

Issued 9-5-2019
BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317
LOT 3-1 READERS BRANCH

Application Date: 08-20-19
 Permit Number: BP-2018-01068
 Old Map Number: 58-53-0-3-0
 GPIN: 7726-04-9497

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 12163 Readers Pointe Dr. <u>Manekin Subot, VA, 23103</u>		District <u>03</u>	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</u>		Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	New Street Address		Amount: <u>\$12,592.00</u>	
	Front Setback <u>30' from Prop. line</u>		Center Line Setback	
	Side Setback <u>10'</u>		Rear Setback <u>25'</u>	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	

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: 8/22/19

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

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A		Type CLASS A	Expiration 6-30-2021

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

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

VALUE OF WORK	
Building	\$155,090.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <u>709.90</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>14.20</u>
Zoning Fee	\$ <u>50-</u>
Total	\$ <u>774.10</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: James



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 741 VA Relay

Application Date: 7/25/19
 Permit Number: BP-2019-00688
 GPIN/Tax Map: 5892-60-9911 / 9-14-0-1-0
 Issued: 9/26/19
 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: 6187 ~~5~~ Community House Rd Lot 1 (Community Forest Subdivision)
 Owner: New Ventures Real Estate Phone #: 804-378-9300
 Address: 1604 Anderson Hwy Suite B Powhatan VA 23139 Email: sprousescorner@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: R. Alan Anderson Phone #: 804-839-7201
 Address: 1604 Anderson Hwy Suite B, Powhatan VA 23139 Email: sprousescorner@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Community Forest Proffer Yes No Amount: _____ Date Paid: _____
 Front Setback: 75' from Row Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____
 Side Setback: 35' from Row Side Setback: 20' Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: Dennis Floyd Date: 7/31/19 A1

CONTRACTOR INFORMATION
 Contractor: Anderson Home Construction Phone: 804-839-7201
 Address: 2080 Cartersville Rd, New Canton, VA 23123 Email: raanderson2080@gmail.com
 Contractor License Number: 2705106351 Type: A Expiration: 5/31/20

DESCRIPTION OF WORK
 Scope of Work: single family housing

Proposed Use <u>residential</u>	Current Use <u>N/A</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>9999</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>
Finished Sq. Ft.: <u>1600</u>	Unfinished Sq. Ft.: <u>368</u>	# of Bedrooms: <u>3</u>
		# of floors: <u>1</u>
		Total Sq. Ft.: <u>1968</u>

Building Only - Excludes All Trades Permits

Value of Work: <u>135,000.00</u>	Application Fee: \$ <u>619.50</u>
	State Levy Fee: \$ <u>12.39</u>
	Septic/Well Fee: \$ _____
	Zoning Fee: \$ <u>50.00</u>
	RLD: \$ <u>100.00</u>
	SWP: \$ <u>200.00</u>
	Total: \$ <u>981.89</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: R. Alan Anderson Date: 7/24/19

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Powhatan Real Estate Settlements Telephone: 804-598-7160

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

OWNER'S STATEMENT

I, R. Alan Anderson of (address) Lot 1, Community House Rd 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. Alan Anderson 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 R. Alan 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
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 12

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 9.25.19.

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 7/28/19
 Permit Number: BP-2019-00689
 GPIN/Tax Map: 5892-60-9635/9-14-0-2-0
 Issued: 9/26/19
 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: 6173 Community House Rd, lot 2 Community Forest Subdivision.
 Owner: New Ventures Real Estate Phone #: 804-378-9300
 Address: 11604 Anderson Hwy Suite B Powhatan VA 23139 Email: sprousecorner@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: K. Alan Anderson Phone #: 804-839-7201
 Address: 11604 Anderson Hwy Suite B Powhatan VA 23139 Email: sprousecorner@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Community Forest	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: 15' from ROW	Center Line Setback: _____	Rear Setback: 35'	CUP/Variance/COA: _____
Side Setback: 20'	Side Setback: 20'	Flood Zone: _____	_____

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: Daniel Floyd Date: 7/31/19

CONTRACTOR INFORMATION
 Contractor: Anderson Home Construction Phone: 804-839-7201
 Address: 2080 Cartersville Rd, New London VA 23123 Email: raganderson2080@gmail.com
 Contractor License Number: 2705106351 Type: A Expiration: 5/31/20

DESCRIPTION OF WORK
 Scope of Work: single family housing w/ attached garage

Proposed Use: Residential	Current Use: N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed): 9599
SEWER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms: 2
Finished Sq. Ft.: 1600	Unfinished Sq. Ft.: 368	# of Bedrooms: 3
		# of floors: 1
		Total Sq. Ft.: 1968

Building Only - Excludes All Trades Permits

Value of Work: 150,000.00	Application Fee: \$ 687.00
	State Levy Fee: \$ 1374
	Septic/Well Fee: \$
	Zoning Fee: \$ 500.00
	RLD: \$ 100.00
	SWP: \$ 200.00
	Total: \$ 1050.74

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: K. Alan Anderson Date: 7/28/19

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Powhatan Real Estate Settlements Telephone: 804-598-7160

Mailing Address: 3887 Old Buckingham Rd Powhatan VA 23139

OWNER'S STATEMENT

R. Alan Anderson of (address) Lot 2, Community House Rd affirm that I am the owner of a certain tract of parcel

of land located at Georgetown 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. Alan Anderson 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 R. Alan 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 Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R-5 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 12

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL R. Alan Anderson DATE 9.25.19.
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 8-13-19
Permit Number: BP-2019-00736
GPIN/Tax Map: 6824-14-2083 / 12-1-0-12-0
Issued: 9-13-19

