



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: 6-1-18

Permit Number: BP-2018-00444

GPIN/Tax Map: 6749-53-5531 / 29-30-22-0

Issued: 6-29-18

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>3798 Riddles Bridge Road, Goochland, VA. 23063</u> | |
| | Owner <u>Thaddeus & Darlene RyLinski</u> | Phone # <u>804-690-2377</u> |
| APPLICANT INFORMATION | Address <u>3798 Riddles Bridge Rd., Goochland, VA. 23063</u> | |
| | Applicant/Contact <u>Thaddeus RyLinski</u> | Email <u>Thad@tpbuilder.com</u> |
| | Address <u>same</u> | Phone # <u>804-690-2377</u> |
| | | Email <u>Thad@tpbuilder.com</u> |

| | | | | |
|--------------------------------------|---|--|----------------------------|-----------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>Fauquier Gardens</u> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount — | Date Paid — |
| | Front Setback <u>75' from Rd</u> | Center Line Setback <u>100'</u> | Rear Setback <u>35'</u> | CUP/Variance/COA — |
| | Side Setback <u>20'</u> | Side Setback <u>20'</u> | Flood Zone <u>X</u> | — |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>6/6/18</u> A1 | | | |

| | | | |
|------------------------|---|------|------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>Thaddeus RyLinski (owner)</u> | | Phone <u>804-690-2377</u> |
| | Address <u>3798 Riddles Bridge Rd., Goochland, VA. 23063</u> | | |
| | Contractor License Number | Type | Expiration |

| | | | | |
|---------------------|--|--|---|---------------------------|
| DESCRIPTION OF WORK | Scope of Work: <u>3fd w/ attached garage</u> | | | |
| | Residence | | | |
| | Proposed Use <u>Residence</u> | Current Use | Existing Buildings on Property <u>"BARN"</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 1/2</u> | # of Bedrooms <u>3</u> |
| | Finished Sq. Ft. <u>2,424</u> | Unfinished Sq. Ft. <u>676</u> | Total Sq. Ft. <u>3,100</u> | |

| | | | |
|--|----------------------------------|-----------------|--------------------|
| Building Only - Excludes All Trades Permits | | Application Fee | \$ <u>944.18</u> |
| Value of Work | <u># 110,000.00 / 207,150.00</u> | State Levy Fee | \$ <u>18.88</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>Thaddeus RyLinski</u> Date <u>6/1/18</u> | | Septic/Well Fee | \$ |
| | | Zoning Fee | \$ <u>50.00</u> |
| | | RLD | \$ |
| | | SWP | \$ |
| | | Total | \$ <u>1,013.06</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: 5-29-18
Permit Number: **BP-2018-00418**
GPIN/Tax Map: 7717-08-8792/46-41-0-7-0
Issued: **6-25-18**
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: **550 Church Hill Rd. Manakin Sabot, VA 23103**
Owner: **Blue Ridge Custom Homes** Phone #:
Address: **1186 Lickinghole Road Goochland VA 23063** Email:

APPLICANT INFORMATION
Applicant/Contact: **Blue Ridge Custom Homes** Phone #: **540-478-3110**
Address: **1186 Lickinghole Road Goochland VA 23063** Email: **Nathanbrch@gmail.com**

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: **Reva Ridge** Proffer: Yes No Amount: **\$2316.00** Date Paid: **Due**
Front Setback: **55' from ROW** Center Line Setback: **80'** Rear Setback: **35'** CUP/Variance/COA:
Side Setback: **35' from Rt #621** Side Setback: **15'** Flood Zone:
APPROVED REJECTED COMMENTS: *Cash proffer is due before C.O. is issued.
Planning & Zoning Officer: **David Floyd** Date: **5/29/18** RR

CONTRACTOR INFORMATION
Contractor: **Blue Ridge Custom Homes** Phone: **540-478-3110**
Address: **1186 Lickinghole Road Goochland VA 23063**
Contractor License Number: **2705086712** Type: **A** Expiration: **7-31-18**

DESCRIPTION OF WORK
Scope of Work: **Single family home on a finished basement with an attached garage**
Proposed Use: SEWER Public/Private WATER Public/Private Existing Buildings on Property: # of Bathrooms: **3** # of Floors: **2** # of Bedrooms: **4**
Finished Sq. Ft.: **3212** Unfinished Sq. Ft.: **2424** Total Sq. Ft.: **5636**

Building Only - Excludes All Trades Permits
Value of Work: **225000** **\$376,040.00**
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: **5-29-18**
Application Fee: **\$1704.18**
State Levy Fee: **\$34.88**
Septic/Well Fee: **\$40-**
Zoning Fee: **\$50-**
RLD: **\$00-**
SWP: **\$200-**
Total: **\$2129.06**

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: Aurora Title Telephone: 804-729-9005

Mailing Address: 2203 Pump Road Henrico VA 23233

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

Application Date: 6-13-18
 Application Accepted: BP 2018-00476
 Old Map Number: 58-48-8-73-0
 GPIN: 7715-469514

Issued: 6-25-18

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 863 Water Bridge Road Manakin-Sabot, VA 23103 | | District Dover | |
| | Owner Boone Homes, Inc. | | Phone # 804-784-6192 | |
| | Address 129 Broad Street Road, Manakin Sabot, VA 23103 | | | |
| | Proposed Use New Home | Current Use Vacant lot | Existing Buildings on Property None | |
| | Proposed Occupant Load (Commercial) N/A | Acreeage | Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>Kinloch Sec. 8</u> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: _____ | Date Paid: _____ |
| | New Street Address | | Zoning District <u>RPUD</u> | |
| | Front Setback <u>30' from Pavement</u> | Center Line Setback <u>5'</u> | Rear Setback <u>50' B/S</u> | C.U. Permit _____ |
| | Side Setback <u>20' B/S</u> | Side Setback <u>20' B/S</u> | COA _____ | Flood Zone _____ |
| | APPROVED <input checked="" type="checkbox"/> | REJECTED <input type="checkbox"/> | COMMENTS: <u>* Survey locate left side + front setbacks.</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 Lloyd Date: 6/14/18

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/Private <u>XXXX</u> | WATER Public/Private <u>XXXX</u> | # of Bathrooms 4.5 | | |
| | # of Floors 2 | Total Sq. Ft. 5493 | Finished Sq. Ft. 4744 | 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 | | Application Fee \$ <u>1974.00</u> |
| Building | \$436,000.00 | Zoning Fee \$ <u>50.00</u> |
| Excludes All Trades Permits | | Septic/Well Fee \$ _____ |
| | | State Levy Fee \$ <u>39.48</u> |
| | | BLD Total \$ <u>2,063.48</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]

LIEN AGENT INFORMATION

Please check one of the following:

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

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

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

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

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

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

APPROVAL _____ DATE _____

Code Official



BUILDING PERMIT APPLICATION

Application Date: 5-29-2018

Permit Number: **BP-2018-00A24**

GPIN/Tax Map: 6777-17-8376/43-39-0-17-0

Issued: **6/18/18**

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 2314 LANES END PLACE | |
| | Owner MAIN STREET HOMES | Phone # 804-423-0314 |
| | Address PO BOX 461, MIDLOTHIAN VA 23113 | Email mtessier@gomsh.com |
| APPLICANT INFORMATION | Applicant/Contact MARIAN TESSIER | |
| | Address PO BOX 461, MIDLOTHIAN VA 23113 | Phone # 804-423-0314 |

| | | | | |
|--------------------------------------|--|--|------------------------------|------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision Lanes End | Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount \$14,364.00 | Date Paid Due |
| | Front Setback 40' From Row | Center Line Setback 65' CL | Rear Setback 25' | CUP/Variance/COA — |
| | Side Setback 10' | Side Setback 10' | Flood Zone — | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer David Floyd Date 5/30/18 RP | | | |

| | | | |
|------------------------|--|------------------|------------------------------|
| CONTRACTOR INFORMATION | Contractor MAIN STREET HOMES | | Phone 804-423-0314 |
| | Address PO BOX 461 MIDLOTHIAN VA 23113 | | |
| | Contractor License Number 2705039441 | Type A | Expiration 5-2018 |

| | | | | |
|---------------------|--|--|---|---------------------------|
| DESCRIPTION OF WORK | Scope of Work: NEW SINGLE FAMILY DWELLING W/ATTACHED GARAGE | | | |
| | Proposed Use | Current Use | Existing Buildings on Property NO | # 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 4 | # of Bedrooms 4 |
| | Finished Sq. Ft. 3858 | Unfinished Sq. Ft. 812 | Total Sq. Ft. 4670 | |

| | | | |
|--|--|-----------------------------------|--|
| Building Only - Excludes All Trades Permits | | Application Fee \$ 1451.10 | |
| Value of Work 289441 \$319,800.00 | | State Levy Fee \$ 29.82 | |
| 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 5-29-2018 | | Septic/Well Fee \$ 40 - | |
| | | Zoning Fee \$ 50 - | |
| | | RLD \$ 100 - | |
| | | SWP \$ 200 - | |
| | | Total \$ 1870.92 | |

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 Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

| | |
|---|---|
| Residential fee is based on the building value of the job | \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per 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: ~~3-26-2018~~ ³⁰ 5-29-18Permit Number: **BP-2018-00422**

