



# 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: 10.25.17  
 Permit Number: BP-2017-00854  
 GPIN/Tax Map: 6798-45-9813/33-1-0-9-1  
 Issued: 11.29.17  
 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.

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 <b>2519 Oilville Road</b>	
	Owner <b>Sam and Kathy Sears</b>	Phone # <b>804-339-3234</b>
	Address <b>110 Revolution Circle Christiansburg, VA 24073</b>	Email <b>sdsears@verizon.net</b>
APPLICANT INFORMATION	Applicant/Contact <b>Jeremy Harring</b>	
	Address <b>22221 Pear Orchard Rd Moseley, VA 23120</b>	Phone # <b>739-3405</b>
	Email <b>jharring@harringconstrucion.com</b>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>William D. Vick Jr</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$2316.00</u>	Date Paid <u>Paid 10/30/17</u>
	Front Setback <u>55' from ROW</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>RR-2002-00001</u>
	Side Setback <u>15'/35'</u>	Side Setback <u>15'/35'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>10/25/17</u> <u>RR</u>			

CONTRACTOR INFORMATION	Contractor <b>Harring Construction Co.</b>		Phone <b>739-3405</b>
	Address <b>22221 Pear Orchard Rd. Moseley, VA 23120</b>		
	Contractor License Number <b>2705021378</b>	Type <b>Class A</b>	Expiration <b>7-31-2019</b>

DESCRIPTION OF WORK	Scope of Work: residential single family dwelling <u>w/ attached garage</u>			
	Proposed Use	Current Use	Existing Buildings on Property <b>0</b>	# of Floors <b>2</b>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <b>4 1/2</b>	# of Bedrooms <b>5</b>
	Finished Sq. Ft. <b>4,569</b>	Unfinished Sq. Ft. <b>806</b>	Total Sq. Ft. <b>5,375</b>	

**Building Only - Excludes All Trades Permits**

Value of Work	<del>\$400,000</del> <u>\$422,620.<sup>00</sup></u>
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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 [Signature]    Date 10/25/17

Application Fee	\$ <u>1913.09</u>
State Levy Fee	\$ <u>39.08</u>
Septic/Well Fee	\$ <u>40-</u>
Zoning Fee	\$ <u>50-</u>
RLD	\$ <u>100-</u>
SWP	\$ <u>-</u>
Total	\$ <u>2142.89</u>

**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: Atlantic Coast Settlement Services Telephone: 541-6677

Mailing Address: 206 N. 2nd Ave Hopewell, VA 23860

**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 10 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 11.29.17*

Application Date: **11.20.17**  
 Application Accepted: **BP-2017-00926**  
 Old Map Number: **58-48-8-22-0**  
 GPIN: **7715-46-9779**

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 825 Lachlan Road Manakin Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Kinloch Sec. 8</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: —	Date Paid: —
	New Street Address		Zoning District <i>RPU D</i>	
	Front Setback <i>30' from pavement</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit —
	Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	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: *David Floyd* Date: *11/21/17*

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

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

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

VALUE OF WORK		Application Fee \$ <i>1317</i>
Building	\$290,000	Zoning Fee \$ <i>50</i>
Excludes All Trades Permits		Septic/Well Fee \$
		State Levy Fee \$ <i>216.34</i>
		<del>BLD</del> Total \$ <i>1393.34</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: *David Owen*

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

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

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

**OWNER'S AFFIDAVIT**

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

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

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

RLD \$ 100.00  
Septic & well \$ 40.80 For Commercial & Residential  
Septic only \$ 25.44 for Commercial & Residential  
Zoning Commercial \$ 100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD B 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: 10-23-17

Permit Number: BD-2017-00851

GPIN/Tax Map: 11-1-41-D-1 7821-38-0436

Issued: 11-28-17

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

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: 3691 Hadensville Fife Rd

Owner: Marvin + Pava Webster Phone #: 804-339-5684

Address: 3675 Hadensville Fife Rd. Email: pavabilak@gmail.com

Applicant/Contact: Republic Home Builders / Stephanie Phone #: 540-891-8144

Address: 10205 Southpoint Parkway Fredericksburg Email: smcvaade@republichomebuilders.com

Subdivision: None Proffer:  Yes  No Amount: — Date Paid: —

Front Setback: 55' from RW Center Setback: — Rear Setback: 35' CUP/Variance/COA: —

Side Setback: 20' Side Setback: 30' Flood Zone: —

APPROVED  REJECTED  COMMENTS: AI

Planning & Zoning Officer: David Floyd Date: 10/25/17

Contractor: Republic Home Builders Phone: 540-891-8144

Address: 10205 Southpoint Parkway Fredericksburg, VA 22407

Contractor License Number: 2705110671 Type: CBC; RBC Expiration: 9-30-18

Scope of Work: Residential Custom 4 Bedroom with recreation room upstairs. Crawl space. 2.5 Bath; 2 Car Garage new sfd w/attached

Proposed Use: SEWER Public/Private  Current Use: WATER Public/Private  Existing Buildings on Property: — # of Floors: 2