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>4050 Fleming Rd Goochland VA 23093</u> <u>37.5</u>	Phone # <u>804-536-7248</u>
	Owner <u>Fiona Towner</u>	Email
	Address <u>PO Box 84 Manakin VA 23103</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Fiona Towner</u>	Phone # <u>804-536-7248</u>
	Address <u>PO Box 84 Manakin VA 23103</u>	Email <u>ftowner23@gmail.com</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 ROW</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <u>—</u>	

APPROVED REJECTED COMMENTS: AI
 Planning & Zoning Officer David Ford Date 8/23/19

CONTRACTOR INFORMATION	Contractor <u>CP Weddington</u> <u>awree</u>	Phone <u>804-399-2555</u>
	Address <u>11930 W County Line Middleham VA 23112</u>	Email <u>fweddington@msa.com</u>
	Contractor License Number <u>2705070265</u> (FT) Type <u>Class A</u> (FT) Expiration <u>07/31/2020</u> FT	

DESCRIPTION OF WORK	Scope of Work: <u>New Residential Home w/ attached garage</u>				
	Proposed Use <u>Residential Dwelling</u>	Current Use <u>Forestry/Land Only</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>1 acre 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>2.5</u>	# of Bedrooms <u>3</u>	# of floors <u>1</u>
	3045 FT Finished Sq. Ft. <u>2715</u>	430 FT Unfinished Sq. Ft. <u>530</u>	Total Sq. Ft. 2645 <u>3245</u>		

Building Only - Excludes All Trades Permits

Value of Work <u>212,250</u> <u>223,500.00</u>	Application Fee \$ <u>1,017.75</u>
	State Levy Fee \$ <u>20.36</u>
	Septic/Well Fee \$ <u>—</u>
	Zoning Fee \$ <u>50.00</u>
	RLD \$ <u>—</u>
	SWP \$ <u>—</u>
Signature of Applicant <u>[Signature]</u> Date <u>8-13-2019</u>	Total \$ <u>1,088.11</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.

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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, Fiona Towner of (address) PO Box 84 Manakin VA 23103 affirm that I am the owner of a certain tract of parcel

of land located at 6824-14-2083 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 R-5 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2012

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL  DATE 9.10.19.
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 8/13/19 Rec: 8.15.19
 Permit Number: BP-2019-00745
 GPIN/Tax Map: 1000-36-8681/43-42-D-1-D
 Issued:

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>1754 Fishers Pond Drive Maidens, VA 23102</u>	
	Owner <u>Breeze Hill Inc.</u>	Phone # <u>539-2524</u>
	Address <u>1390 B Broad Street Rd Oilville, 23129</u>	Email <u>[Redacted]</u>

APPLICANT INFORMATION	Applicant/Contact <u>Steve Thompson</u>	Phone #
	Address <u>1390 B Broad Street Rd Oilville, VA 23129</u>	Email <u>stevethompsonbuilder@comcast.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Sec 3 Lot 1 Breeze Hill</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$20,910.00</u>	Date Paid <u>Due</u>
	Front Setback <u>40' from Row</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>35' from Row/Fishers Pond 10'</u>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>*Cash Proffer due before issuing C.O</u>		
	Planning & Zoning Officer <u>David Floyd</u>	Date <u>8/16/19</u>	RP	

CONTRACTOR INFORMATION	Contractor <u>Steve Thompson Builder, LLC</u>	Phone <u>539-2524</u>
	Address <u>1390 B Broad Street Rd Oilville, VA 23129</u>	Email <u>stevethompsonbuilder@comcast.net</u>
	Contractor License Number <u>2705054732</u>	Type <u>CBC RBC</u>

DESCRIPTION OF WORK	Scope of Work: <u>New residential dwelling with attached garage w/ unfinished 2nd floor</u>				
	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 <u>3 1/2</u>	# of Bedrooms <u>3</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>2870</u>	Unfinished Sq. Ft. <u>1171</u>	Total Sq. Ft. <u>4041</u>		
	Building Only - Excludes All Trades Permits				

Value of Work <u>\$315,000</u>	Application Fee \$ <u>1429.50</u> State Levy Fee \$ <u>28.59</u> Septic/Well Fee \$ <u>0</u> Zoning Fee \$ <u>50-</u> RLD \$ <u>100-</u> SWP \$ <u>200-</u> Total \$ <u>1808.09</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>Steve Thompson</u>	Date <u>8/12/19</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 E Setterwhite Telephone: 556-4012

Mailing Address: 3013 River Road West Goochland, 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 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 Michael E. Brubaker DATE 9.20.19.
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: 9-23-19

Application Date: 8-16-19
 Application Accepted: BP-2019-00748
 Old Map Number: 21-15-1-5-0
 GPIN: 6850-30-2151

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: 2721 Preston Park Lane (51) Sandy Hook, VA 23153		District: 23153
	Owner: Earl Thompson, Inc.		Phone #:
	Address: 1930 Soldiers Lodge Rd., Crozier, VA. 23039		
	Proposed Use: SINGLE FAM	Current Use: Same	Existing Buildings on Property: N/A
Proposed Occupant Load (Commercial): N/A	Acreage: 2.18	Commercial Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Subdivision: Preston Park Sec. 1, Lots	Proffer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$21,302.00	Date Paid: Due
New Street Address:		Zoning District: R1	
Front Setback: 48' from Row	Center Line Setback:	Rear Setback: 35'	C.U. Permit: <input type="checkbox"/>
Side Setback: 15'	Side Setback: 15'	COA:	Flood Zone:
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Cash Proffer is due before issuing C.O.			

