



BUILDING PERMIT APPLICATION

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

Application Date: 3-13-2019

Permit Number: DP-2019-00258

GPIN/Tax Map: 6831-53-2264 / 12-1-0-70-0

Issued: 3-19-19

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>Ethel W. Clarke</u>	
	Owner <u>4014 Cedar Plains Rd.</u>	Phone # <u>804-839-4114</u>
	Address <u>Sandy Hook, Va. 23153</u>	Email <u>804-839-4114</u>

APPLICANT INFORMATION	Applicant/Contact <u>Owner</u>	
	Address <u>4014 Cedar Plains Rd Sandy Hook, Va 23153</u>	Phone # <u></u>
		Email <u></u>

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

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

DESCRIPTION OF WORK	Scope of Work: <u>Replace existing sun room 14'x14' - SAME FOOTPRINT</u> <u>Revised 9/16/19 - Changing sun room to screened in porch</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. <u>196</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>196</u>		

Building Only - Excludes All Trades Permits

Value of Work

~~\$4,500.00~~ 10,780

Application Fee	\$ <u>100.51</u>
State Levy Fee	\$ <u>1.21</u>
Septic/Well Fee	\$ <u> </u>
Zoning Fee	\$ <u> </u>
RLD	\$ <u> </u>
SWP	\$ <u> </u>
Total	\$ <u>101.72</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

Ethel W. Clarke

Date

3/13/19



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

Residential Commercial

Application Date: 9/16/19
 Permit Number: BP-2019-00839
 GPIN/Tax Map: 7718-01-2075 / 46-14-0-2-0
 Issued: 9/19/19

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>563 DAWNINGTON DRIVE MANASSAS-SABOT, VA 23103</u>	
	Owner <u>LOUIS CRAIG</u>	Phone # <u>804-310-1461</u>
	Address <u>563 DAWNINGTON DR MANASSAS-SABOT, VA 23103</u>	Email <u>LOUIS.CRAIG1@COMCAST.NET</u>

APPLICANT INFORMATION	Applicant/Contact <u>LOUIS CRAIG</u>	Phone # <u>SAME AS ABOVE</u>
	Address <u>563 DAWNINGTON DR. MANASSAS-SABOT, VA 23103</u>	Email <u>SAME AS ABOVE</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>home owner</u>		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Replace existing deck on rear of House 10'x36'</u> <u>NO CHANGE TO EXISTING FOOTPRINT</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>360</u>	Total Sq. Ft. <u>360</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30.00</u>
Value of Work	<u>\$3310.00</u> <u>\$3,600.00</u>	State Levy Fee	\$ <u>60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Louis Craig</u> Date <u>9/16/19</u> <u>\$3310</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>30.60</u>

8-9-19



BUILDING PERMIT APPLICATION

Application Date: 08/05/19

Permit Number: BP-2019-00730

GPIN/Tax Map: 7134-12-2293/64-1-0-48-0

Issued: 9-18-19

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 12445 Patterson Avenue, Richmond, VA 23238	
	Owner Hope Church	Phone # 804-708-5330
	Address 12445 Patterson Avenue, Richmond, VA 23238	Email ghayes@hopecentral.com

APPLICANT INFORMATION	Applicant/Contact Gibson Luck		Phone # 804-249-2600
	Address 4198 Cox Rd, Suite 107, Glen Allen, VA 23060		Email gluck@dcpgc.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>100' from Rev</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: Daniel Floyd Date: 8/13/19 #2

CONTRACTOR INFORMATION	Contractor Dominion Construction Partners		Phone 804-249-2600
	Address 4198 Cox Rd, Suite 107, Glen Allen, VA 23060		Email gluck@dcpgc.com
	Contractor License Number 2705115874	Type A	Expiration 06/30/2021

Scope of Work: Includes site clearing, underground utility tie-in, setting modular unit. for office/meeting space - at Hope Church

Proposed Use Offices	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 4,655 SF		
SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 1	# of Bedrooms 0	# of floors 1
Finished Sq. Ft. 1,440		Unfinished Sq. Ft. 0		Total Sq. Ft. 1,440

Building Only - Excludes All Trades Permits

Value of Work	<u>\$101,625 \$126,720.00</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: _____ Date: 08/05/19

Application Fee	\$ <u>950.40</u>
State Levy Fee	\$ <u>19.01</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1069.41</u>



BUILDING PERMIT APPLICATION

Application Date: 9-9-19

Permit Number: BP-2019-00814

GPIN/Tax Map: 6789-03-3142/32-12-046

Issued: 9-17-19

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.

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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>2705 Buckhorn Hills</u>	
	Owner <u>George Smart</u>	Phone # <u>804-314-2333</u>
	Address <u>2705 Buckhorn Hills MAIDENS, VA.</u>	Email <u>CATTAIL_FORG@ALWAYS PLANT SMART</u>

APPLICANT INFORMATION	Applicant/Contact <u>George Smart</u>	Phone #
	Address <u>SAME</u>	Email <u>SAME</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from ROW</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David Ford</u> Date <u>9/11/19</u> A2			

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

DESCRIPTION OF WORK	Scope of Work: <u>16 x 35 Deck</u>				
	Proposed Use <u>DECK</u>		Current Use <u>NONE</u>		
	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>520</u>	Total Sq. Ft. <u>520</u>		

Building Only - Excludes All Trades Permits

Value of Work \$5,200.00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant George Smart Date 9-9-19

Application Fee	\$ <u>35.40</u>
State Levy Fee	\$ <u>.71</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>61.11</u>

Rec: 9-10-19

 <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: <u>September 9, 2019</u>
	Permit Number: <u>BP-2019-00826</u>
	GPIN/Tax Map: <u>30-1-0-76-0 / 6758-87-7481</u>
	Issued: <u>9-17-19</u>

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>2314 Sandy Hook Road, Goochland, Virginia 23063</u>	
	Owner <u>Roland P III Clement & Roland P JR Clement</u>	Phone # <u>(804) 564-6964</u>
	Address <u>3275 Cooley Road, Gum Spring, Virginia 23065</u>	Email <u>Ebrookslyon@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>JES Construction, LLC / Karen Vasquez</u>	
	Address <u>2410 Southland Drive, Chester, Virginia 2383</u>	Email <u>Kvasquez@jeswork.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>100' from ROW</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*No change to Foot print.</u> Planning & Zoning Officer: <u>David Boyd</u> Date: <u>9/12/19</u> 132			

CONTRACTOR INFORMATION	Contractor <u>JES Construction, LLC</u>		Phone _____
	Address <u>2410 Southland Drive, Chester, Virginia 23831</u>		
	Contractor License Number <u>2705068655</u>	Type <u>A</u>	Expiration <u>4-30-2020</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install (9) Intellijacks and Install 18' Linear Feet of Supplemental Beam</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 <u>3</u>	# of Bedrooms <u>1</u>	# of floors _____
	Finished Sq. Ft. _____	Unfinished Sq. Ft. _____	Total Sq. Ft. <u>2,246</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>7321</u> State Levy Fee \$ <u>1.46</u> Septic/Well Fee \$ _____ Zoning Fee \$ _____ RLD \$ _____ SWP \$ _____ Total \$ <u>7467</u>
Value of Work	<u>13,601.00</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>Karen Vasquez</u> Date <u>9/9/2019</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: 9/5/19

