

**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 4.18.17

Application Date: 2/13/17  
 Application Accepted: RP-2017-00118  
 Old Map Number: 62.15-0-D-2A  
 GPIN: 7704-26-1048

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	Lot 2 Ben Dover Farms		District
Owner	Brian P. & Lisa S. MIDGEFFE		Phone # 757-773-2122
Address	GPIN # 7704-26-1048		
Proposed Use	Single Family	Current Use	Lot
Existing Buildings on Property	No		
Proposed Occupant Load (Commercial)	N/A	Acreeage	9.6
Commercial Use	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Ben Dover	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	N/A	Date Paid:	N/A
New Street Address			Zoning District	A-2			
Front Setback	55' from ROW	Center Line Setback		Rear Setback	35'	C.U. Permit	N/A
Side Setback	30'	Side Setback	30'	C.O.A.	N/A	Flood Zone	N/A

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: 2/13/17

Applicant/Contact: Jim Dunkum DUNKUM INC. Phone: 804-396-0156

Email: jim@dunkum.net

CONTRACTOR INFORMATION

Contractor	DUNKUM INC.	Phone	804-740-4071
Address	1606 Woodgrove Circle Richmond VA 23238		
Contractor License Number	2705024554	Type	CLASS A
Expiration	6-30-2018		

Description of Work

Scope of Work:	finished basement attached garage		
	New Single Family Dwelling		5 1/2
SEWER	Public/Private	WATER	Public/Private
# of Floors	2	Total Sq. Ft.	8993
Finished Sq. Ft.	7811	Unfinished Sq. Ft.	1182
# of Bedrooms	4		

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

VALUE OF WORK		storm water \$200.00	Application Fee	\$512.00
Building	1,200,000		Zoning Fee	50.00
Excludes All Trades Permits			Septic/Well Fee	40.00
			State Levy Fee	109.04
			RLD	100.00

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: Jim Dunkum

total: \$5911.04

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Heritage Title Co. Telephone: 672-3029

Mailing Address: 3002 Hungary Spring Rd Suite 100  
Richmond VA 23228

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

# 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: 42-1-60

Application Date: 3.10.17

Application Accepted: BP-2017-00190

GPIN: 6757-56-7924

Issued: 4.13.17

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	1875 Cedar point rd. 23063	District	
	Owner	Gerald Jenkins Goochland, VA	Phone #	804-310-9116
	Address			

Proposed Use	Current Use	Existing Buildings on Property	
	N/A		
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
	4.10	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount:	Date Paid:
	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	—	—
	New Street Address	Zoning District		
	—	A-2		

Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
55' from ROW	—	35'	—	—
Side Setback	Side Setback	COA	Flood Zone	
20'	20'	—	—	

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: 3/13/17

Applicant/Contact: Amelia's Home Construction Phone: (804) 678-8394

Email: ameliashomeconstruction@gmail.com

CONTRACTOR INFORMATION	Contractor	Amelia Daves	Phone	
	Address	584 Paddock Ln Louisa VA 23093		
	Contractor License Number	Type	Expiration	
	2705156468	Class A	06-30-2017	

Description of Work	Scope of Work: <u>unfinished</u>				
	<u>Constructing a new 1200 sq ft home w/ basement</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
2	2400	1200	1200 1500	3	

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

VALUE OF WORK

Building	* 150,000
Excludes All Trades Permits	

Application Fee	\$687.00
Zoning Fee	\$50.00
Septic/Well Fee	\$
State Levy Fee	\$14.54
<b>Total</b>	<b>\$791.54</b>

*Amelia Daves*

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.

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit: 804-556-4849

Name: Darvin E Satherwhite  
Powhatan Real Estate Settlements Telephone: 804-598-7160

Mailing Address: 3923 Old Buckingham Rd Powhatan VA 23139  
3013 River Rd West P.O. Box 325 Goochland VA 23063

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee

Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee

RLD \$ 100.00  
Septic & well \$ 40.80 For Commercial & Residential  
Septic only \$ 25.44 for Commercial & Residential  
Zoning Commercial \$ 100.00  
Zoning Residential SFD \$60.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**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 4.10.17

Application Date: 3/14/17  
 Application Accepted: BP-2017-00201  
 Old Map Number: 58.44.0.5.0  
 GPIN: 7716-35-4493

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	1400 Grand Dr., Manakin Sabot, VA, 23103		District
Owner	DANIEL WILSON		Phone # 804-615-7001
Address	1401 GRAND DR. MANAKIN SABOT, VA 23103		
Proposed Use	Current Use	Existing Buildings on Property	
SINGLE FAM RES.		NO	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
	3.28 AC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
Grand Ridge	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	—	—
New Street Address	Zoning District A-2		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
55' from ROW	—	35'	—
Side Setback	Side Setback	C O A	Flood Zone
20'	20'	—	—
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 3/15/17

Applicant/Contact: DAN WILSON Phone 804-615-7001  
 Email: DWILSON@STARWOODCORP.COM

CONTRACTOR INFORMATION

Contractor	Daniel E. Wilson Construction		Phone
Address	1401 Grand Dr. Manakin Sabot, VA, 23103		
Contractor License Number	Type	Expiration	
2701024509		06-30-2018	

Description of Work

Scope of Work:				
NEW HOUSE attached garage with partially finished basement				
SEWER	WATER	4 # of Bathrooms		
Public/Private	Public/Private			
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
3	6145	3937	2208	3

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

VALUE OF WORK \$ 428,485.00  
 Building 28177  
 Excludes All Trades Permits

Application Fee	\$ 1990.19
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 39.60
<b>Total</b>	<b>\$ 2069.79</b>

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 David E. Wilson

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: COMMONWEALTH ESCROW & TITLE Telephone: 804-359-2382

Mailing Address: 5609 PATTERSON AVE, SUITE C, RICHMOND, VA 23226

OWNER'S AFFIDAVIT

MANAKIN SABOT, VA 23103

I DAN WILSON of (address) 1401 GRAND DR. affirm that I am the owner of a certain tract of parcel of land located at 1401 GRAND DR. and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

Owner's Signature

Signed and acknowledged by in the city or county of Virginia on the Day of, 20 in the presence of the undersigned notary. My Commission expires.