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

Planning & Zoning Officer: David Floyd Date: 8/19/19

Applicant/Contact: Ray Avery IV, Exec. VP Emerald Homes Phone: 674-0231 Ext. 6

Email: ray@Emerald-homes.com

CONTRACTOR INFORMATION	Contractor: <u>Chesterfield Construction Svcs. Inc.</u> Phone: <u>674-0231</u>
	Address: <u>P.O. Box 4309 Midlothian, 23112</u>
	Contractor License Number: <u>2701 024711</u> Type: <u>Class A - BLD.</u> Expiration: <u>9/30/19</u>

Description of Work	Scope of Work: <u>Construct single family dwelling w/attached garage</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms: <u>2 1/2</u>		
	# of Floors: <u>2</u>	Total Sq. Ft.: <u>2224</u>	Finished Sq. Ft.: <u>2050</u>	Unfinished Sq. Ft.: <u>506</u>	# of Bedrooms: <u>3</u>
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	<u>151,645</u>
Excludes All Trades Permits	

Application Fee	\$ <u>694.40</u>
Zoning Fee	\$ <u>50.-</u>
Septic Well Fee	\$ <u>200.-</u>
State Levy Fee	\$ <u>13.89</u>
RLD	\$ <u>100.-</u>
Total	1058.29

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

Signature of Applicant: Ray Avery IV RE Date: 8/12/19

LIEN AGENT INFORMATION

Please check one of the following:

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

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

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

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

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

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

APPROVAL _____ DATE _____
Code Official

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

ISSUED: 9-23-19

Application Date: 8-19-19
 Application Accepted: PP-2019-00749
 Old Map Number: 21-15-1-9-0
 GPIN: 6850-20-0880

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		2805 Preston Park Way (9-1 PP)		District	Sanby Hook, VA 23153	
	Owner		Earl Thompson, Inc.		Phone #		
	Address						1930 Soldiers Lodge Rd, Crozier, VA. 23039
	Proposed Use	Current Use	Existing Buildings on Property				
	SINGL FAM	Same	N/A				
Proposed Occupant Load (Commercial)	Acreeage	Commercial Use					
N/A	1.59	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Subdivision	Proffer	Amount:	Date Paid:				
Preston Park, Sec. 1, Lot 9	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	\$21,302.00	Due				
New Street Address		Zoning District					
		R-1					
Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance			
40' from ROW		35'					
Side Setback	Side Setback	COA	Flood Zone				
15'	15'						
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: *Cash Proffer is due before issuing C.O.					

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

Planning & Zoning Officer: David Floyd Date: 8/19/19

Applicant/Contact: Ray Avery IV Phone: 674-0231 Ext. 6

Email: ray@Emerald-homes.com

CONTRACTOR INFORMATION	Contractor	Emerald Custom Homes		Phone	674-0231
	Address				
	P.O. Box 4309 Midlothian, 23112				
Contractor License Number	Type	Expiration			
210516550	Class A - BLD.	12/31/20			

Description of Work	Scope of Work:					
	Construct single family dwelling w/attached garage on Lot 9-1PP					
	SEWER	WATER	# of Bathrooms			
	Public/Private	Public/Private	2			
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms	
1	2768	2006	762	3		

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

VALUE OF WORK	
Building	\$155,155
Excludes All Trades Permits	

Application Fee	\$ 710 -
Zoning Fee	\$ 50 -
Septic/Well Fee	\$ 200 -
State Levy Fee	\$ 14.20
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.

Signature of Applicant: Ray Avery IV TR

Total: 8/21/19 \$1074.40

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Philip L. McDaniel, Attorney Telephone: 374-0380

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

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

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

APPROVAL _____ DATE _____

Code Official

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

ISSUED: 9-23-19

Application Date: 8-19-19
 Application Accepted: BP-2019-00750
 Old Map Number: 21-15-1-18-0
 GPIN: 6850-31-7189

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>3001 Preston Park Terr. (18-1) Sandy Hook, VA 23153</u>		District <u>Sandy Hook, VA 23153</u>		
	Owner <u>Earl Thomson, Inc.</u>		Phone #		
	Address <u>1930 Soldiers Lodge Rd., Crozier, VA. 23039</u>				
	Proposed Use <u>Single Fam</u>	Current Use <u>Same</u>	Existing Buildings on Property <u>N/A</u>		
	Proposed Occupant Load (Commercial) <u>N/A</u>	Acres <u>1.5</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Preston Park Sec. 1 Lot 18</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$21,302.00</u>	Date Paid: <u>Due</u>	
	New Street Address		Zoning District <u>R1</u>		
	Front Setback <u>4' from Row</u>	Center Line Setback	Rear Setback <u>35</u>	C.U. Permit	Variance
	Side Setback <u>25' from Row/Park Terr</u>	Side Setback <u>15'</u>	COA	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>* Cash Proffer due before issuing C.O.</u>		

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

Planning & Zoning Officer: David Boyd Date: 8/22/19

Applicant/Contact: Ray Avery IV Phone: 674-0231 Ext. 6
 Email: ray@Emerald-homes.com

Contractor: Emerald Custom Homes Phone: 674-0231
 Address: P.O. Box 4309 Midlothian, 23112
 Contractor License Number: 210516550 Type: Class A - BLD. Expiration: 12/31/20

Description of Work: Construct single family dwelling w/attached garage

SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2</u>	
# of Floors <u>2</u>	Total Sq. Ft. <u>2814</u>	Finished Sq. Ft. <u>2113</u>	Unfinished Sq. Ft. <u>703</u>
		# of Bedrooms <u>4</u>	

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

VALUE OF WORK \$160,192.50
 Building 160,188,192.50
 Excludes All Trades Permits

Application Fee \$ 132.80
 Zoning Fee \$ 50-
 Septic/Wall Fee \$ 200-
 State Levy Fee \$ 4.61
 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. true
 Signature of Applicant: Ray Avery IV Date: 8/15/19 # 1097.52