Permit Number: BP-2019-00823

GPIN/Tax Map: 63-38-0-31-0 / 724-14-4006

Issued: 9-12-19

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 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 316 Victoria Way	
	Owner William Ringuette	Phone # (804) 708-0384
	Address 316 Victoria Way Richmond, VA 23238	Email

APPLICANT INFORMATION	Applicant/Contact Power Home Solar/Aleah Bickerstaff	Phone # 704-200-9715
	Address 919 N Main Street Mooresville, NC 28115	Email abickerstaff@powerhome.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 Power Home Solar	Phone 704-200-9715
	Address 919 N Main Street Mooresville, NC 28115	
	Contractor License Number 2705165346	Type AES, ELE, ROC

DESCRIPTION OF WORK	Scope of Work: 20 roof mounted solar modules, grid tied 6.00 kW on existing residence			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$15.84
Value of Work \$14,188.20		State Levy Fee \$1.52
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
Signature of Applicant <u>Dyan J. [Signature]</u> Date <u>9/5/19</u>		Zoning Fee \$
		RLD \$
		SWP \$
		Total \$17.36

BUILDING PERMIT APPLICATION

JNTY

Department of Building Inspection
 Box 119
 Highland, VA 23063
 556-5815 Fax (804) 556-5651
 711 VA Relay

Application Date: 9/4/19
 Permit Number: BP-201900799
 GPIN/Tax Map: 6787-18-8611
 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.

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>1165 Hawkford CT Maidens, 23102</u>			
	Owner <u>Jeff Nagle</u>	Phone # <u>804-301-9067</u>		
	Address <u>1165 Hawkford CT</u>	Email		
APPLICANT INFORMATION	Applicant/Contact <u>Bruno Roy</u>		Phone # <u>804-683-8518</u>	
	Address <u>3100 Mill Trace Ln Sandy Hook</u>		Email <u>off2hcky@aol.com</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Somerset</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from ROW</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>9/9/19</u> RP			

CONTRACTOR INFORMATION	Contractor <u>BGR LLC / Bruno Roy</u>		Phone <u>804-683-8518</u>
	Address <u>3100 Mill Trace Ln</u>		Email <u>off2hcky@aol.com</u>
	Contractor License Number <u>2705164507</u>	Type <u>A</u>	Expiration <u>8/31/21</u>

DESCRIPTION OF WORK	Scope of Work: <u>Remove existing deck and replace with new deck with partial screened in porch.</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>406</u>	Total Sq. Ft. <u>406</u>		

Building Only - Excludes All Trades Permits

Value of Work <u>11,165</u>	Application Fee \$ <u>62.25</u>
	State Levy Fee \$ <u>1.24</u>
	Septic/Well Fee \$
	Zoning Fee \$ <u>25.00</u>
	RLD \$
	SWP \$
	Total \$ <u>98.49</u>

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

Signature of Applicant: [Signature] Date: 9/4/19



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: 8/8/2019

Permit Number: BP-2019-00735

GPIN/Tax Map: 6801-19-0772/98-0-K-0

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.

Residential Commercial

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OWNER INFORMATION	Site Address 3845 Belzora Lane, Columbia, VA 23038	
	Owner Chris Hilliar	Phone # (804) 640-2356
	Address 3845 Belzora Lane, Columbia, VA 23038	Email chilliar313@gmail.com

APPLICANT INFORMATION	Applicant/Contact Britney Myers - PEG Alternative Energy Inc.		Phone # (804)299-3296
	Address 11044 Richardson Rd. Ste. A29 Ashland, VA 23005		Email permitting@pegalte.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 PEG Alternative Energy Inc.		Phone (804)299-3296
	Address 11044 Richardson Rd. Ste. A29 Ashland, VA 23005		Email permitting@pegalte.com
	Contractor License Number 2705159755	Type AES, ELE	Expiration 4/30/2021

DESCRIPTION OF WORK	Scope of Work: 28 photovoltaic panels roof mounted, grid tied to utility.				
	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	\$4,865.25
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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 Britney Myers Date 8/8/2019

Application Fee	\$ <u>33.89</u>
State Levy Fee	\$ <u>.68</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>34.57</u>



BUILDING PERMIT APPLICATION

Application Date: 8-29-19
 Permit Number: BD-2019-00790
 GPIN/Tax Map: 6797-49-3297 / 46-19-0-15-0
 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.

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Residential Commercial

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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>NATRUCKINGDISPATC</u>
	Applicant/Contact <u>Alija Smajlagic</u>	Phone #
	Address	Email

H@ma

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 PDD</u>			
	Planning & Zoning Officer <u>Daniel Boyd</u>	Date <u>8/30/19</u>	MI	

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

DESCRIPTION OF WORK	Scope of Work: <u>40x30 Prefab Detached Garage for N+A Trucking</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>1200</u>	Total Sq. Ft. <u>1200</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>315.00</u>
Value of Work	<u>\$23,000</u> \$42,000	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>



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: 9.5.19

Permit Number: BP-2019-00804

GPIN/Tax Map: 6966-45-4187/54-1-0-2-0

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.

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>2579 River Rd W, Maidens, Va 23102</u>	
	Owner <u>David & Kathy Nuckols</u>	Phone # <u>804 382 6365</u>
	Address <u>2579 River Rd. W., Maidens, Va 23102</u>	Email <u>nuck2225@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>David Nuckols</u>	
	Address <u>2579 River Rd. W. Maidens, Va 23102</u>	Email <u>nuck2225@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>100' from ROW</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>[Signature]</u> Date <u>9/10/19</u> A2			

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

DESCRIPTION OF WORK	Scope of Work: <u>Addition to existing house, to include master bath, great room, kitchen and garage. ^{attached} 3 Bed room to remain 3 bedroom</u>				
	Proposed Use <u>Residential</u>	Current Use <u>Residential</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>1.5</u>	# of Bedrooms <u>0 / 3</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>1641</u>	Unfinished Sq. Ft. <u>840</u>	Total Sq. Ft. <u>2481</u>		

Building Only - Excludes All Trades Permits		Application Fee <u>687.00</u> State Levy Fee \$ <u>13.74</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>725.74</u>
Value of Work	<u>\$150,000</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<u>[Signature]</u>	
Date	<u>9/4/2019</u>	

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 566-5661 TDD 711 Va Relay

PP-2019-00808

Application Accepted: 9-6-19

Old Map Number: 48-18-0-2-D

GPIN: 7738-11-6644

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.