# of Bathrooms: 2.5 # of Bedrooms: 4

Finished Sq. Ft.: ~~2422~~ 2,422 Unfinished Sq. Ft.: 695 Total Sq. Ft.: ~~2422~~ 3,117

Building Only - Excludes All Trades Permits

Value of Work: \$ 273,318.00

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: Stephanie McVade Date: 10/31/17

Application Fee	\$ <u>1,241.93</u>
State Levy Fee	\$ <u>25.64</u>
Septic/Well Fee	\$ <u>40.00</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>—</u>
Total	\$ <u>1,457.57</u>

**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: Signature Home Settlements Telephone: 540-710-9210

Mailing Address: 4114 Lafayette Blvd Suite 101 Fredericksburg, VA 22408

**OWNER'S AFFIDAVIT**

I, Marvin Webster of (address) 3675 Hendersonville Fife Rd affirm that I am the owner of a certain tract of parcel of land located at Tax Map # 11-1-0-41-D 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.

Marvin Webster 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

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

Application Date: 10.12.17  
Permit Number: BP-2017-00828  
GPIN/Tax Map: 6795-48-5716/56-17-0-4-0  
Issued: 11.28.17

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 <u>1090 DOVER ROAD MANAKIN-SABOT VA 23103</u>	
	Owner <u>Gary Rogliano</u>	Phone # <u>1-914-643-3314</u>
	Address <u>1090 Dover Rd. Manakin-Sabot 23103</u>	

APPLICANT INFORMATION	Applicant/Contact <u>STARKE Construction</u>	Phone # <u>804 519-6270</u>
	Address <u>1707 SHALLOW WELL RD. MANAKIN-SABOT VA 23103</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>	
	Front Setback <u>55' from PL</u>	Center Line Setback <u>—</u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>—</u>	
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <u>—</u>		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* 2st Acres allows for 2nd Residence.</u>				
	Planning & Zoning Officer: <u>David Ford</u> Date <u>10/16/17</u> <u>A2</u>				

CONTRACTOR INFORMATION	Contractor <u>STARKE CONSTRUCTION</u>		Phone <u>804-519-6270</u>
	Address <u>1707 SHALLOW WELL ROAD MANAKIN-SABOT VA 23103</u>		
	Contractor License Number <u>2705038805</u>	Type <u>RBC CBC</u>	Expiration <u>4-30-2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>NEW SFD attached garage</u>			
	Proposed Use	Current Use	Existing Buildings on Property <u>Yes</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>2350</u>	Unfinished Sq. Ft. <u>960 concrete 1216</u>	Total Sq. Ft. <u>3210 3566</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>1587-</u> State Levy Fee \$ <u>32.24</u> Septic/Well Fee \$ <u>.50</u> Zoning Fee \$ <u>50-</u> RLD \$ <u>—</u> SWP \$ <u>—</u> Total \$ <u>1694.24</u>
Value of Work	<u>350,000</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	<u>[Signature]</u> Date <u>10/12/17</u>	

**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: W. ALEXANDER BURDITT ESQ. Telephone: 804-420-6481  
WILLIAMS MULLONS  
 Mailing Address: 200 S. 10th ST. SUITE 1600 P.O. Box 1320 (23218-1320)  
Richmond VA 23219

**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) 556-5215 Fax (804) 556-5661 TDD 711 Va Relay

ISSUED: 11-28-17

Application Date: 10-18-17  
 Application Accepted: DP-2017-00841  
 Old Map Number: 13-0-24-5  
 GPIN: 0842-85-5079

This application is for 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: 2702  
 101 5 Boundary Run Gvm Spry  
 District: Locking Hole  
 Owner: Vertical Builders  
 Phone #: 804 440 6647  
 Address: PO Box 4205 Richmond VA  
 Proposed Use: New Home  
 Current Use: Vacant  
 Existing Buildings on Property: No  
 Proposed Occupant Load (Commercial):  
 Acreage: 3.243  
 Commercial Use:  Yes  No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Boundary Run  
 Proffer:  Yes  No  
 Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 New Street Address: \_\_\_\_\_ Zoning District: A1  
 Front Setback: 75' from ROW  
 Center Line Setback: 100'  
 Rear Setback: 35'  
 C.U. Permit: \_\_\_\_\_ Variance: \_\_\_\_\_  
 Side Setback: 20'  
 Side Setback: 20'  
 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 [Signature] Date: 10/19/17

Applicant/Contact: Ryan Sedwick Phone: 804 291 8736

Email: Rsedwick@verticalbuilders.com

Contractor: Vertical Builders Phone: 804 440 6647  
 Address: PO Box 4205 Richmond VA 23220  
 Contractor License Number: 2765 103062 Type: A - B10 Expiration: 2-28-18

Description of Work: Clear driveway, build new home, driveway & well  
 New shed/wattached garage  
 # of Bathrooms: 2  

SEWER Public/Private	WATER Public/Private	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
# of Floors: 1	Total Sq. Ft.: 1826, 2580	1826	754	3