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
RLD \$ 100.00
Septic & well \$ 40.80 For Commercial & Residential
Septic only \$ 25.44 for Commercial & Residential
Zoning Commercial \$ 100.00
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE # STORIES CONSTRUCTION TYPE OCCUPANY LOAD CODE EDITION
FIRE SPRINKLER FIRE ALARM

APPROVAL [Signature] DATE 4.10.17.
Code Official

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5851 TDD 711 Va Relay

ISSUED 4.19.17

Application Date: 3.14.17  
 Application Accepted: BP-2017-00211  
 Old Map Number: 6A12.G.7.0  
 GPIN: 7123-59-6544

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 401 Knollwood Drive		District	
	Owner The McGurn Co. Inc.		Phone #	
	Address P.O. Box 8 Manakin-Sabot, VA 23103			
	Proposed Use SINKS FOR RES	Current Use LAWN	Existing Buildings on Property None	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision PAGEBROOK	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
	New Street Address		Zoning District R-1	
	Front Setback 40' CE	Center Line Setback ROW	Rear Setback 35	C.U. Permit N/A
	Side Setback 15	Side Setback 15	COA N/A	Variance 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 Lloyd Date: 3/27/17

Applicant/Contact: Arthur McGurn Phone: 804-640-1294  
 Email: artiemcgurn@gmail.com

Contractor: The McGurn Co. Inc. Phone: 804-640-1294  
 Address: P.O. Box 8 Manakin-Sabot, VA 23103  
 Contractor License Number: 2701021780 Type: A: Res. Comm Expiration: 10-31-2018

Description of Work: Single Family Residential attached garage

SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	
# of Floors 1	Total Sq. Ft. 1894	Finished Sq. Ft. 1370	# of Bedrooms 3
		Unfinished Sq. Ft. 320 Savage	

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

VALUE OF WORK	\$106,275.00	518
Building	<del>75,000</del>	
Excludes All Trades Permits		
Application Fee	\$490.24	
Zoning Fee	\$50.00	
Septic/Well Fee	\$40.00	
State Levy Fee	\$10.60	
RLD	\$100.00	

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. total: \$690.84  
 Signature of Applicant: [Signature]

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

*Bowen, Champlin, Foreman & Rochecharlie*

Name: Greg Foreman Telephone: 804-379-1900

Mailing Address: 1919 Huguenot Rd, Richmond, VA 23235  
#300

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$60.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

TB1107: 4-11-17

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317  
**LOT 9-3 PARKSIDE VILLAGE**

Application Date: 03-21-17  
 Permit Number: BD-2017-00220  
 Old Map Number: 48-19-0-9-0  
 GPIN: 7738-11-5525

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.

<b>OWNER INFORMATION</b>	Site Address 7289 Ellingham Court		District		
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060				
	Proposed Use	Current Use	Existing Buildings on Property		
Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$5987.00	Date Paid: Due	
	New Street Address		Zoning District RPUD		
	Front Setback 30' from Pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A	Variance N/A
	Side Setback 20' B/S	Side Setback 20' B/S	Census Track N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Cash Proffer due before C.U. is issued.				
	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: 3/27/17

Applicant/Contact: BERTON JAMES Phone: (804)217-6910  
 Email: bjames@eagleofva.com

<b>CONTRACTOR INFORMATION</b>	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 6-31-2017	

<b>Description of Work</b>	<b>Scope of Work:</b> NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors 1	Total Sq. Ft. 2644	Finished Sq. Ft. 2084	Unfinished Sq. Ft. 560	# of Bedrooms 3

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

<b>VALUE OF WORK</b>		Application Fee	\$ 703.47
Building	\$153,660.00	Septic/Well Fee	\$ -
Excludes All Trades Permits		State Levy Fee	\$ 14.07
		Zoning Fee	\$ 50.00
		Total	\$ 767.54

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: 4/24/17  
 Application Accepted: BP-2017-00321  
 Old Map Number: 58-48-8-28-0  
 GPIN: 7715-57-0075

*Issued: 4-27-17*

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 824 Lachlan Road Manakin Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
	Proposed Occupant Load (Commercial) N/A	Acreage .433	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Kinloch 8	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
	New Street Address _____		Zoning District RPUD	
	Front Setback 30' from Pavement	Center Line Setback _____	Rear Setback 50' B/S	C.U. Permit N/A
	Side Setback 20' B/S	Side Setback 20' B/S	COA N/A	Variance 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 Owen Date: 4/24/17

Applicant/Contact: David Owen Phone: 804-708-5120  
 Email: dowen@boonehomes.net

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.		Phone 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Contractor License Number 2705 022198A		Type BLD	Expiration 3/31/2018

Description of Work	Scope of Work: New Single family home with attached Garage			
	SEWER Public/Private XXXX	WATER Public/Private XXXX	4.5	# of Bathrooms
	# of Floors 2	Total Sq. Ft. 4157	Finished Sq. Ft. 3564	Unfinished Sq. Ft. 593
# of Bedrooms 4				

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

VALUE OF WORK	
Building	\$290,000
Excludes All Trades Permits	

Application Fee	\$ <u>1343.34</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>26.34</u>
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.

Signature of Applicant: [Signature]

1393.34

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Old Republic National Title Insurance Co Telephone: 804-281-7484

Mailing Address: 1800 Bayberry Court, Suite 104, Richmond, VA 23226

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**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 4.25.17

Application Date: 4.12.17  
 Application Accepted: BP-2017-00293  
 Old Map Number: 57-20-F-2  
 GPIN: 7715-08-9747

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 3 BROAD RUN CIRCLE	District DOVER
Owner KATHLEEN AND KELLY SCOTT	Phone #
Address 5259 HARVEST GLEN DR. GLEN ALLEN VA 23059	
Proposed Use SINGLE FAMILY RESIDENCE	Current Use VACANT
Proposed Occupant Load (Commercial)	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acreage 2.657	Existing Buildings on Property NONE

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision Broad Run	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
New Street Address		Zoning District A-2	
Front Setback 55' from ROW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A
Side Setback 20'	Side Setback 20'	COA N/A	Variance 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 Teyd Date: 4/12/17

Applicant/Contact: KEVIN KITTEL Phone: 804-387-5707  
 Email: KEVIN@HIGHLANDBUILDING.COM