OWNER INFORMATION	Site Address 7192 Yare St. Glen Allen, VA 23059		District	
	Owner Robert Marsh		Phone # 241-8382	
	Address 7192 Yare St.			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage 0.20	Commercial Use <input 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
	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: DAN Swords Jr Phone 994-3429

Email: DAN@bwbbuilders.com

Contractor BWW Builders Phone 346-3300

Address 8601 Staples Mill Rd. Richmond
 Contractor License Number 2705 108 250 Type A Expiration 6/30/2020

Description of Work: Scope of Work: To build a 12'x12' Screen Porch onto existing deck. Upgrade Footings as needed. *not going outside of footprint*

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. 144	Finished Sq. Ft.	Unfinished Sq. Ft. 144	# of Bedrooms

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

VALUE OF WORK	
Building	15,000
<i>Excludes All Trades Permits</i>	

Application Fee	\$19.50
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 1.59
REG Total	\$ 21.09

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: [Handwritten Signature]



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8/20/19

Permit Number: BP-2019-00767

GPIN/Tax Map: 7707-76-8441 / 46-27-B-19-0

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>2244 Wheatlands Dr, Manakin Sabot</u>	
	Owner <u>Joe Watson</u>	Phone # <u>(804) 852-0337</u>
	Address <u>2244 Wheatlands Dr.</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Donald Nunnally</u>	Phone # <u>(804) 339-9106</u>
	Address <u>3010 Skippers Ridge Powhatan Va 23139</u>	Email <u>denunnally@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Wheatlands</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from Row</u>	Center Line Setback <u>80'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: [Signature] Date: 8/23/19 RR

CONTRACTOR INFORMATION	Contractor <u>D.E. Nunnally Contractor Inc</u>	Phone <u>(804) 598-7135</u>
	Address <u>3010 Skippers Ridge Powhatan Va 23139</u>	Email <u>denunnally@gmail.com</u>
	Contractor License Number <u>2705085006</u>	Type <u>CBC/GFC/AG/RCC</u>

Scope of Work:
Build 30x48 Detached garage.

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>N.A.</u>	# of Bedrooms <u>N.A.</u>	# of floors <u>2</u>
Finished Sq. Ft. <u>N.A.</u>	Unfinished Sq. Ft. <u>1952</u>	Total Sq. Ft. <u>1952</u>		

Building Only - Excludes All Trades Permits

Value of Work <u>\$55,000</u>	<u>\$63,440.00</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: 8/13/19

Application Fee	\$ <u>297.48</u>
State Levy Fee	\$ <u>5.95</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>328.43</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: 7-8-19

Permit Number: BP-2019-00657

GPIN/Tax Map: 6717-64-5567 39-1-0-21-0

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.

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: 4997 Saint Pauls Church Road

Owner: County United Methodist Church Phone #: _____

Address: 4997 Saint Pauls Church Road Email: _____

APPLICANT INFORMATION

Applicant/Contact: Andrew Browning Phone #: 804-291-8697

Address: 7309 Hemover Green Drive Mechanicsville, VA 23111 Email: abrowning@youngblood-tyler.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

Front Setback: 75' from ROW Center Line Setback: _____ Rear Setback: 5' CUP/Variance/COA: _____

Side Setback: 5' Side Setback: 5' Flood Zone: _____

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: [Signature] Date: 7/16/19 AI

CONTRACTOR INFORMATION

Contractor: Andrew Browning on behalf of County Church Phone: 804-291-8697

Address: _____ Email: abrowning@youngblood-tyler.com

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK

Scope of Work: Construct 1500 sq ft picnic shelter

Proposed Use <u>Church</u>	Current Use <u>Church</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>No wetland/stream impact 2000 sq ft land</u>		
<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</u>	# of floors <u>N/A</u>
Finished Sq. Ft. <u>N/A</u>	Unfinished Sq. Ft. <u>1,500</u>	Total Sq. Ft. <u>1500</u>		

Building Only - Excludes All Trades Permits

Value of Work: \$ 25,000.00

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

Signature of Applicant: [Signature] Date: 7/2/19

Application Fee	\$ <u>187.50</u>
State Levy Fee	\$ <u>3.75</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>241.25</u>

Issued 2-13-19
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 30-1 READERS BRANCH

Application Date: *01-22-2019*
 Permit Number: *BP-2019-00068*
 Old Map Number: *S8-S3-0-30-0*
 GPIN: *1126-24-2654*

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 12108 Ebb Pointe Circle <i>Manekin Sabot, VA 23103</i>		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Readers Branch</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <i>\$12,592.00</i>	Date Paid: <i>Done</i>
	New Street Address		Zoning District <i>RPU D</i>	
	Front Setback <i>35' from Prop. Line</i>	Center Line Setback	Rear Setback <i>25'</i>	C.U. Permit
	Side Setback <i>10'</i>	Side Setback <i>10'</i>	Census Tract <i>51075400100</i>	Flood Zone <i>X</i>
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: <i>* Survey locate setbacks * Cash Proffer due before issuing C.O.</i>

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

Planning & Zoning Officer: *David Floyd* Date: *1/23/19*

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	Expiration 6-30-2019

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE <i>Revised 9-9-19 increased deck by 216 sq ft</i>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	2666 2882	2106	500 776	3

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

VALUE OF WORK	
Building	<i>\$155,090.00</i> <i>\$162,110.00</i>
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>159.90</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>14.20</i>
Zoning Fee	\$ <i>50-</i>
Total	\$ <i>174.10</i>

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

Signature of Applicant: *[Signature]* *revision fee due: \$32.22*



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: 07/29/2019

Permit Number: BP-2019-00713

GPIN/Tax Map: 7734-10-7868 / 64-22-15-22-0

Issued: 9-9-19

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 13263 Apdon Court Richmond, VA 23238	
	Owner John Cory & Janine Cate Hoffer	Phone # 804-986-8517
	Address 899 Hermitage Road Manakin Sabot, VA 23103	Email coryhoffer@comcast.net
APPLICANT INFORMATION	Applicant/Contact John Cory Hoffer	
	Address 899 Hermitage Road Manakin Sabot VA 23103	Phone # 804-986-8517 Email coryhoffer@comcast.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" 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		Date		

CONTRACTOR INFORMATION	Contractor N/A Owner	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: Extend rear of home to add mud room, expand & remodel kitchen. Extend right side of home to add master bedroom, closet and bathroom.				
	Proposed Use Residential Dwelling	Current Use Residential Dwelling	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 1	# of Bedrooms 1	# of floors 2
	Finished Sq. Ft. 1400		Unfinished Sq. Ft. 0	Total Sq. Ft. 1400	

Building Only - Excludes All Trades Permits

Value of Work	77,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant _____ Date 07/29/2019

Application Fee	\$ 545.00
State Levy Fee	\$ 272.50
Septic/Well Fee	\$ 0.00
Zoning Fee	\$ 25.00
RLD	\$ 0.00
SWP	\$ 0.00
Total	\$ 862.50



BUILDING PERMIT APPLICATION

Application Date: 8/28/2019

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

Permit Number: DP 2019-00788

GPIN/Tax Map: 31-19-0-2-0 / 6779-30-9677

Issued: 9-9-19

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 2530 Juniper Lane Maidens, Va 23102	
	Owner S. Scott von Schilling	Phone # 804-240-7265
APPLICANT INFORMATION	Address 2530 Juniper Lane Maidens, Va 23102	
	Applicant/Contact S. Scott von Schilling	Phone # 804-240-7265
APPLICANT INFORMATION	Address 2530 Juniper Lane Maidens, Va 23102	
	Email scottvonschilling@yahoo.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Poplar Forest</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>55' from ROW</u>	Center Line Setback —	Rear Setback <u>35' from ROW</u>	CUP/Variance/COA —
	Side Setback <u>20'</u>	Side Setback <u>30'</u>	Flood Zone <u>C</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>8/29/19</u> A2			

CONTRACTOR INFORMATION	Contractor Self		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: 12 ft x 16 ft covered deck on rear of house				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. 192	Total Sq. Ft. 192		