GPIN/Tax Map: 6777-17-6478/43-39-0-18-0

Issued: **6/14/18**

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 2316 LANES END PLACE | |
| | Owner MAIN STREET HOMES | Phone # 804-423-0314 |
| | Address PO BOX 461, MIDLOTHIAN VA 23113 | Email mtessier@gomsh.com |
| APPLICANT INFORMATION | Applicant/Contact MARIAN TESSIER | |
| | Address PO BOX 461, MIDLOTHIAN VA 23113 | Phone # 804-423-0314 |
| | | Email mtessier@gomsh.com |

| | | | | |
|--------------------------------------|--|--|------------------------------|--------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision Lanes End | Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount \$14,364.00 | Date Paid Due |
| | Front Setback 40' from R/W | Center Line Setback 6.5' | Rear Setback 25' | CUP/Variance/COA --- |
| | Side Setback 10' | Side Setback 10' | Flood Zone --- | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David Lloyd Date: 5/30/18 RP | | | |

| | | | |
|------------------------|--|------------------|------------------------------|
| CONTRACTOR INFORMATION | Contractor MAIN STREET HOMES | | Phone 804-423-0314 |
| | Address PO BOX 461 MIDLOTHIAN VA 23113 | | |
| | Contractor License Number 2705039441 | Type A | Expiration 5-2018 |

| | | | | |
|---------------------|--|--|---|---------------------------|
| DESCRIPTION OF WORK | Scope of Work: NEW SINGLE FAMILY DWELLING W/ATTACHED GARAGE | | | |
| | Proposed Use | Current Use | Existing Buildings on Property NO | # 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 | # of Bedrooms 4 |
| | Finished Sq. Ft. 2795 | Unfinished Sq. Ft. 838 | Total Sq. Ft. 3633 | |

Building Only - Excludes All Trades Permits

| | |
|---------------|---------------|
| Value of Work | 244729 |
|---------------|---------------|

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: **5-29-2018**

| | |
|-----------------|-------------------|
| Application Fee | \$ 1113.28 |
| State Levy Fee | \$ 23.07 |
| Septic/Well Fee | \$ 40- |
| Zoning Fee | \$ 50- |
| RLD | \$ 100- |
| SWP | \$ 200- |
| Total | \$ 1526.35 |

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 Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

| | |
|---|---|
| Residential fee is based on the building value of the job | \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per 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: 5-22-18
Permit Number: BP-2018-00401
GPIN/Tax Map: 0813-74-6906/5-33-0-1-0
Issued: 6/14/18

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: 3762 County Line Rd Kents Store, VA 23084
Owner: New Venture Real Estate Phone #: 804-378-9300

APPLICANT INFORMATION
Address: 1664 Anderson Hwy, Suite F Powhatan VA 23139 Email: sprousescorner@gmail.com
Applicant/Contact: Wendy Stinnett Phone #: 804-378-9300
Address: 1664 Anderson Hwy, Suite F, Powhatan VA 23139 Email: sprousescorner-egmail.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: Fields at Shannon H-71 Proffer: Yes No Amount: --- Date Paid: ---
Front Setback: 75' from ROW Center Line Setback: 100' Rear Setback: 35' CUP/Variance/COA: ---
Side Setback: 35' from ROW Side Setback: 35' from ROW Flood Zone: ---
APPROVED REJECTED COMMENTS: ---
Planning & Zoning Officer: David Floyd Date: 5/25/18 A1

CONTRACTOR INFORMATION
Contractor: Anderson Home Construction Phone: 804-839-7201
Address: 2080 Cartersville Rd, New Canton, VA 23123
Contractor License Number: 2705106351 Type: class A Expiration: 5/31/18

DESCRIPTION OF WORK
Scope of Work: single-family housing
Proposed Use: Residential Current Use: N/A Existing Buildings on Property: none # of Floors: 1
SEWER: Public/Private WATER: Public/Private # of Bathrooms: 2 # of Bedrooms: 3
Finished Sq. Ft.: 1472 Unfinished Sq. Ft.: 368 Total Sq. Ft.: 1840

Building Only - Excludes All Trades Permits
Value of Work: ~~25,000.00~~ \$107,600.00
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: 5/22/18
Application Fee: \$496.38
State Levy Fee: \$10.73
Septic/Well Fee: \$40-
Zoning Fee: \$50-
RLD: \$100-
SWP: \$200-
Total: \$897.11

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: Rowhatten Real Estate Settlements Telephone: 804-598-7160

Mailing Address: 3887 Old Buckingham Rd, Rowhatten, VA 23139

OWNER'S AFFIDAVIT

I, R. Allen Anderson of (address) County Line Rd (lot 1 site A) affirm that I am the owner of a certain tract of parcel of land located at Goochland Co. 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.

R. Allen Anderson 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 R. Allen Anderson

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 6-14-18

Application Date: *5/18/18* **5/30/2018**
 Application Accepted: **BP-2018-00426**
 Old Map Number: **12-27-0-C-0**
 GPIN: ~~0831-06-29056821-97-~~ **97098**

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 3644 Forest Grove Rd. Sandy Hook, VA 23153 | | District Byrd | |
| | Owner Ashleigh & Robert Highes | | Phone # 804-310-6057 | |
| | Address 3630 Forest Grove Rf. Sandy Hook, VA 23153 | | | |
| | Proposed Use Residential | Current Use | Existing Buildings on Property | |
| Proposed Occupant Load (Commercial) | Acreage 9.219 | Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| Subdivision None | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: | Date Paid: | |
| New Street Address | | Zoning District A1 | | |
| Front Setback 100' from CL | Center Line Setback 100' | Rear Setback 35' | C.U. Permit | Variance |
| Side Setback 35' from ROW on right side / 20' for road | Side Setback | COA | Flood Zone | |
| APPROVED <input checked="" type="checkbox"/> | REJECTED <input type="checkbox"/> | COMMENTS: * Mobile home must be removed within 60 days of C.O. approval. | | |

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

Planning & Zoning Officer: *David Lloyd* Date: **5/30/18**

Applicant/Contact: **Makenna Robbins** Phone: **540-603-8300**
 Email: **makennar@bethelbuilders-va.com**

| | | | | |
|------------------------|--|------------------|------------------------------|--|
| CONTRACTOR INFORMATION | Contractor Bethel Builders, LLC. | | Phone 540-603-9300 | |
| | Address 100 Fredericksburg Ave. Louisa, VA 23093 | | | |
| | Contractor License Number 2705148374 | Type A | Expiration 9/2018 | |

| | | | | | |
|---------------------|---|---|---------------------------------|-----------------------------------|-------------------------------|
| Description of Work | Scope of Work: new construction for residential single family home | | | | |
| | Unfinished basement w/ attached garage | | | | |
| | SEWER Public/Private # of Floors one | WATER Public/Private Total Sq. Ft. 1954 | Finished Sq. Ft. 1954 | Unfinished Sq. Ft. 2591 | # of Bathrooms Two |
| | | | | | # of Bedrooms Three |

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

| | | |
|------------------------------|-------------------------|-------------------------------------|
| VALUE OF WORK 4545 | | Application Fee \$1368.90 |
| Building \$301,550 | Zoning Fee 50 | |
| Excludes All Trades Permits | | Septic/Well Fee 40 |
| | | State Levy Fee \$28.10 |
| | | RLD \$100 |

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: \$1587.15**

Signature of Applicant: *Makenna Robbins*



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: 4-27-2018 *Rec: 5-9-18*

Permit Number: *BP-2018-00354*

GPIN/Tax Map: 6777-26-1926 - 43-39-0-15-0

Issued: *6/11/18*

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: 2310 LANES END PLACE

Owner: MAIN STREET HOMES Phone #: 804-423-0314

Address: PO BOX 461, MIDLOTHIAN VA 23113 Email: mtessier@gomsh.com

APPLICANT INFORMATION
 Applicant/Contact: MARIAN TESSIER Phone #: 804-423-0314

Address: PO BOX 461, MIDLOTHIAN VA 23113 Email: mtessier@gomsh.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: *Lanes End* Proffer: Yes No Amount: *14,364.00* Date Paid: *Duo*

Front Setback: *Up from Row* Center Line Setback: *65'* Rear Setback: *25'* CUP/Variance/COA: _____

Side Setback: *10'* Side Setback: *10'* Flood Zone: _____

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: *David Ford* Date: *5/10/18* RP

CONTRACTOR INFORMATION
 Contractor: MAIN STREET HOMES Phone: 804-423-0314

Address: PO BOX 461 MIDLOTHIAN VA 23113

Contractor License Number: 2705039441 Type: A Expiration: 5-2018

DESCRIPTION OF WORK
 Scope of Work: NEW SINGLE FAMILY DWELLING W/ATTACHED GARAGE

Proposed Use: _____ Current Use: _____ Existing Buildings on Property: NO # of Floors: 2

SEWER: Public/Private WATER: Public/Private # of Bathrooms: 3 # of Bedrooms: 4

Finished Sq. Ft.: 2763 Unfinished Sq. Ft.: 920 Total Sq. Ft.: 3683

Building Only - Excludes All Trades Permits
 Value of Work: 280612 *\$280612*

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: 4-27-2018

| | |
|-----------------|------------------|
| Application Fee | \$1274.05 |
| State Levy Fee | \$26.30 |
| Septic/Well Fee | \$40.00 |
| Zoning Fee | \$50.00 |
| RLD | \$100.00 |
| SWP | \$200.00 |
| Total | \$1691.05 |