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

VALUE OF WORK  
 Building: 155,150  
 Excludes All Trades Permits

10409  
 1,115.18

Application Fee \$ 710.18  
 Zoning Fee \$ 50.00  
 Septic/Well Fee \$ 40.00  
 State Levy Fee \$ 15.00  
 BLD R.D. 100.00  
 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: [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 38-98.01 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: Harvey E Williams PLC Telephone: 804 396-3580

Mailing Address: 7516 Right Flank Road Mechanicsville VA 23116

OWNER'S AFFIDAVIT

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

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

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

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

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

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

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.00 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**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 11.17.17

Application Date: 11.2.17  
 Application Accepted: BP-2017-00881  
 Old Map Number: 58-48-8-26-0  
 GPIN: 7715-47-8292

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 820 Lachlan Rd. Manakin-Sabot, VA 23103		District Dover		
	Owner Boone Homes, Inc.		Phone # 804-784-6192		
	Address 129 Broad Street Road, Manakin Sabot, VA 23103				
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None		
	Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Kinloch 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 15' on water bridge side	COA —	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: * Front setback, survey locate.		

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

Planning & Zoning Officer: David Owen Date: 11/2/17

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/Make	WATER Public/Make			# of Bathrooms 3.5
	# of Floors 2	Total Sq. Ft. 5693	Finished Sq. Ft. 4724	Unfinished Sq. Ft. 969	# of Bedrooms 3

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

VALUE OF WORK	
Building	\$443,000.00
Excludes All Trades Permits	

Application Fee	\$2005.50
Zoning Fee	\$50.00
Septic/Well Fee	\$
State Levy Fee	\$40.11
<b>Total</b>	<b>\$2095.61</b>

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

Signature of Applicant: [Signature]

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: 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 2 CONSTRUCTION TYPE 5B OCCUPANY LOAD \_\_\_\_\_ CODE EDITION 2012 VBC  
FIRE SPRINKLER - FIRE ALARM -

APPROVAL [Signature] DATE 15 Nov 2017  
Code Official



# BUILDING PERMIT APPLICATION

Application Date: 10/12/17

Permit Number: BP-2017-00829

GPIN/Tax Map: 6759-70-5404 / 30-8-20

Issued: 11-16-17

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.

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 <b>Lot 20 Cheney Creek</b>	
	Owner <b>Jason Funkhouser / Erik Greenbaum Trustee</b>	Phone #
	Address	Email
APPLICANT INFORMATION	Applicant/Contact <b>Ken Broadwater Homes, LLC</b>	Phone # <b>804-375-3044</b>
	Address <b>99 Rhodes Lane Cartersville, Va 23027</b>	Email <b>Ken@KenBroadwaterHomes.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>Cheney's Creek</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —	
	Front Setback <b>75' from ROW</b>	Center Line Setback <b>100'</b>	Rear Setback <b>35'</b>	CUP/Variance/COA —	
	Side Setback <b>20'</b>	Side Setback <b>20'</b>	Flood Zone		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Side setback to be survey located.				
	Planning & Zoning Officer <b>David [Signature]</b> Date <b>10/16/17</b> <span style="float: right;">A2</span>				

CONTRACTOR INFORMATION	Contractor <b>Ken Broadwater Homes LLC.</b>	Phone <b>804-375-3044</b>
	Address <b>99 Rhodes Lane Cartersville, VA. 23027</b>	
	Contractor License Number <b>2705-100355 A</b>	Type Class A

DESCRIPTION OF WORK	Scope of Work: <b>Single family home w/ a Hatched garage</b>			
	Proposed Use New home	Current Use Vacant land	Existing Buildings on Property none	# of Floors <b>Two</b>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <b>2.5</b>	# of Bedrooms <b>4</b>
	Finished Sq. Ft. <b>1912</b>	Unfinished Sq. Ft. <b>336 Garage 118 Front porch 192 Rear Deck 646 Total</b>		Total Sq. Ft. <b>2558</b>

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <b>893.32</b> State Levy Fee \$ <b>17.87</b> Septic/Well Fee \$ <b>40.80</b> Zoning Fee \$ <b>50.00</b> RLD \$ <b>100.00</b> SWP \$ <b>—</b> Total \$ <b>1,101.99</b>	
Value of Work	<b>195,850.00</b>		
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.			
Signature of Applicant <b>[Signature]</b>		Date <b>10/13/17</b>	

**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 Satterwhite Telephone: 804-556-4012

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 \_\_\_\_\_ CODE EDITION \_\_\_\_\_

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

APPROVAL *Darvin Satterwhite* DATE 11-16-17

Code Official

10-6-17

# BUILDING PERMIT APPLICATION

Goochland County Building Inspection Department

P.O. Box 119

Goochland, VA 23063

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

Application Date:

Tax Map Number:

GPIN Number:

Permit Number:

Fee:

Issue Date:

43-40-0-C-24

LP999-SS-7552

BP-2017-00813

11.7.17

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

OWNER INFORMATION

SITE ADDRESS	Lot 24 Breeze Hill section 2	DISTRICT	
OWNER	Johnson Construction Co Inc.	PHONE #	787-3060
ADDRESS	P.O. Box 205 Rockville VA 23146		

