



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: 7-10-18

Permit Number: 2018-00536

GPIN/Tax Map: 6164-30-9136/31-2-0-2-B1

Issued: 10-2-19

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>2503 Turner Rd</u>	
	Owner <u>Hil & Michelle Beck</u>	Phone # <u>386-986-5083</u>
APPLICANT INFORMATION	Address <u>4008 West Franklin St Richmond Va</u>	
	Applicant/Contact <u>Peter Cole / Cole Interiors</u>	Phone # <u>804-514-9606</u>
	Address <u>1112 Manakin Rd Rockville Va.</u>	
	Email <u>Coleinteriors@comcast.net</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from ROW/RP</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>7/11/18</u> A2			

CONTRACTOR INFORMATION	Contractor <u>Cole Interiors Inc.</u>		Phone <u>804-514-9606</u>
	Address <u>1112 Manakin Rd Rockville Va 23146</u>		Email <u>Coleinteriors@comcast.net</u>
	Contractor License Number <u>2705051138</u>	Type <u>Class A Building</u>	Expiration <u>6/2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>Construction of Horse Barn Newslid with attached 8 stall horse barn w/</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>1 AC Room &</u>		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>2</u>	# of Bedrooms <u>2</u>	# of floors <u>2 tractor</u>
	Finished Sq. Ft. <u>1926</u>	Unfinished Sq. Ft. 1150 <u>4652</u>	Total Sq. Ft. <u>6578</u> 502 <u>store</u>		

Building Only - Excludes All Trades Permits

Value of Work \$250,000.00 ~~#361,470.00~~

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 7-9-2018

Application Fee	\$ <u>1,638.39</u>
State Levy Fee	\$ <u>33.57</u>
Septic/Well Fee	\$ <u>4000</u>
Zoning Fee	\$ <u>5000</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1,971.96</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 9.30.19
Permit Number: BP-2019-00899
GPIN/Tax Map: 60726-44-0975
Issued: 10-31-19

Residential Commercial

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

This application requires two copies of construction drawings and two copies of the 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: 1229 Lickinghole Road Goochland
Owner: Peter + Jessica Huelcin Phone #: VA
Address: 1186 Lickinghole Road Goochland VA 23063 Email:

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

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: James River Landing Proffer: Yes No Amount: _____ Date Paid: _____
Front Setback: 55' from Row Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____
Side Setback: 30' Side Setback: 30' Flood Zone: _____
APPROVED REJECTED COMMENTS: * Survey locate left side setback.
Planning & Zoning Officer: Daniel Floyd Date: 10/11/19 AI

CONTRACTOR INFORMATION
Contractor: Blue Ridge Custom Homes Phone: 540-478-3110
Address: 1186 Lickinghole Road Goochland VA 23063
Contractor License Number: 2705086712 Type: A Expiration: 7-31-20

DESCRIPTION OF WORK
Scope of Work: Single Family Dwelling w/ Attached Unfinished Garage & basement
Proposed Use: _____ Current Use: _____ Existing Buildings on Property: _____ # of Floors: 2
SEWER: Public/Private WATER: Public/Private # of Bathrooms: 2.5 # of Bedrooms: 4
Finished Sq. Ft.: 2677 Unfinished Sq. Ft.: 1139 + 761 + 180 Total Sq. Ft.: 4,757.00

Building Only - Excludes All Trades Permits
Value of Work: \$278,775.00 (2080)
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant: _____ Date: 9-30-19

Application Fee	\$ <u>12,664.9</u>
State Levy Fee	\$ <u>25.33</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1,341.82</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: Aurora Title Telephone: 804-729-9005

Mailing Address: 2203 Pump Road Henrico VA 23233

OWNER'S AFFIDAVIT

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

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL MICHAEL BROOKING DATE 10-30-19.

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 9-23-2019

Permit Number: BP-2019-00874

GPIN/Tax Map: 6777-17-6032-43-39-0-8-0

Issued: 10-30-19

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 2315 Lanes End PL	
	Owner MAIN STREET HOMES	Phone # 804-423-0314
	Address PO BOX 461, MIDLOTHIAN VA 23113	Email mtessier-lambert@gomsh.com
APPLICANT INFORMATION	Applicant/Contact	
	Address	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lanes End</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>14,920⁰⁰</u>	Date Paid <u>DUE</u>
	Front Setback <u>40'</u>	Center Line Setback <u>65'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>R-P</u>
	Side Setback <u>10'</u>	Side Setback <u>15'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>A Barnes</u> Date: <u>10/3/2019</u>			

CONTRACTOR INFORMATION	Contractor MAIN STREET HOMES		Phone 804-423-0314
	Address PO BOX 461, MIDLOTHIAN, VA 23113		mtessier-lambert@gomsh.com
	Contractor License Number 2705039441	Type A	Expiration 5-2020

Scope of Work: NEW SINGLE FAMILY DWELLING WITH ATTACHED GARAGE

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>46,685 sq ft</u>		
<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3.5	# of Bedrooms 4	# of floors 2
Finished Sq. Ft. 2975	Unfinished Sq. Ft. 1129	Total Sq. Ft. 4104		

Building Only - Excludes All Trades Permits

Value of Work	268114
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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: Marcus Jesse Lambert Date: 9-23-2019

Application Fee	\$ <u>1,218.51</u>
State Levy Fee	\$ <u>24.31</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>200.00</u>
Total	\$ <u>1,592.82</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: BON AIR TITLE Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Other Fees that may be applicable RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5 # STORIES 2 CONSTRUCTION TYPE VE OCCUPANY LOAD B CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL *Wendell R. Bushong* DATE 10.28.19.
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 2-30-19
8-30-19Permit Number: 5D-2019-00791GPIN/Tax Map: 6797-62-0404 / 45-15-0-2-0Issued: 10-29-19