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 Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

OWNER'S AFFIDAVIT

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

_____ Owner's Signature

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

_____ (Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per 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: 5-11-18
 Permit Number: BP-2018-00369
 GPIN/Tax Map: 32-1-0-40-E/6798-7A-6A
 Issued: 6/7/18
 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: 2385 Camelback Rd Maidens VA 23102
 Owner: Travis Grady Phone #: 804.837.3492
 Address: 1506 Wood Grove Circle Richmond VA 23238 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: Oakwood Homes / Jennifer Adams Phone # (C): 804.229.7463
 Address: 11160 Washington Hwy Glen Allen VA 23059 Email: Jennifer.Adams@oakwoodhomes.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: None Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 55' from Property line Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____
 Side Setback: 20' Side Setback: 30' Flood Zone: _____

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 5/11/18 A2

CONTRACTOR INFORMATION
 Contractor: Oakwood Homes Phone: 804.798.9135
 Address: 11160 Washington Hwy Glen Allen VA 23059
 Contractor License Number: 2705048123 Type: Class A contractor Expiration: 4.30.2019

DESCRIPTION OF WORK
 Scope of Work: Set up on frame modular home.
 Proposed Use: SFH Current Use: _____ Existing Buildings on Property: 0 # of Floors: 1
 SEWER Public/Private WATER Public/Private # of Bathrooms: 2 # of Bedrooms: 3
 Finished Sq. Ft.: 2020 Unfinished Sq. Ft.: 50 Total Sq. Ft.: 2070

Building Only - Excludes All Trades Permits \$133315.00
 Value of Work: ~~139,957.10~~ 133,315.00

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: Jennifer Adams Date: _____

| | |
|-----------------|------------------|
| Application Fee | \$ <u>411.92</u> |
| State Levy Fee | \$ <u>13.04</u> |
| Septic/Well Fee | \$ <u>40.-</u> |
| Zoning Fee | \$ <u>50.-</u> |
| RLD | \$ _____ |
| SWP | \$ _____ |
| Total | \$ <u>714.96</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: Commonwealth Escrow & Title Telephone: 804-359-2382

Mailing Address: 5009 Patterson Ave, Suite C Richmond VA 23224

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 _____

N/A

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

N/A



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: 5.2.18
 Permit Number: BP-2018-00342
 GPIN/Tax Map: 6823-69-3460/5-14-0-3-0
 Issued: 6.6.18

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>5045 Ange Rd Louisa, VA 23093</u> | |
| | Owner <u>DWAYNE WARE</u> | Phone # |
| | Address <u>5045 Ange Rd</u> | Email |

| | | |
|-----------------------|---|----------------------------|
| APPLICANT INFORMATION | Applicant/Contact <u>George Friend</u> | Phone # <u>426 8148</u> |
| | Address <u>5907 Black</u> | Email |

| | | | | |
|--------------------------------------|--|--|----------------------------|------------------|
| 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>55' From ROW</u> | Center Line Setback | Rear Setback <u>35'</u> | CUP/Variance/COA |
| | Side Setback <u>20'</u> | Side Setback <u>20'</u> | Flood Zone <u>X</u> | <u>A1</u> |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Dennis Floyd</u> Date <u>5/7/18</u> | | | |

| | | |
|------------------------|--|------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>JAG Construction (George Friend)</u> | Phone <u>804-229-4756</u> |
| | Address <u>5907 Blackjack OAK Ct Richmond, VA 23231</u> | |
| | Contractor License Number <u>2705124561</u> | Type <u>Bld</u> |

| | | | | |
|---------------------|---|---|--------------------------------|---------------------------|
| DESCRIPTION OF WORK | Scope of Work: <u>Building New Construction house with unfinished second floor</u> | | | |
| | Proposed Use | Current Use | Existing Buildings on Property | # of Floors <u>2</u> |
| | <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms <u>3</u> | # of Bedrooms <u>4</u> |
| | Finished Sq. Ft. <u>1988</u> | Unfinished Sq. Ft. <u>860</u> | Total Sq. Ft. <u>2848</u> | |
| | Building Only - Excludes All Trades Permits | | | |

| | |
|---------------|----------------|
| Value of Work | <u>160,000</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 [Signature] Date _____

| | |
|-----------------|------------------|
| Application Fee | \$ <u>150 -</u> |
| State Levy Fee | \$ <u>15.44</u> |
| Septic/Well Fee | \$ <u>40 -</u> |
| Zoning Fee | \$ <u>50 -</u> |
| RLD | \$ _____ |
| SWP | \$ _____ |
| Total | \$ <u>830.44</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: Ayres Title Telephone: 804 769-3550

Mailing Address: 5468 Richmond-Tappahannock Hwy
King William VA 23086

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

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: 4-30-18

Permit Number: BP-2018-00328

GPIN/Tax Map: 681A-82-9327/5-1-0-2-0

Issued: 6-5-18

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>5412 Three Chopt Rd Louisa, VA 23093</u> | |
| | Owner <u>Amelia Daves</u> | Phone # <u>(804) 678-8394</u> |
| | Address <u>across from 5400 Broad Street Rd on three Chopt (near power line)</u> | Email <u>amelishomeconstruction@gmail.com</u> |

| | | |
|-----------------------|--|------------------------|
| APPLICANT INFORMATION | Applicant/Contact <u>Amelia Daves</u> | |
| | Address <u>584 Paddock Ln Louisa VA 23093</u> | Phone # <u>Same</u> |
| | | Email <u>Same</u> |

| | | | | |
|--------------------------------------|---|--|------------------------------|---|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount | Date Paid |
| | Front Setback <u>100ft 100ft (6' Road)</u> | Center Line Setback <u>150ft</u> | Rear Setback <u>350ft</u> | <u>55,800 + 250</u> CUP/Variance/COA |
| | Side Setback <u>20ft</u> | Side Setback <u>150ft</u> | Flood Zone | <u>A-1</u> |
| | APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: | Planning & Zoning Officer: <u>Amelia Barnes</u> Date: <u>5-2-2018</u> <u>57-2018</u> | | |

| | | | |
|------------------------|--|------------------------|--------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>Amelia Daves</u> | | Phone <u>(804) 678-8394</u> |
| | Address <u>584 Paddock Ln Louisa VA 23093</u> | | |
| | Contractor License Number <u>2705156468</u> | Type <u>Class A</u> | Expiration <u>6-30-19</u> |

| | | | | |
|---------------------|---|---|--------------------------------|-------------------------|
| DESCRIPTION OF WORK | Scope of Work: <u>New construction 3BR 2 Bath House 1600 sq ft</u> | | | |
| | Proposed Use | Current Use | Existing Buildings on Property | |
| | <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms <u>2</u> | # of Floors <u>1</u> |
| | Finished Sq. Ft. <u>1600</u> | Unfinished Sq. Ft. <u>312</u> | Total Sq. Ft. <u>1912</u> | |

| | | | |
|--|----------------|-----------------|------------------|
| Building Only - Excludes All Trades Permits | | Application Fee | \$ <u>642-</u> |
| Value of Work | <u>140,000</u> | State Levy Fee | \$ <u>13.64</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> |
| Signature of Applicant: <u>Amelia Barnes</u> Date: <u>4-30-18</u> | | RLD | \$ |
| | | SWP | \$ |
| | | Total | \$ <u>175.64</u> |

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

Application Date: 5-30-18

Application Accepted: BP-2018-00428

Old Map Number: 58-48-8-70-0

GPM: 1715-56-0360

Issued 6-5-18

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 832 Woodcove Court Manakin-Sabot, VA 23103 | | District Dover - <u>Kinloch</u> | |
| | Owner Boone Homes, Inc. | | Phone # 804-784-6192 | |
| | Address 129 Broad Street Road, Manakin Sabot, VA 23103 | | | |
| | Proposed Use New Home | Current Use Vacant lot | Existing Buildings on Property None | |
| Proposed Occupant Load (Commercial) N/A | Acreage | Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>Kinloch Sec. 8</u> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: — | Date Paid: — |
| | New Street Address | | Zoning District <u>RPU D</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> | 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 Ford Date: 5/30/18

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 <u>CBC, RBC</u> | Expiration 3/31/2020 |

| | | | | | |
|---------------------|---|---------------------------------------|--------------------------|---------------------------|--------------------|
| Description of Work | Scope of Work: New Single family home with attached Garage | | | | |
| | SEWER Public/Onsite <u>XXXX</u> | WATER Public/Onsite <u>XXXX</u> | # of Bathrooms 4.5 | | |
| | # of Floors 2 | Total Sq. Ft. 4805 | Finished Sq. Ft. 4207 | Unfinished Sq. Ft. 598 | # of Bedrooms 4 |

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

| VALUE OF WORK | |
|-----------------------------|--------------|
| Building | \$338,000.00 |
| Excludes All Trades Permits | |

| | |
|-----------------|--------------------|
| Application Fee | \$ <u>1533.00</u> |
| Zoning Fee | \$ <u>50.00</u> |
| Septic/Well Fee | \$ |
| State Levy Fee | \$ <u>30.66</u> |
| RLD | \$ <u>1,613.66</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]

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 8 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: 5-1-18

