

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

8.22.17 - Issued

Application Date: 6/20/17
 Application Accepted: BP-2017-00504
 GPIN: 7717-2A-3303/47-12-01-B
 Issued:

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		2177 Proffitt Rd. Manassas, VA 23103		District	VA 23103	
	Owner		MHIT Builders Inc		Phone #	804-641-4200	
	Address						8527 Mayland Dr Ste 106 Henrico, VA 23294
	Proposed Use		Current Use		Existing Buildings on Property		
	Proposed Occupant Load (Commercial)		Acreage		Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer		Amount:	Date Paid:	
	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		
	75' from Row	—	35'	—	—		
Side Setback	Side Setback	C O A		Flood Zone			
20'	30'	—		—			
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:							

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

Planning & Zoning Officer: Daniel Floyd Date: 6/21/17

Applicant/Contact: ROLAND MILLICAN Phone: 804-641-4200
 Email: rolmillican@aol.com

CONTRACTOR INFORMATION	Contractor	MHIT Builders Inc OWNER	Phone	804-641-4200
	Address			
	8527 MAYLAND DR STE 106 HENRICO, VA 23294			
Contractor License Number		Type	Expiration	

Description of Work	Scope of Work: SFD with Horse Barn below WINNING QUARTERS ABOVE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3823	1600	2223	2

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

Building	VALUE OF WORK \$203,362.50	Application Fee	\$ 927.13
	85,000	Zoning Fee	\$ 0-
Excludes All Trades Permits		Septic/Well Fee	\$ 40-
		State Levy Fee	\$ 14.34
		Fee Total	\$ 1036.47

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.

* ARD. Millican



BUILDING PERMIT APPLICATION

Application Date: 7-6-2017

Permit Number: **BP-2017-00539**

GPIN/Tax Map: **6777-26 7452 / 43-39-0-12-0**

Issued: **8-10-17**

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.

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

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 2301 LANES END PLACE		Phone # 804-423-0314
	Owner MAIN STREET HOMES		Email mtessier@gomsh.com
	Address PO BOX 461, MIDLOTHIAN, VA 23113		Phone # 804-423-0314
APPLICANT INFORMATION	Applicant/Contact Marian Tessier		Email mtessier@gomsh.com
	Address SAME AS ABOVE		Phone # 804-423-0314

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Lane's End	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$14,179.00	Date Paid Due
	Front Setback 40' from P.O.W.	Center Line Setback —	Rear Setback 25' from Prop Line	CUP/Variance/COA —
	Side Setback 10' from Prop Line	Side Setback 10' from Prop Line	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: RP *Cash Proffer is Due before			
	Planning & Zoning Officer David Floyd		Date 7/12/17	C.O. is issued.

CONTRACTOR INFORMATION	Contractor MAIN STREET HOMES		Phone 804-423-0314
	Address PO BOX 461, MIDLOTHIAN VA 23113		
	Contractor License Number 2705039441	Type A	Expiration 5-31-2019

DESCRIPTION OF WORK	Scope of Work: New Single Family Dwelling with attached Garage and Screen Porchh			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors 3
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 4	# of Bedrooms 4
	Finished Sq. Ft. 3973	Unfinished Sq. Ft. 1453 1150	Total Sq. Ft. 5126 5123	

Building Only - Excludes All Trades Permits		Application Fee \$ 1751.61 State Levy Fee \$ 35.83 Septic/Well Fee \$ 40.00 Zoning Fee \$ 50.00 RLD \$ 100.00 SWP \$ 200.00 Total \$ 2177.44	
Value of Work 270809 386,580.00	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 Marian Tessier	Date 7-6-2007		

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 8.8.17

Application Date: 7-12-17
 Application Accepted: BP-2017-00547
 Old Map Number: 67-2-E-8-0
 GPIN: 7723-64-3719

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: 217 East Brook Run. Dr. Richmond, VA 23238
 District: 23238
 Owner: The McGurn Company Inc.
 Phone #: 804-784-7245

Address: P.O. Box 8, Manakin Sabot, VA 23103

Proposed Use: _____ Current Use: _____ Existing Buildings on Property: _____

Proposed Occupant Load (Commercial): _____ Acreage: _____ Commercial Use:
 Yes No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: James River Estates Proffer: Yes No Amount: _____ Date Paid: _____

New Street Address: _____ Zoning District: R-1

Front Setback: 40' from ROW Center Line Setback: _____ Rear Setback: 35' from PL C.U. Permit: _____ Variance: _____

Side Setback: 15' from PL Side Setback: 15' from PL COA: _____ Flood Zone: _____

APPROVED REJECTED COMMENTS: _____

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

Planning & Zoning Officer: David Floyd Date: 7/13/17

Applicant/Contact: Artie McGurn Phone: 784-7245

Email: artie.mcgurn@gmail.com

Contractor: The McGurn Company Inc. Phone: 804-784-7245

Address: P.O. Box 8, Manakin Sabot, VA 23103

Contractor License Number: 2701021780 Type: A Expiration: 10-31-18

Description of Work: Single Family home w/ garage

SEWER Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>	WATER Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>	# of Bathrooms: 2 1/2		
# of Floors: 2	Total Sq. Ft.: 4028	Finished Sq. Ft.: 2793	Unfinished Sq. Ft.: 1481	# of Bedrooms: 3 4

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

VALUE OF WORK: 4274
 Building: 185,000 - 265,012.50
 Excludes All Trades Permits

Application Fee	\$1304.56
Zoning Fee	50.-
Septic/Well Fee	25.-
State Levy Fee	24.59
BP Total	\$1304.15

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: Artie McGurn

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: Greg Foreman Telephone: 804-379-1900

Mailing Address: 1919 Huguenot Rd #300, N. Chesterfield, 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 60 CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 7/21/17

Permit Number: BP-2017-00575

GPIN/Tax Map: 4-3-8/6813-04-6659

Issued: 8.24.17

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address <u>4646 Slippery Rock LN Columbia, VA 23038</u>	
	Owner <u>Renovatro LLC</u>	Phone # <u>804 216 7222</u>
	Address <u>PO Box 71595 Rich VA 23255</u>	Email <u>jlnettco@aol.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>DAVID JANNETT</u>	Phone # <u>same</u>
	Address <u>same</u>	Email <u>same</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Tobscott Estates</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>55' from Row</u>	Center Line Setback —	Rear Setback <u>35' from PL</u>	CUP/Variance/COA —
	Side Setback <u>20' from PL</u>	Side Setback <u>20' from PL</u>	Flood Zone —	—
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>A-1</u>			

