



# BUILDING PERMIT APPLICATION

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

Application Date: 10-15-2018  
 Permit Number: BP-2018-00871  
 GPIN/Tax Map: 02500009 0729-84-8347/28-9-0-5-0  
 Issued: 10-22-2018

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>2574 CHAPEL HILL Rd</u>	
	Owner <u>Guy M. &amp; CARDYNT. Phillips</u>	Phone # <u>804-357-5418</u> <u>804-357-5408</u>
	Address <u>PO Box 753, Goochland VA, 23063</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Guy M. Phillips</u>	Phone # <u>804-357-5408</u>
	Address <u>2574 CHAPEL HILL Rd.</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100' @ 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	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer: Anda Barks Date: 10-16-2018

CONTRACTOR INFORMATION	Contractor <u>N/A -&gt; OWNER</u>	Phone
	Address	Email
	Contractor License Number	Type

8.4  
5.4

DESCRIPTION OF WORK	Scope of Work: <u>ADD A HANDICAP RAMP + Landings</u> <u>8x4'8-ramp</u> <u>4'8x5'3 landing</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>64</u>	Total Sq. Ft. <u>64</u>		

**Building Only - Excludes All Trades Permits**

Value of Work	<u>800 - \$1760.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Guy M. Phillipse Date: 10-15-18

Application Fee	\$ <u>30-</u>
State Levy Fee	\$ <u>60</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25-</u>
RLD	\$
SWP	\$
Total	\$ <u>55.60</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 10-12-18

Permit Number: BP-2018-00865

GPIN/Tax Map: 6057-91-6324/42-40-0-14-0

Issued: 10-22-2018

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>3003 SWANN'S FAWN CRESENT, GOOCHLAND VA</u>	Phone # <u>804-564-9097</u>
	Owner <u>SWANN'S FAWN LLC</u>	Email <u>LEGACYHOMES09@AOL.COM</u>
	Address <u><del>3003 SWANN'S FAWN CRESENT, GOOCHLAND, VA</del></u>	

APPLICANT INFORMATION	Applicant/Contact <u>TRAVIS W. JOHNSON</u> <u>SAME</u>	Phone # <u>804-564-9097</u>
	Address <u>207 ECHO MEADOWS RD</u>	Email <u>LEGACYHOMES09@AOL.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' 0" 066</u>	Center Line Setback <u>ROW</u>	Rear Setback <u>25</u>	CUP/Variance/COA <u>R-3</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>C</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer Anita Barnes Date 10-17-2018

CONTRACTOR INFORMATION	Contractor <u>LEGACY HOMES LLC</u>	Phone <u>804-564-9097</u>
	Address <u>207 ECHO MEADOWS RD. ROCKVILLE, VA 23146</u>	Email <u>LEGACYHOMES09@AOL.COM</u>
	Contractor License Number <u>2705052698</u>	Type <u>CLASS A</u>

DESCRIPTION OF WORK	Scope of Work: <u>NEW 22'x22' detached GARAGE</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
	Finished Sq. Ft.		Unfinished Sq. Ft. <u>484</u>	Total Sq. Ft. <u>484</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>\$15,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 10-2-18

Application Fee	\$ <u>79.50</u>
State Levy Fee	\$ <u>1.59</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25-</u>
RLD	\$
SWP	\$
Total	\$ <u>106.09</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: RICHMOND SETTLEMENTS LLC Telephone: 804-477-8858

Mailing Address: 9030 STONY POINT PKWY STE 235  
RICHMOND, VA 23234

**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 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  
Zoning all other structures \$ 25.00

**OFFICE USE ONLY**

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

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

APPROVAL Laura Beck DATE 10/22/2018  
Code Official

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

Application Date: 10/17/18  
 Application Accepted: BP-2018-00883  
 GPIN: 67107-12-7723/42-1-0-103-A  
 Issued: 10.22.2018

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

OWNER INFORMATION	Site Address <u>2938 Bldg C RIVER RD. WEST</u>		District		
	Owner <u>COUNTY OF GOOCHLAND</u>		Phone # <u>298-4427</u>		
	Address <u>1800 SANDY HOOK RD GOOCHLAND VA 23063</u>				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial) _____	Acreage _____	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
	Side Setback	Side Setback	C O A	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: Antia Barnes Date: 10-18-2018

Applicant/Contact: LEIGH GORDON Phone: 556-8180

Email: ON FILE

CONTRACTOR INFORMATION	Contractor <u>GORDON BROS. CONSTRUCTION</u>		Phone <u>556-8180</u>	
	Address <u>2945 RIVER RD. WEST GOOCHLAND VA 23063</u>			
	Contractor License Number <u>2705144137</u>	Type <u>A</u>	Expiration <u>12/31/19</u>	

Description of Work	Scope of Work: <u>REMODEL BREAK ROOM &amp; CONVERT TO EVIDENCE ROOM</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	_____	_____	_____	_____	_____

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

VALUE OF WORK	
Building	<u>\$ 9685.00</u>
Excludes All Trades Permits	

*fees waived, county project*

Application Fee	\$ _____
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ _____
RLD	\$ _____

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

\* Leigh Gordon



# BUILDING PERMIT APPLICATION

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

Application Date: 10-12-2018

Permit Number: BP-2018-00869

GPIN/Tax Map: 6968-90-6631/43-15-0-3-0

Issued: 10-17-2018

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>2337 Twin Creeks Lane, Maidens, VA 23102</u>	
	Owner <u>Patricia G. Sweney</u>	Phone # <u>H-804-556-6840</u>
	Address <u>2337 Twin Creeks Ln, Maidens, VA</u>	Email <u>Patricia.Sweney@churchdwight.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Patricia G. Sweney</u>	
	Address	Phone # <u>C-804-363-9121</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>80' @ Row</u>	Center Line Setback	Rear Setback <u>35</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: <u>cannot be used as a living area</u>			
Planning & Zoning Officer <u>[Signature]</u>		Date <u>10-16-2018</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>279 sq. ft. entertainment room was added to existing garage in 2009</u>			
	Proposed Use	Current Use <u>Storage</u>	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 <u>one</u>	# of Bedrooms <u>5</u>
	# of floors <u>one</u>	Finished Sq. Ft. <u>279</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>279</u>

**Building Only - Excludes All Trades Permits**

Value of Work	<del>\$7,850</del> <u>\$15,345.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Patricia Sweney Date 10-12-2018

Application Fee	\$ <u>81.05</u>
State Levy Fee	\$ <u>1.62</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25-</u>
RLD	\$ _____
SWP	\$ _____
<b>Total</b>	\$ <u>107.67</u>