Permit Number: BP-2018-00334

GPIN/Tax Map: 6840-80-6030 20-28-0-A-2

Issued: 6-5-18

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 3654 West Rocketts Ridge Court | |
| | Owner Rocketts Ridge, LLC | Phone # 804-752-4900 |
| APPLICANT INFORMATION | Address 11123 Cauthorne Road Glen Allen, VA. 23059 | Email chuck@messercontracting.com |
| | Applicant/Contact Roger Zurasky | Phone # 804-545-4103 |
| | Address 11357 Nuckols Road PMB 108 Glen Allen, VA. 23059 | Email roger@royalldomhomes.com |

| | | | | |
|--------------------------------------|--|--|----------------------------|--------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision | Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount 20,496.00 | Date Paid DUE |
| | Front Setback 40' 0" ROW | Center Line Setback 65' 0" CL | Rear Setback 35 | CUP/Variance/COA R-1 |
| | Side Setback 15 | Side Setback 15 | Flood Zone | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: | Planning & Zoning Officer: <u>[Signature]</u> Date: <u>5-7-2018</u> | | |

| | | |
|------------------------|--|------------------------------------|
| CONTRACTOR INFORMATION | Contractor Royal Dominion Homes, Inc. | Phone 804-545-4101 |
| | Address 11357 Nuckols Road Suite 108 Glen Allen, VA. 23059 | |
| | Contractor License Number 2705118875 | Type Residential Building (RBC) |

| | | | | |
|---------------------|--|--|--------------------------------------|------------------|
| DESCRIPTION OF WORK | Scope of Work: New single family / with attached garage | | | |
| | Proposed Use | Current Use | Existing Buildings on Property no | |
| | SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms 2 1/2 | # of Floors 2 |
| | Finished Sq. Ft. 2802 | Unfinished Sq. Ft. 918 | Total Sq. Ft. 3720 | |

Building Only - Excludes All Trades Permits

| | |
|---------------|----------------------------|
| Value of Work | 180000 \$244,575.00 |
|---------------|----------------------------|

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: 6-19-18

| | |
|-----------------|--------------------|
| Application Fee | \$ <u>1,112.59</u> |
| State Levy Fee | \$ <u>23.05</u> |
| Septic/Well Fee | \$ <u>40.00</u> |
| Zoning Fee | \$ <u>50.00</u> |
| RLD | \$ <u>100.00</u> |
| SWP | \$ <u>200.00</u> |
| Total | \$ <u>1,525.64</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: Kimberly Wright Telephone: 804-288-4007

Mailing Address: 1503 Santa Rosa Road Suite 109 Richmond, VA. 23229

OWNER'S AFFIDAVIT

I Roger Zurasky of (address) 11357 Nuckols Road suite 108 Glen Allen, VA. 23059 affirm that I am the owner of a certain tract of parcel of land located at 3654 West Rocketts Ridge Court 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



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: 5/1/18
 Permit Number: BP-2018-00332
 GPIN/Tax Map: 5890-43-2592/16-1-0-37-A
 Issued: 6-5-18
 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: 5923 Old Columbia Rd. Columbia, VA 23038
 Owner: Ann Fairman
 Phone #: 804-517-3149
 Address: PO Box 1262 Goochland Va 23063
 Email: raglanfarm@yahoo.com

APPLICANT INFORMATION
 Applicant/Contact: Ann Fairman
 Address: [Blank]
 Phone #: [Blank]
 Email: [Blank]

TO BE COMPLETED BY ZONING DEPARTMENT

| | | | |
|----------------------------|---|-------------------|----------------------|
| Subdivision | Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No | Amount | Date Paid |
| Front Setback: 100' CL ROW | Center Line Setback | Rear Setback: 35' | CUP/Variance/COA: A/ |
| Side Setback: 20' | Side Setback: 35' Old ROW | Flood Zone | |

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: Paul Barnes Date: 5-2-2018

CONTRACTOR INFORMATION
 Contractor: Owner
 Address: [Blank]
 Phone: [Blank]
 Contractor License Number: [Blank] Type: [Blank] Expiration: [Blank]

DESCRIPTION OF WORK
 Scope of Work: Single family dwelling

| | | | |
|--|--|--------------------------------|------------------|
| Proposed Use | Current Use | Existing Buildings on Property | # of Floors: 1 |
| SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms: 1 | # of Bedrooms: 2 |
| Finished Sq. Ft.: 864 | Unfinished Sq. Ft.: 27 | Total Sq. Ft.: 891 | |

Building Only - Excludes All Trades Permits

| | |
|------------------------|---------------------------|
| Value of Work: \$5,000 | Application Fee: \$259.50 |
| | State Levy Fee: \$5.99 |
| | Septic/Well Fee: \$40- |
| | Zoning Fee: \$50- |
| | RLD: \$100- |
| | SWP: \$- |
| | Total: \$455.49 |

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: 5/1/18



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: 5/15/2018Permit Number: BP-2018-00379GPIN/Tax Map: 6797-81-5102/45-1-0-99-CIssued: 6.4.18

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 survey 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>1461 Shallow Well Road Manakin Neck, VA 23103</u> | |
| | Owner <u>Jonathan McDoeman</u> | Phone # <u>804-887-9846</u> |
| | Address <u>5000 Avia Cir. Apt 006 Henrico, VA 23233</u> | Email |

| | | |
|-----------------------|---|---------------------------------------|
| APPLICANT INFORMATION | Applicant/Contact <u>Scott Gouldman</u> | Phone # <u>804-218-5114</u> |
| | Address <u>8721 Jacobs Rd Chesterfield, VA 23852</u> | Email <u>sgouldman@comcast.net</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 Prop. Line</u> | Center Line Setback <u>—</u> | Rear Setback <u>55' from Access easement</u> | CUP/Variance/COA <u>—</u> |
| | Side Setback <u>55' from Access easement</u> | Side Setback <u>20'</u> | Flood Zone <u>—</u> | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Ford</u> Date <u>5/15/18</u> <u>AJ</u> | | | |

| | | |
|------------------------|--|------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>Jonathan McDoeman</u> | Phone <u>804-887-9846</u> |
| | Address <u>5000 Avia Cir. Apt 006 Henrico, VA 23233</u> | Email |
| | Contractor License Number <u>Owner</u> | Type <u>—</u> |

| | | | | | |
|---------------------|---|--|--|---------------------------|-------------------------|
| DESCRIPTION OF WORK | Scope of Work: <u>2 story Single Family with unfinished Basement and Attached Garage</u> | | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands; amt land disturbed) <u>7461 sq ft</u> <u>NO</u> <u>none disturbed</u> | | |
| | SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms <u>3.5</u> | # of Bedrooms <u>4</u> | # of floors <u>2</u> |
| | Finished Sq. Ft. <u>3835</u> | Unfinished Sq. Ft. <u>2469</u> <u>2649</u> | Total Sq. Ft. 3835 <u>6484</u> | | |

Building Only - Excludes All Trades Permits

| | |
|---------------|--|
| Value of Work | \$1,300,000 <u>\$438,557.50</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: 5/15/2018

| | |
|-----------------|-------------------|
| Application Fee | \$ <u>1985.51</u> |
| State Levy Fee | \$ <u>40.51</u> |
| Septic/Well Fee | \$ <u>40-</u> |
| Zoning Fee | \$ <u>50-</u> |
| RLD | \$ <u>—</u> |
| SWP | \$ <u>—</u> |
| Total | \$ <u>2116.02</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: Darvin Satterwhite Telephone: 804-556-4012

Mailing Address: 3013 River Road West, P.O. Box 325 Goochland, Va 23063

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per 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

Residential Commercial

Application Date: 5.4.18

Permit Number: BP-2018-00345

GPIN/Tax Map: 6840-43-5618/20.26.0.1.0

Issued: 6-1-18

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: 3866 Sage Rd. Sandy Hook, Va. 23153

Owner: Skyler & Alex Strabley Phone #: 804-516-5870

Address: 532 Fords Rd. Manakin Sabot, Va. 23103 Email: sstrabley05@yahoo.com

Applicant/Contact: Skyler Strabley Phone #: 804-516-5870

Address: 532 Fords Rd. Manakin Sabot, Va. 23103 Email: sstrabley05@yahoo.com

| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision | Proffer | Amount | Date Paid |
|---|---|---|-------------------------|------------------|
| | <u>Willoughby Bend</u> | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <u>—</u> | <u>—</u> |
| | Front Setback <u>75' from ROW</u> | Center Line Setback <u>100'</u> | Rear Setback <u>35'</u> | CUP/Variance/COA |
| | Side Setback <u>35' from Cedar Plains</u> | Side Setback <u>20'</u> | Flood Zone <u>X</u> | <u>—</u> |
| APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>—</u> | | | | |
| Planning & Zoning Officer: <u>Daniel Floyd</u> Date: <u>5/8/18</u> | | | | |

Contractor: OWNER Phone: —

Address: —

Contractor License Number: — Type: — Expiration: —

Scope of Work: Build New Single Family Dwelling + attached garage

| DESCRIPTION OF WORK | Proposed Use | Current Use | Existing Buildings on Property | # of Floors |
|------------------------------|--|--|--|-------------------------|
| | Single Family Home | <u>—</u> | No | <u>1 1/2 = 2</u> |
| | SEWER: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private | WATER: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private | # of Bathrooms: <u>3 Full Bath / 2 Half Bath</u> | # of Bedrooms: <u>4</u> |
| Finished Sq. Ft. <u>2720</u> | Unfinished Sq. Ft. <u>650 + 240 + 330 = 1,220</u> | Total Sq. Ft. <u>3940</u> | <u>3370</u> | |