Planning & Zoning Officer: David Tapp Date: 7/24/17

CONTRACTOR INFORMATION	Contractor <u>Wanderview Homes</u>	Phone <u>804 216 7222</u>
	Address <u>PO Box 71595 Rich VA 23255</u>	
	Contractor License Number <u>2705135088A</u>	Type <u>BO R3C A</u>

DESCRIPTION OF WORK	Scope of Work: <u>new home construction</u>			
	Proposed Use <u>R3S SML Plan</u>	Current Use <u>same</u>	Existing Buildings on Property <u>NO</u>	# of Floors <u>2</u>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>2.5</u>	# of Bedrooms <u>3</u>
	Finished Sq. Ft. <u>1480</u>	Unfinished Sq. Ft. <u>150</u>	Total Sq. Ft. <u>1630</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>466.83</u>	
Value of Work <u>2174000 \$101,075.00</u>		State Levy Fee \$ <u>10.14</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.		Septic/Well Fee \$ <u>40-</u>	
		Zoning Fee \$ <u>50-</u>	
		RLD \$	
		SWP \$	
		Total \$ <u>566.97</u>	

Signature of Applicant: [Signature] Date: _____

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: Home Title Insurance Agency Telephone: 804.272.1828

Mailing Address: 9701 metropolitan Ct. Suite B, N. Chesterfield, VA
232310

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 portion of \$ 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 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 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 0 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) 556-5851 TDD 711 Va Relay

Issued: 8-28-17

Application Date: 7/20/17

Application Accepted: BP-2017-00580

Old Map Number: 13-24-0-2-0

GPIN: 6842-94-8776

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 3750 Boundary Run Rd.		District
	Owner Blue Ridge Custom Homes, LLC		Phone #
	Address 1186 Wickinghole Rd, Goochland, Va. 23063		
	Proposed Use Sngl. Fam Sub	Current Use same	Existing Buildings on Property N/A
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Boundary Run	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____	
	New Street Address		Zoning District A-1		
	Front Setback 55' from PL	Center Line Setback	Rear Setback 35' from PL	C.U. Permit	Variance
	Side Setback 20' from PL	Side Setback 20' from PL	COA	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: * Rear setback must 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 Taylor Date: 8/3/17

Applicant/Contact: Ray Avery IV, Exec. VP Emerald Homes Phone: 674-0231 Ext. 14

Email: ray@emerald-homes.com

CONTRACTOR INFORMATION	Contractor Chesterfield Construction Sves. Inc. DBA Emerald Homes	Phone 674-0231
	Address P.O. Box 4309 Midlothian, 23112	
	Contractor License Number 2701 024711A	Type Class A - BLD.

Description of Work	Scope of Work: Construct single family dwelling w/attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2		
	# of Floors 2	Total Sq. Ft. 2616	Finished Sq. Ft. 2050	Unfinished Sq. Ft. 566	# of Bedrooms 4

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

VALUE OF WORK		Total \$1,099.09	Application Fee	\$ 694.40
Building	\$ 151,645		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 40.00
			State Levy Fee	\$ 14.69
			RLD	\$ 1000.00
			Storm.	\$ 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.

Signature of Applicant: Ray Avery IV

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: Philip L. McDaniel, Attorney Telephone: 379-0380

Mailing Address: P.O. Box 353, Midlothian 23113

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 \$ 40.00 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

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

Residential Commercial

Application Date: 7.26.17

Permit Number: BP-2017-00591

GPIN/Tax Map: 6830-74-1354 / TM: 19.14.0.A.0

Issued: 8.15.17

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 4156 Whitehorne Road Sandy Hook, VA 23153	
	Owner GREG + STELLA HARLOW	Phone # 804-937-8201
	Address	

APPLICANT INFORMATION	Applicant/Contact Jim STARKES	Phone # 804-519-6270
	Address 1707 SHALLOW WELL ROAD MANAKIN SPRING VA 23103	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Meredith Farms	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 75' from ROW	Center Line Setback	Rear Setback 35' from PL	CUP/Variance/COA
	Side Setback 20' from ROW	Side Setback 20' from ROW	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: A-1			
	Planning & Zoning Officer: <i>[Signature]</i>		Date: 7/27/17	

CONTRACTOR INFORMATION	Contractor STARKES Construction	Phone 804-519-6270
	Address 1707 SHALLOW WELL RD. MANAKIN-SPRING VA 23103	
	Contractor License Number 2705038805	Type CBL RBL

DESCRIPTION OF WORK	Scope of Work: New SFD attached garage w/ unfinished basement			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors 2
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3 1/2	# of Bedrooms
	Finished Sq. Ft. 3197	Unfinished Sq. Ft. 2545	Total Sq. Ft. 5742	

Building Only - Excludes All Trades Permits		Application Fee \$ 1699.50
Value of Work 375,000		State Levy Fee \$ 34.79
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.		Septic/Well Fee \$ 40-
Signature of Applicant: <i>[Signature]</i>	Date: 26 July 2017	Zoning Fee \$ 50-
		RLD \$
		SWP \$
		Total \$ 1824.29

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: DAVIN SATTERWHITE Telephone: 556-4012

Mailing Address: _____

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 portion of \$ 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 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 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 8 CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official

ISSUED 8.1.17
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 3-3 PARKSIDE VILLAGE

Application Date: 7-26-17

Permit Number: BP-2017-00595

Old Map Number: 49.19.0.30

GPIN: 0738-11-2940

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 7227 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

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision <u>Parkside Village Sec. 3</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$5987.00</u>	Date Paid: <u>Due</u>
New Street Address		Zoning District <u>RPUD</u>	
Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit
Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Census Tract	Flood Zone
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>* Cash Proffer is due before C.O. is 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.