CONTRACTOR INFORMATION

Contractor HIGHLAND BUILDERS	Phone 804-449-6006
Address P.O. BOX 281 ROCKVILLE VA 23146	
Contractor License Number 2705068282	Expiration 4-30-18
Type A	

Description of Work

Scope of Work: SINGLE FAMILY HOUSE					
SEWER Public/Private		WATER Public/Private		# of Bathrooms 3	
# of Floors 2	Total Sq. Ft. 3773	Finished Sq. Ft. 3227	Unfinished Sq. Ft. 272656	# of Bedrooms 3	

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

VALUE OF WORK 371,000.00

Building	
Excludes All Trades Permits	

Application Fee	\$1681.50
Zoning Fee	\$50.00
Septic/Well Fee	\$40.00
State Levy Fee	\$34.43
RLD	\$100.00

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: Kevin Kittel

total:  
\$1905.93

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: BON AIR TITLE AGENCY Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVENUE, SUITE 111  
RICHMOND VA 23235

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to lincensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee  
Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee  
RLD \$ 100.00  
Septic & well \$ 40.80 For Commercial & Residential  
Septic only \$ 25.44 for Commercial & Residential  
Zoning Commercial \$ 100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

**ISSUED 4-24-17**  
**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317  
**LOT 13-3 PARKSIDE VILLAGE**

Application Date: 04-17-17  
 Permit Number: BP-2017-00312  
 Old Map Number: 48-19-0-13-0  
 GPIN: 7738-11-5244

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.

<b>OWNER INFORMATION</b>	Site Address 7281 Ellingham Court		District		
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Lot Size .3	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$5987.00	Date Paid: Due	
	New Street Address —		Zoning District RPUD		
	Front Setback 30' from Parapet	Center Line Setback —	Rear Setback 50' B/S	C.U. Permit N/A	Variance N/A
	Side Setback 20' B/S	Side Setback 20' B/S	Census Track N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: * Cash Proffer due before C.O. is issued.		
	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: Dennis Floyd Date: 4/19/17

Applicant/Contact: BERTON JAMES Phone: (804)217-6910  
 Email: bjames@eagleofva.com

<b>CONTRACTOR INFORMATION</b>	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 3-31-2017	

<b>Description of Work</b>	<b>Scope of Work:</b> NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private			# of Bathrooms
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3255	2677	578	3

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

<b>VALUE OF WORK</b>	
Building	\$222,450.00
Excludes All Trades Permits	

Application Fee	\$ 1013.03
Septic/Well Fee	\$
State Levy Fee	\$ 20.26
Zoning Fee	\$ 50.00
<b>Total</b>	<b>\$ 1083.29</b>

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: B. J. Berton

Issued: 4.24.17  
**PERMIT APPLICATION**

County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

**LOT 28-2 PARKSIDE VILLAGE**

Application Date: 4-10-17  
 Permit Number: BP-2017-00284  
 Old Map Number: 48-18-0-28-0  
 GPIN: 7738-21-0869

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 7060 Washbrook Terrace		District		
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 5987.00	Date Paid: Due	
	New Street Address		Zoning District RPU D		
	Front Setback 30' from pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A	Variance N/A
	Side Setback 20' B/S	Side Setback 15' from pavement	Census Track N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: * Cash Proffer due before C.O. is issued.		

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: 4/19/17

Applicant/Contact: BERTON JAMES Phone: (804)217-6910

Email: bjames@eagleofva.com

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 3-31-2017 6/30/17	

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	1	2644	2084	560	3

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

VALUE OF WORK	
Building	\$153,660.00
Excludes All Trades Permits	

Application Fee	\$ 703.47
Septic/Well Fee	\$
State Levy Fee	\$ 14.07
Zoning Fee	\$ 50.00
Total	\$ 767.54

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]

75500. 4-24-17

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317  
**LOT 10-3 PARKSIDE VILLAGE**

Application Date: 04-04-17  
 Permit Number: BP-2017-002660  
 Old Map Number: 48-19-0-10-0  
 GPIN: 7738-11-5458

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 7287 Ellingham Court		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Parkside Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$ 5987.00	Date Paid: Done
	New Street Address		Zoning District R PUD	
	Front Setback 30' From Pavement	Center Line Setback	Rear Setback 50' 6/8	C.U. Permit N/A
	Side Setback 20' 6/8	Side Setback 20' 6/8	Census Tract N/A	Flood Zone N/A
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Cash Proffer is due before C.O. is issued.			

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: 4/20/17

Applicant/Contact: BERTON JAMES Phone: (804)217-6910  
 Email: bjames@eagleofva.com

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 6-31-2017	

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors 1	Total Sq. Ft. 2738	Finished Sq. Ft. 2178	Unfinished Sq. Ft. 560	# of Bedrooms 3

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

VALUE OF WORK		Application Fee \$ 730.96
Building	\$159,770.00	Septic/Well Fee \$
Excludes All Trades Permits		State Levy Fee \$ 14.62
		Zoning Fee \$ 50.00
		Total \$ 795.58

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 4.24.17*

Application Date: *3.24.17*

Application Accepted: *BP-2017-00231*

Old Map Number: 26-1-0-28-E3

GPIN: 6718-09-1190

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 5212 Fox Field Farm Ct.		District Byrd	
	Owner Billy L. Llewellyn Sr.		Phone # 804-389-6643	
	Address 2480 Old Time Rd. Powhatan, Va. 23139			
	Proposed Use New Home	Current Use Vacant Lot	Existing Buildings on Property NONE	
	Proposed Occupant Load (Commercial)	Acreage 8	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Fox Field Farm</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <i>N/A</i>	Date Paid: <i>N/A</i>
	New Street Address —		Zoning District <i>A-1</i>	
	Front Setback <i>55' from ROW</i>	Center Line Setback —	Rear Setback <i>35'</i>	C.U. Permit <i>N/A</i>
	Side Setback <i>20'</i>	Side Setback <i>20'</i>	C.O.A. <i>N/A</i>	Flood Zone <i>N/A</i>
	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 Boyd* Date *3/27/17*

Applicant/Contact: B. Lee Llewellyn Jr. Phone 804-350-9327  
 Email: otblee@msn.com