Building Only - Excludes All Trades Permits

Value of Work: 210,000 ~~210,000~~ \$249,750.00

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: 5-3-18

| | |
|-----------------|-------------------|
| Application Fee | \$ <u>1135.87</u> |
| State Levy Fee | \$ <u>23.52</u> |
| Septic/Well Fee | \$ <u>40-</u> |
| Zoning Fee | \$ <u>50-</u> |
| RLD | \$ <u>100-</u> |
| SWP | \$ <u>200-</u> |
| Total | \$ <u>1549.39</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: Darvin Satterwhite Telephone: 804-556-4012

Mailing Address: P.O. Box 325, Goochland, Va. 23063

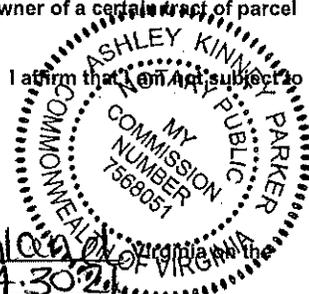
OWNER'S AFFIDAVIT

I, Skylar Strabley of (address) 532 Fords Rd. Manakin- Sabot, Va. 23103 affirm that I am the owner of a certain tract of parcel of land located at 3688 Sage Rd. Sandy Hook, Va. 23153 and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

Signed and acknowledged by Skylar Strabley in the city or county of Goochland on the 3 day of May, 2018 in the presence of the undersigned notary. My Commission expires 4-30-21.

Ashley Kinney 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



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: 5-15-18
 Permit Number: BP-2018-00382
 GPIN/Tax Map: 12-1-71A / 6831-42-1696
 Issued: 6-29-18
 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>4085 Cedar Plains Rd., Sandy Hook, VA 23153</u> | |
| | Owner <u>Ashley Allen</u> | Phone # <u>(804) 971-6605</u> |
| | Address <u>4085 Cedar Plains Rd. Sandy Hook, VA 23153</u> | Email <u>aj3240778@gmail.com</u> |
| APPLICANT INFORMATION | Applicant/Contact <u>Joe Harner</u> | Phone # <u>434-315-8956</u> |
| | Address <u>2750 W 3rd St. Farmville Va 23901</u> | Email <u>r749@clayton.net</u> |

| | | | | |
|---|--|--|----------------------------|---------------------------|
| 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>55' from Prop. Line</u> | Center Line Setback _____ | Rear Setback <u>35'</u> | CUP/Variance/COA _____ |
| | Side Setback <u>35' from Road from Rock bridge Dr.</u> | Side Setback <u>20'</u> | Flood Zone _____ | _____ |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Existing doublewide must be removed within 60 day of issuance of C.O. A1</u> | | | |
| Planning & Zoning Officer <u>David Tapp</u> Date <u>5/16/18</u> | | | | |

| | | | |
|------------------------|---|------------------|---------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>Oakwood Homes of Farmville (Homes Inc)</u> | | Phone <u>(434) 315-8956</u> |
| | Address <u>2650 West 3rd St., Farmville, VA, 23901</u> | | |
| | Contractor License Number <u>2905048123</u> | Type <u>A</u> | Expiration <u>01-30-2019</u> |

| | | | | | |
|---------------------|---|---|--------------------------------|---------------------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <u>Delivery & setup of a doublewide home; Removal of current doublewide</u> | | | | <u>2018</u> |
| | Proposed Use | Current Use | Existing Buildings on Property | # of Floors <u>1</u> | |
| | <input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/> | <input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/> | # of Bathrooms <u>2</u> | # of Bedrooms <u>3</u> | |
| | Finished Sq. Ft. <u>1790</u> | Unfinished Sq. Ft. <u>48-</u> | Total Sq. Ft. <u>1838</u> | | |

Building Only - Excludes All Trades Permits

| | |
|--------------------------------|----------------------------------|
| Value of Work <u>90,000</u> | Application Fee \$ <u>417.00</u> |
| | State Levy Fee \$ <u>8.34</u> |
| | Septic/Well Fee \$ _____ |
| | Zoning Fee \$ <u>50.00</u> |
| | RLD \$ _____ |
| | SWP \$ _____ |
| | Total \$ <u>475.34</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 Joe Harner Date 5-15-18



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: 6/22/18

Permit Number: *BP 2018-00501*

GPIN/Tax Map: *6787-19-6203 / 4A-27-02A-0*

Issued: *6-29-18*

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 survey 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 1161 Hawkford Ct Maidens | |
| | Owner Mark and Ashley Fisher | Phone # |
| | Address 1161 Hawkford Ct Maidens, VA 23102 | Email |

| | | |
|-----------------------|---|---------------------------------|
| APPLICANT INFORMATION | Applicant/Contact Billys Pool Services | Phone # 804-761-7904 |
| | Address 13372 Greenwood Church Rd. Ashland, VA 23005 | Email poolsbybilly@yahoo.com |

| | | | | |
|--------------------------------------|---|--|---------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <i>Somerset</i> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount — | Date Paid — |
| | Front Setback <i>40' from ROW</i> | Center Line Setback <i>605'</i> | Rear Setback <i>5'</i> | CUP/Variance/COA |
| | Side Setback <i>5'</i> | Side Setback <i>5'</i> | Flood Zone | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>David Floyd</i> Date <i>6/28/18</i> <i>RP</i> | | | |

| | | |
|------------------------|--|---------------------------------|
| CONTRACTOR INFORMATION | Contractor Billys Pool Services | Phone 804-761-7904 |
| | Address 13372 Greenwood Church Rd Ashland, VA 23005 | Email poolsbybilly@yahoo.com |
| | Contractor License Number 2705136588 | Type pol |

| | | | | | |
|---------------------|---|--|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <i>install 15x35 inground fiberglass pool CUSTOMER IS pulling barrier permit</i> | | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | | |
| | SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms | # of Bedrooms | # of floors |
| | Finished Sq. Ft. | Unfinished Sq. Ft. <i>525</i> | Total Sq. Ft. <i>525</i> | | |

| | | |
|--|----------------------|--|
| Building Only – Excludes All Trades Permits | | Application Fee \$ <i>126.75</i> State Levy Fee \$ <i>254</i> Septic/Well Fee \$ Zoning Fee \$ <i>25.00</i> RLD \$ SWP \$ Total \$ <i>154.29</i> |
| Value of Work | 25,500 | |
| 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 | <i>William E. C.</i> | Date <i>6/22/18</i> |



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: 6-28-18
 Permit Number: AP-2018-00512
 GPIN/Tax Map: 6797-18-6203 1A4-27-02
 Issued: 6-29-18

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 survey 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>1111 Hawkford Ct Mardens VA 23102</u> | |
| | Owner <u>Mark & Ashley Fisher</u> | Phone # <u>804-920-7492</u> |
| | Address <u>1</u> | Email <u>*afisher119@gmail.com*</u> |

| | | | |
|-----------------------|-------------------|--|--------------------------------------|
| APPLICANT INFORMATION | Applicant/Contact | | Phone # <u>804-920-7492</u> |
| | Address | | Email <u>afisher119@gmail.com</u> |

| | | | | | |
|--------------------------------------|---|---|--------------|------------------|--|
| 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 | | Email |
| | Contractor License Number | Type | Expiration |

| | | | | | |
|---------------------|--|--|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <u>fence barrier for inground pool</u> | | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | | |
| | <input type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms | # of Bedrooms | # of floors |
| | Finished Sq. Ft. | Unfinished Sq. Ft. | Total Sq. Ft. | | |

Building Only - Excludes All Trades Permits

Value of Work \$3,000.00

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 6/28/18

| | |
|-----------------|------------------------|
| Application Fee | \$ <u>30.00</u> |
| State Levy Fee | \$ <u>.00</u> |
| Septic/Well Fee | \$ _____ |
| Zoning Fee | \$ _____ |
| RLD | \$ _____ |
| SWP | \$ _____ |
| Total | \$ <u>30.00</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: 6-26-18

Permit Number: BP-2018-00505

GPIN/Tax Map: 6726-32-4193/50-5-0-25-0

Issued: 6/28/18

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 1186 Lickinghole Road Goochland VA | |
| | Owner Blue Ridge Custom Homes | Phone # |
| | Address 1186 Lickinghole Road Goochland VA 23063 | Email |
| APPLICANT INFORMATION | Applicant/Contact Blue Ridge Custom Homes | Phone # 540-478-3110 |
| | Address 1186 Lickinghole Road Goochland VA 23063 | Email Nathanbrch@gmail.com |

| | | | | |
|--------------------------------------|---|--|---------------------------|---------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>James River Landing</u> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount _____ | Date Paid _____ |
| | Front Setback <u>55' From RAW</u> | Center Line Setback <u>80'</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 Ford</u> Date <u>6/27/18</u> AI | | | |

| | | |
|------------------------|--|------------------------------|
| CONTRACTOR INFORMATION | Contractor Blue Ridge Custom Homes | Phone 540-478-3110 |
| | Address 1186 Lickinghole Road Goochland VA 23063 | |
| | Contractor License Number <u>2705086712</u> | Type <u>A</u> |

| | | | | |
|---------------------|--|--|---|---------------------------|
| DESCRIPTION OF WORK | Scope of Work: Construct a 24' x 42' detached pole barn garage | | | |
| | Proposed Use | Current Use | Existing Buildings on Property Single family home with detached garage | |
| | SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms <u>0</u> | # of Floors <u>1</u> |
| | Finished Sq. Ft. | Unfinished Sq. Ft. <u>1008</u> | Total Sq. Ft. <u>1008</u> | |
| | | | | # of Bedrooms <u>0</u> |

| | | |
|--|---------------------|---------------------------------|
| Building Only - Excludes All Trades Permits | | Application Fee \$ <u>36.04</u> |
| Value of Work 10,000 <u>27,720.00</u> | | State Levy Fee \$ <u>2.93</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 \$ _____ |
| Signature of Applicant <u>[Signature]</u> | Date <u>6-26-18</u> | Zoning Fee \$ <u>25-</u> |
| | | RLD \$ _____ |
| | | SWP \$ _____ |
| | | Total \$ <u>164.47</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: 06/08/2018