# BUILDING PERMIT APPLICATION

Application Date: 10.3.2018  
 Permit Number: BP-2018-00855  
 GPIN/Tax Map: 7738-11-5458 / 48-19-0-10-0  
 Issued: 10.15.18

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 <b>7287 ELLINGHAM COURT, GLEN ALLEN, VA 23059</b>		Phone # <b>804-239-2839</b>
	Owner <b>SHEILA WIGGINS</b>		Email
	Address <b>SAME</b>		
APPLICANT INFORMATION	Applicant/Contact <b>TIM SIDDONS</b>		Phone # <b>804-285-4239</b>
	Address <b>6408 MALLORY DRIVE, HENRICO, VA 23226</b>		Email <b>ADMIN@ADDADECK.COM</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parkside Village</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>30' from pavement</u>	Center Line Setback —	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>10/16/18</u> <span style="float: right;">RPUD</span>			

CONTRACTOR INFORMATION	Contractor <b>ADD A DECK, INC</b>		Phone <b>804-285-4239</b>
	Address <b>6408 MALLORY DRIVE HENRICO, VA 23226</b>		<b>ADMIN@ADDADECK.COM</b>
	Contractor License Number <b>2701-033201A</b>	Type <b>A</b>	Expiration <b>11/30/2018</b>

**Scope of Work: BUILD A SCREENED PORCH ON AN EXISTING DECK.**

Proposed Use <b>PORCH</b>	Current Use <b>DECK</b>	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.		
	<b>192</b>	<b>192</b>		

**Building Only - Excludes All Trades Permits**

Value of Work	<b>\$14,000.00</b>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 10/1/18

Application Fee	\$ <u>15.00</u>
State Levy Fee	\$ <u>1.50</u>
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ <u>16.50</u>

Per Ashley 16.50



# BUILDING PERMIT APPLICATION

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

Application Date: 10.3.2018  
Permit Number: BP-2018-00854  
GPIN/Tax Map: 7716-95-5328/58-46-0-4-0  
Issued: 10.15.18

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 <b>1676 CENTERVILLE PARKE LANE, MANAKIN SABOT, VA 23103</b>	Phone # <b>804-708-0169</b>
	Owner <b>MR &amp; MRS HAROLD COSTLEY</b>	Email
	Address <b>SAME</b>	
APPLICANT INFORMATION	Applicant/Contact <b>TIM SIDDONS</b>	Phone # <b>804-285-4239</b>
	Address <b>6408 MALLORY DRIVE, HENRICO, VA 23226</b>	Email <b>ADMIN@ADDADECK.COM</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: <u>Parke at Centerville</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from driveway</u>	Center Line Setback	Rear Setback <u>50' b/s</u>	CUP/Variance/COA
	Side Setback <u>20' b/s</u>	Side Setback <u>20' b/s</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Survey locate side setback</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>10/4/18</u> <u>KPUD</u>			

CONTRACTOR INFORMATION	Contractor <b>ADD A DECK, INC</b>	Phone <b>804-285-4239</b>
	Address <b>6408 MALLORY DRIVE HENRICO, VA 23226</b>	ADMIN@ADDADECK.COM
	Contractor License Number <b>2701-033201A</b>	Type <b>A</b>

DESCRIPTION OF WORK	Scope of Work: <b>BUILD A SCREENED PORCH ON AN EXISTING ENLARGED DECK.</b> <b>ADDITIONAL SQ FT 2' x 11'3" = 22.5'</b>					
	Proposed Use <b>PORCH</b>	Current Use <b>DECK</b>	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.	157	Unfinished Sq. Ft.	157	Total Sq. Ft.	

**Building Only - Excludes All Trades Permits**

Value of Work	<b>\$18,000.00</b>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 10/1/18

Application Fee	\$ <u>93-</u>
State Levy Fee	\$ <u>186</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25-</u>
RLD	\$
SWP	\$
Total	\$ <u>1298</u>

Per Ashley 119.86



# BUILDING PERMIT APPLICATION

Application Date: 10/5/2018

Permit Number: BP-2018-00864

GPIN/Tax Map: 7707-84-2987 / 46-27-A-13-C

Issued: 10-12-18

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 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 2317 Wheatlands Drive		Phone # 804-814-2990
	Owner Heritage Contracting Services		Email bob@heritage-contracting.net
APPLICANT INFORMATION	Address 9759 Courthouse Road, Spotsylvania Va 22553		Phone # 804-559-4144
	Applicant/Contact Pamela Martin		Email pam@mrcva.com
Address PO Box 690, Mechanicsville, VA 23111			

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 Martin Roofing Company, LLC		Phone 804-559-4144
	Address PO Box 690, Mechanicsville, Va 23111		Email pam@mrcva.com
	Contractor License Number 2705149994	Type Class A	Expiration 6/30/2019

DESCRIPTION OF WORK	<b>Scope of Work:</b> Re-roofing residential house, replaced 5 sheets of the OSB decking board that was damaged, more than the 100 sq ft allowance per building code.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 2	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

**Building Only - Excludes All Trades Permits**

Value of Work	8,361.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *Pamela Martin* Date: 10/5/18

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



# BUILDING PERMIT APPLICATION

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

Application Date: 10-10-2018

Permit Number: BP-2018-00857

GPIN/Tax Map: 6801-44-1273/10-1-0-11-B

Issued: 10-12-2018

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 5764 Community House Rd.	
	Owner Jerry & Chris Hawk	Phone # 804-335-6070
	Address Same as above	Email

APPLICANT INFORMATION	Applicant/Contact Harvey Griffith Jr.	Phone # 801-598-3389
	Address 3791 Maidens Rd. Powhatan Va 23139	Email papgriffith@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 15' from RW	Center Line Setback 100'	Rear Setback 35'	CUP/Variance/GOA _____
	Side Setback 20'	Side Setback 20'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS	Planning & Zoning Officer: David Floyd Date: 10/10/18 #1		

CONTRACTOR INFORMATION	Contractor Griffith Enterprises LLC	Phone 801-598-3389
	Address 3791 Maidens Rd. Powhatan, Va 23139	
	Contractor License Number 2705139386	Type CBC-PLB-RBC

DESCRIPTION OF WORK	Scope of Work: 10x21 enlarge existing living room Addition 210' → Add storage room + new deck				
	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. 210'	Unfinished Sq. Ft. 90' Deck	Total Sq. Ft. 300		

