

Pool Returns Well

 <p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date: <u>1/21/20</u>
	Permit Number: <u>BP-2020-00057</u>
	GPIN/Tax Map: <u>6786-87-7726 / 45-1-0-43-A</u>
	Issued: <u>1-31-2020</u>
	This application is <u>not</u> authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>1601 Gerito Road, Crozier VA, 23039</u>	Phone # <u>804-432-4324</u>
	Owner <u>John Coccagna</u>	Email <u>jscoccagna@gmail.com</u>
	Address <u>103 Trowbridge Road, Richmond VA 23238</u>	Phone #
APPLICANT INFORMATION	Applicant/Contact <u>Same</u>	Email
	Address	

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

CONTRACTOR INFORMATION	Contractor <u>Owner is general contractor</u>	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Construction of retaining wall and pool with full backfill</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	<input type="checkbox"/> SEWER Public/Private	<input type="checkbox"/> WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>102.00</u>
Value of Work	<u>\$20,000.00 \$20,000.00</u>	State Levy Fee	\$ <u>2.04</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>104.04</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>1/15/20</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, John Coccagna of (address) 103 Trowbridge Road Richmond, VA 23238 affirm that I am the owner of a certain tract of parcel of land located at 1601 Gerde Road, Crozet VA 23039 and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

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 B5 # STORIES _____ CONSTRUCTION TYPE VB OCCUPANY LOAD _____ CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL Beatrice Hall DATE 1-30-20
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: 2.16.18

Permit Number: BP-2018-00108

GPIN/Tax Map: 7733-18-1119/64-22-B-1-0

Issued: 3.28.18

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

Residential Commercial

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

OWNER INFORMATION	Site Address	<u>13304 Ingleton Lane (Rivergate) Richmond, VA 23238</u>		
	Owner	<u>Anil Patel</u>	Phone #	<u>804-647-3957</u>
APPLICANT INFORMATION	Address	<u>14436 Pleasant Creek Dr S. Chesterfield, VA 23834</u>		
	Applicant/Contact	<u>Anil Patel</u>	Phone #	<u>804-647-3957</u>
APPLICANT INFORMATION	Address	<u>14436 Pleasant Creek Dr S. Chesterfield, VA 23834</u>		
			Email	<u>apatelrva@comcast.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Rivergate</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u> </u>	<u> </u>
TO BE COMPLETED BY ZONING DEPARTMENT	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>40' from ROW</u>	<u>65'</u>	<u>35'</u>	<u>R2-1996-2</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Side Setback	Side Setback	Flood Zone	
	<u>15'</u>	<u>15'</u>	<u> </u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer		<u>Daniel Lloyd</u>		Date <u>2/16/18</u> <u>RI</u>

CONTRACTOR INFORMATION	Contractor	<u>Anil Patel / owner</u>		Phone	<u>804-647-3957</u>
	Address	<u>14436 Pleasant Creek Dr S. Chesterfield, VA 23834</u>			
CONTRACTOR INFORMATION	Contractor License Number	Type	Expiration		

DESCRIPTION OF WORK	Scope of Work: Construction of a new home <u>w/ attached 2 car garage</u> <u>Revised 1-9-20 to include 1513 sqft of finished Rec Room</u> <u>w/ finished basement + unfinished 3rd floor</u>				
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors	
	Residential	Vacant Lot	NO	<u>3 4</u>	
	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>11,121</u>	<u>4,547</u>	<u>15,668</u> <u>18,827</u>		

Building Only - Excludes All Trades Permits	<u>13,657</u>	<u>5170</u>	Application Fee	<u>\$5334.08</u>
Value of Work	<u>\$1,138,533</u>	<u>\$1,182,817.50</u>	State Levy Fee	<u>\$106.69</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		<u>1,380,570.00</u>	Septic/Well Fee	<u>\$</u>
Signature of Applicant	<u>Anil Patel</u>	Date	Zoning Fee	<u>\$50-</u>
		<u>2-16-18</u>	R/LD	<u>\$100-</u>
			SWP	<u>\$200-</u>
			Total	<u>\$5791.37</u>