LIEN AGENT INFORMATION

Please check one of the following:

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

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

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

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

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Add 2% State Levy to fee

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

Add 2% State Levy to fee

RLD \$ 100.00

Septic & well \$ 40.80 For Commercial & Residential

Septic only \$ 25.44 for Commercial & Residential

Zoning Commercial \$ 100.00

Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official

ISSUED 9-6-19
BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317
LOT 7-1 READERS BRANCH

Application Date: 08-20-19
 Permit Number: BP-2019-00762
 Old Map Number: 58-53-0-7-0
 GPIN: 7726-14-0625

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 12164 Readers Pointe Dr <u>Manekin Sabot, VA</u>		District <u>23103</u>
Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663
Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
Proposed Use	Current Use	Existing Buildings on Property
Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision <u>Sec. 1, Lot 7</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$12,592.00</u>	Date Paid: <u>Due</u>
New Street Address		Zoning District <u>RPUD</u>	
Front Setback <u>30' from Prop. Line</u>	Center Line Setback	Rear Setback <u>25'</u>	C.U. Permit
Side Setback <u>10'</u>	Side Setback <u>10'</u>	Census Track	Flood Zone <u>X</u>
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>* Survey locate setbacks</u> <u>* Cash proffer due before issuing C.O.</u>	

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

Planning & Zoning Officer: David Boyd Date: 8/23/19

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

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

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE. PARTIALLY FINISHED BASEMENT				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. 4445	Finished Sq. Ft. 3638	Unfinished Sq. Ft. 807	# of Bedrooms 3

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

VALUE OF WORK	
Building	\$303,112.50
<i>Excludes All Trades Permits</i>	

Application Fee	<u>\$1376.01</u>
Septic/Well Fee	\$
State Levy Fee	<u>\$27.52</u>
Zoning Fee	<u>\$50-</u>
Total	<u>\$1453.53</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: *James*



BUILDING PERMIT APPLICATION

Application Date: 8/23/19 Rec: 8-26-19

Permit Number: BP-2019-00776

GPIN/Tax Map: 6778-41-6422/43-8-0-D-1

Issued: 9-23-19

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.

Site Address: 1854 Hawk Town Rd Maidens, VA 23102

Owner: James Buchanan & James Wake Phone #: 804-363-2427

Address: 2830 Stratford Rd Richmond, VA 23225 Email: jmmbuchananii@gmail.com

Applicant/Contact: James Buchanan / Buchanan Builders Phone #: SAME

Address: ~~2830~~ 11453 Rockville Rd Rockville, VA 23146 Email: SAME

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

Planning & Zoning Officer: [Signature] Date: 8/28/19 A2

Contractor: Buchanan Builders Phone: 804-363-2427

Address: 11453 Rockville Rd Rockville, VA 23146

Contractor License Number: 2701028126 Type: Class A Expiration: 6/30/2020

Scope of Work: Build single family residential structure w/ Attached Garage

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
		<u>2.5</u>	<u>4</u>	<u>2</u>
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u>2582 SF</u>	<u>180 780 SF</u>	<u>3362 3362 SF</u>		

Building Only - Excludes All Trades Permits

Value of Work: \$230,000

Application Fee	\$ <u>1,047.00</u>
State Levy Fee	\$ <u>20.94</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ _____
Total	\$ <u>1217.94</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant: [Signature] Date: 8/23/19

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: Meyer Goergen PC Telephone: 804-288-3600

Mailing Address: 1802 Bayberry Ct Suite 200 Richmond, VA 23226

OWNER'S STATEMENT

James Buchanan & James Wake of (address) 2830 Stratford Rd Richmond, VA 23225 affirm that I am the owner of a certain tract of parcel of land located at D Hawk Town Rd (GPIN 6778-41-6422) 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.

James Buchanan 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 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
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

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: 8-26-19
 Permit Number: BP-2019-00777
 GPIN/Tax Map: 6810-04-3363/17-9-0-2-0
 Issued: 9-23-19
 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 TBD 5318 Chimney Springs Dr, Goochland, VA 23063	Phone #
	Owner Joseph Haden	
	Address 14600 Turner Wootton Pkwy, Upper Marlboro, MD 20774	Email

APPLICANT INFORMATION	Applicant/Contact Sylvester Bryce	Phone # (804) 457-2730
	Address 2744 Hadensville-Fife Rd Goochland, VA 23063	Email Sylvester.bryce@fifeinc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Edgehill Hildesway	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 55' from ROW	Center Line Setback	Rear Setback 35'	CUP/Variance/COA
	Side Setback 20'	Side Setback 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer: David Floyd Date: 8/28/19		

CONTRACTOR INFORMATION	Contractor Fife Incorporated	Phone (804) 457-2730
	Address 2744 Hadensville-Fife Rd, Goochland, VA 23063	Email
	Contractor License Number 2705062758	Type CBC-RBC

DESCRIPTION OF WORK	Scope of Work: Construct new residential home			
	Proposed Use Residential	Current Use VACANT LOT	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A	
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 2.5	# of Bedrooms 3
	Finished Sq. Ft. 1996	Unfinished Sq. Ft. 440	# of floors 2	Total Sq. Ft. 2436

Building Only - Excludes All Trades Permits		Application Fee \$ 660.18
Value of Work	\$ 120,000. 144,040.00	State Levy Fee \$ 1320
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 \$ 723.38
Signature of Applicant	Date 8-26-2019	

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: _____ Telephone: _____

Mailing Address: _____

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 _____ 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: **9-12-19**

Application Accepted:

Old Map Number: **2019-00830**

GPIN: **1726-24-010158-1-0-93**

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: 12361 South Crossing Dr. GPS loc (37.662309, -77.678785)		District	
	Owner: Eagle Construction Mark Rainey		Phone #: 382-4028	
	Address: 1515 Hockett Road			
	Proposed Use: Residential	Current Use: Residential	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage: 1.53	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: R	Proffer: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	Side Setback	Side Setback	C O A	Flood Zone
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer: _____ Date: _____

Applicant/Contact: **Jack Beraman** Phone: **824-229-3964**
 Email: **jack@thedeck-tech.com**

Contractor: **JB Contracting Inc** Phone: **824-744-1001**
 Address: **17801 Hull St Rd Moseley VA 23120**
 Contractor License Number: **2705127080** Type: **Class A** CEC, PLE, RBC
 Expiration: **4-30-2021**

Description of Work: **Build a Pedestrian Bridge as per drawings for SECTION 1 Readers Brn**

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. 296.25	Finished Sq. Ft.	Unfinished Sq. Ft. 296.25	# of Bedrooms

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

VALUE OF WORK		Total \$145.35	Application Fee	\$ <u>142.50</u>
Building	<u>19,000.00</u>		Zoning Fee	\$ _____
Excludes All Trades Permits			Septic/Well Fee	\$ _____
			State Levy Fee	\$ <u>2.85</u>
			RLD	\$ _____

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

★ Signature of Applicant: _____



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: 9-6-19
 Permit Number: BP-2019-00807
 GPIN/Tax Map: 6850-55-7362/21-14-0-3-0
 Issued: 9/27/19
 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: 3118 Peter's Way
 Owner: Blaine Martin Phone #: 804-502-5156
 Address: 3118 Peter's Way Email: from Salena@verizon.net

APPLICANT INFORMATION
 Applicant/Contact: Jeff Harrington / Harrington Const. Co, Inc. Phone #: 804 741-6772
 Address: 1814 Ryandale Rd. Richmond VA 23238 Email: Harrington Construction@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Spring Valley Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 55' from Row Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____
 Side Setback: 20' Side Setback: 20' Flood Zone: _____

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 9/10/19 AI

CONTRACTOR INFORMATION
 Contractor: Harrington Construction Co, Inc. Phone: Same as above
 Address: 1814 Ryandale Rd. Richmond VA 23238 Email: _____
 Contractor License Number: 2705022365 Type: A Expiration: 10-31-19

DESCRIPTION OF WORK
 Scope of Work: construct a screen porch over the existing deck
 Proposed Use: screen porch Current Use: deck Environmental Impacts (stream crossing, wetlands, amt land disturbed): None
 SEWER Public/Private WATER Public/Private # of Bathrooms: _____ # of Bedrooms: _____ # of floors: _____
 Finished Sq. Ft.: 0- Unfinished Sq. Ft.: 240 Total Sq. Ft.: 240

Building Only - Excludes All Trades Permits

Value of Work	<u>20,000</u>	Application Fee	\$ <u>102-</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>9-6-19</u>		State Levy Fee	\$ <u>2.04</u>
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25-</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>129.04</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8-29-19
 Permit Number: BD-2019-00790
 GPIN/Tax Map: 6797-49-3297 / 46-19-0-150
 Issued: 9-11-19

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>1159 Tricounty Dr.</u>	
	Owner	<u>Alija Smajlagic</u>	Phone # <u>804-683-1413</u>
APPLICANT INFORMATION	Address	<u>9018 Sparrow Dr.</u>	Email <u>NATRUCKING&DISPATC</u>
	Applicant/Contact	<u>Alija Smajlagic</u>	Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	<u>Old Dominion Industrial</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback	<u>20' from Row</u>	Center Line Setback		Rear Setback <u>50' for buffer</u>	CUP/Variance/COA	
	Side Setback	<u>10'</u>	Side Setback	<u>10'</u>	Flood Zone	<u>R2-1987-2</u>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Approval for setbacks only, may need PUD.</u>				
	Planning & Zoning Officer	<u>David Boyd</u>	Date	<u>8/30/19</u>			<u>MI</u>

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

DESCRIPTION OF WORK	Scope of Work: <u>Permit revised 9/19/19 to increase garage to 50x40x30 Prefab's Detached Garage for N+A Truck</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.			
		<u>1200</u>	<u>1500</u>	<u>1200</u> <u>1500</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>315.00</u>
Value of Work	<u>\$23,000</u> \$42,000 <u>52,500.00</u>	State Levy Fee	\$ <u>6.30</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>371.30</u>
Signature of Applicant	<u>Alija Smajlagic</u>	Date	<u>8-29-19</u>
		Revision Fee	<u>\$80.33</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: 9-24-19

Permit Number: BP-2019-00872

GPIN/Tax Map: 6738-45-9494

Issued: 9/27/19

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>4266 River Road West Goochland, VA. 23063</u>	
	Owner <u>James R. Tate</u>	Phone # <u>804-221-0117</u>
	Address <u>P.O. Box 892 Goochland V.A. 23063</u>	Email <u>JRT706AOL.COM</u>
APPLICANT INFORMATION	Applicant/Contact <u>[Signature]</u>	
	Address <u>[Signature]</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>[Signature]</u>		Phone
	Address		
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Replacement of front porch.</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	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft. <u>[Signature]</u>		Unfinished Sq. Ft. <u>37</u>	Total Sq. Ft. <u>37</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 1,200.</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 9-23-19

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</u>

Doc: 9-16-19

 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: <u>9-20-19</u>
	Permit Number: <u>EP-2019-00855</u>
	GPIN/Tax Map: <u>6161-84-4770/43-34-050</u>
	Issued: <u>9-26-19</u>
<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial	
This application is <u>not</u> 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>1833 Summer Lane, Maidens VA 23102</u>
	Owner <u>George Peyton</u> Phone # <u>804 334-2932</u>
	Address <u>1833 Summer Lane</u> Email