CONTRACTOR INFORMATION	Contractor Old Time Builder Inc.		Phone 804-350-9327	
	Address 2400 Old Time Rd. Powhatan, Va. 23139			
	Contractor License Number 2701019088	Type Class A, CBC RBC	Expiration 1/31/2017	

Description of Work	Scope of Work: Construct a new single family dwelling with basement and attached garage <i>unfinished</i>				
	SEWER Public/Private	WATER Public/Private	2.5 # of Bathrooms		
	# of Floors 2	Total Sq. Ft. 3662	Finished Sq. Ft. 2255	Unfinished Sq. Ft. 1407	# of Bedrooms 4

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

VALUE OF WORK		<i>Storm Water</i> <b>\$ 200.00</b>	Application Fee \$ <i>100.49</i>
Building	\$120,000 <b>\$ 221,887.50</b>		Zoning Fee \$ <i>50.00</i>
Excludes All Trades Permits			Septic/Well Fee \$ <i>40.00</i>
			State Levy Fee \$ <i>21.01</i>
			RLD \$ <i>100.00</i>

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. *total:*

Signature of Applicant *Bj Lee Llewellyn* **\$ 1421.50**

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Hairfield & Morton Telephone: 804-320-6600

Mailing Address: Bon Air Professional Building, 2800 Buford Rd. Suite 201, PO Box 35724, Richmond Va. 23235

**OWNER'S AFFIDAVIT**

Billy Lee Llewellyn Sr. of (address) 248 Old Time Rd affirm that I am the owner of a certain tract of parcel of land located at 5212 Foxfield Farm and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

Billy Lee Llewellyn Sr. Owner's Signature

Signed and acknowledged by Billy Lee Llewellyn Sr. in the city or county of Powhatan Virginia on the 23 Day of March, 2017 in the presence of the undersigned notary. My Commission expires 12/31/2018

Pamela K Echard (Notary)

**PAMELA K ECHARD**  
**NOTARY PUBLIC**  
REG. #7283210  
COMMONWEALTH OF VIRGINIA  
MY COMMISSION EXPIRES DECEMBER 31, 2018

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURE**  
I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee  
Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000  
Add 2% State Levy to fee  
RLD \$ 100.00  
Septic & well \$ 40.80 For Commercial & Residential  
Septic only \$ 25.44 for Commercial & Residential  
Zoning Commercial \$ 100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

Issued 4.24.17

**BUILDING PERMIT APPLICATION**  
Goochland County Building Inspection Department  
P O Box 119  
Goochland VA 23063  
(804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317  
**LOT 21-2 PARKSIDE VILLAGE**

Application Date: 4-17-17  
Permit Number: BP-2017-00305  
Old Map Number: 48.18.0.21.0  
GPIN: 7738-22-0063

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.

<b>OWNER INFORMATION</b>	Site Address 7203 Shenfield Avenue		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision Parkside Village 2	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$5987.00	Date Paid: Due
	New Street Address N/A	Zoning District RPUD		
	Front Setback 30' from Pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A
	Side Setback 20' B/S	Side Setback 20' B/S	Census Track N/A	Variance N/A
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Cash Proffer is due before C.O. is issued.			

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: 4/17/17

Applicant/Contact: BERTON JAMES Phone: (804)217-6910  
Email: bjames@eagleofva.com

<b>CONTRACTOR INFORMATION</b>	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 3-31-2017	

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	1	2644	2084	560	3

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

VALUE OF WORK		Application Fee	\$701.47
Building	\$153,660.00	Septic/Well Fee	\$
Excludes All Trades Permits		State Levy Fee	\$14.07
		Zoning Fee	\$50.00
		Total	\$765.54

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: 4-24-17

Application Date: 3/31/17  
 Application Accepted: BP-2017-00257  
 Old Map Number: 40-43-40-C-3  
 GPIN: 6777-66-3472

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 2112 Jockey Ridge		District		
	Owner Breeze Hill, Inc.		Phone # (804) 539-2524		
	Address 1930 Soldiers Lodge Road Crozier, VA 23039				
	Proposed Use Residential	Current Use	Existing Buildings on Property None		
Proposed Occupant Load (Commercial)	Acreage 2	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Breeze Hill	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 19,852.00	Date Paid: Due	
	New Street Address		Zoning District RP		
	Front Setback 40' From Row	Center Line Setback	Rear Setback 25'	C.U. Permit N/A	Variance N/A
	Side Setback 10'	Side Setback 10'	C O A N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: * Cash Proffer is due before C.O. is issued.		
	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 Lloyd Date: 4/4/17					
Applicant/Contact: Steve Thompson			Phone: (804) 539-2524		
Email: Steve.thompsonbuilder@comcast.net					
CONTRACTOR INFORMATION	Contractor Steve Thompson Builder, LLC		Phone (804) 539-2524		
	Address 1390 B Broad Street Road Oilville, VA 23129				
	Contractor License Number 2705054732A	Type R200 CBL R3C	Expiration 3/31/18		
Description of Work	Scope of Work: New Residential Dwelling with attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3 1/2		
	# of Floors 2	Total Sq. Ft. 6,713	Finished Sq. Ft. 4,313	Unfinished Sq. Ft. 1,349 2,400	# of Bedrooms 4

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

VALUE OF WORK		2,513.14	Application Fee	\$ 2,120.73
Building	350,000 408,605.00		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 40.00
			State Levy Fee	\$ 43.21
			RIP	\$ 100.00
			Stormwater	200.00

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.