Fee owed for additional footings: \$1,215.54



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: 12/6/2019
 Permit Number: BP-2019-01114
 GPIN/Tax Map: 7724-23-1627 / 6341-0-6-0
 Issued: 1-27-20
 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>521 + 525</u> 523 Creekmore Place, Richmond VA, 23238	Phone # <u>804-747-1943</u>
	Owner LeGault Homes LLC	Email <u>jonathan@legaulthomes.com</u>
APPLICANT INFORMATION	Address <u>5243 Hickory Park Drive Ste. A, Glen Allen VA, 23059</u>	Phone # <u>804-747-1943</u>
	Applicant/Contact LeGault Homes LLC	Email <u>jonathan@legaulthomes.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Creekmore Place</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from ROW</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>10'/25'</u>	Side Setback <u>10'/25'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* Survey locate setbacks.</u>		

Planning & Zoning Officer David Floyd Date 12/12/19 R3

CONTRACTOR INFORMATION	Contractor LeGault Homes LLC	Phone <u>804-747-1943</u>
	Address <u>5243 Hickory Park Drive Ste. A, Glen Allen VA, 23059</u>	Email <u>jonathan@legaulthomes.com</u>
	Contractor License Number <u>2705133306</u>	Type <u>A</u> Expiration <u>2020-02-29</u>

DESCRIPTION OF WORK	Scope of Work: NEW CONSTRUCTION - 3 UNIT CONDOMINIUM BUILDING - SINGLE FAMILY ATTACHED - CONDOS				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <u>3.5</u>	# of Bedrooms <u>3</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>2,344</u>	Unfinished Sq. Ft. <u>378</u>	Total Sq. Ft. <u>2,722</u>		

Building Only - Excludes All Trades Permits	Application Fee <u>\$6425.24</u>
Value of Work <u>\$223,000</u> <u>\$677,000</u> <u>\$856,698.00</u>	State Levy Fee <u>\$128.50</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.	Septic/Well Fee <u>\$</u>
Signature of Applicant <u>Jonathan DeFrancisco</u> Date <u>12/6/2019</u>	Zoning Fee <u>\$10000</u>
	RLD <u>\$10000</u>
	SWP <u>\$20000</u>
	Total <u>\$6,825.24</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: Bankers Title Telephone: (800) 830-1414

Mailing Address: 9011 Arboretum Pkwy #110, Richmond, VA 23236

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 R-5 # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 1/22/2020
Code Official

Pool Design



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: 1/21/20

Permit Number: BP-2020-00058

GPIN/Tax Map: 0786-87-7726/45-1-043-A

Issued: 1-31-2020

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>1601 Genito Road, Crozier VA 23039</u>	
	Owner	<u>John Caccasna</u>	Phone # <u>804-432-4324</u>
APPLICANT INFORMATION	Address	<u>Same</u>	
	Applicant/Contact	<u>Same</u>	
		Email	<u>jscaccasna@gmail.com</u>
		Phone #	
		Email	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Amber Lake</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>75' from Row</u>		<u>5'</u>	
	Side Setback	Side Setback	Flood Zone	
	<u>5'</u>	<u>5'</u>		
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer		Date		
<u>David Floyd</u>		<u>1/28/2020</u>		<u>A2</u>

CONTRACTOR INFORMATION	Contractor	Phone
	Address	Email
	<u>owner is general contractor</u>	
Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Construction of pool with full length auto cover. 42 width 18 Deep above In Ground pool</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>756</u>	<u>756</u>			

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>237.00</u>
Value of Work	<u>\$50,000</u>	State Levy/Fee	\$ <u>4.74</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.		Septic/Wall Fee	\$
		Zoning Fee	\$ <u>25.00</u>
Signature of Applicant <u>[Signature]</u> Date <u>1/21/20</u>		RLD	\$
		SWP	\$
		Total	\$ <u>266.74</u>