Building Only - Excludes All Trades Permits		Application Fee	\$102.00
Value of Work	29000	State Levy Fee	\$2.04
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$25.00
		RLD	\$
		SWP	\$
		Total	\$129.04

Signature of Applicant: [Signature] Date: 10-9-18

Revised: 10-12-18 to include monument sign



# 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: 9/21/18

Permit Number: BP-2018-00813

GPIN/Tax Map: 7727-58-4225/48-15-02-1

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	2300 Commerce Center Drive		
	Owner	JFS Holdings LLC	Phone #	
APPLICANT INFORMATION	Address	1100 East Morehead Street, Charlotte, NC 28204	Email	
	Applicant/Contact	Jessica Sutherland	Phone #	
	Address	1908 Chamberlayne Ave	Email	permit@talley-sign.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	Rockville Commerce	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	—	—
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	20' from Ave	—	10'	—
	Side Setback	Side Setback	Flood Zone	
	10'	10'	—	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: Removed lights from monument sign		
	Planning & Zoning Officer	Date		
	David Taylor	10/9/18		

CONTRACTOR INFORMATION	Contractor	Phone	
	Talley Sign Company	804 649 0325	
	Address	Richmond, VA 23222	
	1908 Chamberlayne Ave		
	Contractor License Number	Type	Expiration
	2701025262A	Contractors	9/30/2020

DESCRIPTION OF WORK	Scope of Work: install one illuminated wall sign and one <del>monument sign</del> (illuminated via external flood lights)				
	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	\$ 35.00
Value of Work	4,575	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.		Septic/Well Fee	\$
		Zoning Fee	\$ 50.00
		RLD	\$
		SWP	\$
		Total	\$ 85.00
Signature of Applicant	Date		
J. Sutherland	9/21/18		



# 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

Residential  Commercial

Application Date: 7/12/2018

Permit Number: BP-2018-00551

GPIN/Tax Map: 6777-77-2005/43-40-C-14-0

Issued: 7-27-18

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 2119 Jockey Ridge Road		Phone # (804) 569-9745
	Owner Krickovic & Ziegler, LLC		Email mike@kandzbuilders.com
	Address PO Box 1510, Mechanicsville, VA 23116		
APPLICANT INFORMATION	Applicant/Contact Mike Krickovic		Phone # (804) 908-2253
	Address PO Box 1510, Mechanicsville, VA 23116		Email mike@kandzbuilders.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Breeze H.71	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$20,496.00	Date Paid Due
	Front Setback 40' from Row	Center Line Setback 65'	Rear Setback 25'	CUP/Variance/COA
	Side Setback 10'	Side Setback 10'	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Cash proffer is due before C.O. is issued. RP			
Planning & Zoning Officer: David Floyd Date: 7/16/18				

CONTRACTOR INFORMATION	Contractor Krickovic & Ziegler, LLC		Phone (804) 569-9745
	Address PO Box 1510, Mechanicsville, VA 23116		Email mike@kandzbuilders.com
	Contractor License Number 2705100072A	Type Class A	Expiration 11/30/18

DESCRIPTION OF WORK	Scope of Work: New single family home with partially finished basement and attached garage. Convert 220 sq ft of crawl space to unfinished space in basement revised 9-28-18				
	Proposed Use New Construction	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Area of disturbance 0.364 ac.		
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 4 Full - 2 1/2	# of Bedrooms 3	# of floors 2 + Basement
	Finished Sq. Ft. 5135	Unfinished Sq. Ft. 2565.00 + 220 = 2785	Total Sq. Ft. 7700 - 7920		

Building Only - Excludes All Trades Permits		Value of Work <del>479,000</del> \$545,487.50	Application Fee \$2906.70
			State Levy Fee 50.13
			Septic/Well Fee 40--
			Zoning Fee 50--
			RLD 100--
			SWP 200--
			Total \$2906.83

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

Signature of Applicant: *[Signature]* Date: 7/12/18

Revision fee: \$42.91

eliminate 1 bedroom & use as sewing room, house to remain 3 bedrooms



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: **10-3-2018**

Permit Number: **BP-2018-00846**

GPIN/Tax Map: **9677** Tms **29-1-0-50-B**  
**6748-59-**

Issued: **10-10-2018**

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 <b>Yvette McDermont Thomas</b>			Phone # <b>804 445 4633</b>
	Owner <b>3785 Grays lane</b>		Email	
APPLICANT INFORMATION	Address <b>Goochland Va 23063</b>			Phone # <b>804 512 6931</b>
	Applicant/Contact <b>Theodore T Jackson</b>		Email <b>JTJ5225@Comcast.net</b>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>None</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <b>—</b>	Date Paid <b>—</b>
	Front Setback <b>55' From Basement</b>	Center Line Setback	Rear Setback <b>35</b>	CUP/Variance/COA
	Side Setback <b>20'</b>	Side Setback <b>20'</b>	Flood Zone <b>X</b>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <b>* Survey locate from setbacks.</b>			
Planning & Zoning Officer <b>David Floyd</b> Date <b>10/4/18</b> <b>AI</b>				
CONTRACTOR INFORMATION	Contractor <b>Theodore T Jackson</b>			Phone <b>804 512 6931</b>
	Address <b>Jackson Shop Construction</b>			Email <b>JTJ5225@comcast.net</b>
	P.O. Box 1204 Goochland Va 23063			
Contractor License Number <b>2701016643</b>		Type <b>CBC RBC Class A</b>	Expiration <b>9-30-2019</b>	
DESCRIPTION OF WORK	Scope of Work: <b>24x24 Porch 4'10 x 18 closet</b>			
	<b>Addition -&gt; Bedroom, bathroom, sitting room</b>			
	Proposed Use <b>not dwelling</b>	Current Use <b>dwelling</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <b>3</b>	# of Bedrooms <b>3</b>
Finished Sq. Ft. <b>576</b>		Unfinished Sq. Ft. <b>Porch 87</b>		addition Total Sq. Ft. <b>576 Porch 87 <b>663</b></b>

**Building Only - Excludes All Trades Permits**

Value of Work	<b>\$ 52,000.00</b>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant **Theodore T. Jackson** Date **10/3/2018**

Application Fee	<b>246-</b>
State Levy Fee	<b>4.92</b>
Septic/Well Fee	<b>\$</b>
Zoning Fee	<b>25-</b>
RLD	<b>\$</b>
SWP	<b>\$</b>
Total	<b>275.92</b>