USE COMPLIANCE REQUIREMENTS

PROPOSED USE	CURRENT USE	EXISTING BUILDINGS ON PROPERTY	
new home		None	
PROPOSED OCCUPANT LOAD	LOT SIZE	COMMERCIAL USE	
	2.310	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
SUBDIVISION	Proffer	Amount	Date Paid
Breeze Hill	Y/N	\$19,850.2	Due
NEW STREET ADDRESS	ZONING DISTRICT		RP
FRT	CEN	REAR	S.U. PERMIT
46 From ROW	5	25'	
SIDE SETBACK	SIDE SETBACK	CENSUS TRACK	FLOOD ZONE
10'	10'		

APPROVED  REJECTED  COMMENTS: RP

This application requires 2 copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: *David Faust* 12/10/17

CONTRACTOR INFORMATION

CONTRACTOR	Johnson Construction Co Inc.	PHONE	
ADDRESS	P.O. Box 205 Rockville VA 23146		
CONTRACTOR LICENSE NUMBER	TYPE	EXPIRATION	
2705106885 A	BLD	5/31/18	
SCOPE OF WORK	new home with attached garage		

DESCRIPTION OF WORK

CONSTRUCTION TYPE:		ADDING ADDITION	Y/N
SEWER PUBLIC <input checked="" type="checkbox"/> PRIVATE	WATER PUBLIC <input checked="" type="checkbox"/> PRIVATE	ADDING KITCHEN	Y/N
		ADDING BEDROOMS	Y/N
# OF FLOORS	TOTAL SQ. FT.	FINISHED SQ. FT.	UNFINISHED SQ. FT.
2	5062	3478	1584
USE FOR FARM USE EXEMPTION	# OF BEDROOMS	# OF BATHROOMS	
	3	3	
	ACREAGE	FEET	
	2.310	1	

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

### VALUE OF STRUCTURE

BUILDING	500,000
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Excludes All Trades Permits

PERMIT FEE SCHEDULE: Residential fee is based on the building value of the job. \$0 to \$4000 of value.....\$30.00 Above \$4000 \$4.50 per \$1000 of Assessed value. Add 1.75% state levy to fee.  
 Commercial fee is based on the building value of the job. \$0 to \$4000 of value.....\$30.00 Above \$4000 \$7.50 per \$1000 of assessed value. Add 1.75% state levy to fee.

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

APP. 2262-  
 Well 40.00  
 ZON 50.00  
 Storm 200.00  
 R/d 100.00  
 R/d Levy 46.04  
 Total 436.04

LIEN AGENT INFORMATION

Please check one of the following:

- I do not wish to designate a mechanic's lien agent and that for the purpose of Section 38.88.01 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 TELEPHONE: 804-281-7490  
 MAILING ADDRESS: 1800 Bayberry Ct. Suite 104 Richmond, VA 23226

**IN LIEU OF AN EROSION AND SEDIMENT CONTROL PLAN FOR A SINGLE FAMILY RESIDENCE  
 A STONE DRIVE-WAY MUST BE INSTALLED BEFORE ANY CONSTRUCTION IS TO BEGIN.**

OWNERS AFFIDAVIT

I, \_\_\_\_\_ OF (address) \_\_\_\_\_ AFFIRM THAT I AM THE  
 OWNER OF A CERTAIN TRACT OR 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 54.1-111.1 OF THE CODE OF VIRGINIA. \_\_\_\_\_ OWNER

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)

ISSUANCE OF THIS BUILDING PERMIT DOES NOT CONSTITUTE AN APPROVAL OF SOIL CONDITIONS OR SITE  
 SUITABILITY BY THE COUNTY. THE APPLICANT IS RESPONSIBLE FOR CONDUCTING ANY SOIL TESTS OR ENGINEERING  
 TESTS APPLICANT DEEMS NECESSARY TO IDENTIFY AREAS CONTAINING SHRINK-SWELL SOIL OR GEOLOGICAL  
 CONDITIONS.

APPLICANT SIGNATURE

AS THE PROPERTY OWNER(S) ON WHICH YOUR BUILDING OR STRUCTURE IS TO BE LOCATED, YOU ARE RESPONSIBLE  
 FOR LOCATING YOUR PROPERTY LINES TO ASSURE THAT THE COUNTY SET-BACK LINES WILL NOT BE VIOLATED. IF YOU ARE  
 NOT ABSOLUTELY CERTAIN AS TO THE EXACT LOCATION OF YOUR PROPERTY LINES, IT IS STRONGLY RECOMMENDED  
 THAT YOU OBTAIN THE SERVICES OF A SURVEYOR TO DO SO. IF YOU ARE MISTAKEN REGARDING YOUR PROPERTY LINE  
 LOCATIONS AND VIOLATE THE SET-BACK LINE REQUIREMENTS, YOU MAY BE FORCED TO MOVE YOUR BUILDING AND  
 STRUCTURE AT YOUR OWN EXPENSE.