Issued 1-29-2020

BP-2020-00060

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

Application Date: 1-21-2020

Application Accepted:

Old Map Number: 67-2-C-7-D

GPIN: 7723-55-2169

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 213 West Brook Run Drive, Richmond, VA 23238			District		
	Owner L. Fred Roensch			Phone # 804-263-3666		
	Address 213 West Brook Run Drive, Richmond, VA 23238					
	Proposed Use Single family dwelling with solar		Current Use Single family dwelling	Existing Buildings on Property Single family dwelling		
	Proposed Occupant Load (Commercial)		Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Paid:	
	New Street Address			Zoning District		
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance	
	Side Setback	Side Setback	C O A		Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:					
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.					

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Sam Wing Phone 804-655-2095

Email: solarinfo@concentricusa.com

CONTRACTOR INFORMATION	Contractor Concentric LLC		Phone 804-655-2095	
	Address 6117 Staples Mill Road Richmond Virginia 23228			
	Contractor License Number 2705172026		Type AE class A	Expiration 07/30/2021

Description of Work	Scope of Work: Installation and wiring for 6.4KW grid tied, roof mounted, solar PV system (20 panels, 20 microinverters total)				
	SEWER Public/Private		WATER Public/Private		# of Bathrooms
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

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

VALUE OF WORK	
Building	6,904.99
Excludes All Trades Permits	

Application Fee	\$ 43.07
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 1.86
RLD	\$ _____

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

Signature of Applicant Sam Wing

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 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 RS # STORIES _____ CONSTRUCTION TYPE VB OCCUPANY LOAD _____ CODE EDITION 15
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL Batwa Nell DATE 1-29-2020
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: 12/11/19
 Permit Number: BP-2019-01134
 GPIN/Tax Map: 6797-88-5039/45-10-940
 Issued: 1-28-2020
 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 1985 SHALLOW WELL RD, MANAKIN SABOT, VA 23103	
	Owner ADRIAN CHAPARRO MALDONADO	Phone # (804) 774-6519
	Address 1985 SHALLOW WELL RD.	Email adrianchaparro2013@gmail.com
APPLICANT INFORMATION	Applicant/Contact ADRIAN CHAPARRO MALDONADO	Phone # (804) 774-6519
	Address 1985 SHALLOW WELL RD	Email adrianchaparro2013@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from 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 Taylor</u> Date: <u>12/17/19</u> <u>A2</u>			

CONTRACTOR INFORMATION	Contractor ADRIAN CHAPARRO MALDONADO	Phone (804) 774-6519
	Address 1985 SHALLOW WELL RD.	Email
	Contractor License Number	Type <u>N/A</u>
		Expiration <u>N/A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install a 25' x 20' metal garage.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>500</u>	500 sqft Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work
~~# 5845~~ 13,750

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: Adrian Chaparro Date: 12/11/19

Application Fee	\$ <u>73.87</u>
State Levy Fee	\$ <u>1.48</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>2500</u>
RLD	\$
SWP	\$
Total	\$ <u>100.35 cash</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: 12-10-2020Permit Number: BP-2019-01118GPIN/Tax Map: 6823-66-1340 / 5-1-0-76-0Issued: 1-30-2020

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>5002 Three chopt rd Louisa VA 23093</u>	
	Owner <u>Charles Proffitt</u>	Phone # <u>804 512 1740</u>
	Address <u>5002 Three chopt rd Louisa VA 23093</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Virginia Carolina Buildings</u>	Phone # <u>1800 893 1242</u>
	Address <u>210 South 4th street Crewe VA 23930</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' From ROW</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>35'</u>	Side Setback <u>5'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date 12/16/19 191

CONTRACTOR INFORMATION	Contractor <u>Virginia Carolina Buildings</u>		Phone <u>800 893 1242</u>
	Address <u>210 South 4th street Crewe VA 23930</u>		Email
	Contractor License Number <u>2705136501</u>	Type <u>CLASS A</u>	Expiration <u>10-31-2020</u>