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Darvin E Satterwhite Telephone: 804 556-4012

Mailing Address: P.O. Box 325 Goochland, VA 23039

**OWNER'S AFFIDAVIT**

I, Earl Thompson of (address) Lot 3 Bruce Hill affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE [Signature]

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	R/LD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**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: 4.14.17  
 Application Accepted: BP-2017-00301  
 Old Map Number: 58.48.8.49.0  
 GPIN: 7715-47-6226

*Issued: 4/19/17*

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 878 Water Bridge Road Manakin Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
	Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Kinlock 8</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>
	New Street Address		Zoning District <u>RPUD</u>	
	Front Setback <u>30' from Pavement</u>	Center Line Setback	Rear Setback	C.U. Permit <u>N/A</u>
	Side Setback <u>20' B/S</u>	Side Setback <u>15' from Pavement</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: David Owen Date: 4/17/17

Applicant/Contact: David Owen Phone: 804-708-5120

Email: dowen@boonehomes.net

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.		Phone 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Contractor License Number 2705 022198A		Type BLD	Expiration 3/31/2018

Description of Work	Scope of Work: New Single family home with attached Garage			
	SEWER Public/Private <u>XXXX</u>	WATER Public/Private <u>XXXX</u>	2.5	# of Bathrooms
	# of Floors 1	Total Sq. Ft. 3298	Finished Sq. Ft. 2705	Unfinished Sq. Ft. 593
			# of Bedrooms 2	

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

VALUE OF WORK	
Building	\$226,000
<i>Excludes All Trades Permits</i>	

Application Fee	\$ 1029.00
Zoning Fee	\$ 50.00
Septic/Well Fee	\$
State Levy Fee	\$ 20.58
<del>BLD</del> Total	\$ 1099.58

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]

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Old Republic National Title Insurance Co Telephone: 804-281-7484

Mailing Address: 1800 Bayberry Court, Suite 104, Richmond, VA 23226

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_, in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 38-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**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: 4/11/17  
 Application Accepted: BP-2017-00285  
 Old Map Number: 58-48-8-27-0  
 GPIN: 7715-57-0115

*Issued: 4/19/2017*

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 822 Lachlan Road Manakin Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
Proposed Occupant Load (Commercial) N/A	Acreage .552	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Kinloch Sec 8	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
	New Street Address		Zoning District RPLD	
	Front Setback 30' from Paved	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A
	Side Setback 20' B/S	Side Setback 20' B/S	C O A 1	Variance 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 Owen Date: 4/11/17

Applicant/Contact: David Owen Phone: 804-708-5120

Email: dowen@boonehomes.net

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.		Phone 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Contractor License Number 2705 022198A		Type BLD	Expiration 3/31/2018

Description of Work	Scope of Work: New Single family home with attached Garage			
	SEWER Public/XXXX	WATER Public/XXXX	# of Bathrooms 3.5	
	# of Floors 2	Total Sq. Ft. 4449	Finished Sq. Ft. 3920	Unfinished Sq. Ft. 529
			# of Bedrooms 3	

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

VALUE OF WORK	
Building	\$314,000
<i>Excludes All Trades Permits</i>	

Application Fee	\$1425.00
Zoning Fee	\$50.00
Septic/Well Fee	\$
State Levy Fee	\$28.50
<del>Permit</del> Total	\$1503.50

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.

Signature of Applicant: David Owen

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Old Republic National Title Insurance Co Telephone: 804-281-7484

Mailing Address: 1800 Bayberry Court, Suite 104, Richmond, VA 23226

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_. In the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**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: **3.24.17**  
 Application Accepted: **BP-2017-00234**  
 Old Map Number: **58.43.7.15.0**  
 GPIN: **7715-67-0479**

**Issued: 4-7-17**

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 <b>714 OLD STREAM ROAD</b>		District <b>DOVER</b>		
	Owner <b>CLEO &amp; JAYCE GASTON</b>		Phone # <b>379-1251</b>		
	Address <b>11781 WEXTON DR. CHESTERFIELD VA 23236</b>				
	Proposed Use	Current Use	Existing Buildings on Property <b>No</b>		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>KANLON</b>		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <b>N/A</b>	Date Paid: <b>N/A</b>
	New Street Address <b>714 OLD STREAM ROAD</b>		Zoning District <b>RPUD</b>		
	Front Setback <b>30' from Perimeter</b>	Center Line Setback	Rear Setback <b>50' B/S</b>	C.U. Permit <b>N/A</b>	Variance <b>N/A</b>
	Side Setback <b>20' B/S</b>	Side Setback <b>20' B/S</b>	COA <b>N/A</b>	Flood Zone <b>N/A</b>	
	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: **3/27/17**

Applicant/Contact: **J. WARREN MONTAGUE** Phone: **804 690 9230**  
 Email: **JWARRENMONTAGUE@GMAIL.COM**

CONTRACTOR INFORMATION	Contractor <b>JOHN W. MONTAGUE JR INC.</b>		Phone <b>804-784-4276</b>	
	Address <b>310 RIVER ROAD WEST.</b>			
	Contractor License Number <b>2701014152</b>	Type <b>A</b>	Expiration <b>10/31/17</b>	

Description of Work	Scope of Work: <b>NEW HOME</b> <span style="float: right;"><b>basement</b></span>			
	<b>SEWER</b> Public/Private		<b>WATER</b> Public/Private	
	# of Floors <b>3</b>	Total Sq. Ft. <b>8,000</b>	Finished Sq. Ft. <b>4348</b>	Unfinished Sq. Ft. <b>36974849</b>
			# of Bathrooms <b>3 1/2</b>	# of Bedrooms <b>4</b>

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

VALUE OF WORK <b>9197</b>		Application Fee \$ <b>2952.48</b> Zoning Fee \$ <b>50.00</b> Septic Well Fee \$ <b>200.00</b> State Levy Fee \$ <b>52.05</b> RLD \$ <b>100.00</b>
Building	<b>575,662.50</b>	
Excludes All Trades Permits		
PER Goochland WEBSITE SW		
total: <b>\$3004.53</b>		

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]**

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: POWHATAN REAL ESTATE SETTLEMENTS, LLC Telephone: 804-598-7160

Mailing Address: 3887 OLD BUCKINGHAM ROAD, POWHATAN VA 23139

OWNER'S AFFIDAVIT

I, LEO GASTON of (address) 11781 WEXFORD DR. affirm that I am the owner of a certain tract of parcel of land located at 714 OLD STANFORD and that I have applied for a building permit. I affirm that I am not subject to discipline as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

Owner's Signature

Signed and acknowledged by Tracy B Brumfield in the city or county of Goodland Virginia on the 24 Day of March, 2017 in the presence of the undersigned notary. My Commission expires 03/31/2017

Tracy B Brumfield (Notary)



ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee
Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee
RLD \$ 100.00
Septic & well \$ 40.80 For Commercial & Residential
Septic only \$ 25.44 for Commercial & Residential
Zoning Commercial \$ 100.00
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE # STORIES CONSTRUCTION TYPE OCCUPANY LOAD CODE EDITION
FIRE SPRINKLER FIRE ALARM