Building Only – Excludes All Trades Permits

Value of Work	5280.00
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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: [Signature] Date: 9/20/19

Application Fee	\$ <u>357.00</u>
State Levy Fee	\$ <u>.72</u>
Septic/Wall Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>614.72</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, S. Scott von Schilling of (address) 2530 Juniper Lane Maidens, Va 23102 affirm that I am the owner of a certain tract of parcel of land located at 2530 Juniper Lane Maidens, Va 23102 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 9/5/2019
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: 2-20-19
 Permit Number: BP-2019-00125
 GPIN/Tax Map: 7134-33-7164/64-1-0-74-A
 Issued: 9.6.2019

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 12330 Patterson Avenue - Richmond, VA 23238		Phone # 402-420-2311
	Owner Tuckahoe Pines Retirement Community, LLC		Email bccollingsworth@rcommunities.com
	Address 7101 S. 82nd Street - Lincoln, NE 68516		
APPLICANT INFORMATION	Applicant/Contact Paul Ritchie		Phone # 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email pritchie@camerongeneralcontractors.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>150' from low</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>3/7/19</u>			

CONTRACTOR INFORMATION	Contractor Cameron General Contractors-Jim Orlando		Phone 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email jorlando@camerongeneralcontractors.com
	Contractor License Number 2705166535	Type Class A	Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: New Construction of a 8- Stall Garage (accessory to the retirement community) (8- Stall Garage - B) <u>Bldg 5</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 1
	Finished Sq. Ft. 1,962	Unfinished Sq. Ft. 0	Total Sq. Ft. 1,962		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>526.75</u>
Value of Work	70,234.00	State Levy Fee \$ <u>10.54</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>02/28/19</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>100.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>637.29</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: 2-20-19

Permit Number: BD-2019-00174

GPIN/Tax Map: 7734-33-716A/64-1-0-74-A

Issued: 9-6-2019

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 12330 Patterson Avenue - Richmond, VA 23238	
	Owner Tuckahoe Pines Retirement Community, LLC	Phone # 402-420-2311
APPLICANT INFORMATION	Address 7101 S. 82nd Street - Lincoln, NE 68516	Email bccollingsworth@rlcommunities.com
	Applicant/Contact Paul Ritchie	Phone # 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516	Email pritchie@camerongeneralcontractors.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>15' from Row</u>	Center Line Setback —	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>3/7/19</u>			

CONTRACTOR INFORMATION	Contractor Cameron General Contractors-Jim Orlando	Phone 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516	Email jorlando@camerongeneralcontractors.com
	Contractor License Number 2705166535	Type Class A
		Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: New Construction of a 8-Stall Garage (accessory to the retirement community) (8-Stall Garage - <u>CR Bldg 6</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 1	
	Finished Sq. Ft. 1,962	Unfinished Sq. Ft. 0	Total Sq. Ft. 1,962

Building Only - Excludes All Trades Permits	
Value of Work 70,234.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.	
Signature of Applicant <u>[Signature]</u>	Date <u>02/28/19</u>
Application Fee	\$ <u>526.75</u>
State Levy Fee	\$ <u>10.54</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>100.00</u>
RLD	\$
SWP	\$
Total	\$ <u>637.29</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: 2-20-19
 Permit Number: BP-2019-00171
 GPIN/Tax Map: 134-33-7164 / 64-1-0-7A
 Issued: 9-6-2019
 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 12330 Patterson Avenue - Richmond, VA 23238	
	Owner Tuckahoe Pines Retirement Community, LLC	Phone # 402-420-2311
	Address 7101 S. 82nd Street - Lincoln, NE 68516	
APPLICANT INFORMATION	Applicant/Contact Paul Ritchie	
	Address 7101 S. 82nd Street - Lincoln, NE 68516	

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>150' from ROW</u>	Center Line Setback —	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>3/7/18</u> <u>B1</u>			

CONTRACTOR INFORMATION	Contractor Cameron General Contractors-Jim Orlando		Phone 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email jorlando@camerongeneralcontractors.com
	Contractor License Number 2705166535	Type Class A	Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: <u>New Construction of a 8- Stall Garage (accessory to the retirement community) (8-Stall Garage - HC) <u>Bldg</u></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 1
	Finished Sq. Ft. 2,013	Unfinished Sq. Ft. 0	Total Sq. Ft. 2,013		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>540.44</u>	
Value of Work 72,059.00		State Levy Fee \$ <u>10.81</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>Paul Ritchie</u> Date <u>02/28/19</u>		Septic/Well Fee \$	
		Zoning Fee \$ <u>100.00</u>	
		RLD \$	
		SWP \$	
		Total \$ <u>651.25</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: 2-20-19

Permit Number: BP-2019-00176

GPIN/Tax Map: 7734-33-7164 / 64-1-0-74A

Issued: 9.6.2019

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 12330 Patterson Avenue - Richmond, VA 23238	
	Owner Tuckahoe Pines Retirement Community, LLC	Phone # 402-420-2311
	Address 7101 S. 82nd Street - Lincoln, NE 68516	Email bccollingsworth@rlcommunities.com
APPLICANT INFORMATION	Applicant/Contact Paul Ritchie	
	Address 7101 S. 82nd Street - Lincoln, NE 68516	Phone # 402-420-2335
		Email pritchie@camerongeneralcontractors.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>150' from Row</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date <u>3/7/19</u>			

CONTRACTOR INFORMATION	Contractor Cameron General Contractors-Jim Orlando		Phone 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email jorlando@camerongeneralcontractors.com
	Contractor License Number 2705166535	Type Class A	Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: New Construction of a 8-Stall Garage (accessory to the retirement community) (8-Stall Garage - A) <u>Bldg 3</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 1
	Finished Sq. Ft. 1,962	Unfinished Sq. Ft. 0	Total Sq. Ft. 1,962		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>526.75</u> State Levy Fee \$ <u>10.54</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>100.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>637.29</u>
Value of Work	70,234.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	Date 02/28/19	
<u>[Signature]</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: 2-20-19
 Permit Number: BP-2019-00173
 GPIN/Tax Map: 1734-33-7164/64-1-0-7A
 Issued: 9-6-2019

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 12330 Patterson Avenue - Richmond, VA 23238	
	Owner Tuckahoe Pines Retirement Community, LLC	Phone # 402-420-2311
	Address 7101 S. 82nd Street - Lincoln, NE 68516	Email bccollingsworth@rcommunities.com
APPLICANT INFORMATION	Applicant/Contact Paul Ritchie	
	Address 7101 S. 82nd Street - Lincoln, NE 68516	Phone # 402-420-2335
		Email pritchie@camerongeneralcontractors.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>150' From Row</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood zone _____	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>3/7/19</u> 131			

CONTRACTOR INFORMATION	Contractor Cameron General Contractors-Jim Orlando		Phone 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email jorlando@camerongeneralcontractors.com
	Contractor License Number 2705166535	Type Class A	Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: New Construction of a 4- Stall Garage (accessory to the retirement community) (4- Stall Garage - A) <u>Bldg 1</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> Public/Private <input type="checkbox"/>	<input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors 1
	Finished Sq. Ft. 987	Unfinished Sq. Ft. 0	Total Sq. Ft. 987		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>264.98</u>
Value of Work 35,331.00		State Levy Fee \$ <u>5.30</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 \$ _____
Signature of Applicant <u>[Signature]</u>	Date <u>02/28/19</u>	Zoning Fee \$ <u>100.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>370.28</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: 2-20-19
 Permit Number: DP-2019-00172
 GPIN/Tax Map: 1134-33-7164/64-10-74-A
 Issued: 9.6.2019