DESCRIPTION OF WORK	Scope of Work: <u>30x40 enclosed garage with 12x40 lean to.</u>				
	Proposed Use <u>Garage</u>		Current Use		
	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		# of Bathrooms	# of Bedrooms	# of floors <u>1</u>
	<input type="checkbox"/> Public/Private	<input type="checkbox"/> WATER Public/Private	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1680</u>	Total Sq. Ft. <u>1680</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>\$12,500.00</u> \$54,600
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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 Josh Farnham Date 12/6/2019

Application Fee	\$ <u>257.70</u>
State Levy Fee	\$ <u>5.15</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>287.85</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: 12-13-19
 Permit Number: 2019-01135
 GPIN/Tax Map: 126-85-1752/59-3-2-90-F
 Issued: 1-27-20

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	1800 Wilkes Ridge circle	
	Owner	Notch Hotel LLC	
APPLICANT INFORMATION	Address	11541 Nuckolls Rd Ste D.	
	Applicant/Contact	Jessica Sutherland	Phone # 804 649 0325
	Address	1908 Chamberlayne Ave.	Email PERMITS@talleyesign.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	COA - 2018-00010 COA - 2019-00012
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Wall signs, no setbacks assigned.</u> Planning & Zoning Officer: <u>David Taylor</u> Date: <u>1/21/2020</u> 131			

CONTRACTOR INFORMATION	Contractor	Talley Sign company		Phone	804 649 0325
	Address	1908 Chamberlayne Ave.		Email	PERMITS@talleyesign.com
	Contractor License Number	2701025262	Type	A - BSC	Expiration 9/30/20

DESCRIPTION OF WORK	Scope of Work: <u>install (3) illuminated wall signs per drawings</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>HOTEL</u>		# of Bathrooms	# of Bedrooms	# of floors
	<input type="checkbox"/> Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	Total Sq. Ft. <u>12042</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>8,250</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: Jessica Sutherland Date: 11/26/19

Application Fee	\$ <u>61.87</u>
State Levy Fee	\$ <u>1.24</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$
SWP	\$
Total	\$ <u>113.11</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: 01/13/20 1-15-20 5
 Permit Number: BP-2020-00034
 GPIN/Tax Map: 1-4-0-70/6803-44-695
 Issued: 1-23-20
 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 4572 Shannon Hill rd	Phone #
	Owner Taylor Gleason	
	Address 4572 Shannon Hill rd Columbia va 23038	Email
APPLICANT INFORMATION	Applicant/Contact Jeannie M. Salvatore	Phone #
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Email Jsalvatore@jeswork.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 Jes construction	Phone 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Email Jsalvatore@jeswork.com
	Contractor License Number 2705-06-8655	Type A

DESCRIPTION OF WORK	Scope of Work: 161 LF DRAIN TILE, 2 SUMP PUMPS, 1155 CRAWL SEAL LINER, DEHUMIDIFIER FOR ENCAPSULATION.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1128		

Building Only - Excludes All Trades Permits

Value of Work	19,600.00
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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 Jeannie M. Salvatore Date 01/13/20

Application Fee	\$ <u>100.20</u>
State Levy Fee	\$ <u>2.00</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>102.20</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: 10/08/2019

Permit Number: BP-2019-01131

GPIN/Tax Map: 7733-34-9570 / 67-6-010

Issued: 1-23-2020

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 205 Hill Point Road	Phone # 804-363-1953
	Owner Richard L & Ann W Ramsey	Email
APPLICANT INFORMATION	Address 205 Hill Point Road, Manakin Sabot, VA 23103	Phone # 970-274-04466
	Applicant/Contact John Bauhan	Email jbauhan@bauhancustombuilders.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>None</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <i>55' From ROW</i>	Center Line Setback	Rear Setback <i>35'</i>	CUP/Variance/COA
	Side Setback <i>20'</i>	Side Setback <i>20'</i>	Flood Zone	—

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: *David Floyd* Date: *12/17/18* #2