APPROVAL DATE

Code Official

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 656-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 4/26/17

BP-2017-00333

Old Map Number: 19-7-A1

GPIN: 6830-86-4592

**Issued: 4-28-17**

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>3265 Rigsby Hollow Rd.</u>		District <u>Lickinghole</u>	
	Owner <u>Theresa + Office Moore</u>		Phone # <u>(804) 840-5175</u>	
	Address <u>3265 Rigsby Hollow Rd, Sandy Hook, VA 23153</u>			
	Proposed Use <u>Residential</u>	Current Use <u>Residential</u>	Existing Buildings on Property <u>single wide to be removed</u>	
	Proposed Occupant Load (Commercial)	Acreage <u>5.31</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>
	New Street Address		Zoning District <u>A-1</u>	
	Front Setback <u>55' from Row</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	C.U. Permit <u>N/A</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Single wide home must be removed within 60 days of C.O.</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 4/26/17

Applicant/Contact: Same Phone

Email:

CONTRACTOR INFORMATION	Contractor <u>CMH Homes Inc.</u>	Phone <u>804-798-3206</u>
	Address <u>12244 Washington Hwy Ashland, VA</u>	
	Contractor License Number <u>2705048123</u>	Type <u>CLASS A</u>

Description of Work	Scope of Work: <u>Replace single wide with double wide 28'x52' manufactured home</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2</u>	
	# of Floors <u>1</u>	Total Sq. Ft. <u>1456</u>	Finished Sq. Ft. <u>1369</u>	Unfinished Sq. Ft. <u>87</u>
				# of Bedrooms <u>3</u>

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

VALUE OF WORK	
Building	<u>85,000.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>394.50</u>
Zoning Fee	\$ <u>20.00</u>
Septic/Well Fee	\$ <u>0</u>
State Levy Fee	\$ <u>7.89</u>
<b>Total</b>	\$ <u>452.39</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: Theresa T. Moore

**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 4-28-17*

Application Date *BP-2017-00331*

Application Accepted:

Old Map Number: *57-25-B-9-0*

GPIN: *7716-13-9431*

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>35 HUNTING RIDGE ROAD, MANAKIN SUBD</i>		District	
	Owner <i>MICHAEL + ANNE FITZSIMMONS</i>		Phone # <i>804-519-1594 DR</i> <i>804-651-5553</i>	
	Address <i>35 HUNTING RIDGE ROAD, MANAKIN SUBD, VA 23103</i>			
	Proposed Use <i>HOME/RESIDENCE</i>	Current Use <i>HOME/RESIDENCE</i>	Existing Buildings on Property <i>HOME + GARAGE</i>	
	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	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
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: \_\_\_\_\_ Phone \_\_\_\_\_

Email: \_\_\_\_\_

CONTRACTOR INFORMATION	Contractor <i>Owner/contract</i>		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: <i>RELOCATING HALF BATH; RELOCATING LAUNDRY ROOM; RENOVATING KITCHEN</i>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	<i>1</i>	<i>2000 sq ft</i>	<i>2000 sq ft</i>	<i>N/A</i>	<i>3</i>

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

VALUE OF WORK	
Building	<i>\$20,000</i>
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>102.00</i>
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ <i>2.04</i>
<b>TOTAL</b>	\$ <i>104.04</i>

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 *Michael Fitzsimmons*

**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: 4-27-17

Application Date: 3/20/17

Application Accepted: BP-2017-00217

Old Map Number: 48-2-C-6-0

GPIN: 7726-68-1196

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 12660 Pamela Ln Henrico 23233	District
Owner Polina & Adam McNeerney	Phone # 804-579-4808
Address Same	
Proposed Use Addition / Add. Living Room	Current Use S.F.
Existing Buildings on Property Single Family Dwelling	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Proposed Occupant Load (Commercial)	Acreage .658

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision Bellview Gardens	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
New Street Address		Zoning District R-1	
Front Setback 40' from <del>the</del> Rear	Center Line Setback 105'	Rear Setback 25'	C.U. Permit N/A
Side Setback 15'	Side Setback 35'	COA N/A	Flood Zone N/A
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: * Side setback to be Survey located.	

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 Paul Date: 4/7/17

Applicant/Contact: Keck Baker / Baker Homes LLC. Phone: 804-310-2897

Email: bakerhomesllc@gmail.com

Contractor Baker Homes LLC.	Phone 804-310-2897
Address 7247 Baker Woods Pl. New Kent VA 23124	
Contractor License Number 2705075386	Type A Bldg
Expiration 4/30/17	

Scope of Work: Construct Addition to Single Family + living room Add Driveway. ↓ bedroom + Kitchenette + laundry	# of Bathrooms One (1)
SEWER Public/Private	WATER Public/Private
# floors 1	Total 1052
Finished 908	Unfinished 144
# 1 bedrooms 1	

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

VALUE OF WORK
Building \$118,000.00
Excludes All Trades Permits

Application Fee	\$ 25.00
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 10.86
<b>Total</b>	<b>\$ 37.86</b>

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]

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Craig Evans Telephone: 804-746-3773

Mailing Address: 8122 Mechanicsville Turnpike, Mech VA 23111

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.60 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

**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: 4-26-17

Application Date: 4-20-17  
 Application Accepted: BP-2017-00318  
 Old Map Number: 62-1-0-10-0  
 GPIN: 7714-01-1462

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 485 Baseobel Road, Manakin-Sabot, VA 23103		District		
	Owner Luck Companies		Phone # 804-641-0193		
	Address 515 Stone Mill Drive, Manakin-Sabot, VA 23103				
	Proposed Use Temporary Office	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial) 3-4	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	New Street Address		Zoning District B-1		
	Front Setback 55' from flow	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 Ford Date: 4/21/17

Applicant/Contact: Williams Scotsman, Inc. Phone: 804.641.8479  
 Email: tewatson@willscot.com

CONTRACTOR INFORMATION	Contractor <u>Williams Scotsman Inc.</u>	Phone <u>804 641. 8479</u>
	Address <u>129 Roxbury Industrial Center, Charles City, VA 23030</u>	
	Contractor License Number <u>2701023005</u>	Type <u>Class A</u>