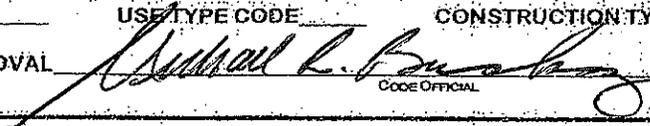
I (WE) HEREBY ACKNOWLEDGE RECEIPT OF THIS NOTICE AND ASSUME ALL RISKS REGARDING PROPERTY LINE  
 LOCATIONS IN THE EVENT I (WE) DECIDE NOT TO OBTAIN A SURVEY OF MY PROPERTY LINES.

DATE \_\_\_\_\_  
 DATE \_\_\_\_\_

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA  
 S36.99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTIONS 105.10 AND 121.1.1.

OWNER \_\_\_\_\_

USE _____	USE TYPE CODE _____	CONSTRUCTION TYPE _____	OCCUPANT LOAD _____
APPROVAL _____	 <small>Code Official</small>		DATE <u>11.3.17</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: 10-3-17  
 Permit Number: BP-2017-00796  
 GPIN/Tax Map: 6784-29-3980 / 60-4-0-7-0  
 Issued: 11/3/17 11/2/17  
 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: 627 Lee Rd Crozier VA 23039  
 Owner: Bobby Creel Phone #: 804-237-9034  
 Address: PO Box 277 Goochland VA 23063 Email: \_\_\_\_\_

**APPLICANT INFORMATION**  
 Applicant/Contact: Bobby Creel Phone #: 804-237-9034  
 Address: PO Box 277 Goochland VA 23063 Email: info@Colonial<sup>tnm</sup>crafters.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>75' from ROW</u>	Center Line Setback: <u>100' CL</u>	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	Flood Zone: <u>X and AE</u>	_____

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: [Signature] Date: 10/5/17 A2

**CONTRACTOR INFORMATION**  
 Contractor: Bobby Creel Phone: 804-237-9034  
 Address: PO Box 277 Goochland VA 23063  
 Contractor License Number: 2705141588 Type: A Expiration: 6-30-19

**DESCRIPTION OF WORK**  
 Scope of Work: Unfinished 3rd floor  
New Home w/ attached garage

Proposed Use: <u>Residence</u>	Current Use: <u>N/A</u>	Existing Buildings on Property: <u>1</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>4.5</u>	# of Bedrooms: <u>5</u>
Finished Sq. Ft.: <u>3600</u>	Unfinished Sq. Ft.: <u>2000 / 1136</u>	Total Sq. Ft.: <u>5600 / 4736</u>	

Building Only - Excludes All Trades Permits  
 Value of Work: 250,000 312,600.00

Application Fee	\$ 1918.70
State Levy Fee	\$ 29.17
Septic/Well Fee	\$ 40.-
Zoning Fee	\$ 50.-
RLD	\$
SWP	\$
Total	\$ 1537.87

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: 10-3-17



# 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

Residential  Commercial

Application Date: 9/12/17

Permit Number: BP-2017-00722

GPIN/Tax Map: 6785-54-1216/55-12-0-B-1

Issued: 11.2.17

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 951 Issequena Lane, Crozier VA 23039	
	Owner Forbes and Blake Inc.	Phone # (804) 514-4728
	Address 12832 West Creek Parkway, Suite G, Richmond, VA	Email Charlie forbes4@gmail.com

APPLICANT INFORMATION	Applicant/Contact Charlie Forbes	Phone # (804) 514-4728
	Address 794 River Road West, Markham Sabot, VA, 23103	Email Charlie forbes4@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 55' from ROW	Center Line Setback	Rear Setback 35'	CUP/Variance/COA —
	Side Setback 55' from ROW	Side Setback 55' from ROW	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date 9/14/17 A-2	
Planning & Zoning Officer: <i>David Taylor</i>				

CONTRACTOR INFORMATION	Contractor owner		Phone —
	Address —		
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Single family dwelling attached garage, unfinished basement			
	Proposed Use	Current Use	Existing Buildings on Property NO	# of Floors 3
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3.5	# of Bedrooms 3
	Finished Sq. Ft. 2,200	Unfinished Sq. Ft. 2,685	Total Sq. Ft. 4,885	

Building Only - Excludes All Trades Permits

Value of Work	300,000
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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: *Charlie Forbes* Date: 9/12/17

Application Fee	\$ 1312.00
State Levy Fee	\$ 28.09
Septic/Well Fee	\$ 40-
Zoning Fee	\$ 50-
RLD	\$ -
SWP	\$ -
Total	\$ 1480.09

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: Bon Air Title Agency Inc. Telephone: 804.320.1336  
 Mailing Address: 9211 Forest Hill Ave. Suite 111 Richmond, VA  
23235

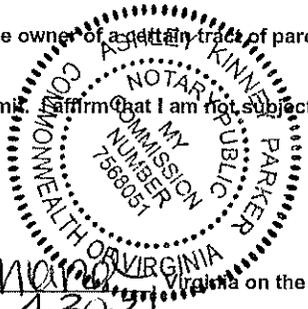
**OWNER'S AFFIDAVIT**

Charlie Forbes of (address) 7914 River Road West affirm that I am the owner of a certain tract of parcel of land located at Issequeva Lane 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.