Planning & Zoning Officer David [Signature] Date 7/29/17

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

Email: bjames@eagleofva.com

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 6-30-2019	

Description of Work				
Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private		WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private		# of Bathrooms
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
2	3651	2881	770	3

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

VALUE OF WORK	
Building	\$244,950.00
Excludes All Trades Permits	

Application Fee	\$ <u>1114.27</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>22.29</u>
Zoning Fee	\$ <u>50-</u>
Total	\$ <u>1186.56</u>

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

Signature of Applicant [Signature]



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8/1/17

Permit Number: BP-2017-00605

GPIN/Tax Map: 6999-66-6834 / 43-40-0-6-5

Issued: 8.22.17

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 2116 Jockey Ridge Lane Maidens, VA 23102	
	Owner Breeze Hill Inc.	Phone # 347-4763
	Address 1930 Soldiers Lodge Rd Cross Keys	Email carlthompson2@gmail.com

APPLICANT INFORMATION	Applicant/Contact Steve Thompson		Phone # 539-2524
	Address 1390 B Broad Street Rd Oilville, VA 23127		Email stevethompsonbuilder@comcast.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Breeze Hill Sec. 2	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$19,852.00	Date Paid Done
	Front Setback 40' from ROW	Center Line Setback	Rear Setback 25' from PL	CUP/Variance/COA
	Side Setback 10' from PL	Side Setback 10' from PL	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Cash Proffer Due before C.O. is issued.			
	Planning & Zoning Officer Dana Floyd		Date 8/3/17	RP

CONTRACTOR INFORMATION	Contractor Steve Thompson Builder, LLC		Phone 539-2524
	Address 1390 B Broad Street Rd Oilville VA 23125		
	Contractor License Number 2705054732	Type CBC RBC	Expiration 3/31/2018

DESCRIPTION OF WORK	Scope of Work: New Residential Dwellings Attached garage			
	Proposed Use	Current Use	Existing Buildings on Property None	# of Floors 2
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3 1/2	# of Bedrooms 3
	Finished Sq. Ft. 3659	Unfinished Sq. Ft. 1600	Total Sq. Ft. 5259	

Building Only - Excludes All Trades Permits		Application Fee	\$1919.57
Value of Work	\$340,000 379,015.00	State Levy Fee	\$35.15
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.		Septic/Well Fee	\$40-
		Zoning Fee	\$50-
		RLD	\$100-
		SWP	\$200-
		Total	\$2142.72
Signature of Applicant Steve Thompson		Date	8/1/17

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: 556-4012

Mailing Address: 3013 River Road West 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 portion of \$ 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 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 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 6 CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: **8/4/17**

Permit Number: **BP-2017-00612**

GPIN/Tax Map: 6822-18-0333 / **5-1-0-54-A**

Issued: **8-31-17**

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 3417 County Line Rd. Kents Store VA 23084	
	Owner Peter T & Norah R Knutsen	Phone # 804-457-4356
	Address 3421 County Line Rd. Kents Store, VA 23084	Email knutsenp@gmail.com
APPLICANT INFORMATION	Applicant/Contact Peter T Knutsen	
	Address 3421 County Line Rd. Kents Store, VA 23084	Phone # 540-360-5070

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 75' from Row	Center Line Setback —	Rear Setback 35' from PL	CUP/Variance/COA —
	Side Setback 20' from PL	Side Setback 20' from PL	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David Floyd Date: 8/4/17 A-1			

CONTRACTOR INFORMATION	Contractor Self		Phone 540-360-5070
	Address Same as above		
	Contractor License Number Property Owner	Type —	Expiration —

DESCRIPTION OF WORK	Scope of Work: Build a small 2 bedroom cabin on existing parcel for family member. No formal property subdivision.			
	Proposed Use Residence	Current Use Field	Existing Buildings on Property House and Barn	# of Floors 2
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 2.5	# of Bedrooms 2
	Finished Sq. Ft. 1715	Unfinished Sq. Ft. 1344	Total Sq. Ft. 3059	

Building Only - Excludes All Trades Permits

Value of Work	175,000 \$179,025.00
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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: **Peter Knutsen** Date: **8/4/17**

Application Fee	\$ 817.61
State Levy Fee	\$ 17.15
Septic/Well Fee	\$ 40-
Zoning Fee	\$ 50-
RLD	\$ —
SWP	\$ —
Total	\$ 924.16



BUILDING PERMIT APPLICATION

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

Application Date: 8-9-17Permit Number: BP-2017-00626GPIN/Tax Map: 58-26-4 / 7715-26-4255Issued: 8-15-17

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.



Residential



Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address <u>365 First Flite Lane, Lot 4</u>	
	Owner <u>David & Sandra Nunnallay</u>	Phone # <u>804-615-6256</u>
	Address <u>265 Hill Point Road, Richmond, VA 23238</u>	Email <u>macbrand21@comcast.net</u>
APPLICANT INFORMATION	Applicant/Contact <u>Ray Williams</u>	
	Address <u>14343 Sommerville Ct., Midlothian, VA., 23113</u>	Phone # <u>804-794-7705</u>
		Email <u>darrell@rwbuilder.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Fairway Estates</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from ROW</u>	Center Line Setback _____	Rear Setback <u>35' from PL</u>	CUP/Variance/COA _____
	Side Setback <u>20' from PL</u>	Side Setback <u>20' from PL</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Rear Setback must be survey located.</u>			
Planning & Zoning Officer <u>Daniel Ford</u>		Date <u>8/9/17</u>		<u>M-2</u>

CONTRACTOR INFORMATION	Contractor <u>Ray A. Williams Const. Co.</u>		Phone <u>804-794-7705</u>
	Address <u>14343 Sommerville Ct., Midlothian Va., 23113</u>		
	Contractor License Number <u>2701024603</u>	Type <u>A</u>	Expiration <u>03-31-2018</u>

DESCRIPTION OF WORK	Scope of Work: <u>New Residential construction with attached garage</u>			
	Proposed Use	Current Use	Existing Buildings on Property <u>no</u>	# of Floors <u>2</u>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>4.5</u>	# of Bedrooms <u>4</u>
	Finished Sq. Ft. <u>5530</u>	Unfinished Sq. Ft. <u>575 + 2634 + 298 = 1136</u>	Total Sq. Ft. <u>7515.00</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>880,000</u>	Application Fee <u>849</u>	Application Fee \$ <u>3,972.00</u>
	<u>= 1985.00</u>	State Levy Fee \$ <u>79.44</u>
		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>50.00</u>
		RLD \$ <u>100.00</u>
		SWP \$ _____
		Total \$ <u>4,201.44</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] Date: 8/9/17

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: Owen and Owens Telephone: 804-464-3093

Mailing Address: 15521 Midlothian Turnpike, suite 300, Midlothian VA 23113

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 portion of \$ 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 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 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: 8-15-17