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>Lot 2 115 Woods Edge Lane</u>	Phone # <u>540-659-0243</u>
	Owner <u>Bobby D. Smith</u>	Email <u>b1smith64@verizon.net</u>
	Address <u>109 Denise St. Stafford Va.</u>	

APPLICANT INFORMATION	Applicant/Contact <u>OWNER</u>	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u> </u>	Date Paid <u> </u>
	Front Setback <u>55' from ROW</u>	Center Line Setback <u> </u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u> </u>
	Side Setback <u>20'</u>	Side Setback <u>30'</u>	Flood Zone <u> </u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>9/13/19</u> 192			

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

DESCRIPTION OF WORK	Scope of Work: <u>single Family Dwelling, Located on one Floor in a Pole Barn</u>				
	Proposed Use <u>Living</u>	Current Use <u>None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>4200 sq ft</u>		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>1</u>	# of Bedrooms <u>1</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>275 sq ft.</u>	Unfinished Sq. Ft. <u>975</u>	Total Sq. Ft. <u>1200</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$24,000</u> \$39,8750
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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: Bob Smith Date: 6-21-19

Application Fee	\$ <u>18834</u>
State Levy Fee	\$ <u>377</u>
Septic/Well Fee	\$ <u> </u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u> </u>
SWP	\$ <u> </u>
Total	\$ <u>24211</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

Bobby Smith of (address) 709 Denzest, Stafford Va. 22554 affirm that I am the owner of a certain tract of parcel of land located at Lot 2 woods Edge Lane and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

Bobby Smith Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 10-28-19.

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9-18-19
 Permit Number: BP-2019-00848
 GPIN/Tax Map: 6738-27-4055/28-1-6
 Issued: 10-25-19

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

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 4378 River Rd			
	Owner Amelia Daves	Phone # (804) 678-8394		
APPLICANT INFORMATION	Address 584 Paddock Ln Louisa VA 23093			
	Applicant/Contact	Email ameliahomeconstruction@gmail.com		
TO BE COMPLETED BY ZONING DEPARTMENT	Address			
	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Front Setback 200' from 120'	Center Line Setback 140'	Rear Setback 100' + 35'	Date Paid
	Side Setback left 50' 20'	Side Setback 200' + 20'	Flood Zone	CUP/Variance/COA
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer: <u>Dennis Lloyd</u> Date: <u>9/18/19</u> AI			

CONTRACTOR INFORMATION	Contractor Amelia Daves		Phone
	Address 584 Paddock Ln Louisa VA		Email ameliahomeconstruction@gmail.com
	Contractor License Number	Type A BLD	Expiration

Scope of Work:
Construction of single family home

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 9,900		
<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
Finished Sq. Ft. 1750	Unfinished Sq. Ft. 461	Total Sq. Ft. 2,211		

Building Only - Excludes All Trades Permits

Value of Work 215,000	Application Fee \$ 979.50
	State Levy Fee \$ 1959
	Septic/Well Fee \$
	Zoning Fee \$ 50.00
	RLD \$
	SWP \$
	Total \$ 1,049.09

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 of Applicant: [Signature] Date: 9-18-19

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Powhatan Real Estate Telephone: 598-7100

Mailing Address: 3923 Old Buckingham Rd Powhatan VA 23139
Settlements

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 10.24.19.

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 9-6-19
Permit Number: BP-2019-00816
GPIN/Tax Map: 7716-61-0184/58-24-0-3-0
Issued: 10-24-19

Residential Commercial

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

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>269 Lucille Lane Goochland County VA</u>	
	Owner <u>Robert and Kathreen Sandford</u>	Phone # <u>804 502 2155</u>
	Address <u>269 Lucille Lane Manakin-Sabot, VA</u>	Email <u>kathreen@westendtax.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Robert T. Sandford</u>	Phone # <u>804 502 2155</u>
	Address <u>269 Lucille Lane Manakin-Sabot VA 23103</u>	Email <u>robert.sandford.1@us.af.mil</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>New</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' From ROW</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone _____	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>9/11/19</u> A2			

CONTRACTOR INFORMATION	Contractor <u>self</u>	Phone <u>804 502 2155</u>
	Address <u>269 Lucille Lane Manakin-Sabot VA 23103</u>	Email <u>robert.sandford.1@us.af.mil</u>
	Contractor License Number _____	Type _____

DESCRIPTION OF WORK	Scope of Work: <u>Install a driveway, install septic, install well and build house w/ attached garage.</u> <u>(Alternative septic)</u>				
	Proposed Use _____	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>32,670 sq ft</u>		
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>4 1/2</u>	# of Bedrooms <u>4</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>3640</u>	Unfinished Sq. Ft. 806 <u>2438</u>	Total Sq. Ft. 4446 <u>6,078</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>2012.08</u>
Value of Work	524,404.00 <u>444,461.00</u>	State Levy Fee	\$ <u>40.24</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 T Sandford</u> Date <u>4-24-2019</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>50.-</u>
		RLD	\$ <u>100.-</u>
		SWP	\$ _____
		Total	\$ <u>2102.32</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 Robert and Kathreen Sandford of (address) 269 Lucille Lane Manakin-Sabot VA 23103 affirm that I am the owner of a certain tract of parcel of land located at 269 Lucille Lane Manakin-Sabot VA 23103 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.

Robert & Kathreen Sandford 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 *Robert & Kathreen Sandford*

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Other Fees that may be applicable RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL *Michael Beckwith* DATE 10.24.19.

