Line Setback —	Rear Setback 5'	C.U. Permit None
	Side Setback 5'	Side Setback 5'	COA N/A	Variance None
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: Daniel Floyd Date: 6/29/16

Applicant/Contact: Brett Stansley Phone: 804-363-0415

Email: bretts@grandgraphics.net

CONTRACTOR INFORMATION	Contractor owner		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: Detached Garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors 1	Total Sq. Ft. 676	Finished Sq. Ft. 676	Unfinished Sq. Ft. 676	# of Bedrooms —

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	\$32,000.00
Excludes All Trades Permits	

Application Fee	\$156.00
Zoning Fee	25.00
Septic/Well Fee	\$
State Levy Fee	3.12
R.L.D. Total	\$184.12

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

X

7-7-5-2016

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 11.20.15
 Application Accepted: 2015.00854
 Old Map Number: 6706.86.0790
 GPIN: 3893

Issued 12.18.15

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address 5371 Whittcamp Road, Goochland VA 23063		District	
	Owner Clover Forest Plantation (Clover Forest LLC / Southbury Corp.)		Phone # Sebastian Volcker 804 695 6996	
	Address 5345 Whittcamp Rd Goochland VA 23063			
	Proposed Use Deck for Carriage	Current Use N/A	Existing Buildings on Property Main House and Carriage House	
Proposed Occupant Load (Commercial) N/A	Acreege 110.631	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A (Deck)		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District A1		
Front Setback 75' off road	Center Line Setback	Rear Setback 5'	C.U. Permit	
Side Setback 5'	Side Setback 5'	COA 1	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: David Floyd Date: 11/30/15

Applicant/Contact: _____ Phone: _____
 Email: _____

CONTRACTOR INFORMATION	Contractor Owner		Phone	
	Address			
Description of Work	Contractor License Number		Type	Expiration
	Scope of Work: Construction of a Deck of $\approx 25' \times 18'$ off the carriage house. Revised 12.28.15 Add 18x11 restroom below deck			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors N/A	Total Sq. Ft. N/A	Finished Sq. Ft. 450 198	Unfinished Sq. Ft. 450
		# of Bedrooms N/A		

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK 450 048

Building	$\approx \$3500$
Excludes All Trades Permits	

Application Fee	\$ 30.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$
RLD Total	\$ 55.00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature]

Grow Houses + Barn (no apartment)

Issued 7.5.2016



ZONING COMPLIANCE APPLICATION
COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office

P.O. Box 103

Goochland, VA 22063

Phone: (804) 556-5860

Web: www.co.goochland.va.us

FAX: (804) 556-5654

Office Use Only

Application File Date: <u>6/23/16</u>	Application No.: <u>AP-2016-00504</u>	Fee: \$25.00
Zoning Approval: Yes <u>David Floyd</u>	No: _____	Date: <u>7/1/16</u>

Zoning Application Type: Please appropriate check box

Residential Accessory Structure - 256 sq. feet or less - structures over 256 sq. feet require a building permit

Farm Use Structure - Attached Farm Use Affidavit shall be completed and signed by property owner

Application Requirements

- Applicant shall submit two (2) sets of sealed surveyed site plans showing proposed location of building on property with setbacks clearly marked
- Applicant is responsible for locating the property lines and clearly marking them for inspection purposes and to assure setbacks are not violated

Applicant/Owner Information

Name of Property Owner: H. Gray Broughton

Address: 6802 Patterson Ayle

E-mail: Stew@Stewhacsmushrooms

Telephone: 804 551-3408

Cell phone: _____

FAX: _____

Name of Applicant: _____

Address: _____

E-mail: _____

Telephone: _____

Cell phone: _____

FAX: _____

Property Information

Street Address: 5750 Jabez Lane 23063

GPIN Number: 6707-53-0878

Existing Use: _____

Zoning: A1

Acreage: 21.59

Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire: _____

Project Information

1. Estimated square footage of the building(s): 20x42 = 840

2. Written Description of Proposed Physical Improvements:

Agricultural Grow Room / Greenhouse