# 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: 9/25/2018  
Permit Number: BP-2018-00817  
GPIN/Tax Map: 7716-22-1427 / 58-21-050  
Issued: 10-10-18  
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: 11 QUAIL RUN ROAD  
Owner: J.T. + Kelli WELLS  
Address: 11 QUAIL RUN ROAD

**APPLICANT INFORMATION**  
Applicant/Contact: (THOMAS HICKS) TY WEST BUILDERS, LLC  
Address: 2168 PLAINVIEW CTR POWHATAN, VA 23139

**TO BE COMPLETED BY ZONING DEPARTMENT**  
Subdivision: BROAD RUN  
Proffer:  Yes  No  
Amount: ---  
Date Paid: ---  
Front Setback: 40' from road  
Center Line Setback: 65  
Rear Setback: 5'  
Side Setback: 5'  
Side Setback: 5'  
Flood Zone: ---  
CUP/Variance/COA: ---  
APPROVED  REJECTED  COMMENTS:  
Planning & Zoning Officer: [Signature] Date: 10/4/18 **R3**

**CONTRACTOR INFORMATION**  
Contractor: TY WEST BUILDERS, LLC 23139  
Address: 2168 PLAINVIEW CTR POWHATAN, VA  
Contractor License Number: 2705070570A Type: BLD Expiration: 8/20  
Phone: 804-598-9055  
Email: ---

**DESCRIPTION OF WORK**  
Scope of Work: 38x28 DE-TACHED 3 CAR GARAGE 2 STORY, ELECTRICAL, UNFINISHED 2nd floor storage  
Proposed Use: --- Current Use: --- Environmental Impacts (stream crossing, wetlands, amt land disturbed): ---  
SEWER:  Public/Private   
WATER:  Public/Private   
# of Bathrooms: N/A # of Bedrooms: N/A # of floors: 2  
Finished Sq. Ft.: --- Unfinished Sq. Ft.: 1850 Total Sq. Ft.: 1850

Building Only - Excludes All Trades Permits  
Value of Work: \$48,000 \$60,125  
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: 9/25/18  
Application Fee: \$ 282.56  
State Levy Fee: \$ 5.65  
Septic/Well Fee: \$ ---  
Zoning Fee: \$ 25.00  
RLD: \$ ---  
SWP: \$ ---  
Total: \$ 313.21



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 9-24-18  
 Permit Number: BP-2018-00808  
 GPIN/Tax Map: 0822-87-5544 / 61-0-38-0  
 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.

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: 4946 Three Chopt Road Nonesville, VA 23067  
 Owner: Charles Shannon & Sam Piazza  
 Address: SAME  
 Phone #: 804-9014467  
 Email: \_\_\_\_\_

**APPLICANT INFORMATION**  
 Applicant/Contact: NEIL INGRAM OR Trudy NITE  
 Address: 3351 SPEEK'S DRIVE SUITE 107 Middleburg, VA 23112  
 Phone #: 8049121196  
 Email: TNINGRAMTR@GMAIL.COM

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>None</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>75' from road</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: _____	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Floyd Date: 9/25/18 AI

**CONTRACTOR INFORMATION**  
 Contractor: PRO RENOVATION  
 Address: 3351 SPEEK'S DRIVE SUITE 107 Middleburg VA 23112  
 Phone: 804912-1196  
 Email: TNINGRAMTR@GMAIL.COM  
 Contractor License Number: 2705106203 Type: A Expiration: 2020-06-30

**DESCRIPTION OF WORK**  
 Scope of Work: ADD A 12' X 12' OFFICE & A 24' X 24' attached GARAGE

Proposed Use: <u>OFFICE / GARAGE</u>	Current Use: <u>NONE</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>NONE</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>3-0-</u>	# of Bedrooms: <u>0-</u>	# of floors: <u>1</u>
Finished Sq. Ft.: <u>144 #</u>	Unfinished Sq. Ft.: <u>576 #</u>	Total Sq. Ft.: <u>720 #</u>		

Building Only - Excludes All Trades Permits

Value of Work: <u>38,000</u>	Application Fee: \$ <u>183.00</u>
	State Levy Fee: \$ <u>3.66</u>
	Septic/Well Fee: \$ _____
	Zoning Fee: \$ <u>25.00</u>
	RLD: \$ _____
	SWP: \$ _____
	Total: \$ <u>211.66</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] Date: 9-24-18



# BUILDING PERMIT APPLICATION

Application Date: 10.3.2018  
 Permit Number: BP-2018-00848  
 GPIN/Tax Map: 7734-01-1241/WA-28-F-0-0  
 Issued: 10.9.2018  
 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 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>160 Buttonbush Richmond VA 23238</u>		Phone #
	Owner <u>Joyce &amp; Walker Smith</u>		Email
	Address <u>160 Buttonbush Richmond VA 23238</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Matt Helms</u>		Phone # <u>8046909605</u>
	Address <u>2508 Turkey Creek Rd Oilville VA 23129</u>		Email <u>matthelms@westviewcompanies.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Oak</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>30' from Pavement</u>	Center Line Setback _____	Rear Setback <u>50' B/S</u>	CUP/Variance/COA _____
	Side Setback <u>20' B/S</u>	Side Setback <u>15' from Wild Plant</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Loyd</u> Date <u>10/4/18</u> <span style="float: right;">RPWD</span>			

CONTRACTOR INFORMATION	Contractor <u>WestView Companies, Inc</u>		Phone <u>8047840095</u>
	Address <u>2508 Turkey Creek Rd Oilville VA 23129</u>		<u>matthelms@westviewcompanies.com</u>
	Contractor License Number <u>2705117309</u>	Type <u>A</u>	Expiration <u>9-30-2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>Constructing a roof over existing patio slab.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>0</u>
	Finished Sq. Ft. <u>380</u>		Unfinished Sq. Ft. <u>380</u>	Total Sq. Ft. <u>380</u>	

Building Only - Excludes All Trades Permits		Application Fee	<u>\$59.03</u>
Value of Work	<u>9,300 \$10,450.00</u>	State Levy Fee	<u>\$1.18</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  Signature of Applicant <u>[Signature]</u> Date <u>10-3-2018</u>		Septic/Well Fee	\$ _____
		Zoning Fee	<u>\$25-</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	<u>\$85.21</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: 9-26-2018 *Rec'd 10-3-18*