Description of Work	Scope of Work: <u>Deliver &amp; install a 36x10 (32x10 Boxsize) mobile office for temporary use as a scale house for approx 6 months. Will provide Aluminum Ramp &amp; IBC steps. Building will be block approx 5' off the ground.</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>None</u>		
	# of Floors <u>1</u>	Total Sq. Ft. <u>300</u>	Finished Sq. Ft. <u>300</u>	Unfinished Sq. Ft. <u>-</u>	# of Bedrooms <u>-</u>

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

VALUE OF WORK	
Building	<u>2,226.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>30.00</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ <u>-</u>
State Levy Fee	\$ <u>.60</u>
<b>R&amp;P Total</b>	\$ <u>80.60</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: Ten Watson

**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: 4-11-17  
 Application Accepted: BP-2017-00267  
 Old Map Number: 9-11-0-6-0  
 GPIN: 5891-96-0371

Issued 4-11-17

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>3500 Lowry Rd Columbia VA 23038</u>		District		
	Owner <u>Bridgette McClard</u>		Phone # <u>8048140392</u>		
	Address <u>3121 Lowry Rd Columbia VA 23038</u>				
	Proposed Use <u>Residence</u>	Current Use <u>none</u>	Existing Buildings on Property <u>none</u>		
	Proposed Occupant Load (Commercial)	Acreage <u>20.65</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lantanna North</u>		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>
	New Street Address <u>—</u>		Zoning District <u>A-1</u>		
	Front Setback <u>75' from ROW</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	C.U. Permt <u>N/A</u>	Variance <u>N/A</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>		COMMENTS: <u>* Existing mobile home must be removed 60 days after C.O. issued</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. Revised site plan approved 4/25/17.

Planning & Zoning Officer: David Teed Date: 4/6/17

Applicant/Contact: Bridgette McClard Phone: 8048140392  
 Email: bridgette.adams@capitalone.com

CONTRACTOR INFORMATION  
 Contractor: Blue Ridge Transporting LLC Phone: 434 987 6049  
 Address: 1470 Stillhouse Ridge Rd Charlottesville VA 22903  
 Contractor License Number: 2705151346 Type class: single wide Expiration: 9-30-2017

Description of Work  
 Scope of Work: Transport & set up mobile home & Revised 4-2017 to add 136 sq. ft deck

SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2</u>	
# of Floors <u>1</u>	Total Sq. Ft. <u>924</u>	Finished Sq. Ft. <u>924</u>	Unfinished Sq. Ft. <u>0/36</u>
		# of Bedrooms <u>3</u>	

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

VALUE OF WORK  
 Building: \$12,000.00  
 Excludes All Trades Permits

Application Fee \$ 106.00  
 Zoning Fee \$ 50.00  
 Septic/Well Fee \$ —  
 State Levy Fee \$ 1.32  
 RLD Total \$ 117.32

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: Bridgette McClard

# 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 4.25.17**

Application Date: **4.12.17**  
 Application Accepted: **BP-2017-00294**  
 Old Map Number: **57-20-F-2**  
 GPIN: **7715-08-9747**

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 <b>3 BROAD RUN CIRCLE</b>		District <b>DOVER</b>		
	Owner <b>KATHLEEN AND KELLY SCOTT</b>		Phone #		
	Address <b>5259 HARVEST GLEN DR. GLEN ALLEN VA 23059</b>				
	Proposed Use <b>SINGLE FAMILY RESIDENCE</b>	Current Use <b>VACANT</b>	Existing Buildings on Property <b>NONE</b>		
	Proposed Occupant Load (Commercial)	Acreage <b>2.657</b>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>Broad Run</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <b>N/A</b>	Date Paid: <b>N/A</b>	
	New Street Address		Zoning District <b>A-2</b>		
	Front Setback <b>55' from Road</b>	Center Line Setback <b>5'</b>	Rear Setback <b>5'</b>	C.U. Permit <b>N/A</b>	Variance <b>N/A</b>
	Side Setback <b>5'</b>	Side Setback <b>5'</b>	COA <b>N/A</b>	Flood Zone <b>N/A</b>	
	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: **4/12/17**

Applicant/Contact: **KEVIN KITTEL** Phone: **804-387-5707**  
 Email: **KEVIN@HIGHLANDBUILDING.COM**

CONTRACTOR INFORMATION	Contractor <b>HIGHLAND BUILDERS</b>	Phone <b>804-449-6006</b>
	Address <b>P.O. BOX 281 ROCKVILLE VA 23146</b>	
	Contractor License Number <b>2705068282</b>	Type <b>A</b>

Description of Work	Scope of Work: <b>DETACHED GARAGE AND SHOP 28x42</b>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <b>3</b>		
	# of Floors <b>2</b>	Total Sq. Ft. <b>1,176</b>	Finished Sq. Ft.	Unfinished Sq. Ft. <b>1,176</b>	# of Bedrooms <b>3</b>

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

VALUE OF WORK		Application Fee \$ <b>230.27</b>
Building	<b>150,000</b>	Zoning Fee \$ <b>25.00</b>
Excludes All Trades Permits		Septic/Well Fee \$
		State Levy Fee \$ <b>4.74</b>
		<b>TOTAL \$260.74</b>

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]*

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: BON AIR TITLE AGENCY Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVENUE, SUITE 111  
RICHMOND VA 23235

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_ Virginia on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_  
FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

**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 4.25.17

Application Date: 3.2.17

Application Accepted: BP-2017-001108

Old Map Number: 58.32.3.A.O

GPIN: 7725-33-0619

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 15060 CAPITAL ONE DRIVE, RICHMOND, VA 23238		District	
	Owner CAPITAL ONE - TED TREMAIN		Phone # 855-375-0822	
	Address 15050 CAPITAL ONE DRIVE, RICHMOND, VA 23238			
	Proposed Use BUSINESS, B	Current Use BUSINESS B	Existing Buildings on Property RENOVATION OF EXISTING BUILDING	
Proposed Occupant Load (Commercial) 1,522	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
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	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: MASON PILCHER Phone 804-402-8157