Permit Number: **BP-2018-0498**

GPIN/Tax Map: **7704-91-8292-9998 / 62-1-0-10-TW**

Issued: **6-27-18**

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 survey 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 Quarry Drive 499 Boscobel Ferry Road, Manakin, VA 23101 | |
| | Owner SBA Communications Corporation | Phone # 704-600-5424x2103 |
| | Address 4402-G Stuart Andrew Boulevard Charlotte, NC 28217 | Email pstutts@sbsite.com |

| | | |
|-----------------------|---|-------------------------------|
| APPLICANT INFORMATION | Applicant/Contact Phillip Stutts | Phone # 704-600-5424 x2103 |
| | Address 4402-G Stuart Andrew Boulevard Charlotte, NC 28217 | Email pstutts@sbsite.com |

| | | | | |
|--------------------------------------|--|--|----------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision None | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount | Date Paid |
| | Front Setback 20' from ROW | Center Line Setback | Rear Setback 10' | CUP/Variance/COA |
| | Side Setback 10' | Side Setback 10' | Flood Zone | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: [Signature] Date: 6/20/18 M2 | | | |

| | | | |
|------------------------|--|------------|-----------------------------|
| CONTRACTOR INFORMATION | Contractor SBA Communications Corporation | | Phone 704-527-0003 x2103 |
| | Address 4402-G Stuart Andrew Boulevard | | Email pstutts@sbsite.com |
| | Contractor License Number 2705143663 | Type GC | Expiration 3/31/2020 |

| | | | | | |
|---------------------|---|---|--------------------|---------------|---|
| DESCRIPTION OF WORK | Scope of Work: Remove and Install Antennas and Remote Radio Units to Existing Cell Tower | | | | |
| | Proposed Use | | Current Use | | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |
| | <input type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms | # of Bedrooms | # of floors |
| | Finished Sq. Ft. | | Unfinished Sq. Ft. | | Total Sq. Ft. |

| | | |
|--|------------------|--|
| Building Only - Excludes All Trades Permits | | Application Fee \$ 56.25 State Levy Fee \$ 1.13 Septic/Well Fee \$ _____ Zoning Fee \$ 50.00 RLD \$ _____ SWP \$ _____ Total \$ 107.38 |
| Value of Work | \$7,500 | |
| 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 | |
| [Signature] | 6/08/2018 | |

[Signature] 6-27-18 Approved



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: 6-27-18
 Permit Number: BP-2018-00503
 GPIN/Tax Map: 7733-26-3997 / 67-11-C-30
 Issued: 6-27-18

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 survey 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>S DAHLGREN RD</u> | |
| | Owner <u>JIM BARTLEY</u> | Phone # <u>334-4381</u> |
| | Address | Email <u>JBBS3@OUTLOOK.COM</u> |
| APPLICANT INFORMATION | Applicant/Contact <u>SAME</u> | |
| | Address | Phone # 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>SELF-OWNER</u> | | Phone |
| | Address | | Email |
| | Contractor License Number | Type | Expiration |

| | | | | | |
|---------------------|--|--|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <u>CONSTRUCT ROOF OVER NEW PORCH</u> <u>12x30'</u> | | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | | |
| | <input type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms | # of Bedrooms | # of floors |
| | Finished Sq. Ft. | Unfinished Sq. Ft. <u>360</u> | Total Sq. Ft. <u>360</u> | | |

| | | | |
|---|---------------|-----------------|------------------|
| Building Only - Excludes All Trades Permits | | Application Fee | \$ _____ |
| Value of Work | <u>15,000</u> | State Levy 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 <u>[Signature]</u> Date <u>6/22/18</u> | | Septic/Wall Fee | \$ _____ |
| | | Zoning Fee | \$ _____ |
| | | RLD | \$ _____ |
| | | SWP | \$ _____ |
| | | Total | \$ <u>181.09</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: 6-25-18
Permit Number: PD-2018-504
GPIN/Tax Map: 6767-99-4357 / 43-120-31
Issued: 6-27-18

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 survey 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: 2350 Fairgrounds Rd
Owner: Randy Woodson
Address: [blank]
Phone #: [blank]
Email: [blank]

APPLICANT INFORMATION
Applicant/Contact: Thomas Johnson
Address: 1190 Quail Run Rd Powhatan Va
Phone #: 804-513-1382
Email: Thomas Johnson Enterprises @ yd.

| | | | | |
|--------------------------------------|--|---------------------|---------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision | Street | Amount | Date/Price |
| | Front Setback | Center Line Setback | Rear Setback | Height/Height/GO |
| | Side Setback | Side Setback | Height/Zoning | |
| | APPROVED <input type="checkbox"/> REJECTED <input checked="" type="checkbox"/> COMMENTS: [blank] | | | |

CONTRACTOR INFORMATION
Contractor: Thomas Johnson Enterprises
Address: 1190 Quail Run Rd Powhatan Va 23135
Phone: 804 513-1382
Email: [blank]
Contractor License Number: 2705120874
Type: CBC RBC
Expiration: 3-31-2020

DESCRIPTION OF WORK
Scope of Work: Fire Sub. Rebuild Interior walls
Proposed Use: [blank] Current Use: [blank] Environmental Impacts (stream crossing, wetlands, amt land disturbed): [blank]
SEWER: Public/Private WATER: Public/Private
of Bathrooms: [blank] # of Bedrooms: [blank] # of floors: [blank]
Finished Sq. Ft.: [blank] Unfinished Sq. Ft.: [blank] Total Sq. Ft.: [blank]

Building Only - Excludes All Trades Permits
Value of Work: 35,000

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: 6-25-18

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

Application Date: 3.7.2018
 Application Accepted: BP-2018-001167
 Old Map Number: 7715-46-4155/58.48.8.62.0
 (GRIN) Issued: 3.13.18

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 842 Prestburg 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 | Acresage | Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>Kinloch Sec. 8</u> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: — | Date Paid: — |
| | 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> | C O A | Flood Zone — |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Front Setback, Survey locate</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 Taylor Date 3/8/18

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 <u>Revised 6-25-18</u> <u>to include 393 sq ft of finished space to garage room</u> | | | |
| | SEWER Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> | WATER Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> | # of Bathrooms 3.5 | |
| | # of Floors 2 | Total Sq. Ft. <u>4100</u> <u>437</u> | Finished Sq. Ft. 3754 + <u>393</u> | # of Bedrooms 3 |

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

| | | | |
|-----------------------------|-------------|----------------------|-------------------|
| VALUE OF WORK | <u>4147</u> | Application Fee | \$ <u>1384.50</u> |
| Building | 305,000.00 | Zoning Fee | \$ <u>50</u> |
| Excludes All Trades/Permits | | Septic/Well Fee | \$ |
| | | State Levy Fee | \$ <u>27.109</u> |
| | | NET Total | \$ <u>1462.19</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 1800 Sandy Hook Rd
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Application Date: 2-8-18
 Permit Number: BP-2018-00087
 GPIN/Tax Map: 7727-58-9124/48-15-0-2-0
 Issued: 6/26/18

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>2300 Commerce Center Dr. Rockville, VA. 23146</u> | |
| | Owner <u>Rockville Commerce Center, LLC</u> | Phone # <u>804-784-6300</u> |
| | Address <u>515 Stone Mill Dr. Manakin-Sabot, VA. 23103</u> | Email <u>Blhompson@luckcompanies.com</u> |

| | | |
|-----------------------|--|--|
| APPLICANT INFORMATION | Applicant/Contact <u>Mike Erickson - Primax Properties, LLC</u> | Phone # <u>980-938-5471</u> |
| | Address <u>1100 E. Morehead St. Charlotte, NC. 28204</u> | Email <u>merickson@primaxproperties.com</u> |

| | | | | |
|--------------------------------------|--|--|----------------------------|---------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>Rockville Commerce Center</u> | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount _____ | Date Paid _____ |
| | Front Setback <u>20' from ROW</u> | Control Line Setback <u>45'</u> | Rear Setback <u>10'</u> | CUP/Variance/COA _____ |
| | Side Setback <u>10'</u> | Side Setback <u>75' from ROW / 623'</u> | Flood Zone _____ | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> | COMMENTS: <u>_____</u> | | |