Application Date: 8/10/17
 Application Accepted: BP-2017-00637
 Old Map Number: 58-48-8-42-0
 GPIN: 7715-57-1825/58-48-8-42-0

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

OWNER INFORMATION	Site Address 889 Kempston Lane 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		
Subdivision Kinlock Sec. 8	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: —	Date Paid: —	
New Street Address		Zoning District RPUD		
Front Setback 30' from Pavement	Center Line Setback —	Rear Setback 50' B/S	C.U. Permit —	Variance —
Side Setback 20' B/S	Side Setback 20' B/S	C O A	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Front 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 Floyd Date: 8/11/17

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	3.5		# of Bathrooms
	# of Floors 2	Total Sq. Ft. 4272	Finished Sq. Ft. 3523	Unfinished Sq. Ft. 749	# of Bedrooms 3

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

VALUE OF WORK	
Building	\$293,000.00
Excludes All Trades Permits	

Application Fee	\$ 1330.50
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ —
State Levy Fee	\$ 26.61
RED Total	\$ 1407.11

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 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 8-16-17
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 17-3 PARKSIDE VILLAGE

Application Date: 8-14-17
 Permit Number: BP-2017-00648
 Old Map Number: 48.19.0.17.0
 GPIN: 0738-11-3471

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 7288 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 <u>Parkside Village Sec. 3</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$5987.00</u>	Date Paid: <u>Due</u>	
	New Street Address		Zoning District <u>RPUD</u>		
	Front Setback <u>30' from Pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit	Variance
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Census Track	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>* Cash Proffer due before C.U. is 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.
 Planning & Zoning Officer: David Ford Date: 8/15/17

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 6-30-2019

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
	2	4322	3708	614	4

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

VALUE OF WORK	
Building	\$301,125.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <u>1367.00</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>27.34</u>
Zoning Fee	\$ <u>50-</u>
Total	\$ <u>1444.40</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]

Issued 8.16.17

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 36-3 PARKSIDE VILLAGE

Application Date: 8-14-17

Permit Number: BP-2017-00649

Old Map Number: 48.19.0.36.0

GPIN: 7738-11-1813

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 7231 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		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Parkside Village Sec. 3	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$ 5987.00	Date Paid: Dec	
	New Street Address		Zoning District RPUD		
	Front Setback 30' from Pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit	Variance
	Side Setback 20' B/S	Side Setback 28' B/S	Census Track	Flood Zone	
	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: <u>[Signature]</u> Date: <u>8/15/17</u>					
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 6-30-2019		
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
	2	3438	2881	557	4

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

VALUE OF WORK

Building	\$236,962.50
Excludes All Trades Permits	

Application Fee	\$ 1078.33
Septic/Well Fee	\$
State Levy Fee	\$ 21.57
Zoning Fee	\$ 50-
Total	\$ 1149.90

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]

Issued 8-24-17
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 16-3 PARKSIDE VILLAGE

Application Date: 08-16-17
 Permit Number: BP-2017-00656
 Old Map Number: 48-19-0-16-0
 GPIN: 7738-11-3320

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 7284 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 <u>Parkside Village Sec. 3</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$5987.00</u>	Date Paid: <u>Due</u>
	New Street Address		Zoning District <u>RPUD</u>	
	Front Setback <u>30' from front</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Census Tract	Flood Zone
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/> COMMENTS: <u>*Cash Proffer is due before 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.

Planning & Zoning Officer: David Floyd Date: 8/21/17

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 6-30-2019	

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	3.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. 3257	Finished Sq. Ft. 2677	Unfinished Sq. Ft. 580	# of Bedrooms 3

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

VALUE OF WORK	
Building	\$222,525.00
Excludes All Trades Permits	

Application Fee	\$ 1013.36
Septic/Well Fee	\$
State Levy Fee	\$ 20.27
Zoning Fee	\$ 50-
Total	\$ 1083.63

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

Signature of Applicant: [Signature]



BUILDING PERMIT APPLICATION

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

Application Date: 8/9/2017 **8-18-17**

Permit Number: **BP-2017-00658**

GPIN/Tax Map: 7716-42-6506 / **58.21.D.10**

Issued: **8.31.17**

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 290 Hawk Wing Drive	
	Owner John & Elizabeth Ragone	Phone # 8043053688
	Address 290 Hawk Wing Drive	Email jragone@earthlink.net

APPLICANT INFORMATION	Applicant/Contact David Raber, CR, CKD, CBD		Phone # 8043877534
	Address 12535 Patterson Avenue		Email dave@classickitchensofva.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Broad Run Sec. 2	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 40' from ROW	Center Line Setback —	Rear Setback 25' from PL	CUP/Variance/COA —
	Side Setback 10' / 25' from PL	Side Setback 10' / 25' from PL	Flood Zone —	—
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: David Raber Date 8/21/17			
	Planning & Zoning Officer: David Raber Date 8/21/17 R-3			

CONTRACTOR INFORMATION	Contractor Classic Kitchens of Va., Inc.		Phone 8047845075
	Address 12535 Patterson Avenue, Richmond, VA 23238		
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Single story addition, screen porch, porch family room			
	Proposed Use	Current Use	Existing Buildings on Property 2	# of Floors 1
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 0	# of Bedrooms 0
	Finished Sq. Ft. 450	Unfinished Sq. Ft. 216	Total Sq. Ft. 666	

Building Only - Excludes All Trades Permits		Application Fee	\$112.00
Value of Work	200,000 -	State Levy Fee	\$18.24
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] Date: 8/17/17		Septic/Wall Fee	\$
		Zoning Fee	\$25-
		RLD	\$
		SWP	\$
		Total	\$155.24

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: 8/21/17
 Application Accepted: BP-2017-00672
 Old Map Number: 47-28-0-13-0
 GPIN: 7716-69-1992

Issued 8-31-17
 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>2016 Sycamore Creek Dr</u>		District	
	Owner <u>William & Judith Johnson</u>		Phone # <u>804 781 4996</u>	
	Address <u>2016 Sycamore Creek Dr</u>			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage <u>2.53</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Sycamore Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	New Street Address		Zoning District <u>R-1</u>	
	Front Setback <u>40' from ROW</u>	Center Line Setback _____	Rear Setback <u>5'</u>	C.U. Permit _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	COA _____	Flood Zone _____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.
 Planning & Zoning Officer Dwight Floyd Date 8/24/17