Charlie Forbes Owner's Signature

Signed and acknowledged by Charlie Forbes in the city or county of Goodson Virginia on the 13 day of September 2017 in the presence of the undersigned notary. My Commission expires 4:30:21

Ashley K. Parker (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

Issued 11-1-17

**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 34-3 PARKSIDE VILLAGE**

Application Date: 10-26-17  
Permit Number: **BP-2017-00865**  
Old Map Number: **7738-01-9797**  
GPIN: **48-19-0-34-0**

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.

<b>OWNER INFORMATION</b>	Site Address 7235 Shenfield Avenue		District
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
	Proposed Use	Current Use	Existing Buildings on Property
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision <i>Parkside Village</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$6074.00</i>	Date Paid: <i>Done</i>	
	New Street Address		Zoning District <i>RPUD</i>		
	Front Setback <i>30' from sidewalk</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit	Variance
	Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	Census Track	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: <i>*Cash Proffer is due before C.O. is issued.</i>	

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: *Suzanne Floyd* Date: *10/30/17*

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

Email: *bjames@eagleofva.com*

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

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors 1	Total Sq. Ft. 2900	Finished Sq. Ft. 2106	Unfinished Sq. Ft. 794	# of Bedrooms 2

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

VALUE OF WORK	
Building	\$162,695.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>744.13</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>14.88</i>
Zoning Fee	\$ <i>50.-</i>
Total	\$ <i>809.01</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 *[Signature]*

Issued 11.1.17

# 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 33-3 PARKSIDE VILLAGE**

Application Date:

10-25-17

Permit Number:

BP-2017-00864

Old Map Number:

48-19-0-33-0

GPIN:

7738-01-9734

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 7237 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 <i>Parkside Village</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$6074.00</i>	Date Paid: <i>Done</i>
New Street Address		Zoning District <i>RPUD</i>	
Front Setback <i>30' from Runners</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit
Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	Census Track	Flood Zone
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer is due before C.O. is issued.</i>			

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 Feagel*

Date

*10/27/17*

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	2.5	# of Bathrooms	
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
1	2810	2106	704	2

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

### VALUE OF WORK

Building	\$159,770.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>130.96</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>14.62</i>
Zoning Fee	\$ <i>50-</i>
Total	\$ <i>195.58</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

*[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: 10-18-17  
 Permit Number: BP-2017-00838  
 GPIN/Tax Map: 7734-01-5385/64-28-F  
 Issued: 11.1.17  
 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: 151 Buttonbush ~~Rd~~ Richmond, VA 23238  
 Owner: Harring Construction Co. Phone #: 739-3405  
 Address: 22221 Pear Orchard Rd Moseley, VA 23120 Email: jharring@harringconstruction.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Jeremy Harring Phone #: 739-3405  
 Address: 22221 Pear Orchard Rd Moseley, VA 23120 Email: jharring@harringconstruction.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: West Oak Sec. II Proffer:  Yes  No Amount: \$5269.00 Date Paid: 10/19/17  
 Front Setback: 30' from Riverfront Center Line Setback: \_\_\_\_\_ Rear Setback: 50' B/S CUP/Variance/COA: R2-2002-00009  
 Side Setback: 20' B/S Side Setback: 20' B/S Flood Zone: \_\_\_\_\_  
 APPROVED  REJECTED  COMMENTS: Survey locate side setback (6')  
 Planning & Zoning Officer: David Foyel Date: 10/19/17 RPUD

**CONTRACTOR INFORMATION**  
 Contractor: Harring Construction Co. Phone: 739-3405  
 Address: 22221 Pear Orchard Road Moseley, VA 23120  
 Contractor License Number: 2705021378 Type: Class A Expiration: 7-31-2019

**DESCRIPTION OF WORK**  
 Scope of Work: residential single family dwelling attached garage  

Proposed Use	Current Use	Existing Buildings on Property	# of Floors
		<u>0</u>	<u>2</u>
SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
		<u>5</u>	<u>6</u>
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
<u>3919</u>	<u>923</u>	<u>4842</u>	

**Building Only - Excludes All Trades Permits**  
 Value of Work: \$ 420,000

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: 10/16/17

Application Fee	\$ <u>1402-</u>
State Levy Fee	\$ <u>38.04</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50-</u>
RLD	\$ <u>100-</u>
SWP	\$ <u>200-</u>
Total	\$ <u>2290.04</u>

**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: Atlantic Coast Settlement Services Telephone: 541-6677

Mailing Address: 206 N. 2nd Ave. Hopewell, VA 23860

**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 12 CODE EDITION \_\_\_\_\_

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

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

Code Official



# BUILDING PERMIT APPLICATION

Application Date: 11-28-17  
 Permit Number: BP-2017-00945  
 GPIN/Tax Map: 0776-87-2991 / 44-15-1-14-0  
 Issued: 11-30-17  
 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: 1990 Covington Road  
 Owner: William Justin Lacy Phone #: 839 2385  
 Address: 6641 West Broad St Richmond VA Email: jlacy@svllc.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Shitcutt Construction Services Inc Phone #: 305 7015  
 Address: 2645 Judas Ferry Rd Pamunton VA Email: Posteshitcutt2@aiground.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: Covington 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: 11/29/17 AD