Planning & Zoning Officer: [Signature] Date: 6/26/18 M2

| | | |
|------------------------|---|------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>TBD W.R. Newman & Associates, Inc.</u> | Phone <u>615-933-7590</u> |
| | Address <u>2854 Logan Street Nashville, TN 37211</u> | |
| | Contractor License Number <u>2705027099</u> | Type <u>CBC RBC</u> |

| | | | | |
|---------------------|--|--|---|-----------------------------|
| DESCRIPTION OF WORK | Scope of Work: <u>New construction of a 19,223 sq.ft. retail store for Tractor Supply, per drawings by C.L. Helt, project #17187</u> | | | |
| | Proposed Use <u>mercantile</u> | Current Use <u>none</u> | Existing Buildings on Property <u>none</u> | # of Floors <u>1</u> |
| | SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/> | WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/> | # of Bathrooms <u>(2) toilet rooms</u> | # of Bedrooms <u>N/A</u> |
| | Finished Sq. Ft. <u>19,223</u> | Unfinished Sq. Ft. _____ | Total Sq. Ft. <u>19,223</u> | |

Building Only - Excludes All Trades Permits

| | |
|---------------|---|
| Value of Work | <u>\$800,000.00</u> <u>1,076,488.00</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: 2/5/18

| | |
|-----------------|-------------------|
| Application Fee | \$ <u>8073.00</u> |
| State Levy Fee | \$ <u>166.47</u> |
| Septic/Well Fee | \$ _____ |
| Zoning Fee | \$ <u>100</u> |
| RLD | \$ _____ |
| SWP | \$ _____ |
| Total | \$ <u>8335.13</u> |



BUILDING PERMIT APPLICATION

Application Date: 6/18/18

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

Permit Number: BP-2018-00481

CPIN/Tax Map: 7715-04-3635/57-1-0-4A2

Issued: 6-26-18

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 1051 Manakin Road, Manakin-Sabot, VA 23103 | |
| | Owner Aaron & Becky Hartman | Phone # 804-539-1018 |
| | Address 1051 Manakin Road, Manakin-Sabot, VA 23103 | Email hartmanan@gmail.com |

| | | |
|-----------------------|---|---|
| APPLICANT INFORMATION | Applicant/Contact Ultimate Pools / Steve Jowers | Phone # 804-479-4706 |
| | Address 2175 Lanier Lane, Rockville, VA 23146 | Email steve@ultimatepools.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'</u> | Rear Setback <u>35' from Basement</u> | CUP/Variance/COA |
| | Side Setback <u>35' from ROW on Rt. 75' from ROW on Lt.</u> | City Setback | Flood Zone | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>6/20/18</u> A2 | | | |

| | | |
|------------------------|---|------------------------------|
| CONTRACTOR INFORMATION | Contractor Ultimate Pools | Phone 804-749-4706 |
| | Address 2175 Lanier Lane, Rockville, VA 23146 | |
| | Contractor License Number 2705026339 | Type CBC RBC RFC |

| | | | | |
|---------------------|---|--|--------------------------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <u>gunite</u> In-Ground 16' x 32' Rectangle pool, 3' to 6' deep with AUTO COVER | | | |
| | Proposed Use | Current Use | Existing Buildings on Property | |
| | SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms | # of Floors |
| | Finished Sq. Ft. | Unfinished Sq. Ft. | Total Sq. Ft. 512 | |

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 TJ Date 6/15/18

| | |
|-----------------|------------------|
| Application Fee | \$ <u>141.00</u> |
| State Levy Fee | \$ <u>2.94</u> |
| Septic/Well Fee | \$ |
| Zoning Fee | \$ <u>25.00</u> |
| RLD | \$ |
| SWP | \$ |
| Total | \$ <u>174.94</u> |



BUILDING PERMIT APPLICATION

Application Date: 6/8/18
 Permit Number: BP-2018-00463
 GPIN/Tax Map: 717-05-6242/46-3A-0-1-0
 Issued: 6/26/18

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 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 survey 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: 458 MASSIE'S LN MANAKIN SABOT, VA 23103
 Owner: RUOY DESANTI Phone #: 631-872-6375
 Address: 458 MASSIE'S LN MANAKIN SABOT, VA 23103 Email:

APPLICANT INFORMATION
 Applicant/Contact: LEGACY HOMES LLC / TRAVIS W. JOHNSON Phone #: 804-564-9097
 Address: 207 ECHO MEADOWS RD ROCKVILLE, VA 23146 Email: LEGACYHOMES19@AOL.COM

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Massie Bend Proffer: Yes No Amount: — Date Paid: —
 Front Setback: 40' from POW Center Line Setback: 5' Rear Setback: 5' CUP/Variance/COA: —
 Side Setback: 5' Side Setback: 5' Flood Zone: X
 APPROVED REJECTED COMMENTS: * Requires affidavit for use.
 Planning & Zoning Officer: David Floyd Date: 6/15/18 R1

CONTRACTOR INFORMATION
 Contractor: LEGACY HOMES LLC Phone: 804-564-9097
 Address: 207 ECHO MEADOWS RD ROCKVILLE, VA 23146
 Contractor License Number: 2705052698 Type: CLASS A Expiration: 10-31-2019

DESCRIPTION OF WORK
 Scope of Work: POOL HOUSE
 Proposed Use: SEWER Public/Private Current Use: WATER Public/Private Environmental Impacts (stream crossing, wetlands, amt land disturbed): NONE 5000 SQ FT. 3'
 # of Bathrooms: 1 # of Bedrooms: 1 # of floors: 1
 Finished Sq. Ft.: 500 SQ FT Unfinished Sq. Ft.: 250 SQ FT Total Sq. Ft.: 750 SQ FT

Building Only - Excludes All Trades Permits

| | | | |
|---------------|-------------|-----------------|----------|
| Value of Work | \$50,000.00 | Application Fee | \$237- |
| | | State Levy Fee | \$4.74 |
| | | Septic/Well Fee | \$ |
| | | Zoning Fee | 25- |
| | | RLD | \$ |
| | | SWP | \$ |
| | | Total | \$266.74 |

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

Signature of Applicant: [Signature] Date: 6-8-18

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: DARVIN E. SATTERWHITE Telephone: 804-556-4012

Mailing Address: 3013 RIVER RD. W. GOSHALLAND, VA 23063

OWNER'S STATEMENT

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

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 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3 Section 36-99.7

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
- Zoning all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL Louis Beck DATE 8/26/2018

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: 5/31/18 *Rec 6/12/18*

 Permit Number: RP-2018-00474

 GPIN/Tax Map: 7725-62-2879/59-33-26-0

 Issued: 6-22-18

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 survey 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>12720 Tuckahoe Creek Court, Henrico, VA 23238</u> | |
| | Owner <u>Hospital Corporation of America</u> | Phone # <u>804-289-4828</u> |
| | Address <u>2621 Grove Avenue, Richmond, VA 23220</u> | Email <u>Thomas.Ladd@hcahealthcare.com</u> |

| | | |
|-----------------------|--|--|
| APPLICANT INFORMATION | Applicant/Contact <u>Signs Unlimited, Inc. a division of Worth Higgins & Assoc. Inc./Karen Noakes</u> | Phone # <u>804-353-0607</u> |
| | Address <u>1808 MacTavish Avenue, Richmond, VA 23230</u> | Email <u>knoakes@signsunlimited.net</u> |

| | | | | |
|--------------------------------------|--|--|-----------------------|---------------------------|
| 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>50' from POB/288</u> | Center Line Setback _____ | Rear Setback _____ | CUP/Variance/COA _____ |
| | Side Setback _____ | Side Setback _____ | Flood Zone _____ | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Floyd</u> Date <u>6/13/18</u> <i>MI</i> | | | |

| | | |
|------------------------|---|-----------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>Signs Unlimited, Inc.</u> | Phone <u>804-353-0607</u> |
| | Address <u>1808 MacTavish Avenue, Richmond, VA 23230</u> | <u>knoakes@signsunlimited.net</u> |
| | Contractor License Number <u>2701031809</u> | Type <u>Class A</u> |

| | | | | | | |
|---------------------|---|--|---|---------------|-------------|--|
| DESCRIPTION OF WORK | Scope of Work: <u>Build a block structure, footer, eifs panels with caps and stonework around an existing freestanding pole sign.</u> | | | | | |
| | Proposed Use Emergency Care | Current Use Emergency Care | Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u> | | | |
| | <input type="checkbox"/> SEWER Public/Private | <input type="checkbox"/> WATER Public/Private | # of Bathrooms | # of Bedrooms | # of floors | |
| | Finished Sq. Ft. | Unfinished Sq. Ft. | Total Sq. Ft. | | | |

| | | |
|--|---------------------|---|
| Building Only - Excludes All Trades Permits | | Application Fee <u>\$435-</u> State Levy Fee <u>\$8.70</u> Septic/Well Fee \$ Zoning Fee <u>\$50-</u> RLD \$ SWP \$ Total <u>\$493.70</u> |
| Value of Work | <u>\$58k</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>Karen Noakes</u> | Date <u>5/31/18</u> |

Issued 6-20-18



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: 6/20/18 Application No.: AP-2018-00490 Fee: \$25.00 *
Zoning Approval: Yes 1 Daniel Floyd No: _____ Date: 6/20/18

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: Munirah Chidnoss
Address: 1930 HASKIN RD
GOOCHLAND VA 23063
E-mail: CALMCHIDNOSS@COMCAST.NET