Applicant/Contact: <u>PA-Mor Construction</u>	Phone <u>804 781-0442</u>
Email: <u>MaryAnn.pmc@comcast.net</u>	
Contractor <u>PA-Mor Const</u>	Phone <u>804 781-0442</u>
Address <u>PO. Box 295 Mech VA 23111</u>	
Contractor License Number <u>2705091041</u>	Type <u>A</u> Expiration <u>1/31/2019</u>

Description of Work	Scope of Work: <u>12'3" x 23'11 fiberglass pool</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. <u>312</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>312</u>

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

VALUE OF WORK	
Building	<u>36,225.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>175.01</u>
Zoning Fee	<u>00</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>3.50</u>
TOTAL	\$ <u>203.51</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 D.N. Clements



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8-28-17
 Permit Number: AP-2017-00681
 GPIN/Tax Map: 7116-69-1992 / 47-28-0-1-E
 Issued: 8-31-17

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address <u>2016 Sycamore Creek Drive - link to BP 2017-00672</u>	Phone # <u>804 784-4996</u>
	Owner <u>Wm R Johnson / Judith P Johnson</u>	Email <u>2016 Sycamore Creek Dr. Manakin-Sabot Va 23103</u>
	Applicant/Contact <u>Judith P Johnson</u>	Phone # <u>804 784.4996</u>
APPLICANT INFORMATION	Address <u>Same as above</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Sycamore Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>0</u>	Center Line Setback <u>0</u>	Rear Setback <u>0</u>	CUP/Variance/COA
	Side Setback <u>0</u>	Side Setback <u>0</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>[Signature]</u> Date: <u>8/24/17</u> R-1			

CONTRACTOR INFORMATION	Contractor <u>IMAGE Fencing Inc.</u>	Phone <u>212 9400</u>
	Address <u>12689 Pamela Lane Richmond Va 23233</u>	
	Contractor License Number <u>2705064870 Class B Civic</u>	Type <u>Fencing</u>

DESCRIPTION OF WORK	Scope of Work: <u>Fence barrier for pool</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>30.00</u>
Value of Work \$ <u>1000.00</u>		State Levy Fee \$ <u>.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.		Septic/Well Fee \$ <u>—</u>
Signature of Applicant <u>[Signature]</u>	Date <u>8/28/17</u>	Zoning Fee \$ <u>—</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>30.60</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: **8-28-17**
 Permit Number: **BP-2017-00682**
 GPIN/Tax Map: **5892-54-4414/9-13-05-0**
 Issued: **8-31-17**
 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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION
 Site Address: **3925 FOURCEE FARMS LANE**
 Owner: **DAVID BOHNHOFF** Phone #: **434-591-0429**
 Address: **3925 FOURCEE FARMS LANE** Email: **bohnhoffwoodworking@gmail.com**

APPLICANT INFORMATION
 Applicant/Contact: **DAVID BOHNHOFF** Phone #: **434-591-0429**
 Address: **3925 FOURCEE FARMS LANE** Email: **bohnhoffwoodworking@gmail.com**

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: **Fourcee Farms** Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: **55' from ROW (Fourcee Farm Rd)** Center Line Setback: _____ Rear Setback: **5'** CUP/Variance/COA: _____
 Side Setback: **35' from ROW (Community House Rd)** Side Setback: **5'** Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: **David Ford** Date: **8/29/17** **A-1**

CONTRACTOR INFORMATION
 Contractor: **DAVID BOHNHOFF (PROPERTY OWNER)** Phone: **434-591-0429**
 Address: **3925 FOURCEE FARMS LANE**
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: **BUILD A ~~WOOD STU~~ ADJOINING GARAGE FOR LUMBER STORAGE Building**

Proposed Use: STORAGE	Current Use: WOOD STUDIO	Existing Buildings on Property: 2	# of Floors: 2
SEWER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms: 0	# of Bedrooms: 0
Finished Sq. Ft.: 1200	Unfinished Sq. Ft.: 1200	Total Sq. Ft.: 1200	

Building Only - Excludes All Trades Permits

Value of Work: 40,000	Application Fee: \$ 192-
	State Levy Fee: \$ 3.84
	Septic/Well Fee: \$ _____
	Zoning Fee: \$ 25-
	RLD: \$ _____
	SWP: \$ _____
	Total: \$ 220.84

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 Bohnhoff** Date: **8/28/17**



BUILDING PERMIT APPLICATION

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

Application Date: 6/23/2017

Permit Number: **BP-2017-00517**

GPIN/Tax Map: 7727-56-1101 and 7727-46-8720

Issued: **8-30-17** **48-1-0-40-0**

Residential Commercial

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 1950 Rockville Industrial Way	
	Owner Luck Stone - Mike Plale	Phone # 8044766492
	Address PO Box 29682, Richmond, VA 23242	Email mplale@luckstone.com

APPLICANT INFORMATION	Applicant/Contact Jack Heisler		Phone # 8043149237
	Address 3201 Lanvale Avenue, Richmond, VA 23230		Email jack@jaheisler.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>75' from ROL</i>	Center Line Setback	Rear Setback <i>10'</i>	CUP/Variance/COA
	Side Setback <i>31' adjacent to A-2</i>	Side Setback <i>10'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>M2</i>			

Planning & Zoning Officer: *David Land* Date: *6/24/17*

CONTRACTOR INFORMATION	Contractor J.A. Heisler Contracting Co., Inc.		Phone 8043552616
	Address 3201 Lanvale Avenue, Richmond, VA 23230		
	Contractor License Number 2701027149A	Type A	Expiration 12/31/2017

DESCRIPTION OF WORK	Scope of Work: Construction of Maintenance Building with training room and bathrooms			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft. 11684	Unfinished Sq. Ft. 0	Total Sq. Ft. 11684	

Building Only - Excludes All Trades Permits		Application Fee 7,095.87	
Value of Work \$747,776.00		State Levy Fee \$1,427.22	Septic/Well Fee \$4,000.25
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.		Zoning Fee \$100.00	RLD \$
Signature of Applicant <i>John A Heisler</i>	Date <i>6/23/17</i>	SWP \$	Total 7,363.29



BUILDING PERMIT APPLICATION

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

Application Date: 7/5/17
Permit Number: AP-2017-00530
GPIN/Tax Map: 77116-99-5543/47-1-0-43-H
Issued: 8.30.17