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 12330 Patterson Avenue - Richmond, VA 23238		Phone # 402-420-2311
	Owner Tuckahoe Pines Retirement Community, LLC		Email bccollingsworth@rlcommunities.com
	Address 7101 S. 82nd Street - Lincoln, NE 68516		
APPLICANT INFORMATION	Applicant/Contact Paul Ritchie		Phone # 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email pritchie@camerongeneralcontractors.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>150' from RW</u>	Center Line Setback —	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>3/7/19</u>			

CONTRACTOR INFORMATION	Contractor Cameron General Contractors-Jim Orlando		Phone 402-420-2335
	Address 7101 S. 82nd Street - Lincoln, NE 68516		Email jorlando@camerongeneralcontractors.com
	Contractor License Number 2705166535	Type Class A	Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: New Construction of a 4- Stall Garage (accessory to the retirement community) (4- Stall Garage - B) <u>Bldg 2</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 1
	Finished Sq. Ft. 987	Unfinished Sq. Ft. 0	Total Sq. Ft. 987		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>264.98</u> State Levy Fee \$ <u>5.30</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>100.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>370.28</u>
Value of Work	35,331.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<u>Paul Ritchie</u>	
Date	02/28/19	



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

Residential Commercial

Application Date: 7-2-19
 Permit Number: BP-2019-00631
 GPIN/Tax Map: 0851-30-6939/21-1-0-2-C
 Issued: 7-16-19
 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: 3451 Three Chopt Rd
 Owner: James Devers Phone #: 703-499-0933
 Address: 3451 Three Chopt Rd Email:

APPLICANT INFORMATION
 Applicant/Contact: Phone #
 Address: Email

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
Front Setback: <u>100' CE</u>	Center Line Setback: <u>ROW</u>	Rear Setback: <u>35</u>	CUP/Variance/COA <u>cannot be used as a second dwelling</u>
Side Setback: <u>20</u>	Side Setback: <u>20</u>	Flood Zone:	

APPROVED REJECTED COMMENTS: No change to existing footprint
 Planning & Zoning Officer: [Signature] Date: 7/8/19

CONTRACTOR INFORMATION
 Contractor: Mid-Atlantic Home Imp LLC Phone: 804-697-0649
 Address: 829 Toms Rd Barboursville, VA 22923 Email: midatlantichomeimp56@gmail.com
 Contractor License Number: 2705-116990 Type: A Res/CBC Expiration: 02/21

DESCRIPTION OF WORK
 Scope of Work: Finish off basement, Framing, Insulation, Plbg, + Elec
Revised 9-5-19 to add 57 sqft finished + Storage area
rec room, office, kitchenette, bathroom, shower

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. <u>1200</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>1200</u>		

Building Only - Excludes All Trades Permits

Value of Work: \$165,000.00

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

Signature of Applicant: [Signature] Date: 7-2-19

Application Fee	\$ <u>304.50</u>
State Levy Fee	\$ <u>16.09</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>310.59</u>



BUILDING PERMIT APPLICATION

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

Application Date: **6-3-19**Permit Number: **2019-00548**GPIN/Tax Map: **6757-71-3153**Issued: **7-16-19**

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 2022-2012 RIVER VALLEY LANE	
	Owner RICHARD T. DIANE KNARR	Phone # 804-339-4983
APPLICANT INFORMATION	Address 3010 MOUNT HILL DR MIDLOTHIAN 23113	Email RICHARDJKNARR@gmail.com
	Applicant/Contact SAME	Phone #

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 55' FROM ROW	Center Line Setback —	Rear Setback 35'	CUP/Variance/COA —
	Side Setback 20'	Side Setback 20'	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer David Floyd Date 7-16-19			

CONTRACTOR INFORMATION	Contractor LARRY W ELLIOTT, Builder	Phone 804-356-9343
	Address 3560 PEASERD MIDLOTHIAN 23112	Email MISTERMAGIC500@aol.com
	Contractor License Number 2701039746	Type Class A

DESCRIPTION OF WORK	Scope of Work: Plans revised 8/30/19 to relocate garage.			
	SINGLE FAMILY HOME w attached garage			
	Proposed Use	Current Use exist.	Environmental Impacts (stream crossing, wetlands, and land disturbed) 39,500 SQ FT	
	SEWER <input checked="" type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3 Full 2-1/2	# of Bedrooms 4

Building Only - Excludes All Trades Permits		Application Fee \$ 1866.00 State Levy Fee \$ 38.12 Septic/Well Fee \$ 40.00 Zoning Fee \$ 50.00 RLD \$ 100.00 SWP \$ — Total \$ 2,094.12
Value of Work	412,000	
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 Larry W Elliott	Date 6-3-19	

w/ unfinished basement



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: JUNE 25, 2019

Permit Number: BP-2019-00642

GPIN/Tax Map: 7726-24-0900 / 58-53-0-21-0

Issued: 9-4-19

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>12116 Branch Overlook Dr.</u> MANAKIN SABOT, VA 23103	
	Owner READERS BRANCH PARTNERS, LLC	Phone # 804.741.4663
	Address 2250 OLD BRICK ROAD, SUITE 220, GLEN ALLEN, VA 23060	Email

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	Phone # 804.798.5097
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid	
	Front Setback <u>30' from Prop. Line</u>	Center Line Setback	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 approved plat. Contractor has full responsibility for proper placement to meet Section 1 RPUD</u>				
	Planning & Zoning Officer: <u>David Boyd</u> Date: <u>7/11/19</u>				

CONTRACTOR INFORMATION	Contractor BRAC RETAINING WALLS AND EXCAVATING, LLC		Phone 804.798.5097
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		
	Contractor License Number 2705131869	Type CONTRACTOR A	Expiration 11.30.2019

DESCRIPTION OF WORK	Scope of Work: <u>INSTALL 1 SEGMENTAL BLOCK RETAINING WALL AT LOT 21 = 1,003 SQ FT / 95 L FT</u>				
	<u>Section 1</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1,003		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>146.04</u>
Value of Work	\$19,472.00	State Levy Fee	\$ <u>2.92</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>Vicki Barnett</u> Date: <u>JUNE 25, 2019</u>		Septic/Well Fee	\$
		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>198.96</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: 8-21-19
 Permit Number: BP-2019-00759
 GPIN/Tax Map: 7774-0A-5970 / 62-4-E-4-0
 Issued: 9-4-19

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>108 Holly Drive Manakin School VA 23103</u>		
	Owner	Phone #	<u>(804) 754-6496</u>	
APPLICANT INFORMATION	Address	Email	<u>mickeys mommy 1@yahoo</u>	
	Applicant/Contact	Phone #	<u>(804) 754-6496</u>	
	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 <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer _____ Date _____			

CONTRACTOR INFORMATION	Contractor	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Add Bedroom, closet + Bath to existing garage.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>3450</u>
Value of Work	<u>5,000</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. Signature of Applicant <u>[Signature]</u> Date <u>9/21/19</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>3519</u>