Permit Number: *BP-2018-00849*

GPIN/Tax Map: 28-1-0-58-GT / *0738-18-935A-9999*

Issued: *10-9-18*

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 <b>2309 Chapel Hill Road Goochland, VA 23063</b>	
	Owner <b>Cody L. Barton</b>	Phone #
APPLICANT INFORMATION	Address <b>2030 Timbers Hill Road N. Chesterfield, VA</b>	Email
	Applicant/Contact <b>Estee Williams</b>	Phone # <b>434-409-9220</b>
	Address <b>1494 Minor Ridge Ct Charlottesville, VA 22901</b>	Email <b>estee.williams@smartlinkllc.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>None</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>75' front</i>	Center Line Setback <i>100'</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: <i>No change to existing footprint</i>			
Planning & Zoning Officer <i>Daniel Floyd</i>		Date <i>10/4/18</i>		<i>AI</i>

CONTRACTOR INFORMATION	Contractor <b>NAV Industrial</b>	Phone <b>540-765-7295</b>
	Address <b>12925 Booker T. Washington Hwy, Hardy, VA 24101</b>	
	Contractor License Number <b>2705140628</b>	Type <b>A</b>

DESCRIPTION OF WORK	Scope of Work: <b>Remove and replace antennas on existing tower. See attached drawings</b>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <i>12.50</i>
Value of Work	<b>15,000.00</b>	State Levy Fee	\$ <i>2.25</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <i>Estee Williams</i> Date: <i>9-26-18</i>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <i>50-</i>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <i>104.75</i>



# BUILDING PERMIT APPLICATION

Application Date: 9/17/18

Permit Number: *2018-00784*

GPIN/Tax Map: *6749-86-2147 - 9999/29-1-086 OT*

Issued: *10-5-18-*

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.

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 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 2748 Dogtown Road, Goochland VA 23063	
	Owner <b>Goochland County</b>	Phone # 804-556-5815
	Address	

APPLICANT INFORMATION	Applicant/Contact Sermat Construction /Ryan Haskell		Phone # 804-357-0960
	Address 2419 Westwood Ave Richmond, Va 23230		Email rhaskell@sermat.com

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

Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

CONTRACTOR INFORMATION	Contractor <b>Sermat Construction</b>		Phone 804-264-4800
	Address 2419 Westwood Ave Richmond, VA 23230		rhaskell@sermat.com
	Contractor License Number <i>2701025440</i>	Type <i>Class A</i>	Expiration <i>10/31/2018</i>

DESCRIPTION OF WORK	Scope of Work: turn suites Numbers 1,3,4,6 into new office space per plans that highlighted walls will be added. install a warming Kitchen in suite 7. install a cabinets and sink in Suite 4. <i>(cannot be stoves) with out type I hood</i>				
	Proposed Use office	Current Use Office	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	60,953 Finished Sq. Ft.	0 Unfinished Sq. Ft.	60,953 Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee \$ _____ State Levy Fee \$ _____ Septic/Well Fee \$ _____ Zoning Fee \$ _____ RLD \$ _____ SWP \$ _____ Total \$ <i>0</i>
Value of Work	60,000	
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	Date <i>9/17/18</i>	
<i>[Signature]</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

Residential  Commercial

Application Date: 9/19/2018

Permit Number: BP-2018-00806

GPIN/Tax Map: 6789-00-3672 / 32-1-0-86-0

Issued: 10.5.2018

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 2561 Perkinsville Road, Maidens VA 23102	
	Owner <b>Vallambrosa, LLC c/o Strother Scott</b>	Phone # 804-780-3271
	Address 2561 Perkinsville Road, Maidens, VA 23102	Email strother.scott@gmail.com

APPLICANT INFORMATION	Applicant/Contact <b>Nancy Anderson</b>		Phone # 804-500-0287
	Address 2810 North Parham Road, Henrico, VA 23294		Email nanderson@velocitel.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	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>No change to existing footprint.</u>				
	Planning & Zoning Officer: <u>[Signature]</u> Date: <u>9/24/18</u> <span style="float: right;">112</span>				

CONTRACTOR INFORMATION	Contractor <b>Velocitel, LLC</b>		Phone 804-500-0287
	Address 2810 N. Parham Road, Henrico, VA		Email nanderson@velocitel.com
	Contractor License Number 2705166724	Type Class A	Expiration 1/30/2020

DESCRIPTION OF WORK	<b>Scope of Work:</b> Replace existing antennas with new and add accessory equipment behind antennas. No new electrical service will be installed and no modification to the tower is needed.				
	Proposed Use same as current		Current Use telecommunications tower		Environmental Impacts (stream crossing, wetlands, amt land disturbed) n/a
	<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.	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>112.50</u>	
Value of Work	\$15,000	State Levy Fee \$ <u>2.25</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>Nancy Anderson</u> Date: <u>9/20/2018</u>		Septic/Well Fee \$	
		Zoning Fee \$ <u>50-</u>	
		RLD \$	
		SWP \$	
		Total \$ <u>164.75</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: 10/2/18  
 Permit Number: BP-2018-00853  
 GPIN/Tax Map: 6709-88-5855-9998/ 17-1-0-18-TW  
 Issued: 10-5-18

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 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 5260 Old Columbia Road, Goochland Va 23063	
	Owner SBA Towers c/o Elaine Tarkington	Phone # 919-0868-0426
	Address 8051 Congress Ave, Boca Raton, Fl 33487	Email etarkington@sbsite.com
APPLICANT INFORMATION	Applicant/Contact Velocitel for AT&T / Curtis McMillan	
	Address 2810 N. Parham Road, Suite 110, Henrico VA 23294	Phone # 804-500-0266 Email CMcMillan@Velocitel.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>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: <u>No change to existing Footprints</u>	

Planning & Zoning Officer: [Signature] AI

CONTRACTOR INFORMATION	Contractor Velocitel LLC		Phone 804-405-0660
	Address 2810 Parham Road, Suite 110, Henrico Va. 23294		Email cmcmillan@velocitel.com
	Contractor License Number 2705166724	Type A	Expiration 1-31-2020

DESCRIPTION OF WORK	Scope of Work: Install 3 LTE Antennas, 3 NEW RRUS, adding 1 fiber lines and swapping out on DC trunk <u>upgrade equipment</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	\$14,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Curtis McMillan Date: 10/2/18

Application Fee	\$ <u>105.00</u>
State Levy Fee	\$ <u>2.10</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>157.10</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 10-2-2018  
Permit Number: BP-2018-00838  
GPIN/Tax Map: 6057-97-8457/42-1-0-64-0  
Issued: 10-5-2018