APPLICANT INFORMATION	Applicant/Contact <u>DAVID ECKLES</u> Phone # <u>804-264-9797</u>
	Address <u>10010 THREE CHOPT RD</u> Email <u>DAVID@REGALHOMEIMPROVEMENT.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Longwood</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' FROM ROAD</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>35'</u>	Side Setback <u>35'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 9/26/19 A2

CONTRACTOR INFORMATION	Contractor <u>OWNER</u> <u>LEE BUTCHERS Supply, CO</u> Phone <u>804-264-9797</u>
	Address <u>10010 THREE CHOPT ROAD</u> Email <u>DAVID@REGALHOMEIMPROVEMENT.COM</u>
	Contractor License Number <u>2701010533</u> Type <u>Residential</u> Expiration <u>9/30/19</u>

DESCRIPTION OF WORK	Scope of Work: <u>ENCLOSING A CURRENT PORCH TO MAKE IT A FOUR SEASON FLORIDA ROOM & STAIR LANDING</u>			
	Proposed Use <u>ENCLOSED PORCH</u>	Current Use <u>OPEN PORCH</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>	
	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. <u>224 sq/ft</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>224 sq/ft</u>	

Building Only - Excludes All Trades Permits Value of Work <u>\$22,000.00</u>	Application Fee \$ <u>111.00</u> State Levy Fee \$ <u>2.22</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>138.22</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>9-16-19</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: **Rec: 9-6-19**Permit Number: **BP-2019-00802**GPIN/Tax Map: **6767-39-9994 / 431-0-2-A**Issued: **9-25-19**

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: **HIDDEN ROCK PARK**

Owner: **Goochland County** Phone #: **536-5855**

Address: **1920 Hidden Rock Lane** Email: **d.stamey@goochlandva.gov**

APPLICANT INFORMATION
 Applicant/Contact: **JEFF STAKE** Phone #: **804-334-4092**

Address: _____ 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 REJECTED COMMENTS: _____
 Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION
 Contractor: **WOODMONT CONSTRUCTION** Phone: **804-556-3589**

Address: **3108 Rock Crest Lane 23153** Email: **WOODMONT-STAKE@MSN.COM**

Contractor License Number: **2705032394A** Type: **A** Expiration: **MSN.COM**

DESCRIPTION OF WORK
 Scope of Work: **construction of single leafing cage at Hidden Rock Park** **228-21**

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.		
	1000	1000		

Building Only - Excludes All Trades Permits
 Value of Work: **\$21,000**

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: **9/25/19**

SWAN COUNTY PROJECT

Application Fee	\$	
State Levy Fee	\$	
Septic/Well Fee	\$	
Zoning Fee	\$	
RLD	\$	
SWP	\$	
Total	\$	0

Issued 7-15-19

BUILDING PERMIT APPLICATION

Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317
LOT 10-1 READERS BRANCH

Application Date: *6-14-19*
 Permit Number: *BP-2019-00593*
 Old Map Number: *58-53-0-10-0*
 GPIN: *M26-14-3455*

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 12142 Branch Overlook Dr <i>Manekin Sabot, VA 23103</i>	District
	Owner EAGLE CONSTRUCTION OF VA., LLC	Phone # 804-741-4663

OWNER INFORMATION	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
	Proposed Use	Current Use	Existing Buildings on Property
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Readers Branch</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <i>\$12,592.00</i>	Date Paid: <i>Due</i>
	New Street Address		Zoning District	

Front Setback <i>30' from property</i>	Center Line Setback <i>Line</i>	Rear Setback <i>25'</i>	C.U. Permit	Variance
Side Setback <i>15' from front do</i>	Side Setback <i>10'</i>	Census Track	Flood Zone <i>X</i>	

APPROVED REJECTED COMMENTS: ** Survey locate setbacks. * Cash Proffer due before issuing C.O.*

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 *6/19/19*

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

Email: *bjames@eagleofva.com*

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

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE <i>Partially finished basement</i> <i>Permit revised 9/24/19 to convert 185 sq ft of unfinished space into fourth bedroom and closet</i>				
	SEWER <i>Public/Private</i>	WATER <i>Public/Private</i>	# of Bathrooms		
	# of Floors <i>2</i>	Total Sq. Ft. <i>3801</i>	Finished Sq. Ft. <i>2700</i> 2894	Unfinished Sq. Ft. <i>1092</i> 907	# of Bedrooms <i>4</i>

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

VALUE OF WORK

Building	\$244,125.00 <i>251,062.50</i>
Excludes All Trades Permits	

Application Fee	\$110.50
Septic/Well Fee	\$
State Levy Fee	\$22.21
Zoning Fee	\$50-
Total	\$182.71

Relinquish Fee \$31.85

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]*

Revised 5-6-19 - remove ...

Revised 9/25/19 to change 1854 sq ft of unfinished basement into finished Rec Room.