ISSUED 5-23-19
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 6-1 READERS BRANCH *ISS*

Application Date: 5-1-19
 Permit Number: BP-2019-00420
 Old Map Number: 58-53-0-6-0
 GPIN: 7726-04-9668

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 12166 Readers Pointe Dr, <i>Manakin Sabot, VA 23103</i>		District
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
	Proposed Use	Current Use	Existing Buildings on Property

TO BE COMPLETED BY ZONING DEPARTMENT	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	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 <i>RPU D</i>	
	Front Setback <i>30' from Property Line</i>	Center Line Setback	Rear Setback <i>25'</i>	C.U. Permit
	Side Setback <i>10'</i>	Side Setback <i>10'</i>	Census Track	Flood Zone

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: *5/1/19*

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 6-30-2019

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE, PARTIALLY FINISHED BASEMENT, <i>Revised 9-18-19</i> <i>to Add 18x9' deck and reconfigure Master Bath.</i>				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	1	<i>4142 4304</i>	2880	<i>1262 1924</i>	3

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

VALUE OF WORK	
Building	\$263,325.00 <i>\$269,400.00</i>
Excludes All Trades Permits	

Application Fee	\$ <i>1196.96</i>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <i>23.94</i>
Zoning Fee	\$ <i>50.00</i>
Total	\$ <i>1270.90</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. *2789*

Signature of Applicant: *James*

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 32-1 READERS BRANCH

Application Date: 04-12-19
 Permit Number: BP-2019-00347
 Old Map Number: 7726-24-3776/58-53-0-32-0
 GPN: 5-15-19

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 12104 Ebb Pointe Circle		District
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
	Proposed Use	Current Use	Existing Buildings on Property
Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</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 Property Line</u>	Center Line Setback	Rear Setback <u>25'</u>	C.U. Permit	Variance
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Census Tract <u>51075400100</u>	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: 4/16/19

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 6-30-2019

Description of Work	Scope of Work: <u>NEW DWELLING WITH ATTACHED GARAGE, PARTIALLY FINISHED BASEMENT, Revised 9-18-19</u> <u>to add an 11'6" x 12' deck on Rear of House.</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors <u>2</u>	Total Sq. Ft. <u>4385 4524</u>	Finished Sq. Ft. <u>3588</u>	Unfinished Sq. Ft. <u>797 936</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	
Building	<u>\$298,987.50 304,200⁰⁰</u>
Excludes All Trades Permits	

Application Fee	\$ <u>135744-</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>2715-</u>
Zoning Fee	\$ <u>5000-</u>
Total	\$ <u>143459-</u>

Revision Fee 2393

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 711 VA Relay

Residential Commercial

Application Date: 8-19-19
 Permit Number: ~~BP 2019-00822~~ BP-2019-00755
 GPIN/Tax Map: 7727-483631/47-33-D-18-A
 Issued: ~~10/23/18~~ 9/3/19
 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>2362</u> 3775 <u>GREYSTONE COURT, Rockville, VA. 23146</u>		Phone # <u>703 509 0056</u>		
	Owner <u>McCONNELL Properties LLC</u>		Email <u>Royal Foundations@gmail.com</u>		
	Address <u>PO Box 100 Somerset VA. 22972</u> ^{14186 MADISON RUN ROAD GORDONSVILLE VA.}		Phone # <u>703 509 - 0056</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Robert A. McConnell</u>		Phone # <u>703 509 - 0056</u>		
	Address <u>14186 MADISON RUN ROAD GORDONSVILLE VA. 22942</u>		Email <u>Royal Foundations@gmail.com</u>		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid	
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA	
	Side Setback	Side Setback	Flood Zone		
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	Planning & Zoning Officer		Date		
CONTRACTOR INFORMATION	Contractor <u>Royal Foundations Inc</u>		Phone <u>703-509-0056</u>		
	Address <u>14186 MADISON RUN ROAD, GORDONSVILLE VA. 22942</u>		Email <u>Royal Foundations@gmail.com</u>		
	Contractor License Number <u>2705134727</u>	Type <u>C/ASSA CBC</u>	Expiration <u>6/30/20</u>		
DESCRIPTION OF WORK	Scope of Work: <u>The Shedd</u> <u>Build out of Bathrooms & Customer Greeting Area</u> <u>Tenant Upfit</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 <u>2</u>	# of Bedrooms	# of floors
	Finished Sq. Ft. <u>800</u>	Unfinished Sq. Ft. <u>9200</u>	Total Sq. Ft. <u>10,000</u>		
	Building Only - Excludes All Trades Permits				
Value of Work <u>\$8000</u>	Application Fee <u>\$600-</u> State Levy Fee <u>\$120</u> Septic/Well Fee <u>\$</u> Zoning Fee <u>\$10000</u> RLD <u>\$</u> SWP <u>\$</u> Total <u>\$76120</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>Robert A. McConnell</u>		Date <u>8/17/19</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: 8-19-19

Permit Number: ~~BP 2018 00824~~ BP-2019-00756

GPIN/Tax Map: 7727-48-6650/47-33-0-18-D

Issued: ~~10/22/19~~ 9/3/19

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>2405 Granite Ridge Road, Rockville, VA. 23146</u>	<u>Bldg 1 Suite B</u>
	Owner <u>McConnell Properties LLC</u>	Phone # <u>703-509-0056</u>
APPLICANT INFORMATION	Address <u>PO Box 100 Somerset, VA. 22972</u>	Email <u>Royal Foundations @Gmail.com</u>
	Applicant/Contact <u>Robert A. McConnell</u>	Phone # <u>703-509-0056</u>
	Address <u>14186 Madison Run Road, Gordonsville VA. 22942</u>	Email <u>Royal Foundations @Gmail.com</u>

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

CONTRACTOR INFORMATION	Contractor <u>Royal Foundations Inc</u>	Phone <u>703-509-0056</u>
	Address <u>14186 Madison Run Road, Gordonsville VA. 22942</u>	Email <u>Royal Foundations @gmail.com</u>
	Contractor License Number <u>2705134727</u>	Type <u>CLASS A CBL RBL</u>
		Expiration <u>6/30/20</u>

DESCRIPTION OF WORK	Scope of Work: <u>Metallum 30 Tenant Upfit</u> <u>Buildout of unisex Bathroom, 1/2 shared separation wall</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 <u>1</u>	# of Bedrooms <u>1</u>
	# of floors <u>1</u>	Finished Sq. Ft. <u>80</u>	Unfinished Sq. Ft. <u>2920</u>	Total Sq. Ft. <u>3000</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 6,000</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 Robert A. McConnell Date 8/17/19

Application Fee	<u>\$ 45-</u>
State Levy Fee	<u>\$ 90</u>
Septic/Well Fee	<u>\$</u>
Zoning Fee	<u>\$ 100.00</u>
RLD	<u>\$</u>
SWP	<u>\$</u>
Total	<u>\$ 235.00</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8-19-19
 Permit Number: ~~BP-2019-0008~~ BP-2019-0005
 GPIN/Tax Map: 7727-48-6550/47-33-0-18-0
 Issued: ~~09/03/19~~ 9/3/19
 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: 2405 Granite Ridge Road, Rockville, VA 23146 Bldg 1 Suite A
 Owner: McConnell Properties LLC Phone #: 703-509-0056
 Address: PO Box 100 Somerset, VA 22972 14186 Madison Run Road Gordonsville 22942 Email: RoyalFoundations@gmail.com
APPLICANT INFORMATION
 Applicant/Contact: Robert A. McConnell Phone #: 703-509-0056
 Address: 14186 Madison Run Road, Gordonsville VA 22942 Email: RoyalFoundations@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