Residential Commercial

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 54 Plaza Dr. Manakin-Sabot, Virginia 23103	
	Owner Yi, Jeong Ho	Phone # 804-869-9326
APPLICANT INFORMATION	Address	Email masteryimanager@gmail.com
	Applicant/Contact Yi, Jeong Ho	Phone # 804-869-9326
	Address	Email masteryimanager@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>20' from ROW</u>	Center Line Setback _____	Rear Setback <u>30' from PL</u>	CUP/Variance/COA
	Side Setback <u>10' from PL</u>	Side Setback <u>10' from PL</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>M-1</u> Planning & Zoning Officer: <u>David [Signature]</u> Date: <u>7/25/17</u> CUP Required moving forward with sign at own RISK			

CONTRACTOR INFORMATION	Contractor Sign to Go	Phone 703-801-0734
	Address 12177 Livingston Rd. Manassas, VA 20110	
	Contractor License Number 2705077647	Type BSC CIC HIC RBC CBC
	Expiration 7/31/2017	

DESCRIPTION OF WORK	Scope of Work: Building Mounted Sign; We would like to install an outdoor signage for the building that is located at the premise.			
	Proposed Use	Current Use	Existing Buildings on Property	
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	<u>\$30.00</u>
Value of Work	\$3000	State Levy Fee	<u>\$.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.		Septic/Well Fee	\$
		Zoning Fee	<u>\$50.00</u>
Signature of Applicant: <u>[Signature]</u> Date: <u>7/5/17</u>		RLD	\$
		SWP	\$
		Total	<u>\$80.60</u>

CUP Required moving forward with sign at own RISK
8292



BUILDING PERMIT APPLICATION

Application Date: 7/24/2017

received 8-3-17

Permit Number: BP-2017-00629

GPIN/Tax Map: 6769-48-6700/43-2-0-2-0

Issued: 8.29.17

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.

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

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address: 1900 HIDDEN ROCK LANE, MAIDENS, VA 23102			
	Owner: Goochland County	Phone #: 804/556-5800		
APPLICANT INFORMATION	Address: 1800 SANDY HOOK RD. P.O. BOX 10 GOOCHLAND, VA 23063		Email: countyadmin@goochlandva.us	
	Applicant/Contact: Sean Bowers		Phone #: 804-714-2540	
TO BE COMPLETED BY ZONING DEPARTMENT	Address: 7620 Whitepine Rd, Richmond, VA 23237		Email: sbowers@bfe-llc.com	
	Subdivision: None	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____ Date Paid: _____	
	Front Setback: 55' From Ash w/ Holden	Center Line Setback: _____	Rear Setback: 35'	CUP/Variance/COA: _____
	Side Setback: 55' from Fairgrounds Rd. 20'	Side Setback: _____	Flood Zone: _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____			
Planning & Zoning Officer: [Signature]		Date: 8/25/17	A-2	
CONTRACTOR INFORMATION	Contractor: BFE Construction, Inc.		Phone: 804-714-2540	
	Address: 7620 Whitepine Road, Richmond, VA 23237			
	Contractor License Number: 2705075858	Type: Class A	Expiration: 05-31-2019	
DESCRIPTION OF WORK	Scope of Work: Ground-up new construction including site work, framing, fire protection and MEP. Animal Protection Building			
	Proposed Use: Business Group B	Current Use: N/A	Existing Buildings on Property: 1	
	SEWER: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	# of Bathrooms: 4	# of Floors: 1
	# of Bedrooms: N/A	Finished Sq. Ft.: 13,941	Unfinished Sq. Ft.: N/A	Total Sq. Ft.: 13,941

Building Only - Excludes All Trades Permits

Value of Work: \$2,669,075 (crossed out) \$2,126,345.00

Fee waived, county project

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] Date: 7/26/17

Application Fee	\$
State Levy Fee	\$
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$

* Revised 8-28-17 529 sq ft finished bedroom above garage *

<p align="center">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</p> <p align="center">TM: 18.14.8</p>	<p>Application Date: 8-31-16</p> <p>Application Accepted: BP-20110-00695</p> <p>GPIN: 6821-50-9607</p> <p>Issued: 12.5.16</p>
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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 3344 Tiller Lane		District	
	Owner Aaron Goodwin		Phone #	
	Address 1186 Lickinghole Rd Goochland Va 23063			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage 5.008	Commercial Use <input 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 A-1		
Front Setback 75' from ROW	Center Line Setback —	Rear Setback 35'	C.U. Permit N/A	Variance N/A
Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Teyl Date: 9/2/16

Applicant/Contact: Nathan Sanacka Phone: 540-478-3110

Email: Nathan Sanacka Nathanbach@gmail.com

CONTRACTOR INFORMATION	Contractor Blue Ridge Custom Homes		Phone	
	Address 1186 Licking hole Rd Goochland Va 23063			
	Contractor License Number 2705 086712	Type A	Expiration	

Description of Work	Scope of Work: New single family home attached garage w/ bonus above room				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2.5		
	# of Floors 2	Total Sq. Ft. 4675	Finished Sq. Ft. 2419 2943	Unfinished Sq. Ft. 2261 1732	# of Bedrooms 4

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

VALUE OF WORK		Application Fee \$1208.26 Zoning Fee \$50.00 Septic/Well Fee \$40.00 State Levy Fee \$24.97 RLD \$100.00
Building	250,000 265,837.50 storm water \$5200.00	
Excludes All Trades Permits \$285,675.00		

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: \$11023.23



ZONING COMPLIANCE APPLICATION
COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office
P.O. Box 103
Goochland, VA 22063

Phone: (804) 556-5860

Web: www.co.goochland.va.us

FAX: (804) 556-5654

received
8-23-17

Issued 8-24-17

Application File Date: 8-23-17		Office Use Only		Application No.: AP-2017-00669		Fee: \$25.00	
Zoning Approval: Yes		No:		Date: 8/24/17			

Zoning Application Type: Please appropriate check box

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

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

Application Requirements

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

Applicant/Owner Information

Name of Property Owner: Kenneth L. Proffitt
Address: 1963 Rockville Rd
Rockville, Virginia 23146
E-mail:

Telephone: 804-719-9059
Cell phone: 804-400-7965
FAX:

Name of Applicant: Kenneth L. Proffitt
Address: 1963 Rockville Rd
Rockville, Virginia 23146
E-mail:

Telephone: 804-719-9059
Cell phone: 804-400-7965
FAX:

Property Information

Street Address: 1963 Rockville Rd Rockville, Va
GPIN Number: 7707-11-8096 23146
Existing Use: Storage

Zoning:
Acreage: 1.49

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

Project Information

1. Estimated square footage of the building(s): 256 sq ft
2. Value of Building: \$2,000
3. Written Description of Proposed Physical Improvements:
for lawnmowers etc.