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>1800 Sandy Hook Rd Rm 206</u>	Phone # <u>804-556-5802</u>
	Owner <u>Goochland County Administration</u>	Email
	Address <u>same</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Montgomery Consulting LLC.</u>	Phone # <u>804-754-8010</u>
	Address <u>1618 Westcastle Rd Rich. VA 23238</u>	Email <u>Joe@Montgomery Consulting, Net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	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>25'</u>	CUP/Variance/COA
	Side Setback <u>10' 25'</u>	Side Setback <u>10' 25'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint</u>	Planning & Zoning Officer: <u>Daniel Floyd</u> Date: <u>10/2/18</u>		

CONTRACTOR INFORMATION	Contractor <u>Montgomery Consulting LLC.</u>	Phone <u>804 754-8010</u>
	Address <u>1618 Westcastle Rd Richmond VA 23238</u>	
	Contractor License Number <u>2705153482</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Renovate Storage Rm 206 into Social Svs Office</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. <u>140</u>	Unfinished Sq. Ft. <u>4</u>	Total Sq. Ft. <u>144</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>10,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 10-2-18

*fees waived, county project*

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

\$71.91

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5661 TDD 711 Va Relay

Application Date: 9-21-2018  
 Application Accepted: BP-2018-00804  
 Old Map Number: 48-2-B-2-0  
 GPIN: MA26-68-7019

Issued 10-4-2018

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

OWNER INFORMATION	Site Address <b>12655 Fawn Lane , Glen Allen , VA 23233</b>		District		
	Owner <b>Peter Woo</b>		Phone # <b>804-229-4830</b>		
	Address <b>12655 Fawn Lane , Glen Allen , VA 23233</b>				
	Proposed Use <b>Single family dwelling</b>	Current Use <b>Single family dwelling</b>	Existing Buildings on Property <b>Single family dwelling</b>		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District		
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
	Side Setback	Side Setback	COA	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.				

Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

Applicant/Contact: **Sam Wing** Phone **804-655-2095**  
 Email: **solarinfo@ipsosva.com**

CONTRACTOR INFORMATION	Contractor <b>integrated Power sources of VA</b>		Phone <b>804-655-2095</b>	
	Address <b>2260 Dabney Lane</b>			
	Contractor License Number <b>2705036575</b>	Type <b>Contractor Class A</b>	Expiration <b>02/28/2019</b>	

Description of Work	Scope of Work: <b>Installation of 12KW roof mounted , grid tied , solar PV system.</b> <b>(40 panels total and 40 microinverters total)</b>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

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

VALUE OF WORK	
Building	<b>\$13,000</b>
Excludes All Trades Permits	

Application Fee	\$ <u>70.50</u>
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>1.41</u>
<del>Fee</del> Total	\$ <u>71.91</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 Samuel Wing



# BUILDING PERMIT APPLICATION

Application Date: 10-2-18Permit Number: DP-2018-00939GPIN/Tax Map: 7133-18-8320 / W-22B30Issued: 10-3-18

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 <u>13300 INGLETON LANE</u>	
	Owner <u>MARK + KATHERINE BUSSEN</u>	Phone # <u>804-347-4817</u>
	Address <u>13300 INGLETON LANE</u>	

APPLICANT INFORMATION	Applicant/Contact <u>TOM NOMER</u>		Phone # <u>804 426 7846</u>
	Address <u>12536 PATTERSON AVE</u>		Email <u>TOM@lanebuilt.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Rivergate Sec. 1</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40' from Row</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>35' from Rivergate Dr.</u>	Side Setback <u>15'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>10/3/18</u> <u>RA</u>			

CONTRACTOR INFORMATION	Contractor <u>LANE HOMES + REMODELING INC.</u>		Phone <u>804-784-0012</u>
	Address <u>12536 PATTERSON AVE.</u>		Email <u>TOM@lanebuilt.com</u>
	Contractor License Number <u>2701 0291 25A</u>	Type <u>A CBLR/SE</u>	Expiration <u>1-31-19</u>

DESCRIPTION OF WORK	Scope of Work: <u>REMOVE WINDOW/INSTALL DOOR</u> <u>BUILD 7'6" x 7' BRICK STAIR</u>					
	Proposed Use		Current Use		Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<input type="checkbox"/> Public/Private	<input type="checkbox"/> Public/Private	<input type="checkbox"/> Public/Private	<input type="checkbox"/> Public/Private	# of Bathrooms	# of Bedrooms    # of floors
	Finished Sq. Ft.		Unfinished Sq. Ft. <u>50 sq ft</u>		Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	<u>\$ 92.55</u>
Value of Work	<u>\$ 17,900.00</u>	State Levy Fee	<u>\$ 1.85</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	<u>\$ 25.00</u>
Signature of Applicant: <u>Thomas G. Nomer</u> Date: <u>10-2-18</u>		RLD	\$
		SWP	\$
		Total	<u>\$ 119.40</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

ISSUED 10.3.2018

Application Date: 10.1.18

Application Accepted: BP-2018-00834

Old Map Number: 6776-16-8533

GPIN: 54-3-0-K-3

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	1590 Denver Drive		District
Owner	Chris Wilkinson		Phone #
Address	1590 Denver Drive		
Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
	10	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	—	—
New Street Address	Zoning District A2		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
55' from ROW	80'	5'	
Side Setback	Side Setback	COA	Flood Zone
5'	5'		

APPROVED     REJECTED     COMMENTS:

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

Planning & Zoning Officer: David Floyd    Date: 10/2/18    A2

Applicant/Contact: PLA-Mor Construction    Phone: 804 781-0442

Email: MaryAnn.pmc.pools@gmail.com

Contractor: PLA-Mor Construction    Phone: 804 781-0442

Address: P.O. Box 295 Mech. VA 23111

Contractor License Number: 2705091041    Type: A    Expiration: 1/31/2019

Scope of Work: 16' x 40' Fiberglass pool w/ Automatic Cover    ASTM 1346

Description of Work	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.
		640		640

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

VALUE OF WORK	
Building	74,895
Excludes All Trades Permits	

Application Fee	\$349.03
Zoning Fee	\$25.00
Septic/Well Fee	\$
State Levy Fee	\$6.98
<del>REG</del> Total	\$381.01

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: M. Clements



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 9/26/18

Permit Number: *BP-2018-00819*

GPIN/Tax Map: *0750-24-6925 / 21-11-0-82-0*

Issued: *10-2-18*

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 3069 rock cress ln. sandy hook va. 23153	
	Owner <b>Mr. &amp; Mrs. st clair</b>	Phone # <b>804-955-9310</b>
	Address same as above	