Code Official

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

ISSUED: 10-24-19

Application Date: *6.28.19*
 Permit Number: *BP-2019-00639*
 Old Map Number: *3125 PIN*
 GPIN: *6738-17-5745 (28-20-0-30)*

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 <i>2253 Chapel Hill Rd</i>		District	
	Owner <i>Gordon Brothers Construction, LLC</i>		Phone # <i>804.556.8180</i>	
	Address <i>2945 River Road West, Goochland, VA 23063</i>			
	Proposed Use	Current Use	Existing Buildings on Property <i>0</i>	
	Proposed Occupant Load (Commercial) <i>N/A</i>	Lot Size <i>3.309 acres</i>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>None</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District <i>A1</i>	
	Front Setback <i>75' from ROW</i>	Center Line Setback	Rear Setback <i>35'</i>	C.U. Permit
	Side Setback <i>5' Side - 35' from ROW</i>	Side Setback <i>Rt. Side - 100' from ROW</i>	Census Track	Flood Zone
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer *David Floyd* Date *7/11/19*

Applicant/Contact: *Leigh Gordon* Phone *804.972.3877*
 Email: *gordonbrothersconstruction@yahoo.com*

CONTRACTOR INFORMATION	Contractor <i>Gordon Brothers Construction, LLC</i>		Phone <i>804.556.8180</i>	
	Address <i>2945 River Road W., Goochland, VA 23063</i>			
	Contractor License Number <i>2705144137</i>	Type <i>A</i>	Expiration <i>12-31-2019</i>	

Description of Work	Scope of Work: <i>Build a new 1512 sq. ft. single family dwelling</i>				
	SEWER Public/Private <input checked="" type="checkbox"/>	WATER Public/Private <input checked="" type="checkbox"/>	<i>bath-72</i>		
	# of Floors <i>1</i>	Total Sq. Ft. <i>1776</i>	Finished Sq. Ft. <i>1512</i>	Unfinished Sq. Ft. <i>264</i>	# of Bedrooms <i>3</i>

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

VALUE OF WORK		SWP <i>200 -</i>	Application Fee <i>\$687-</i>	Septic/Well Fee <i>\$100-</i>	State Levy Fee <i>\$13.74</i>	Zoning Fee <i>\$50-</i>	Total <i>\$1050.74</i>
Building	<i>150,000.00</i>						
Excludes All Trades Permits							

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 *Leigh Gordon* *7/3/19*

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 38.88.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

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

Name: Darvin Satterwhite Telephone: 804-556-4012

Mailing Address: 3013 River Rd West, Goochland, VA 23063

OWNERS AFFIDAVIT

I _____ of (address) _____ affirm that I am the owner of a certain tract of parcel of land located at _____ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by section 54.1.1111 of the Code of Virginia.

Owner's Signature

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

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA §36.99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTIONS 105.10 AND 121.1.1.

OWNERS SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job. \$0 to \$4000 of value.....\$30.00 + \$4.50 per \$1000 above \$4000
Add 1.75% State levy to fee.

Commercial fee is based on the building value of the job. \$0 to \$4000 of value.....\$30.00 + \$9.50 per \$1000 above \$4000
Add 1.75% State levy to fee.

OFFICE USE ONLY

USE _____ USE TYPE CODE _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD 6

APPROVAL JCK DATE 10 24 19
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 8/28/2019
 Permit Number: BP-2019-00785
 GPIN/Tax Map: 58-49-9-24-0/7715-65-029
 Issued: 10-24-19

Residential Commercial

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

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>909 Kinloch Pointe Lane</u>	
	Owner <u>James Stallman and Susan Hurt</u>	Phone #
	Address	Email
APPLICANT INFORMATION	Applicant/Contact <u>Sarah Kellam</u>	
	Address <u>107 Colony Lake Drive R, VA 23238</u>	Phone # <u>804-740-8100</u> Email <u>ahomeplace@aol.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Kinloch Sec 9 Lot 24</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>8/29/19</u> RPUD			

CONTRACTOR INFORMATION	Contractor <u>Homeplaces, Ltd.</u>		Phone <u>804.740.8100</u>
	Address <u>107 Colony Lake Drive R, VA 23238</u>		Email <u>ahomeplace@aol.com</u>
	Contractor License Number <u>2705026916</u>	Type <u>A</u>	Expiration <u>01/31/21</u>

DESCRIPTION OF WORK	Scope of Work: <u>single family new construction with attached garage</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>no environmental (4000 sq ft)</u>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <u>4 1/2</u>	# of Bedrooms <u>4</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>4785</u>	Unfinished Sq. Ft. <u>1829</u>	Total Sq. Ft. <u>6614</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2937.00</u> State Levy Fee \$ <u>58.74</u> Septic/Well Fee \$ <u> </u> Zoning Fee \$ <u>50.00</u> RLD \$ <u>100.00</u> SWP \$ <u>2000.00</u> Total \$ <u>3345.74</u>
Value of Work	<u>\$ 650,000.</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>8/28/19</u>	

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: J. V. Cowan-Gates Telephone: (804) 320-9100

Mailing Address: 1930 Huguenot Rd. Richmond VA 23235

OWNER'S STATEMENT

I _____ of (address) _____ affirm that I am the owner of a certain tract of parcel

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD 8 CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 10 24 19

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 8/26/2019
Permit Number: BP-2019-00775
GPIN/Tax Map: 6821-38-6870 / 11-17-0-B-0
Issued: 10-23-19
This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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: 37th ~~37th~~ 3697 Madensville Five Rd. Goochland, VA 23061
Owner: Audrey C. Pryor
Phone #: (203) 918-8699
Address: _____
Email: _____

APPLICANT INFORMATION
Applicant/Contact: VMAX LLC
Phone #: _____
Address: 11175 Ridgelyield Pkwy Suite 105 Richmond VA 23238
Email: _____

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: None Proffer: Yes No Amount: _____ Date Paid: _____
Front Setback: 75' from road Center Line Setback: 95' Rear Setback: 85' CUP/Variance/COA: _____
Side Setback: 30' Side Setback: 20' Flood Zone: _____
APPROVED REJECTED COMMENTS: _____
Planning & Zoning Officer: David Floyd Date: 8/28/19 41