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

CONTRACTOR INFORMATION
 Contractor: Royal Foundations Inc Phone: 703-509-0056
 Address: 14186 Madison Run Road, Gordonsville VA 22942 Email: RoyalFoundations@gmail.com
 Contractor License Number: 2705134727 Type: CLASS A CRC R32 Expiration: 6/30/20

DESCRIPTION OF WORK
 Scope of Work: Bavarian Auto Sales Tenant UPFIT
Buildout of LOBBY Entrance, Bathrooms, Shared separation wall

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u>500</u>	<u>2500</u>	<u>3000</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 8000</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: Robert A. McConnell Date: 8/17/19

Application Fee	\$ <u>60</u>
State Levy Fee	\$ <u>1.20</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>161.20</u>



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

Date: 9/3/19

Permit #: 2019-00702

GPIN

Tax Map

LOCATION

Street Address: 510 Meadow View Lane Manakin-Sabot Va. 23103

PROPERTY OWNERSHIP

Name: William Miller Phone:

Mailing Address: Email:

APPLICANT

Name: J. Curtis Beahr Phone: 804-370-3363

Address: Email:

CONTRACTOR

Name: Bear Electric Inc Phone: 804-370-3363

Mailing Address: 1245 Dunlue Rd King William Va 23086 Email:

Gas Certification: YES NO State License Number: 2705097841 Expiration: 10/31/19 License Type: ELE Class: B

DESCRIPTION OF WORK

Wire new detached garage sub panel from house and 22 kw generac generator w/ transfer switch

of Bathrooms: 1 Service Size: Power Company: Inquiry #:

Value of Work (required): \$10,000

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: 9/3/19

Office Use Only

Approval: [Signature] Approval date: 9/3/19

Permit Fee: 6732- Issued date: 9/3/19

Please call or visit our website to calculate fee: www.goochlandva.us/permitcalc

(owner's statement on back)



BUILDING PERMIT APPLICATION

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

Application Date: B 2-25-19

Permit Number: BP-2019-00190

GPIN/Tax Map: 1734-33-7164/64-1-0-7A-1

Issued: 9-9-19

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: 12330 Patterson Avenue - Richmond, VA 23238

Owner: Tuckahoe Pines Retirement Community, LLC Phone #: 402-420-2311

Address: 7101 S. 82nd Street - Lincoln, NE 68516 Email: bccollingsworth@rlcommunities.com

APPLICANT INFORMATION

Applicant/Contact: Paul Ritchie Phone #: 402-420-2335

Address: 7101 S. 82nd Street - Lincoln, NE 68516 Email: pritchle@camerongeneralcontractors.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

Front Setback: 150' from rear Center Line Setback: — Rear Setback: 5' CUP/Variance/COA: —

Side Setback: 5' Side Setback: 5' Flood Zone: —

APPROVED REJECTED COMMENTS: 1. Ductwork Date: 3/7/19

Planning & Zoning Officer: [Signature]

CONTRACTOR INFORMATION

Contractor: Cameron General Contractors-Jim Orlando Phone: 402-420-2335

Address: 7101 S. 82nd Street - Lincoln, NE 68516 Email: jorlando@camerongeneralcontractors.com

Contractor License Number: 2705166535 Type: Class A Expiration: 11/30/2020

DESCRIPTION OF WORK

Scope of Work: Trash/Generator Enclosure

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. 447	Unfinished Sq. Ft. 0	Total Sq. Ft. 447		

Building Only - Excludes All Trades Permits

Value of Work: 19,700

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: 02/22/19

Application Fee	\$ 147.75
State Levy Fee	\$ 2.96
Septic/Well Fee	\$
Zoning Fee	\$ 100.00
RLD	\$
SWP	\$
Total	\$ 250.71



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

Date: 9/3/19

Permit #: 2019-00702

GPIN

Tax Map

LOCATION

Street Address: 510 Meadow View Lane Manakin-Sabot Va. 23103

PROPERTY OWNERSHIP

Name: <u>William Miller</u>	Phone
Mailing Address	Email

APPLICANT

Name: <u>J. Curtis Beahr</u>	Phone: <u>804-370-3363</u>
Address	Email

CONTRACTOR

Name: <u>Bear Electric Inc</u>	Phone: <u>804-370-3363</u>			
Mailing Address: <u>1245 Dunluc Rd King William Va 23086</u>	Email			
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: <u>2705097841</u>	Expiration: <u>10/31/19</u>	License Type: <u>ELE</u>	Class: <u>B</u>

DESCRIPTION OF WORK

Wire new detached garage sub panel from house and 22 kw generac generator w/ transfer switch

of Bathrooms: 1 Service Size: _____ Power Company: _____ Inquiry #: _____

Value of Work (required): 410,000

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: 9/3/19

Approval: <u>[Signature]</u>	Office Use Only	Approval date: <u>9/3/19</u>
Permit Fee: <u>6732-</u>		Issued date: <u>9/3/19</u>

Please call or visit our website to calculate fee: 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

Date	9/3/19
Permit #	ELI-2019-00796
GPIN	
Tax Map	

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

LOCATION

Street Address: 2397 SANDY HOOK

PROPERTY OWNERSHIP

Name	RUTH QUARLES	Phone	804-657-5344	
Mailing Address	2397 SANDY HOOK RD GOOCHLAND, VA		Email	

APPLICANT

Name	WILLIE CHRISTMAS	Phone	434-962-4179	
Address	357 ROLLINS LN LOUISA, VA		Email	

CONTRACTOR

Name	LES ELECTRIC			Phone	
Mailing Address	357 ROLLINS LN LOUISA, VA			Email	
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	Expiration	License Type	Class
		270500412	9/30/19	B	PIB Elec

DESCRIPTION OF WORK

INSTALL TRANSFER/DISCONNECT FOR GENERATOR

# of Bathrooms	Service Size	Power Company	Inquiry #
	200 AMP	Dimond Energy	
Value of Work (required)			
\$800.00			

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: Willie Christmas Date: 9/2/19

Approval: <u>D. Fisher</u>	Office Use Only	Approval date: <u>9/3/19</u>
Permit Fee: <u>\$30.00</u>		Issued date: <u>9/3/19</u>

9/11



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

Date	05.29.19
Permit #	011 2019-819
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	3451 TABSCOTT ROAD	District	
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PROPERTY OWNERSHIP

Name	HERBERT & BILLY LEWIS	Phone	804-457-2437
Mailing Address	3451 TABSCOTT ROAD		

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	11/2019	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

INSTALL 22 KW GENERATOR, 2-200 AMP ATS,			
# of Baths	Service Size	Power Company	Inquiry #
	400	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 _____

Value of Work: **9500.00**

Signature of Applicant [Signature]