Issued 8-22-17



ZONING COMPLIANCE APPLICATION COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office
P.O. Box 103
Goochland, VA 22063

Phone: (804) 556-5860

Web: www.goochlandva.us

FAX: (804) 556-5654

Office Use Only

Application File Date: 8-16-17 Application No.: AP-2017-00652 Fee: \$25.00

Zoning Approval: Yes David Floyd No: _____ Date: 8-16-17

Zoning Application Type: Please check appropriate box

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

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

Application Requirements

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

Applicant/Owner Information

Name of Property Owner: Greg Harlow

Telephone: 804-937-8201

Address: 2903 Stone Creek Dr

Cell phone: SAME

Fandy Hook, VA 23153

FAX: _____

E-mail: Greg. Harlow@graybar.com

Name of Applicant: Greg Harlow

Telephone: _____

Address: same

Cell phone: _____

E-mail: _____

FAX: _____

Property Information

Street Address: 4180 Whitehall Rd

3010 Meredith Farms Rd
Zoning: A-1

GPIN Number: 6836-84-0400

Acreage: 21 acres

Existing Use: Farming

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

Project Information

1. Estimated square footage of the building(s): 1200 2. Value of Building: 32,000.00

3. Written Description of Proposed Physical Improvements:

Build 1200 sqft farm use structure for storing farm equipment.



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: **8.21.17**

Permit Number: **BP-2017-00661**

GPIN/Tax Map: **6767-31-4448-9999 / 42-1-0-121-**

Issued: **8-22-17**

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 2485 Old Courthouse Rd. Goochland, VA 23063	Phone #
	Owner Goochland County Fire Training Center	
	Address	Email

APPLICANT INFORMATION	Applicant/Contact Sam Perkins	Phone #
	Address	Email Sam@bluenridge mobile home.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION	Contractor Blue Ridge Transporting LLC	Phone 434-987-6049
	Address 1006-B Jefferson St. Charlottesville, VA 22902	
	Contractor License Number 2705151346	Type MHC

DESCRIPTION OF WORK	Scope of Work: singlewide relocate SW to fire training center from fire station 6 ^ Goochland County 16x60			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft. 960	Unfinished Sq. Ft.	Total Sq. Ft. 960	

Building Only - Excludes All Trades Permits

Value of Work	5,000
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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: **Mark R** Date: _____

Application Fee	\$ _____
State View Fee	\$ _____
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ _____

Fee waived by Goochland County

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: 8-22-17

Application Date: 8/14/2017

Application Accepted: *BP-2017-00662*

Old Map Number: 43-17-0-B-0

GPIN: 6767-91-5799

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 2408 SHEPPARD TOWN ROAD		District	
	Owner JAMIE & THERESA PLEASANTS		Phone # 804-556-3841	
	Address 2408 SHEPPARD TOWN ROAD			
	Proposed Use DWELLING	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage 1.06	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	Side Setback	Side Setback	C O A	Flood Zone
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer _____ Date _____

Applicant/Contact: JUSTIN STORY Phone 804-495-4646

Email: JSTORY@JESNOW.COM

Contractor JES CONSTRUCTION Phone 804-495-4646

Address 2410 SOUTHLAND DRIVE

Contractor License Number 270-506-8655 Type A Expiration 4-30-2018

Scope of Work: CRAWLSPACE ENCAPSULATION

Description of Work	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft. 1040
			# of Bedrooms	

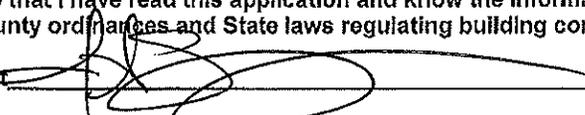
TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	11616.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>64.27</i>
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ <i>1.29</i>
NET Total	\$ <i>65.56</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 



BUILDING PERMIT APPLICATION

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

Application Date: B 8-16-17
 Permit Number: BP-2017-00654
 GPIN/Tax Map: 7733-76-0044 / 68-2-B-7
 Issued: 8-21-17
 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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 16 East Square Lane, Goochland, VA 23238			
	Owner James and Lynne Hensley		Phone # (301) 518-2030	
	Address 16 East Square Lane, Goochland, VA 23238		Email lhensleyb@comcast.net	
APPLICANT INFORMATION	Applicant/Contact HomeKeepers LLC		Phone # (804) 519-2950	
	Address 8501 Patterson Ave, Richmond, VA 23229		Email david@homekeepers.org	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer _____ Date _____			
CONTRACTOR INFORMATION	Contractor HomeKeepers LLC			Phone (804) 750-1166
	Address 8501 Patterson Ave, Richmond, VA 23229			
	Contractor License Number 2705160179		Type Class A	Expiration 6/30/2018
DESCRIPTION OF WORK	Scope of Work: <u>Removal of non bearing wall</u> Kitchen renovation including: non structural wall removal , addition of two islands, electrical receptacles and lights, cabinets, countertops, and induction cooktop with down draft. Installation of fan in upstairs bathroom.			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work \$25,000

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] Date 8/16/17

Application Fee	\$ <u>124.50</u>
State Levy Fee	\$ <u>2.49</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>126.99</u>



BUILDING PERMIT APPLICATION

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

Application Date: 08/01/2017

Permit Number: **BP-2017-00614**

GPIN/Tax Map: **0723-25-6124 / 66.4.0.11.0**

Issued: **8.16.17**

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

Site Address 300 River Side Court, Richmond, VA 23238

Owner Qui-Xu **Phone #**

Address 322 River Side Court, Richmond, VA 23238 **Email**

Applicant/Contact Ultimate Pools/Steve Jowers **Phone #** 804-749-4706

Address 2175 Lanier Rd, Rockville, VA 23146 **Email** service@ultimatepools.com

Subdivision Pembroke **Proffer** Yes No **Amount** — **Date Paid** —

Front Setback 55' From ROW **Center Line Setback** **Rear Setback** 5' **CUP/Variance/COA**

Side Setback 5' **Side Setback** 5' **Flood Zone** —

APPROVED **REJECTED** **COMMENTS:**
Planning & Zoning Officer *David Floyd* **Date** 8/15/17 **A-2**