CONTRACTOR INFORMATION
Contractor: VMAX LLC Phone: (904) 426-1030
Address: 11175 Ridgelyield Pkwy Suite 105 Richmond VA 23238 Email: vitas@vmaxhomes.com
Contractor License Number: 2705-101121 Type: A Expiration: _____

DESCRIPTION OF WORK
Scope of Work: 4 BR New single family house w/ attached garage and partially finished basement
Proposed Use: _____ Current Use: _____ Environmental Impacts (stream crossing, wetlands, amt land disturbed): 20,000
 SEWER Public/Private WATER Public/Private # of Bathrooms: 3 # of Bedrooms: 4 # of floors: 2
Finished Sq. Ft.: 3367 Unfinished Sq. Ft.: 1950 Total Sq. Ft.: 4576 5317

Building Only - Excludes All Trades Permits
Value of Work: 467,000
Application Fee: \$ 213.50
State Levy Fee: \$ 42.27
Septic/Well Fee: \$ _____
Zoning Fee: \$ 50-
RLD: \$ 100-
SWP: \$ _____
Total: \$ 2305.77
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: 8/26/19

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Other Fees that may be applicable RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS # STORIES 2 CONSTRUCTION TYPE SB OCCUPANY LOAD 8 CODE EDITION 12

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 10-21-19

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9-5 9-5-19
 Permit Number: 20-2019-00809
 GPIN/Tax Map: 6776-87-7427 / 44-15-1-17-0
 Issued: 10-16-19

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 1980 Covington Road, Crozier, VA 23039	
	Owner South River Custom Homes	Phone # 804-716-4597
	Address 10138-B Hull Street Road, Midlothian VA 23112	Email alex@southrva.com

APPLICANT INFORMATION	Applicant/Contact Alex Greene	Phone # 804-716-4597
	Address 10138-B Hull Street Road, Midlothian VA 23112	Email alex@southrva.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Covington</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>35'</u>	CUP/Variance/COA _____
	Side Setback <u>35' from Row Dist</u>	Side Setback <u>20'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>9/10/19</u> A2			

CONTRACTOR INFORMATION	Contractor South River Custom Homes	Phone 804-716-4597
	Address 10138-B Hull Street Road, Midlothian VA 23112	Email alex@southrva.com
	Contractor License Number <u>2705145332</u>	Type <u>RBC</u>

DESCRIPTION OF WORK	Scope of Work: New single family home with 2 car attached garage				
	Proposed Use primary dwelling	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) disturbed area to be approximately 43,560 sqft		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3.5	# of Bedrooms 4	# of floors 2
	Finished Sq. Ft. 4,174	Unfinished Sq. Ft. 1,466	Total Sq. Ft. 5,640		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2,037.00</u>	
Value of Work \$450,000		State Levy Fee \$ <u>40.74</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>9-5-19</u>		Septic/Well Fee \$ _____	
		Zoning Fee \$ <u>50.00</u>	
		RLD \$ <u>100.00</u>	
		SWP \$ _____	
		Total \$ <u>2,227.74</u>	

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Atlantic Coast Settlement Services Telephone: (804) 541-6677

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD 8 CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 10/7/19

Code Official

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

Issued 10-11-19

Application Date: 10-1-19
 Application Accepted: BP-2019-00894
 Old Map Number: 58-48-8-67-0
 GPIN: 7715-46-9072

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 833 Woodcove Court <u>Manakin Sabot, VA</u>		District <u>Dover</u>	
	Owner <u>Boone Homes, Inc.</u>		Phone # <u>804-784-6192</u>	
	Address <u>129 Broad Street Road, Manakin Sabot, VA 23103</u>			
	Proposed Use <u>New Home</u>	Current Use <u>Vacant lot</u>	Existing Buildings on Property <u>None</u>	
	Proposed Occupant Load (Commercial) <u>N/A</u>	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address <u>833 Woodcove Ct</u>		Zoning District <u>RPU D</u>	
	Front Setback <u>30' off pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	COA	Flood Zone
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.
 Planning & Zoning Officer: Anita Barnes Date: 10-3-2019

Applicant/Contact: David Owen Phone: 804-708-5120
 Email: dowen@boonehomes.net

CONTRACTOR INFORMATION	Contractor <u>Boone Homes, Inc.</u>		Phone <u>804-784-6192</u>	
	Address <u>129 Broad Street Road, Manakin Sabot, VA 23103</u>			
	Contractor License Number <u>2705 022198A</u>		Type <u>BLD</u>	Expiration <u>3/31/2020</u>

Description of Work	Scope of Work: <u>New Single family home with attached Garage</u>			
	SEWER Public/Onsite <u>XXXX</u>	WATER Public/Onsite <u>XXXX</u>	# of Bathrooms <u>2.5</u>	
	# of Floors <u>2</u>	Total Sq. Ft. <u>4371</u>	Finished Sq. Ft. <u>2938</u>	Unfinished Sq. Ft. <u>1433</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>275,000.00</u>
<i>Excludes All Trades Permits</i>	

Application Fee	<u>\$ 1249.50</u>
Zoning Fee	<u>\$ 50.00</u>
Septic/Well Fee	<u>\$</u>
State Levy Fee	<u>\$ 24.99</u>
TOTAL	<u>\$ 1324.49</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]

LIEN AGENT INFORMATION

Please check one of the following:

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

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

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

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

OWNER'S AFFIDAVIT

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

_____ Owner's Signature

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

_____ (Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD 8 CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL *[Signature]* DATE _____