APPLICANT INFORMATION	Applicant/Contact <b>Bryan Roberts/Aquatic Concepts llc.</b>		Phone # <b>804-363-2379</b>
	Address po box 367 oilville va 23129		Email <i>email</i> <b>BRYAN@ARCHCONLLC.COM</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mill Forest II</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <i>Receipt</i>	Date Paid
	Front Setback <i>55' from Prop. Line</i>	Center Line Setback	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: *[Signature]* Date: *10/1/18* RR

CONTRACTOR INFORMATION	Contractor <b>Aquatic Concepts LLC</b>		Phone
	Address <b>po box 367 oilville va 23129</b>		
	Contractor License Number <b>2705129869</b>	Type class "A"	Expiration <b>8/31/2019</b>

**Scope of Work:** *install a 16' x 37' fiberglass inground pool w fence barrier*

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
Finished Sq. Ft.	Unfinished Sq. Ft. <i>455</i>	Total Sq. Ft. 455		

**Building Only - Excludes All Trades Permits**

Value of Work	<b>\$40,000.00</b>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: *[Signature]* Date: 9/26/18

Application Fee	\$ <i>192.00</i>
State Levy Fee	\$ <i>3.84</i>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <i>25.00</i>
RLD	\$ _____
SWP	\$ _____
<b>Total</b>	\$ <i>220.84</i>



# RESIDENTIAL TRADES 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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

*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 made until the permit has been issued.*

Please call or visit our website to calculate fee  
[www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date: 10.2.18

Permit #: 18-837

GPIN

Tax Map

## LOCATION

Street Address: 1916 Maidens Rd. Goochland, Va 23102

## PROPERTY OWNERSHIP

Name: John H Ware Jr Phone: 804-221-0926

Mailing Address: 1916 Maidens Rd, Goochland, VA 23102 Email:

## APPLICANT

Name: Richard Medeiros Phone: 434-975-3275

Address: 2293 Seminole Lane Charlottesville, VA 22901 Email: richieneverdark@gmail.com

## CONTRACTOR

Name: Never Dark Whole House Generators Phone: 434-975-3275

Mailing Address: 2293 Seminole Ln Charlottesville, VA 22901 Email: richieneverdark@gmail.com

Gas Certification: YES  NO

State License Number: 2710025076 Expiration: 8-31-2020 License Type: Contractors Class: A

## DESCRIPTION OF WORK

Wiring 22kw automatic generator with automatic transfer switch for powering essential circuits only

# of Bathrooms: Service Size: Power Company: Inquiry #:

Value of Work (required): 1,800

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Richard Medeiros Date: 10/2/18

Approval: Fisher Office Use Only Approval date: 10/2/18

Permit Fee: 30.00 Issued date: 10/2/18

Please call or visit our website to calculate fee: [www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

(owner's statement on back)



# RESIDENTIAL TRADES 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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

*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 made until the permit has been issued.*

Please call or visit our website to calculate fee  
[www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date: 10-3-18

Permit #: 0112018-844

GPIN

Tax Map

## LOCATION

Street Address: 2136 Withers Lane maidens, VA 23102

## PROPERTY OWNERSHIP

Name: <u>Matthew Toney</u>	Phone: <u>804-878-5028</u>
Mailing Address: <u>2136 Withers Lane maidens, VA 23102</u>	Email: <u>_____</u>

## APPLICANT

Name: <u>Harper Electric, LLC</u>	Phone: <u>540-223-1862</u>
Address: <u>4212 Davis Hwy Louisa, VA 23093</u>	Email: <u>inquiries@harperelectricva.com</u>

## CONTRACTOR

Name: <u>Harper Electric, LLC</u>	Phone: <u>540-223-1862</u>			
Mailing Address: <u>PO Box 692 minerva, VA 23117</u>	Email: <u>inquiries@harperelectricva.com</u>			
Gas Certification: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number: <u>2705169649</u>	Expiration: <u>09/30/2020</u>	License Type: <u>Contractor Spec. E/E</u>	Class: <u>A</u>

## DESCRIPTION OF WORK

Install 400A transfer switch and 20kw generator

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)	<u>\$ 2800.00</u>		

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Mary Harper Date: 10/2/18

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>10-3-18</u>
Permit Fee: <u>\$ 34.27</u>		Issued date: _____

Please call or visit our website to calculate fee: [www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

43.59

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

*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 made until the permit has been issued.*

Please call or visit our website to calculate fee [www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date	10/4/18
Permit #	2018-00572
GPIN	
Tax Map	

## LOCATION

Street Address 1130 KNIBB LANE

## PROPERTY OWNERSHIP

Name	JOHN TWONBLY	Phone	
Mailing Address		Email	

## APPLICANT

Name	CHRIS HUMPHREY	Phone	794-4877
Address	724 GROVE RD MIDLOTHIAN VA. 23114	Email	CHRIS@HUMPHREYELECTRIC.COM

## CONTRACTOR

Name	HUMPHREY ELECTRIC CO	Phone	794-4877		
Mailing Address	724 GROVE RD. MIDLOTHIAN, VA. 23114	Email	CHRIS@HUMPHREYELECTRIC.COM		
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2701017076A	5/19	ELE	A

## DESCRIPTION OF WORK

WIRE NEW ADDITION <sup>10-24-18</sup> Revised to include service upgrade + transfer suited for future gen. 200 Dominion #10248738

# of Bathrooms: \_\_\_\_\_ Service Size: \_\_\_\_\_ Power Company: \_\_\_\_\_ Inquiry #: \_\_\_\_\_

Value of Work (required) 4,830.00 \$ New value \$ 6,830

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant Chris Humphrey Date: 10/4/18

Approval	<u>[Signature]</u>	Office Use Only	Approval date	10-10-18
Permit Fee	43.59 \$ 52.77 new fee		Issued date	10-10-18

Please call or visit our website to calculate fee: [www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

10/22

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

Date	09.24.18
Permit #	017-2018-836
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

*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 made until the permit has been issued.*

### LOCATION

Street Address	<b>2311 LANES END PLACE</b>	District	
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### PROPERTY OWNERSHIP

Name	<b>SCOTT BINNS</b>	Phone	<b>8046156753</b>
Mailing Address	<b>2311 LANES END PLACE</b>		

### APPLICANT

Name	<b>WOODFIN HEATING</b>	Phone	<b>8047644533</b>
E-Mail Address	<b>VPITTMAN@ASKWOODFIN.COM</b>		