<p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date: July 7, 2018 <i>Rec 8.3.18</i>
	Permit Number: <i>BP-2018-00615</i>
	GPIN/Tax Map: <i>6749-76-4108/29-1-0-82</i>
	Issued: <i>8.6.18</i>
	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: <i>2744 Dogtown Road, Goochland, VA (GPIN 6449-76-4108)</i>	
	Owner: <i>Cornelius Pondridge</i>	Phone #: <i>804-677-5626</i>
	Address: <i>3535 Whitehall Rd, Sandy Hook, VA 23153</i>	Email:

APPLICANT INFORMATION	Applicant/Contact: <i>THS Construction / Terry Shoemaker</i>	Phone #: <i>804-525-5036</i>
	Address: <i>1708 Belleville ST., Richmond, VA, 23230</i>	Email: <i>terry@thsconstruction.com</i>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: <i>None</i>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <i>—</i>	Date Paid: <i>—</i>
	Front Setback: <i>55' from ROW</i>	Center Line Setback: <i>—</i>	Rear Setback: <i>35'</i>	CUP/Variance/COA: <i>—</i>
	Side Setback: <i>20'</i>	Side Setback: <i>20'</i>	Flood Zone: <i>—</i>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>David Ford</i> Date: <i>8/7/18</i> <i>AI</i>				

CONTRACTOR INFORMATION	Contractor: <i>THS Construction Christopher T. Robbins</i>	Phone: <i>804-525-5036</i>
	Address: <i>PO Box 218, Oilville, VA 23129 Henrico, VA 23228</i>	Email: <i>terry@thsconstruction.com</i>
	Contractor License Number: <i>2705-110435</i>	Type Class: <i>A</i>

DESCRIPTION OF WORK	Scope of Work: <i>Construction of new dwelling - Unfinished Basement Decks & Porches - 764 sq. ft. (Attached Garage)</i>				
	Proposed Use: <i>residential dwelling</i>	Current Use: <i>N/A</i>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <i>approx 1-acre land disturbance for construction of dwelling - 49,000 sq. ft.</i>		
	SEWER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms: <i>5 1/2</i>	# of Bedrooms: <i>5</i>	# of floors: <i>3</i>
	Finished Sq. Ft. <i>4258 + 1854 = 6112</i>	Unfinished Sq. Ft. <i>2654 + 764 = 3418</i>	Total Sq. Ft. <i>6902 + 764 = 7676</i>		

Building Only - Excludes All Trades Permits		Application Fee: <i>\$2294.38</i>
Value of Work: <i>\$400,000</i> <i>\$507,195.00</i>	<i>+ 344 = 3762</i>	State Levy Fee: <i>\$46.09</i>
<i>\$521,815.00</i>	<i>1854 = 1908</i>	Septic/Well Fee: <i>\$40-</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.		Zoning Fee: <i>\$50-</i>
Signature of Applicant: <i>[Signature]</i>	Date: <i>8/2/18</i>	RLD: <i>\$100-</i>
		SWP: <i>\$-</i>
		Total: <i>\$2531.07</i>

Revision Fee 670
Revision Fee 428.77



BUILDING PERMIT APPLICATION

Application Date: ~~9/14/2019~~ **Dec: 9-12-19**

Permit Number: **BP-2019-00832**

GPIN/Tax Map: **6767-02-7460/42-1-0-40-0**

Issued: **9-20-19**

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 2931 River Road West	
	Owner Goochland County	Phone # 804-556-5802
	Address P. O Box 10 Goochland VA 23063	

APPLICANT INFORMATION	Applicant/Contact Ryan Haskell		Phone # 804-357-0960
	Address 3419 Westwood Ave Richmodn, 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 Sermat Construction Services		Phone 804-264-4800
	Address 2419 Westwood Ave Richmond, VA 23230		Email RHASKELL@SERMAT.COM
	Contractor License Number 2701025440CBC-RBC	Type Class A	Expiration 10/31/2019

Scope of Work: Interior renovation to change Office #1,#2,#3 into 4 total offices, replace Bathroom Fixtures in the 2 existing bathrooms, remove existing Partition walls in the rear office room, add a wet bar in the rear office, repalce interior finishes

Proposed Use Commercial	Current Use commercial	Environmental Impacts (stream crossing, wetlands, amt land disturbed) No		
<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 2	# of Bedrooms	# of floors
Finished Sq. Ft. 2300	Unfinished Sq. Ft. 0	Total Sq. Ft. 2300		

Building Only - Excludes All Trades Permits

Value of Work **80,000**

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.

Full amount

Application Fee	\$
State Lav Fee	\$
Septic Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$



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: 09/10/2019

Permit Number: BP-2019-00828

GPIN/Tax Map: 6779-85-1101 / 32-1-0-100

Issued: 9-20-19

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 2754 Perkinsville Road Maidens Va. 23102	
	Owner Donald W. Ford	Phone # 804-339-1691
	Address 2754 Perkinsville Road Maidens Va. 23102	Email donnieford@outlook.com

APPLICANT INFORMATION	Applicant/Contact Donald Ford	Phone # 804-339-1691
	Address 2754 Perkinsville Road Maidens Va.23102	Email donnieford@outlook.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 N/A <u>Owner</u>	Phone
	Address	Email
	Contractor License Number <u>Finish off</u>	Type

DESCRIPTION OF WORK	Scope of Work: Complete a second story Bedroom, bath and family room. Area was roughed in as part of original construction in 2018. Permit # BP-2017-00957. Framing was completed at that time. Square Footage estimate is 700 sq ft.				
	Proposed Use Residential	Current Use Residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 1	# of Bedrooms 1	# of floors 1
	2346 Finished Sq. Ft.	700 Unfinished Sq. Ft.	3046 Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>34.50</u>
Value of Work <u>\$5,000.00</u>		State Levy Fee	\$ <u>.69</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	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>35.19</u>