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 9-12-2019

Permit Number: *BP-2019-00831*

GPIN/Tax Map: 6777-17-4124 / 4339-0-7-0

Issued: *10-9-19*

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 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 2317 LANES END PLACE	
	Owner MAIN STREET HOMES	Phone # 804-423-0314
	Address PO BOX 461, MIDLOTHIAN VA 23113	Email mtessier@gomsh.com
APPLICANT INFORMATION	Applicant/Contact MARIAN TESSIER LAMBERT	
	Address PO BOX 461, MIDLOTHIAN VA 23113	Phone # 804-423-0314 Email mtessier@gomsh.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Lane's End</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$14,920.00</i>	Date Paid <i>Due</i>
	Front Setback <i>40' from ROW</i>	Center Line Setback <i>65'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA <input checked="" type="checkbox"/>
	Side Setback <i>10'</i>	Side Setback <i>10'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer due before issuing</i>			
Planning & Zoning Officer: <i>David Floyd</i> Date: <i>9/13/19</i> C.O. <i>RP</i>				

CONTRACTOR INFORMATION	Contractor MAIN STREET HOMES		Phone 804-423-0314
	Address PO BOX 461 MIDLOTHIAN VA 23113		
	Contractor License Number 2705039441	Type A	Expiration 5-2020

DESCRIPTION OF WORK	Scope of Work: NEW SINGLE FAMILY DWELLING W/ATTACHED GARAGE & <i>Basement</i>		
	Proposed Use	Current Use	Existing Buildings on Property NO
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3.5
	# of Floors 3	# of Bedrooms 4	<i>Basement</i>
Finished Sq. Ft. 4142		Unfinished Sq. Ft. 794	Total Sq. Ft. 4936

Building Only - Excludes All Trades Permits

Value of Work	<i>280190 300,425</i>
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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: *Marian Tessier Lambert* Date: 9-12-2019

Application Fee	\$ <i>1543.81</i>
State Levy Fee	\$ <i>30.98</i>
Septic/Well Fee	\$ <i>—</i>
Zoning Fee	\$ <i>50.00</i>
RLD	\$ <i>100.00</i>
SWP	\$ <i>200.00</i>
Total	\$ <i>1924.79</i>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: BON AIR TITLE Telephone: 804-320-1336

Mailing Address: 9211 FOREST HILL AVE, RICHMOND VA 23235

OWNER'S AFFIDAVIT

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

_____ Owner's Signature

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

_____ (Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job	\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job	\$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee
Other Fees that may be applicable	RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD 2 CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL *Eckal* DATE 10/0/19

Code Official



BUILDING PERMIT APPLICATION

Application Date: 8/19/2019

Permit Number: *BP-2019-00753*

GPIN/Tax Map: 13-24-0-20-0 / *6842-84-8138*

Issued: *10-8-19*

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

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

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 4872 Kimber Lane	
	Owner <i>Old Time Builder Inc.</i>	Phone # 8043509327
	Address <i>P.O. Box 81 Rockville Va 23116</i>	Email otblee@msn.com

APPLICANT INFORMATION	Applicant/Contact Lee Llewellyn		Phone # 8043509327
	Address Po. Box 81, Rockville Va. 23146		Email otblee@msn.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Boundary</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>5' from Poles</i>	Center Line Setback	Rear Setback <i>35'</i>	CUP/Variance/COA
	Side Setback <i>30'</i>	Side Setback <i>30'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>David Floyd</i> Date <i>8/20/19</i> <i>AI</i>			

CONTRACTOR INFORMATION	Contractor Old Time Builder Inc.		Phone 8043509327
	Address 2400 Old Time Rd., Powhatan Va 231		Email otblee@msn.co
	Contractor License Number 2701019088	Type Class A	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: Construction of a new single family home. <i>attached garage w/ unfinished basement</i>				
	Proposed Use Single Family Home	Current Use Vacant	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <i>Land Disturbed @ 10,000 sqft</i>		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 2.5	# of Bedrooms 4	# of floors 2
	Finished Sq. Ft. 2263	Unfinished Sq. Ft. 1408	Total Sq. Ft. 3671		

Building Only - Excludes All Trades Permits		Application Fee \$ <i>6013.36</i>	
Value of Work	<i>150,000</i> \$ <i>222,525.00</i>	State Levy Fee	\$ <i>20.27</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.		Septic/Well Fee	\$
		Zoning Fee	\$ <i>50.00</i>
		RLD	\$ <i>100.00</i>
		SWP	\$ <i>200.00</i>
		Total	\$ <i>1,383.63</i>
Signature of Applicant <i>[Signature]</i> Date <i>8/19/2019</i>			

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: Hairfield-Morton PLC Telephone: 804-320-6600

Mailing Address: 2800 Buford Rd. #201, Richmond, VA 23235

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL  DATE 10-8-19
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 8-27-19
 Permit Number: BP-2019-00781
 GPIN/Tax Map: 12-1-0-71-K 16831-52-1309
 Issued: 10-7-19

Residential Commercial

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

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 3971 Cedar Plains Rd Goochland VA 23153	
	Owner CMH Homes Inc.	Phone # 804-210-2075
APPLICANT INFORMATION	Address 11160 Washington Hwy Glen Allen VA 23059	
	Applicant/Contact Oakwood Homes DBA CMH INC.	Phone # 804-798-9135
	Address 11160 Washington Hwy Glen Allen VA 23059	
	Email R702@claytonhomes.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>55' from ROW</u>	Center Line Setback _____	Rear Setback <u>25'</u>	CUP/Variance/GOA _____
	Side Setback <u>20'</u>	Side Setback <u>30'</u>	Flood Zone <input checked="" type="checkbox"/>	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>8/28/19</u> AI			

CONTRACTOR INFORMATION	Contractor CMH Homes Inc		Phone 804-798-9135
	Address 11160 Washington Hwy Glen Allen VA 23059		Email R702@claytonhomes.com
	Contractor License Number 2705048123	Type Class A	Expiration 04-30-2020