Permit fee: ~~67.50~~ **65.00**

Approval [Signature] Date **9-10-19**

Issue date: **9-10-19**



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119

Goochland, VA 23063

(804) 556-5305 Fax (804) 556-5651 TDD (804) 556-5317

TYPE
<input checked="" type="checkbox"/> Electrical
<input type="checkbox"/> Mechanical
<input type="checkbox"/> Plumbing
<input type="checkbox"/> 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	8-28-19
Permit #	19-827
Map #	

LOCATION

Street Address	307 Wickham Glen Dr	District	
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PROPERTY OWNERSHIP

Name	Mark Monahan	Phone	
Mailing Address	307 Wickham Glen Dr		

CONTRACTOR

Company Name	Master Electrical Services	Phone	804-231-1973
Mailing Address	1735 Arlington Rd Richmond, Va 23230	License Type	
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705 067 673
		Expiration	3-31-20
			Class A

DESCRIPTION OF WORK

Replace old broke generator for a new unit 110KW			
# 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 _____ (NOTARY) MY COMMISSION EXPIRES _____

Signature of Applicant		Cost of Job	5,000
Approval		Permit Fee	44.37
Date	9-12-19	Issue Date	9-12-19



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

Date	9-16-19
Permit #	19-840
Old Map #	
G-Pin	6810-24-9074

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 5270 Chimney Springs Drive	District
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PROPERTY OWNERSHIP

Name William L Gunn and Samantha Gunn	Phone 201-230-5621
Mailing Address 5270 Chimney Springs Drive Goochland, VA 23063	

APPLICANT

Name MARCIE HAYNIE	Phone 804-276-5580
E-Mail Address jmelectrical@comcast.net	

CONTRACTOR

Name HAYNIE ELECTRICAL SERVICES INC DBA J&M ELECTRICAL SERVICES	Phone 804-276-5580	
Mailing Address 400 TURNER ROAD N CHESTERFIELD VA 23225	License Type ELE,GFC,PLB	Class A
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705099807A	Expiration 10/31/2019

DESCRIPTION OF WORK

INSTALL (1) 22KW AUTOMATIC STANDBY GENERATOR - 200AMP ATS SWITCH IS ALREADY EXISTING			
# 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

Value of work: \$4800.00

Permit fee: \$43.45

Approval

Date

9-16-19

Issue date:

9-16-19



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

Date	9/12/2019
Permit #	2019-00261 2018-00216
GPIN	
Tax Map	

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

LOCATION

Street Address 565 Ice Pond Cove

PROPERTY OWNERSHIP

Name	Hornik	Phone	
Mailing Address	565 Ice Pond Cove	Email	

APPLICANT

Name	Terry Guthrie	Phone	804-763-6550
Address	12733 Oak Lake Ct Suite D Midlothian VA 23112	Email	tguthrie@cws-va.com

CONTRACTOR

Name	Commonwealth Wiring Solutions, Inc.			Phone	804-763-6550
Mailing Address	12733 Oak Lake Ct Suite D Midlothian VA 23112			Email	tguthrie@cws-va.com
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705128995A	9/30/21	ELE	A

DESCRIPTION OF WORK

Wiring of a single family dwelling that was burned to the ground and rebuilt.

Installation of back up generator with transfer switches. 48kW

# of Bathrooms	Service Size	Power Company	Inquiry #
	400	Dominion	10320767

Value of Work (required) \$55,877.00

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: 9/12/2019

Approval:	<u>[Signature]</u>	Office Use Only	Approval date:	<u>9/17/19</u>
Permit Fee:	<u>Fee Waived / FIRE DAMAGE</u>		Issued date:	<u>9/17/19</u>

Please call or visit our website to calculate fee: www.goochlandva.us/permitcalc

(owner's affidavit on back)

No FEE.

9120



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

Date	09.17.19
Permit #	ELL-2019-00853
GPIN	6749-44-2859
Tax Map	29-1-0-75-C1

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	3836 BELL ROAD	District	
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PROPERTY OWNERSHIP

Name	SHELLEY HENLEY	Phone	804-514-4088
Mailing Address	3836 BELL ROAD		

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	VPITTMAN@ASKWOODFIN.COM	E-mail address:
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2019	License Type:	CONTRACTOR
Class:	A		

DESCRIPTION OF WORK

INSTALL 22 KW GENERATOR, 200 AMP ATS			
Zoo Dom			
# 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.

(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		Value of Work:	9500.00
Approval		Permit fee:	65.03 65.03
Date	9/19/19	Issue date:	9/19/19



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

Date: 9/19/19

Permit #: ELI-2019-854

GPIN

Tax Map

LOCATION

Street Address: 2372 Sheppardtown Rd, Maidens Va 23102

PROPERTY OWNERSHIP

Name: <u>R.W. Osborne</u>	Phone: <u>3563535</u>
Mailing Address: <u>2372 Sheppardtown Rd Maidens Va</u>	Email: <u></u>

APPLICANT

Name: <u>R.W. Osborn</u>	Phone: <u></u>
Address: <u>Same</u>	Email: <u>RWosbornehwac@yahoo</u>

CONTRACTOR

Name: <u>owner</u>	Phone: <u></u>			
Mailing Address: <u></u>	Email: <u></u>			
Gas Certification: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number: <u></u>	Expiration: <u></u>	License Type: <u></u>	Class: <u></u>

DESCRIPTION OF WORK

install 11kw Backup Generator Gas line already installed.

# of Bathrooms: <u></u>	Service Size: <u></u>	Power Company: <u></u>	Inquiry #: <u></u>
Value of Work (required): <u>3500.00</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: R.W. Osborn Date: 9/19/19

Approval: <u>J. Fisher</u>	Office Use Only	Approval date: <u>9/19/19</u>
Permit Fee: <u>3748</u>		Issued date: <u>9/19/19</u>

Please call or visit our website to calculate fee: www.goochlandva.us/permitcalc

(owner's statement on back)

Owner's Statement Required if Owner is the Applicant

I R. W. Osborne of (address) 2372 Sheppard Town Rd
affirm that I am the owner of a certain tract or parcel of land located at (address) Maidens Va 23102

Same

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. W. Osborne (Owner Signature)



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

Date: 9/24/19

Permit # ELI-2019-00870

GPIN

Tax Map

LOCATION

Street Address 852 MEREWOOD CT

PROPERTY OWNERSHIP

Name TODD HARBOLD - Kinloch Development Phone 804 334-7998

Mailing Address 852 MEREWOOD CT MANAKIN 23103 Email

APPLICANT

Name RIC SEABORN Phone 804 389-4242

Address P.O. BOX 147 ROCKVILLE, VA 23146 Email

CONTRACTOR

Name MANAKIN ELECTRICAL CONTRACTORS Phone SAME

Mailing Address SAME Email

Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		<u>2705018630</u>	<u>12-31-2020</u>	<u>ELE</u>	<u>B</u>

DESCRIPTION OF WORK

INSTALL 20KW GENERATOR SYSTEM INCLUDING 2

200A ATS'S

of Bathrooms Service Size Power Company Inquiry

Value of Work (required) \$ 10,100.00

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: Ric Seaborn Date: 9/24/19

Approval: <u>D Fisher</u>	Office Use Only	Approval date: <u>9/24/19</u>
Permit Fee: <u>67⁷⁸</u>		Issued date: <u>9/24/19</u>

Please call or visit our website to calculate fee: www.goochlandva.us/permitcalc

(owner's statement on back)