Signature of Applicant Donald W. Ford Date 9/10/2019

Rec: 9-11 288
672
960



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: 9-11-19

Permit Number: BP-2019-00829

GPIN/Tax Map: 5789-58-4636/15-5-0-14-0

Issued: 9-20-19

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>2641 DEERHAVEN TRAIL Columbia, VA. 23038</u>	
	Owner <u>JOE JOSEPH & BONNIE FIELD</u>	Phone # <u>434-996-6092</u>
	Address <u>2641 DEERHAVEN TRAIL</u>	Email <u>ABARNY090@Gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>JOE FIELD</u>	
	Address <u>2641 DEERHAVEN TRAIL</u>	Email <u>SA.</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>JAMES RIVER PARK</u>	Proffer <input checked="" 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 <u>SA.</u>
	Address <u>SA</u>		Email <u>SA.</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>To Enclose Existing 2 story Porch closet for Florida room - NOT GOING OUTSIDE OF</u>				
	Proposed Use <u>Porch Florida Room</u>	Current Use <u>Unfinished</u>	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 <u>NA.</u>	# of Bedrooms	# of floors
	Finished Sq. Ft. <u>472</u>	Unfinished Sq. Ft. <u>288</u>	Total Sq. Ft. <u>960</u>		

Building Only - Excludes All Trades Permits

Value of Work <u>25,000</u> <u>21,400</u>
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Application Fee	\$ <u>108.30</u>
State Levy Fee	\$ <u>2.17</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>110.47</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 Joseph A. Field Date 9-11-2019

existing footprint

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: 9-5-19
 Application Accepted: BP-2019-00801
 Old Map Number: 2-1-0-1-TW
 GPIN: 6814-57-2695-9998

ISSUED: 9-20-19

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>5620</u> 5677 Three Chopt Road, Louisa VA 23093		District	
	Owner Crown Communications, Inc.		Phone #	
	Address PMB 353 (868064), McMurry, PA 17837			
	Proposed Use No Change	Current Use Cell Tower	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____	
New Street Address		Zoning District <u>A-1</u>		
Front Setback <u>55' from ROW</u>	Center Line Setback	Rear Setback <u>5'</u>	C.U. Permit	Variance
Side Setback <u>5'</u>	Side Setback <u>5'</u>	COA	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>No change to existing footprint.</u> <u>141</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: 9/9/19

Applicant/Contact: Donna Camron - Jacobs Telecommunication Phone: 770.312.0546

Email: Donna.Camron@jacobs.com

CONTRACTOR INFORMATION	Contractor Jacobs Telecommunication		Phone 770.312.0546	
	Address 200 North Warner Road, Suite 203, King of Prussia PA 19406			
	Contractor License Number Attached	Type Contractors	Expiration 2020	

Description of Work	Scope of Work: Removal and replacement of antennas and associated equipment. Please see attached drawings for complete scope of work				
	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		Total: \$ 76.50	Application Fee	\$ 75.00
Building	\$10,000		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$
			State Levy Fee	\$ 1.50
			Total	\$ 126.50

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

Signature of Applicant: Donna Camron



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: 4/11/19
 Permit Number: BP-2019-00355
 GPIN/Tax Map: 5892-95-0301 / 9-2-0-1-B
 Issued: 5-8-19
 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>4043 Shannon Hill Rd, Columbia, Va. 23038</u>	
	Owner <u>Gary & Daray Kiesinger</u>	Phone # <u>(804) 301-9837</u>
	Address <u>Same as above</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>Same as above</u>	Phone #
	Address	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 Property Line</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 <u>David Floyd</u> Date <u>4/17/19</u> 191			

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

DESCRIPTION OF WORK	Scope of Work: <u>30 x 32 addition onto existing house to include den, storage, art studio, and dining room revised 9/18/19 to add</u>				
	Proposed Use <u>Storage, den, art studio</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>960</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>960</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$12,000</u>
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Application Fee	\$ <u>249.60</u>
State Levy Fee	\$ <u>4.99</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>2500</u>
RLD	\$ <u>0</u>
SWP	\$ _____
Total	\$ <u>27959</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 Man K Date 4/11/19

Bathroom & Closet



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: 4-9-19
 Permit Number: BP-2019-00336
 GPIN/Tax Map: 6777-77-0690 / 43-40-C-8-D
 Issued: 4-26-19
 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>2122 Jockey Ridge Road</u>	
	Owner <u>Krickovic & Ziegler, LLC</u>	Phone # <u>804-569-9745</u>
	Address <u>PO Box 1510, Mechanicsville, VA 23116</u>	Email <u>lonnie@kandzbuilders.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Lonnie Wynn</u>	
	Address <u>PO Box 1510, Mechanicsville, VA 23116</u>	Phone # <u>804-569-9745</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze H.11 Sec.2</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$20,910.00</u>	Date Paid <u>Done</u>
	Front Setback <u>40' from rear</u>	Center Line Setback <u>65'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Survey locate rear setback</u> <u>* Cash Proffer due before issue</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>4/10/19</u> CO. RP			

CONTRACTOR INFORMATION	Contractor <u>Krickovic & Ziegler, LLC</u>		Phone <u>804-569-9745</u>
	Address <u>PO Box 1510, Mechanicsville, VA 23116</u>		Email <u>lonnie@kandzbuilders.com</u>
	Contractor License Number <u>2705100072</u>	Type Class <u>A</u>	Expiration <u>11-30-2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>Single family home with attached 2 car garage and basement.</u> <u>+ convert 180 sq ft unfinished</u> <u>revised 6/20/19 increased deck by 135 sq ft to finished wine cellar in rear</u>				
	Proposed Use <u>Residential</u>	Current Use <u>n/a</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) USACOE Jurisdictional Wetlands <u>19,012.49 sqft</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 1/2</u>	# of Bedrooms <u>4</u>	# of floors <u>2 + basement</u>
	Finished Sq. Ft. <u>5433</u>	Unfinished Sq. Ft. <u>2014</u>	Total Sq. Ft. <u>7447</u>		
	<u>5766</u>		<u>1813</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2847.00</u>	
Value of Work <u>\$ 630,000.00</u>		State Levy Fee \$ <u>5774.00</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>4/9/19</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>3294.74</u>	

Permit revised 9/17/19 to convert 12.8x12' (153 sq ft) into driveway - around trees.