**CONTRACTOR INFORMATION**  
 Contractor: Shitcutt Construction Services Inc Phone: 305 7015  
 Address: 2645 Judas Ferry Rd Pam VA 23139  
 Contractor License Number: 2705044980 Type: CBC RBC Expiration: 4/30/2018

**DESCRIPTION OF WORK**  
 Scope of Work: unfinished concrete 28x43 detached garage  
Garage Framing and Floor / Roofing / Siding & Cornice Bree  
722 Room upstairs  
 Proposed Use: Garage Current Use: — Existing Buildings on Property: None under Const # of Floors: 1 1/2  
 SEWER: Public/Private WATER: Public/Private # of Bathrooms: 1/2 # of Bedrooms: 0  
 Finished Sq. Ft.: 0 Unfinished Sq. Ft.: 1935 Total Sq. Ft.: 1935

Building Only - Excludes All Trades Permits

Value of Work	<u>4500.00 - 62,887.50</u>	Application Fee	\$ <u>294.99</u>
		State Levy Fee	\$ <u>5.90</u>
		Septic/Well Fee	\$ <u>—</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>—</u>
		SWP	\$ <u>—</u>
		Total	\$ <u>325.89</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: 11/27/2017

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

*Issued 11-29-17*

Application Date: 11-8-17  
 Permit Number: DP-2017-00902  
 Old Map Number: 62-11-0-A-0  
 GPIN: 7714-02-0500/

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 515 Stone Mill Drive		District		
	Owner Boscobel Properties LLC		Phone #		
	Address P.O. Box 202 Manakin Sabot, VA 23103				
	Proposed Use Existing Self-Support Tower	Current Use Existing Self-Support Tower	Existing Buildings on Property NA		
	Proposed Occupant Load (Commercial) NA	Lot Size NA	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>—</u>	Date Paid: <u>—</u>	
	New Street Address		Zoning District <u>M2</u>		
	Front Setback <u>20'</u>	Center Line Setback <u>—</u>	Rear Setback <u>10'</u>	C.U. Permit <u>—</u>	Variance <u>—</u>
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Census Tract <u>—</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* No change to Footprints</u>				
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.				

Planning & Zoning Officer: [Signature] Date 11/8/17

Applicant/Contact: Willin Consultants on behalf of Sprint / Shannon West  
 Phone: 404-889-0359  
 Email: shannonwest@willinconsultants.com

Contractor: SBA Network Services, LLC  
 Phone: 704.527.0003 x2114  
 Address: 8051 Congress Ave., Boca Raton, FL 33487  
 Contractor License Number: 2705143663  
 Type: A  
 Expiration: 3/31/18

**Scope of Work:** Remove (6) existing antennas, replace with (3) tri-band antennas. Relocate (3) RRH's from ground to tower, install (9) RRH's, remove (6) existing coax cables and install (4) hybridflex cables.

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

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

VALUE OF WORK	
Building	22,000
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <u>165.00</u>
Septic/Well Fee	\$ <u>3.30</u>
State Levy Fee	\$ <u>—</u>
Zoning Fee	\$ <u>50.00</u>
Total	\$ <u>218.30</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: Shannon West

**PERMIT APPLICATION**  
 Building Inspection Department  
 Box 119  
 and VA 23063  
 (804) 556-5651 TDD 711 Va Relay

ISSUED: 11-28-17

Application Date: 11-27-17  
 Application Accepted: 11-16-17  
 Old Map Number: 2017-943  
 GPIN: 57-14-0-19-0  
 6786-40-6670

No 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 INFORM.

TO BE COMPLETED BY ZONING DEPARTMENT

Site Address 1221 THE FOREST, CROZIER		District	
Owner MIKE ODEN		Phone # 804-350-0679	
Address 1221 THE FOREST CROZIER, VA 23039			
Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	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	
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: JEFF AUSTIN Phone: 804-994-2189  
 Email: 1shorerunnerpc@gmail.com

Contractor: PREFERRED Chimney Services Inc Phone: 804-994-2189  
 Address: 4296 King William Rd Aylett, VA 23009  
 Contractor License Number: 2705-082458 Type: CLASS B Expiration: 2-28-2018

Description of Work: RELINE EXISTING CHIMNEY WITH U/L LISTED GOLDEN FIVE CHIMNEY LINER

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

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

VALUE OF WORK

Building: 7170<sup>00</sup>  
 Excludes All Trades Permits

Application Fee	\$ 44.26
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 89
RLD	\$ 45.15
<b>Total</b>	<b>\$ 178.30</b>