DESCRIPTION OF WORK	Scope of Work: <u>Serial # 31710-2019 6'x18' front porch</u> <u>Setup and Install Double wide 10'x12' back deck</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 4	# of floors 1
	Finished Sq. Ft. 1886	Unfinished Sq. Ft. <u>228</u> 208 210	Total Sq. Ft. <u>2124</u> 2124 2102		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>599.92</u> State Levy Fee \$ <u>12.00</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>50.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>661.92</u>
Value of Work	<u>130,650</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>8/14/19</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

Residential Commercial

Application Date: 2-20-19
 Permit Number: 2019-00169
 GPIN/Tax Map: 1734-33-7169/6A-1-0-7A-A
 Issued: 10-10-19
 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: 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@tcommunities.com

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: None Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 150' from ROW Center Line Setback: _____ Rear Setback: 30' CUP/Variance/COA: _____
 Side Setback: 26' Side Setback: 26' Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 3/7/19 B1

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 Retirement Community Bldey 7-

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 190	# of Bedrooms 100	# of floors 3
Finished Sq. Ft. 175,200	Unfinished Sq. Ft. 0	Total Sq. Ft. 175,200		

Building Only - Excludes All Trades Permits

Value of Work	14,412,000	Application Fee	\$ 108,090.00
		State Levy Fee	\$ 2,161.80
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ 100.00
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ 110,351.80

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: 02/08/19



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: 9/4/2019

Permit Number: BP 2019 00798

GPIN/Tax Map: 7725-30-9628 158-54-0-1-C

Issued: 10-15-19

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.

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>15500 Mosaic Creek Boulevard</u>	
	Owner <u>HH Hunt Communities</u>	Phone # <u>804-305-1855</u>
	Address	

APPLICANT INFORMATION	Applicant/Contact <u>Scott Smith - Portico Classic Homes</u>		Phone # <u>804-955-7691</u>
	Address <u>2801 McRae Road, Suite 2B, Richmond VA 23235</u>		Email <u>scott@porticoclassichomes.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>40' from Prop Line</u>	Center Line Setback —	Rear Setback <u>25'</u>	CUP/Variance/GOA —
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>9/9/19</u> RP110			

CONTRACTOR INFORMATION	Contractor <u>Portico Classic Homes LLC</u>		Phone <u>804-955-7691</u>
	Address <u>2801 McRae Road, Suite 2B, Richmond VA 23235</u>		Email <u>scott@porticoclassichomes.com</u>
	Contractor License Number <u>2705144011</u>	Type <u>Class A BLD</u>	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Build the Welcome Center Conservatory for Mosaic.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms <u>3</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>827 + 286</u>	Unfinished Sq. Ft. <u>481 Porch</u>	Total Sq. Ft. <u>827 1594</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2,437.50</u> State Levy Fee \$ <u>48.75</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>100.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>2,586.25</u>
Value of Work	<u>\$325,000</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

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

Application Date: 10/25/19
 Permit Number: BP-2019-00983
 GPIN/Tax Map: 13-24-0-16-0 / 16842-84-9548
 Issued: 10/30/19
 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 3757 Boundary Run Rd, Gum Spring, VA 23065	
	Owner Michael Smithers	Phone # (804) 387-8723
	Address 3757 Boundary Run Rd, Gum Spring, VA 23065	Email msmithers57@gmail.com

APPLICANT INFORMATION	Applicant/Contact Sigora Solar, LLC	Phone # 434-465-6788
	Address 700 Harris St. Suite 101, Charlottesville, VA 22903	Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Boundary Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>75' from Row</u>	Center Line Setback —	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>10/29/19</u> AI			

CONTRACTOR INFORMATION	Contractor Sigora solar, LLC	Phone 434-465-6788
	Address 700 Harris St. suite 101, Charlottesville, VA 22903	Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type —

DESCRIPTION OF WORK	Scope of Work: Installation of PV solar system / SYSTEM SIZE: 11.1 kw <u>ground mounted.</u> PV MODULES: (30) CSUN370-72MH INVERTER(S): (1) solarEdge SE10000H-US				
	Proposed Use Offset Energy Costs	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER <input type="checkbox"/> Public/Private	<input type="checkbox"/> WATER <input type="checkbox"/> Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 540		

Building Only – Excludes All Trades Permits		Application Fee \$ <u>206.21</u>
Value of Work	\$43,156.80	State Levy Fee \$ <u>4.12</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>Gage Carroll</u> Date <u>10/24/2019</u>		Septic/Well Fee \$
		Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>235.33</u>



BUILDING PERMIT APPLICATION

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

Application Date: 10/25/19
 Permit Number: BP-2019-00984
 GPIN/Tax Map: 4705-27-0571 / 57-29-0-64-2
 Issued: 10/30/19
 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: 1271 Flat Rock Crossing, Manakin Sabot VA 23103
 Owner: BRYAN & KENDALL BOGESS Phone #: 804.980.3688
 Address: 1271 Flat Rock Crossing, Manakin Sabot Email: BOGESS712@YAHOO.COM

APPLICANT INFORMATION
 Applicant/Contact: RIDGE LINE CONSTRUCTION, INC. / MILES WHITTEN Phone #: 804 400 8676
 Address: 402 LANCEY DRIVE MIDLOTHIAN, VA. 23114 Email: MWHITTEN@RIDGE LINE CONSTRUCTION.COM

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Logan Woods Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 55' from Row Center Line Setback: _____ Rear Setback: 35' CUP/Varlance/COA: _____
 Side Setback: 30' Side Setback: 30' Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Lloyd Date: 10/29/19 RR

CONTRACTOR INFORMATION
 Contractor: RIDGE LINE CONSTRUCTION, INC. Phone: 804 400 8676
 Address: 402 LANCEY DR. MIDLOTHIAN, VA. 23114 Email: MWHITTEN@RIDGE LINE CONSTRUCTION.COM
 Contractor License Number: 2705 023 188A Type: A Expiration: 02-29-2020