Contractor Ultimate Pools **Phone** 804-749-4706

Address 2175 Lanier Lane, Rockville, VA 23146

Contractor License Number 2705026339 **Type** Class A / CBC RBC RFC **Expiration** 02/28/2019

Scope of Work: In-Ground Pool 12' x 43' Rectangle w/ Auto Cover

Proposed Use **Current Use** **Existing Buildings on Property** **# of Floors**

SEWER Public/Private **WATER** Public/Private **# of Bathrooms** **# of Bedrooms**

Finished Sq. Ft. **Unfinished Sq. Ft.** 516 **Total Sq. Ft.**

Building Only - Excludes All Trades Permits

Value of Work 30,000.00

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

Signature of Applicant *[Signature]* **Date** 08/01/2017

Application Fee	\$ 147-
State Levy Fee	\$ 2.94
Septic/Well Fee	\$
Zoning Fee	\$ 25-
RLD	\$
SWP	\$
Total	\$ 174.94



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8.1.17
Permit Number: BP-2017-00606
GPIN/Tax Map: 6850-14-3076/20-22-0-70-0
Issued: 8.16.17

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.

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address 2805 TIMBER TRAIL DR.	
	Owner MICHAEL AND ROBIN LAWSON	Phone #
	Address SAME	Email

APPLICANT INFORMATION	Applicant/Contact RICHARD BROWN	Phone # 804.519.1775
	Address 3411 WYTHE AVE RICH, VA. 23221	Email MAGNOLIARENO@AOL.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer _____ Date _____			

CONTRACTOR INFORMATION	Contractor MAGNOLIA RENOVATIONS LLC		Phone 804.519.1775
	Address 3411 WYTHE AVE		
	Contractor License Number 2705130425	Type TIC CLASS C	Expiration 8-31-17

DESCRIPTION OF WORK	Scope of Work: TRADES POLLING OWN PERMITS FRAME BASEMENT TO ACTIVE NEW LIVING SPACE Finish off Bedroom, bathroom + storage			
	Proposed Use LIVING SPACE	Current Use STORAGE	Existing Buildings on Property HOUSE	# of Floors 2
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 2.5	# of Bedrooms 4
	Finished Sq. Ft. 1100	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ 52.50
Value of Work \$ 9,000		State Levy Fee \$ 1.05
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.		Septic/Well Fee \$
Signature of Applicant <i>[Signature]</i>	Date 8/1/17	Zoning Fee \$
		RLD \$
		SWP \$
		Total \$ 53.55

Convert 1 existing bedroom to study, after construction
would remain 4 bedrooms

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 8.15.17

Application Date:

8/10/2017

Application Accepted:

BP-2017-00644

received 8.14.17

Old Map Number:

63-33-0-1-0

GPIN:

7715-50-8984

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 814 DUCK POND ROAD	District
Owner MELVIN & JOYCE HOWELL	Phone # 804-784-5096
Address 814 DUCK POND ROAD	
Proposed Use DWELLING	Current Use
Proposed Occupant Load (Commercial)	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acreage 3.94	

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: JUSTIN STORY Phone 804-495-4646

Email: JSTORY@JESNOW.COM

CONTRACTOR INFORMATION	Contractor JES CONSTRUCTION	Phone 804-495-4646
	Address 2410 SOUTHLAND DRIVE	
	Contractor License Number 270-506-8655	Type A

Description of Work	Scope of Work: CRAWLSPACE ENCAPSULATION W/ DISCHARGE SUMP			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft. 2052	# of Bedrooms

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

VALUE OF WORK	
Building	22838.00
Excludes All Trades Permits	

Application Fee	\$ 114.07
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 2.30
REQ TOTAL	\$ 117.07

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 _____

8:30-9



BUILDING PERMIT APPLICATION

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

Application Date: 8-11-17

Permit Number: BP-2017-00638

GPIN/Tax Map: 7715-66-9641

Issued: 8-14-17

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION

Site Address: 205 Kinloch Rd.

Owner: Sohn + Debra Blank Phone #: 804

Address: 205 Kinloch Rd., Manakin Sabot 23103 Email: Blankbunche@gmail.com

APPLICANT INFORMATION

Applicant/Contact: Preston Montague Phone #: 804 690-1993

Address: 499 Bascabel Ferry Rd., Manakin Sabot 23103 Email: PrestonMontagueLLC@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
Side Setback	Side Setback	Flood Zone	

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION

Contractor: Preston Montague LLC. Phone: 804 690-1993

Address: 499 Bascabel Ferry Rd., Manakin Sabot 23103

Contractor License Number: 2705109885 Type: CLASS A. Expiration: 9/30/18

DESCRIPTION OF WORK

Scope of Work: Finish off additional bonus room / playroom square footage over garage.

Proposed Use <u>Residential</u>	Current Use <u>Residential</u>	Existing Buildings on Property <u>Main House only</u>	# of Floors <u>3</u>
SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>4 full / 2 Half.</u>	# of Bedrooms <u>4</u>
Finished Sq. Ft. <u>485</u>	Unfinished Sq. Ft. <u>CLASS A</u>	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work <u>\$17,500</u>	Application Fee \$ <u>90.75</u>
	State Levy Fee \$ <u>1.81</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ _____
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>92.56</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] Date: 8/2/17



BUILDING PERMIT APPLICATION

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

Application Date: 8-11-2017
 Permit Number: BP-2017-00639
 GPIN/Tax Map: 6803-2A-5351/3-2-0-3-0
 Issued: 8-14-17

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the site plan of the property (if new construction or going outside of existing footprint) 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.

OWNER INFORMATION	Site Address <u>4490 Shannon Hill RD Columbia VA 23038</u>	
	Owner <u>NORMAN VINEYARD</u>	Phone #
	Address <u>4490 Shannon Hill RD.</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>434-414-0455</u>	Phone # <u>434-414-0455</u>
	Address <u>SAME</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION	Contractor <u>OWNER</u>	Phone
	Address <u>SAME</u>	
	Contractor License Number	Type Expiration

DESCRIPTION OF WORK	Scope of Work: <u>MASONRY WORK ON FLO-MANTIEL & HARTH</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$,000</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 Norman Vineyard Date 8-11-017

Application Fee	\$ <u>30.60</u>
State Levy Fee	\$ _____
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</u>