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

Signature of Applicant: Jeff Austin



# BUILDING PERMIT APPLICATION

Application Date: 11/20/17

Permit Number: BP-2017-00921

GPIN/Tax Map: 7705-53-9179/57-33-0-11-0

Issued: 11-27-17

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

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 615 DUVER BLUFF CIRCLE - MANAKIN-GARBO 23103	
	Owner JOHN + LISA HERRMANN	Phone # 804-784-3634
	Address 615 DUVER BLUFF CIRCLE	Email JHERRMANN@HOTMAIL
APPLICANT INFORMATION	Applicant/Contact {SAME}	
	Address {SAME}	

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 Self		Phone
	Address		
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: FRAME, INSULATE, + SHEETROCK EXTERIOR WALL			
	Proposed Use STORAGE	Current Use STORAGE	Existing Buildings on Property HOUSE + DETACHED GARAGE	# of Floors 4 (WITH ATTIC)
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3.5	# of Bedrooms 4
	Finished Sq. Ft. Existing 3000		Unfinished Sq. Ft. Existing 100 (LUSH)	
			Total Sq. Ft. 3,000 4,100	

Building Only - Excludes All Trades Permits

Value of Work	~ \$700.00
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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 \_\_\_\_\_ Date 11/20/17

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



# 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: 11-16-17

Permit Number: BP-2017-00916

GPIN/Tax Map: 6718-01-0754/26-10-35M

Issued: 11-27-17

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 <b>1926 Cartersville Rd, Goochland VA 23063</b>	
	Owner <b>DAVE AND JANET LYNCH</b>	Phone # <b>804-937-3077</b>
	Address <b>1926 Cartersville Rd, Goochland VA 23063</b>	Email <b>DAVELYNCH348@GMAIL.COM</b>
APPLICANT INFORMATION	Applicant/Contact <b>SAME AS OWNER</b>	
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Dogwood Acres</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100' From Row</u>	Center Line Setback <u>125' CL</u>	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>11/20/17</u>		

CONTRACTOR INFORMATION	Contractor <b>BYLER BARNES OWNER</b>	Phone <b>(540) 433-3990</b>
	Address <b>3318 N Valley Pike, Harrisonburg, VA 22802</b>	
	Contractor License Number <b>2705135882</b>	Type <b>DPOR</b>

DESCRIPTION OF WORK	Scope of Work: <u>12x30</u> <b>PRE FAB STORAGE SHED TO BE DELIVERED ALREADY CONSTRUCTED</b>			
	Proposed Use <b>STORAGE</b>	Current Use <b>NONE/NEW PRE FAB STORAGE SHED</b>	Existing Buildings on Property <b>DWELLING</b>	# of Floors <b>1</b>
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <b>1.5</b>	# of Bedrooms <b>3</b>
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>299</u>	<u>360</u>	<u>360</u>

Building Only - Excludes All Trades Permits

Value of Work: **\$15,522.91**

Application Fee	\$ <u>81.85</u>
State Levy Fee	\$ <u>1.64</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>108.49</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: Dave Lynch Date: 11/16/2017  
Janet Lynch Date: 11/10/2017



# 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: 11/20/2017

Permit Number: BP-2017-00924

GPIN/Tax Map: 6767-71-9886

Issued: 11-27-17

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

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: 1960 MAIDENS ROAD MAIDENS, VA 23102

Owner: STEVEN M. FARTHING Phone #: (804) 248-6978

Address: 1960 MAIDENS ROAD MAIDENS, VA 23102 Email: stevefarthing18@gmail.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Steven M. Farthing Phone #: (804) 248-6978

Address: 1960 MAIDENS ROAD MAIDENS, VA 23102 Email: stevefarthing18@gmail.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: None Proffer:  Yes  No Amount: --- Date Paid: ---

Front Setback: 100' from CC Center Line Setback: 100' Rear Setback: 35' CUP/Variance/COA: ---

Side Setback: 20' Side Setback: 20' Flood Zone: ---

APPROVED  REJECTED  COMMENTS: \* Side setback to be survey located.

Planning & Zoning Officer: Daniel Floyd Date: 11/22/17 A2

**CONTRACTOR INFORMATION**  
 Contractor: Owner Phone: SAME

Address: SAME AS ABOVE

Contractor License Number: --- Type: --- Expiration: ---

**DESCRIPTION OF WORK**  
 Scope of Work: Addition of 18 x 24 Living Room  
Addition of 12 x 12 Laundry Room

Proposed Use: --- Current Use: --- Existing Buildings on Property: --- # of Floors: ---

SEWER:  Public/Private  WATER:  Public/Private  # of Bathrooms: --- # of Bedrooms: ---

Finished Sq. Ft.: 576 Unfinished Sq. Ft.: --- Total Sq. Ft.: 576

Building Only - Excludes All Trades Permits

Value of Work: \$10,000 31,680

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: Steven M. Farthing Date: 11/20/2017

Application Fee	\$ <u>154.56</u>
State Levy Fee	\$ <u>3.09</u>
Septic/Well Fee	\$ <u>---</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>---</u>
SWP	\$ <u>---</u>
Total	\$ <u>182.65</u>