DESCRIPTION OF WORK
 Scope of Work: BUILD A SCREEN PORCH ONTO THE REAR OF THE EXISTING HOME

Proposed Use <u>SINGL FAMILY SEWER</u> <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	Current Use <u>SINGL FAMILY WATER</u> <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>	# of Bathrooms <u>N/C</u>	# of Bedrooms <u>N/C</u>	# of floors <u>N/C</u>
Finished Sq. Ft. <u>- 0 -</u>	Unfinished Sq. Ft. <u>544</u>	Total Sq. Ft. <u>544</u>			

Building Only - Excludes All Trades Permits

Value of Work <u>\$ 75,000⁰⁰</u>	Application Fee \$ <u>349.50</u>
	State Levy Fee \$ <u>6.99</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ <u>25.00</u>
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>381.49</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: 10/10/19



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: 10/23/19
 Permit Number: BP-2019-00976
 GPIN/Tax Map: 6810-37-1402 / 17-1-0-47E
 Issued: 10/30/19

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: 5284 Community House Rd. 23063
 Owner: Gaynell Robinson
 Phone #: 804-339-1941
 Address: 5284 Community House Rd.
 Email:

APPLICANT INFORMATION
 Applicant/Contact: Hannah Howren
 Phone #: (804) 359-2997
 Address: 17387 Echo Meadows Rd. 23146
 Email: hannah@smallwoodrenovations.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: 35'
 Side Setback: 20'
 Side Setback: 20'
 Flood Zone: _____
 APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: David Floyd Date: 10/28/19 #1

CONTRACTOR INFORMATION
 Contractor: Smallwood Renovations LLC
 Phone: (804) 359-2997
 Address: 17387 Echo Meadows Rd. 23146
 Email: hannah@smallwoodrenovations.com
 Contractor License Number: 2705152796
 Type: CLASS A
 Expiration: 07-31-2020

DESCRIPTION OF WORK
 Scope of Work: 4x8 landing, 12x12 deck, 4x6 bump out

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
Finished Sq. Ft. 200	Unfinished Sq. Ft. 184	Total Sq. Ft. 184		

Building Only - Excludes All Trades Permits

Value of Work	\$6,693.75	Application Fee	\$ 42.12
		State Levy Fee	\$.84
		Septic/Well Fee	\$
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 67.96

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: Mary Howren Date: 10/23/19

Reviewed by [Signature]



BUILDING PERMIT APPLICATION

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

Application Date: 10/28/19
 Permit Number: BP-2019-00992
 GPIN/Tax Map: 7726-96-0570 / 59-1-0-38-A
 Issued: 10/30/19

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>12554 Broad Street Road</u>	
	Owner <u>S. Barbee Cox, III Trustee</u>	Phone # <u>Robin Cox Petrine</u> <u>804-222-3500</u>
	Address <u>P O Box 7737, Richmond, Va 23231</u>	Email <u>r.petrine@sbcocxdemolition.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Robin Cox Petrine</u>	
	Address <u>S B Cox, Inc.</u> <u>P O Box 7737, Richmond, Va 23231</u>	Phone # <u>804 222-3500</u> Email <u>r.petrine@sbcocxdemolition.com</u>

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

CONTRACTOR INFORMATION	Contractor <u>S.B. Cox, Inc.</u>		Phone <u>804 222-3500</u>
	Address <u>P O Box 7737, Richmond, Va 23231</u>		
	Contractor License Number <u>2701010568</u>	Type <u>Class A Contractor</u>	Expiration <u>10-31-2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>Demolition of a two story block office building and 1 story admix building and 1 office mobile trailer. All debris to 623 Landfill. All concrete block to Cox Recycling Center</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. <u>Office Bldg: 4800 SF</u>	Unfinished Sq. Ft. <u>Mobile trailer: 400 SF</u>	<u>Admix = 800 SF</u>		Total Sq. Ft. <u>6,080</u>

Building Only - Excludes All Trades Permits

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

Signature of Applicant: [Signature] Date: 10-22-2019

Application Fee	\$ <u>137.70</u>
State Levy Fee	\$ _____
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>137.70</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10-23-2019
 Permit Number: BP-2019-00963
 GPIN/Tax Map: 6N51-91-9651/42-40-0-20-0
 Issued: 10-30-19

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>3010 SWANN'S FAWN CRESCENT</u>	
	Owner <u>SWANN'S FAWN LLC / TRAVIS JOHNSON</u>	Phone # <u>804-564-9097</u>
APPLICANT INFORMATION	Address <u>207 ECHO MEADOWS RD. ROCKVILLE, VA 23146</u>	Email <u>LEGACYHOMES19@AOL.COM</u>
	Applicant/Contact <u>LEGACY HOMES LLC / TRAVIS W. JOHNSON</u>	Phone # <u>804-564-9097</u>
	Address <u>207 ECHO MEADOWS RD. ROCKVILLE VA 23146</u>	Email <u>LEGACYHOMES19@AOL.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Swann's Fawn Estates</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>40' from Row</u>	Center Line Setback <u>65'</u>	Rear Setback <u>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>* Survey locate left setback.</u>			
Planning & Zoning Officer <u>David Floyd</u>		Date <u>10/24/19</u>		

CONTRACTOR INFORMATION	Contractor <u>LEGACY HOMES LLC</u>		Phone <u>804-564-9097</u>
	Address <u>207 ECHO MEADOWS RD. ROCKVILLE, VA</u>		Email <u>LEGACYHOMES19@AOL.COM</u>
	Contractor License Number <u>2705052698</u>	Type <u>CLASS A</u>	Expiration <u>10-31-2019</u>

DESCRIPTION OF WORK	Scope of Work: <u>22x22 sqft DETACHED 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 <u>—</u>	# of Bedrooms <u>—</u>	# of floors <u>1</u>
	Finished Sq. Ft.		Unfinished Sq. Ft. <u>484</u>	Total Sq. Ft. <u>484</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>\$25,000.00</u>	Application Fee <u>\$124.50</u>
	State Levy Fee <u>\$2.49</u>
	Septic/Well Fee <u>\$—</u>
	Zoning Fee <u>\$25.00</u>
	RLD <u>\$—</u>
	SWP <u>\$—</u>
Signature of Applicant <u>[Signature]</u>	Total <u>\$151.99</u>
Date <u>10-23-19</u>	

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



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			
	<i>Revised 10-29-19 to change from an iron ridge at the chimney</i>			
	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	\$
		Zoning Fee	\$
		RLD	\$
		SWP	\$
		Total	\$77.36

Signature of Applicant: *Dayan D. Law* Date: 9/5/19

to a grid mounted...