Telephone: _____
Cell phone: 804-241-1023
FAX: 804-741-3924

Name of Applicant: _____
Address: _____
E-mail: _____

Telephone: _____
Cell phone: _____
FAX: _____

Property Information

Street Address: 1930 HASKINS RD.
GPIN Number: 6777-19-9433
Existing Use: Residential

Zoning: A1
Acreage: 14.86

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): 200 2. Value of Building: 3200
3. Written Description of Proposed Physical Improvements:



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: 6/5/2018
Permit Number: BP-2018-00480
GPIN/Tax Map: 7726-57-8112/59-1-0-4-0
Issued: 6/20/18

Residential Commercial
Demolition

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 survey 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>12688 Broad Street Road</u> | |
| | Owner <u>288 & Broad Street LLC</u> | Phone # <u>(804) 359-3575</u> |
| | Address <u>5809 York Road, Richmond, VA 23226</u> | Email |

| | | |
|-----------------------|---|---|
| APPLICANT INFORMATION | Applicant/Contact <u>Sandy McMullen (S.B. Cox, Inc.)</u> | Phone # <u>(804) 222-3500</u> |
| | Address <u>P.O. Box 7737, Richmond, VA 23231</u> | Email <u>s.mcmullen@sbcocxdemolition.com</u> |

| | | | | |
|--------------------------------------|---|---|--------------|------------------|
| 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>S.B. Cox, Inc.</u> | Phone <u>(804) 222-3500</u> |
| | Address <u>P.O. Box 7737, Richmond, VA 23231</u> | Email <u>s.mcmullen@sbcocxdemolition.com</u> |
| | Contractor License Number <u>Class A - 2701010568</u> | Type <u>Class A</u> |

| | | | | | |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <u>Demolish existing house, garage & small sheds 623</u> <u>Removal of concrete slabs & foundations debris to landfill</u> | | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | | |
| | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms | # of Bedrooms | # of floors |
| | Finished Sq. Ft. | Unfinished Sq. Ft. | Total Sq. Ft. <u>1372 S.F.</u> | | |

| | | | |
|---|--------------------|-----------------|-----------------|
| Building Only - Excludes All Trades Permits | | Application Fee | \$ <u>75.00</u> |
| Value of Work | <u>\$13,800.00</u> | State Levy Fee | \$ <u>1.50</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>Sandy McMullen</u> date <u>6/5/18</u> | | Septic/Well Fee | \$ _____ |
| | | Zoning Fee | \$ _____ |
| | | RLD | \$ _____ |
| | | SWP | \$ _____ |
| | | Total | \$ <u>76.50</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: 5-31-18
 Permit Number: BP 2018-00432
 GPIN/Tax Map: 492-39-8810 / 71-0-10-0
 Issued: 6-14-18
 This application is an 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 survey 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>4825 Old Fredericksburg Rd Mineral VA 23117</u> | Phone # <u>804-591-9385</u> |
| | Owner <u>Steve & Linda Parker</u> | Email <u>greg.s.parrish@gmail.com</u> |
| APPLICANT INFORMATION | Address <u>1344 Waltans Store Rd Louisa VA 23093</u> | Phone # |
| | Applicant/Contact <u>Same As Above</u> | Email |

| | | | | |
|--------------------------------------|--|--|---------------------------|---------------------------|
| 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>5'</u> | CUP/Variance/COA _____ |
| | Side Setback <u>35' from Road easement</u> | Side Setback <u>5'</u> | Flood Zone _____ | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Floyd</u> Date <u>5/31/18</u> <u>AI</u> | Planning & Zoning Officer | | |

| | | |
|------------------------|----------------------------|-------|
| CONTRACTOR INFORMATION | Contractor <u>Owner</u> | Phone |
| | Address | Email |
| | Contractor License Number | Type |

| | | | | | |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: <u>Build a Pole Barn 32x40 -> Storage</u> | | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | | |
| | SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input type="checkbox"/> | # of Bathrooms | # of Bedrooms | # of floors |
| | Finished Sq. Ft. | Unfinished Sq. Ft. <u>1280</u> | Total Sq. Ft. <u>1280</u> | | |

Building Only - Excludes All Trades Permits

| | |
|-------------------------------------|----------------------------------|
| Value of Work <u>\$35,200.00</u> | Application Fee \$ <u>170.40</u> |
| | State Levy Fee \$ <u>341</u> |
| | Septic/Well Fee \$ _____ |
| | Zoning Fee \$ <u>25.00</u> |
| | RLD \$ _____ |
| | SWP \$ _____ |
| | Total \$ <u>4198.91</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: Linda D. Parker Date: 5-27-18
Steven A. Parker



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: 6/13/18
 Permit Number: BP-2018-00475
 GPIN/Tax Map: 6019-11-9916/26-1-0-57-C
 Issued: 6/19/18

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 survey 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>5260 RIVER ROAD WEST</u> | |
| | Owner <u>GOOCHLAND SUPERMARKET</u> | Phone # <u>804-201-3636</u> |
| | Address — | Email <u>goochlandSUPERMARKET@gmail.com</u> |

| | | |
|-----------------------|---|--|
| APPLICANT INFORMATION | Applicant/Contact <u>ARVIND C. PATIL</u> | |
| | Address <u>5260 RIVER ROAD WEST</u> | Email <u>arpatil11691@yahoo.com</u> |

| | | | | |
|--------------------------------------|--|--|---------------------------|------------------|
| 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>5'</u> | Center Line Setback | Rear Setback <u>5'</u> | CUP/Variance/COA |
| | Side Setback <u>5'</u> | Side Setback | Flood Zone | |
| | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Survey locate sign location.</u> | | | |
| | Planning & Zoning Officer: <u>David Boyd</u> Date: <u>6/13/18</u> B1 | | | |

| | | | |
|------------------------|--|------------------------|------------------------------|
| CONTRACTOR INFORMATION | Contractor <u>TOTAL IMAGE SOLUTIONS</u> | | Phone <u>434-774-6439</u> |
| | Address <u>412 Benton St, South Hill VA 23970</u> | | Email — |
| | Contractor License Number <u>2705141592</u> | Type <u>CLASS C</u> | Expiration <u>6-30-19</u> |

| | | | | |
|---------------------|--|--|---|--------------------|
| DESCRIPTION OF WORK | Scope of Work: <u>INSTALL LED CITYGO SIGN / CANARY CITYGO WRAP.</u> | | | |
| | Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | |
| | SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms — | # of Bedrooms — |
| | # of floors — | Finished Sq. Ft. <u>UNISA</u> | Unfinished Sq. Ft. — | Total Sq. Ft. — |

| | | |
|--|--|---|
| Building Only - Excludes All Trades Permits | | Application Fee \$ <u>48.37</u> State Levy Fee \$ <u>.97</u> Septic/Well Fee \$ <u>—</u> Zoning Fee \$ <u>50-</u> RLD \$ <u>—</u> SWP \$ <u>—</u> Total \$ <u>99.34</u> |
| Value of Work | <u>\$ 6450.00</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>6-11-18</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: 6-14-2018

Permit Number: BP-2018-00483

GPIN/Tax Map: 7733-15-9315/67-10-0-16-0

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.

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey 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: 30 Lower Tuckahoe Dr. West Rich.

Owner: John & Julia Wheeler Phone #: 412-352-0471
804-221-5203

Address: SAME Email: Donald68777@gmail.com

APPLICANT INFORMATION

Applicant/Contact: First Call Construction Services Phone #: 804-221-5203

Address: 2124 Whites Lane Martins 23102 Email: _____

TO BE COMPLETED BY ZONING DEPARTMENT

| | | | |
|------------------------------------|--|--------------------------|-------------------------|
| Subdivision: <u>Lower Tuckahoe</u> | Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: _____ | Date Paid: _____ |
| Front Setback: <u>40' From ROW</u> | Center Line Setback: _____ | Rear Setback: <u>35'</u> | CUP/Variance/COA: _____ |
| Side Setback: <u>15'</u> | Side Setback: <u>15'</u> | Flood Zone: _____ | _____ |

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David Floyd Date: 6/15/18 R1

CONTRACTOR INFORMATION

Contractor: First Call Construction Services Phone: 804-221-5203

Address: 2124 Whites Lane Martins 23102 Email: Donald68777@gmail.com

Contractor License Number: 2705138801 Type: CBC CIC HIC RBC Expiration: 9-30-2018

DESCRIPTION OF WORK

Scope of Work: New Deck - 16x20 AND 8'x9' Storage Area
New Screen Porch 16x20

| | | | | |
|--|--|---|----------------------|--------------------------|
| Proposed Use | Current Use | Environmental Impacts (stream crossing, wetlands, amt land disturbed) | | |
| <input type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms: _____ | # of Bedrooms: _____ | # of floors: _____ |
| Finished Sq. Ft. | | Unfinished Sq. Ft. <u>620</u> | | Total Sq. Ft. <u>620</u> |

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: 6-14-2018

| | |
|-----------------|------------------|
| Application Fee | \$ <u>124.50</u> |
| State Levy Fee | \$ <u>249</u> |
| Septic/Well Fee | \$ _____ |
| Zoning Fee | \$ <u>25-</u> |
| RLD | \$ _____ |
| SWP | \$ _____ |
| Total | \$ <u>51.99</u> |