Email: EPILCHER@GILBANE.CO.COM

CONTRACTOR INFORMATION	Contractor GILBANE BUILDING CO.		Phone 804-782-6518	
	Address 1001 BOULDERS PARKWAY, SUITE 101, RICHMOND, VA 23225			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: RENOVATION OF AN EXISTING 4 FLOOR, 123,890 SF OFFICE BUILDING, REPLACING 4 ROOF TOP UNITS. RENOVATE ALL EXISTING BATHROOMS WCLP				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors 4	Total Sq. Ft. 142,000	Finished Sq. Ft. 123,890	Unfinished Sq. Ft. 19,110	# of Bedrooms N/A

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

VALUE OF WORK		to \$73,503.26	Application Fee	\$ 14,973.33
Building	\$7,738,028		Zoning Fee	\$
Excludes All Trades Permits			Septic/Well Fee	\$
			State Levy Fee	\$ 170.00
			RLD	\$ 74,973.33

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 Mason Pilcher

**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: 4-25-17

Application Date: 4-21-17  
 Application Accepted: BP-2017-00322  
 Old Map Number: 13-1-0-44-21  
 GPIN: 6841-83-0778

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 3701 Broad Street Rd, Gun Spring, VA 23065		District	
	Owner Brian P. Clemons		Phone # 804-339-2903	
	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	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: Brian P. Clemons Phone 804-339-2903  
 Email: stumpyc9@aol.com

CONTRACTOR INFORMATION	Contractor OWNER	Phone
	Address	
	Contractor License Number	Type

Description of Work	Scope of Work: 25' x 30' enclose existing carport into detached garage			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. 1750	Finished Sq. Ft. 750	# of Bedrooms

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

VALUE OF WORK	
Building	\$ 3000.00
Excludes All Trades Permits	

Application Fee	\$ 30.00
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ .60
<del>Fee</del> 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 Brian Clemons

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

ISSUED 4.24.17

Application Date: 4.21.17  
 Permit Number: BP-2017-00319  
 Old Map Number: 39-1-0-5-A  
 GPIN: 6028-20-9615

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 1948 HASKIN RD, GOOCHLAND		District LICKINGHOLE / FIFB		
	Owner STEPHEN G. SHIFFLETTE		Phone # 457-3316 (H) 241-1358 (C)		
	Address 1948 HASKIN RD, GOOCHLAND VA 23063				
	Proposed Use STORAGE	Current Use	Existing Buildings on Property RESIDENCE, 10x16 SHED, 1 DECREPIT SHED		
	Proposed Occupant Load (Commercial)	Lot Size 3.25 ACRES	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
	New Street Address		Zoning District A-1		
	Front Setback 75' from ROW	Center Line Setback —	Rear Setback 5'	C.U. Permit N/A	Variance: N/A
	Side Setback 5'	Side Setback 5'	Census Track 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: [Signature] Date: 4/21/17

Applicant/Contact: STEPHEN G. SHIFFLETTE Phone: 457-3316/241-1358  
 Email: BMAGICK@MSN.COM

CONTRACTOR INFORMATION	Contractor owner		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: CONSTRUCT STORAGE SHED				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 570	Finished Sq. Ft.	Unfinished Sq. Ft. 576	# of Bedrooms

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

VALUE OF WORK

Building	8000.00 EST
Excludes All Trades Permits	

Application Fee	\$ 83.28
Septic/Well Fee	\$
State Levy Fee	\$ 1.67
Zoning	\$ 25.00
<b>Total</b>	<b>\$ 109.95</b>

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: 4-24-17

Application Date: 4-20-17

Application Accepted: BP-2017-00316

Old Map Number: 05-40-02-0

GPIN: 7715-30-9075

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 835 Running Cedar Ct		District	
	Owner Kevin Smith		Phone #	
	Address 835 Running Cedar Ct Manakin			
	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 Running Cedar		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	New Street Address		Amount: N/A	
	Date Paid: N/A		Zoning District RR	
	Front Setback 55' from Road	Center Line Setback	Rear Setback 5'	C.U. Permit N/A
	Variance N/A	Side Setback 5'	Side Setback 5'	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: 4/20/17

Applicant/Contact: Steve Sawing Phone: 749-4706  
 Email: Steve@ultimatepools.com

CONTRACTOR INFORMATION	Contractor ULTIMATE POOL		Phone	
	Address 2175 CANYON COW ROCKVILLE, VA 23146			
	Contractor License Number 2705026339	Type A	Expiration 2-25-18	

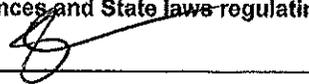
Description of Work	Scope of Work: Inground 16x36 pool with fence				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 576	Finished Sq. Ft.	Unfinished Sq. Ft. 576	# of Bedrooms

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

VALUE OF WORK	
Building	30,000.00
Excludes All Trades Permits	

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

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: 

**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: 4-24-17

Application Date: 4-20-17  
 Application Accepted: BP-2017-00315  
 Old Map Number: 21-9-0-23-0  
 GPIN: 6759-69-1830

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: 2751 Hill House Ln		District	
	Owner: John & SOFIA WANA Godwin		Phone #	
	Address: 2751 House Hill Ln SANDY HOOK, VA			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision: High Grove	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
New Street Address: —		Zoning District: RR		
Front Setback: 5' from road	Center Line Setback: —	Rear Setback: 5' from road	C.U. Permit: N/A	Variance: N/A
Side Setback: 5'	Side Setback: 35' from Broadland	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: 4/21/17

Applicant/Contact: Stell Phone: \_\_\_\_\_  
 Email: Stell@ultimatepools.com

CONTRACTOR INFORMATION	Contractor: <u>ULTIMATE POOLS</u>	Phone: <u>749-4706</u>
	Address: <u>2175 LAWLER LN ROCKVILLE, VA 23146</u>	
	Contractor License Number: <u>2705026339</u>	Type: <u>A</u>

Description of Work	Scope of Work: <u>INGROUND 20X40 POOL WITH AUTO COVER ASTME-1346</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. <u>800</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>800</u>

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

VALUE OF WORK		Application Fee \$ <u>214.50</u>
Building	<u>45000.00</u>	Zoning Fee \$ <u>25.00</u>
Excludes All Trades Permits		Septic/Well Fee \$ _____
		State Levy Fee \$ <u>4.29</u>
		RET Total \$ <u>243.79</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]