BUILDING PERMIT APPLICATION

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

Application Date: 10/29/19

Permit Number: BP-2019-00999

GPIN/Tax Map: 7726-19-6878

Issued: 10-30-19

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>12912 PLAZA DRIVE</u>	Phone # <u>708-0166</u>
	Owner <u>Pierre Bairrel Res.</u>	Email
APPLICANT INFORMATION	Address <u>MAURICE SABOT</u>	Phone #
	Applicant/Contact	Email

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

Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION	Contractor <u>JAMES A. FORD CONSTRUCTION</u>	Phone <u>339-9128</u>
	Address <u>1100 FORDS COUNTRY LANE Glen Allen 23059</u>	Email <u>JEFFREY.FORD@GMAIL.COM</u>
	Contractor License Number <u>2701006303</u>	Type <u>LCB, RCB</u>

DESCRIPTION OF WORK	Scope of Work: <u>REPLACE EXTERIOR WALL WHERE ACNIZ RUNTHRU</u> <u>REPLACE SIDING INSULATION SHEET ROCK</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>200</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>200</u>		

Building Only - Excludes All Trades Permits

Value of Work \$6000.00

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 10/29/19

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

per [Signature]

LIEN AGENT INFORMATION

Please check one of the following:

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

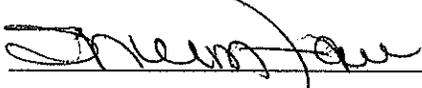
I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: _____ Telephone: _____

Mailing Address: _____

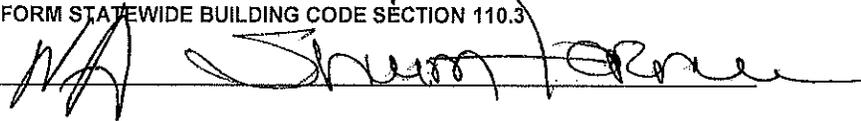
OWNER'S STATEMENT

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

 Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE 

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Other Fees that may be applicable RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE  A2 # STORIES 1 CONSTRUCTION TYPE SB OCCUPANY LOAD _____ CODE EDITION 2015

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL  DATE 10/30/2019
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

Application Date: 8/21/19
 Permit Number: BP-2019-00765
 GPIN/Tax Map: 6785-63-0908 / 155-12-0-A-2
 Issued: 8-27-19
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 878 Briesmaster Way, Crozier, VA 23039	
	Owner Sam Turner	Phone #
	Address 878 Briesmaster Way, Crozier, VA 23039	Email sturner12358@gmail.com

APPLICANT INFORMATION	Applicant/Contact Sigora Solar, LLC		Phone # 434-465-6788
	Address 700 Harris Street Suite 101, Charlottesville, VA 22903		Email permitting@sigorasolar.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 Sigora Solar, LLC		Phone 434-465-6788
	Address 700 Harris Street Suite 101, Charlottesville, VA 22903		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type A	Expiration 07/31/2020

DESCRIPTION OF WORK	Scope of Work: Installation of PV Solar System / System Size: 7.44 kw PV MODULES: (24) SAAE HT60-156M 310W *Flush Roof Mounted INVERTER(S): (24) ENPHASE IQ7-60-2-US <i>side connection w/ 60 AMP fused disconnect</i> <i>Permit revised 10/28/19 to change point of interconnection to supply</i>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> Public/Private	<input type="checkbox"/> Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>115.19</u>
Value of Work	\$23,436.00	State Levy Fee \$ <u>2.35</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>Michael Graves</u> Date <u>8/16/2019</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>119.81</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6-14-17

Permit Number: ~~BP-2017-00489~~

GPIN/Tax Map: 7717-23-1350 / 46-37-0-340

Issued: 10-29-19

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 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	2156 Proffitt Road Manakin - Subot VA 23103	
	Owner	Joe Liesfeld <u>III</u>	Phone # 804-690-1443
	Address	2156 Proffitt Rd Manakin - Subot	Email jliesfeld@liesfeld.com

APPLICANT INFORMATION	Applicant/Contact	Joe Liesfeld <u>III</u>	Phone # 804-690-1443
	Address	2156 Proffitt Rd Manakin - Subot VA 23103	Email jliesfeld@liesfeld.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: A-2 Survey, regrade RT, Setback		

Planning & Zoning Officer: [Signature] Date: 6/16/17

CONTRACTOR INFORMATION	Contractor	Joe Liesfeld <u>III</u>	Phone 804-690-1443
	Address	2156 Proffitt Rd Manakin - Subot VA 23103	
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: New Building to be detached from ex house and to be used as storage. <u>Revised 10-7-19 to 4000sq ft detached garage</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER	WATER	# of Bathrooms	# of Bedrooms
	<input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	0	0
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

0 900-4000 900-4000

Building Only - Excludes All Trades Permits

Value of Work	\$20,000.00 24,750.00 \$15,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 6/14/17

Application Fee	\$ 1684.53
State Levy Fee	\$ 1516.21
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 3225.74

Permitted Shop & Storage