### CONTRACTOR

Name	<b>WOODFIN HEATING</b>	Phone	<b>804-764-4533</b>
Mailing Address	<b>1823 N. HAMILTON STREET RICHMOND, VA 23230</b>	E-mail address:	<b>VPITTMAN@ASKWOODFIN.COM</b>
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	<b>2701037820</b>
		Expiration	<b>11/2018</b>
		License Type:	<b>CONTRACTOR</b> Class: <b>A</b>

### DESCRIPTION OF WORK

<b>INSTALL 22 KW GENERATOR, 200 AMP ATS, SURGE</b>			
# of Baths	Service Size	Power Company	Inquiry #
	<b>200</b>	<b>DOM</b>	<b>N/A</b>

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract or parcel of land located at \_\_\_\_\_

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)

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

\_\_\_\_\_(Notary) My commission expires \_\_\_\_\_

Value of Work: **9500.00**

Signature of Applicant

Permit fee: ~~8752~~ **65.03**

Approval **Fisher**

Date **10-10-18**

Issue date: **10-10-18**



# RESIDENTIAL TRADES 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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

*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 made until the permit has been issued.*

Please call or visit our website to calculate fee  
[www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date	10-17-18
Permit #	5
GPIN	DP-2018-00408
Tax Map	

## LOCATION

Street Address: 110 Alice Run Manakin - SAULT VA

## PROPERTY OWNERSHIP

Name	Linserbelt	Phone	
Mailing Address		Email	

## APPLICANT

Name	Chris Hanley	Phone	804-436-4768
Address	PO Box 1040 White Star VA 22578	Email	hanley-electrical@ycah.com

## CONTRACTOR

Name	Hanley Electrical Service LLC	Phone	804-436-7378						
Mailing Address	PO Box 1040 White Star VA 22578	Email	hanley-electrical@ycah.com						
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	270921284	Expiration	1-19-2020	License Type	ELC	Class	A

## DESCRIPTION OF WORK

Wire a Garage-Workshop-Bonus room - Generator transfer switch for future 120KW

# of Bathrooms	Service Size	Power Company	Inquiry #
1	200	Dominion	10247359
Value of Work (required) 12000.00			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: [Signature] Date: 10-17-18

Approval: <u>[Signature]</u>	Office Use Only	Approval date: 10-18-18
Permit Fee: 76.50		Issued date: 10-18-18

Please call or visit our website to calculate fee: [www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

(owner's statement on back)



# RESIDENTIAL TRADES 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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

*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 made until the permit has been issued.*

Please call or visit our website to calculate fee  
[www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date	10-22-18
Permit #	BP-2018-00502
GPIN	0788-14-5525
Tax Map	32-18-0-33-0

## LOCATION

Street Address  
2427 Bridgewater Drive, Maidens VA 23102

## PROPERTY OWNERSHIP

Name	Carter Home Builders LLC (Gary Carter)	Phone	(804) 241-6507
Mailing Address	611 Joe Brooke Lane, Manakin Sabot VA 23103	Email	carterhomebuilders@gmail.com

## APPLICANT

Name	Tri-Star Construction (John Cosby)	Phone	(804) 370-1121
Address	8440 Twin Cedar Lane, Mechanicsville, VA 23111	Email	gokarting329@aol.com

## CONTRACTOR

Name	Tri-Star Construction	Phone	(804) 370-1121						
Mailing Address	8440 Twin Cedar Lane, Mechanicsville, VA 23111	Email	gokarting329@aol.com						
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2705048912	Expiration	4-30-2019	License Type	BLD/ELE	Class	B

## DESCRIPTION OF WORK

Wire new house

add 22kw generac generator with 200A transfer

# of Bathrooms	Service Size	Power Company	Inquiry #
3	200	Dominion	10248072

Value of Work (required) \$15,750.00

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: John R. Cosby Date: 10-8-18

Approval:	<u>FELDER</u>	Office Use Only	Approval date:	<u>10-22-18</u>
Permit Fee:	<u>93.71</u>		Issued date:	

Please call or visit our website to calculate fee: [www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

1118

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

*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 made until the permit has been issued.*

Date	09.24.18
Permit #	2112017-907
GPIN	
Tax Map	

### LOCATION

Street Address	2301 LANES END PL	District	
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### PROPERTY OWNERSHIP

Name	TRAVIS CHEWNING	Phone	8046412583
Mailing Address	2301 LANES END PL		

### APPLICANT

Name	WOODFIN HEATING	Phone	8047644533
E-Mail Address	VPITTMAN@ASKWOODFIN.COM		

### CONTRACTOR

Name	WOODFIN HEATING	Phone	804-764-4533
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	VPITTMAN@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2018	License Type:	CONTRACTOR Class: A

### DESCRIPTION OF WORK

INSTALL 16 KW GENERATOR, 100 AMP ATS, SURGE			
- 100A PARTIAL TRANSFER W/ SOB PANEL			
# of Baths	Service Size	Power Company	Inquiry #
	400 (2-150A)	DOM	

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract or parcel of land located at \_\_\_\_\_

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)

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

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

My commission expires \_\_\_\_\_

Signature of Applicant [Signature]

Value of Work: 8775.00

Permit fee: ~~67.32~~ 41.70

Approval [Signature] Date 10-24-18

Issue date: 10-24-18



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

*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 made until the permit has been issued.*

Date	10-23-18
Permit #	18-918
Old Map #	
G-Pin	

## LOCATION

Street Address	913 MERCHANT LEE PLACE 23102	District	
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## PROPERTY OWNERSHIP

Name	DAVID & MARY ELLEN REUTINGER	Phone	804-893-0718
Mailing Address	913 MERCHANT LEE PLACE MANAKEN SABOT 23102		

## APPLICANT

Name	H.O. FEILD ELECTRIC CO. INC.	Phone	804-365-0263
E-Mail Address	SERVICE @ HOFEC.COM		

## CONTRACTOR

Name	H.O. FEILD ELECTRIC CO. INC.	Phone	804-365-0263
Mailing Address	P.O. BOX 6321 ASHLAND, VA. 23005	License Type	Class
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	Expiration
		2705123991	8-31-18
		ELE	B

## DESCRIPTION OF WORK

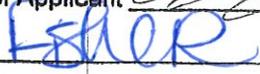
INSTALL 22KW GENERATOR AND 2 200A SWITCHES			
# of Baths	Service Size	Power Company	Inquiry #

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract or parcel of land located at \_\_\_\_\_ 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)

Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. \_\_\_\_\_ (Notary) My commission expires \_\_\_\_\_

Signature of Applicant 

Approval  Date 10-26-18

Value of work: \$11,000.00

Permit fee: \$71.91

Issue date: 10-26-18