CONTRACTOR INFORMATION	Contractor Bauhan Custom Builders, Inc.	Phone 970-274-0466
	Address 1641 Genito Lane, Manakin-Sabot	Email jbauhan@bauhancustombuilders.com
	Contractor License Number 2705137373	Type Class A

Expiration 11/30/2020

Scope of Work: Add Garage and carport, remodel guest suit and laundry area, and remove hyphen, enlarge and rebuild. Create new exterior stairs to the basement.
New SF = 1408 Remodeled SF = 1310

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. <i>112</i>	Unfinished Sq. Ft. <i>1294</i>	Total Sq. Ft. <i>1408</i>		

Building Only - Excludes All Trades Permits

Value of Work	<i>600,000</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: *[Signature]* Date: *12-10-19*

Application Fee	\$ <i>2712.00</i>
State Levy Fee	\$ <i>54.24</i>
Septic/Well Fee	\$
Zoning Fee	\$ <i>25.00</i>
RLD	\$
SWP	\$
Total	\$ <i>2791.24</i>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6-25-19
 Permit Number: BP-2019-00612
 GPIN/Tax Map: 7714-84-6041 / 63-1-0-91-0
 Issued: 1-23-20

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>16 Cobblestone Circle Richmond Va 23235-</u>	
	Owner	<u>W Steven & Pamela Pope</u>	Phone # <u>804-784-2725</u>
APPLICANT INFORMATION	Address	<u>16 Cobblestone Circle Richmond Va</u>	
	Applicant/Contact	<u>W STEVE POPE</u>	Email <u>spope@mpbarclaw.com</u>
	Address		Phone #
			Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>None</u>			
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>55' from ROW</u>		<u>5'</u>	
	Side Setback	Side Setback	Flood Zone	
	<u>5'</u>	<u>5'</u>		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS			
	Planning & Zoning Officer <u>[Signature]</u> Date <u>1/14/2020</u>	<u>92</u>		

CONTRACTOR INFORMATION	Contractor	<u>J.A. Bell, Inc. Harrington Construction Co. Inc.</u>	Phone <u>804-741-6772</u>
	Address	<u>1814 Ryandale Rd. 23238</u>	Email <u>[Redacted]</u>
	Contractor License Number	<u>2705622365</u>	Expiration <u>10-31-21</u>

DESCRIPTION OF WORK	Scope of Work:	<u>Build new ^{detached} garage 40' x 26'</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>N/A</u>	<u>N/A</u>	<u>None</u>		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
			<u>0</u>	<u>0</u>	<u>1</u>
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>1200</u>		<u>1200</u>		

Building Only - Excludes All Trades Permits	Application Fee	<u>394.50</u>
Value of Work <u>\$85,000</u>	State Levy Fee	<u>7.89</u>
	Septic/Well Fee	
	Zoning Fee	<u>2500</u>
	RED	
	SWP	
	Total	<u>42239</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 6-25-19
[Signature] 1-13-20



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: 11/26/2019

Permit Number: BP-2019-01095

GPIN/Tax Map: 7734-04-9723 / 6420-0-14-0

Issued: 1-21-20

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 12500 West Creek Parkway, Richmond, VA 23238	Phone # 804-484-7700
	Owner Performance Food Group	Email
APPLICANT INFORMATION	Address 12500 West Creek Parkway, Richmond, VA 23238	Phone # 804-282-5300
	Applicant/Contact Hourigan Construction/Mark Hourigan Jr.	Email <i>Vette. Lanier @</i> mhouriganjr@hourigan.group

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

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

CONTRACTOR INFORMATION	Contractor Hourigan Construction	Phone 804-282-5300
	Address 411 E. Franklin Street, Suite 400, Richmond, VA 23219	Email mhouriganjr@hourigan.group
	Contractor License Number 2701010019	Type Class A
		Expiration 05/31/2020

DESCRIPTION OF WORK	Scope of Work: Type II B construction. Renovation of existing building. Renovation includes reconfiguration of 1st floor lobby & cafe area & patio. Some adjustments to sprinkler head locations, HVAC diffusers, and ductwork are anticipated.				
	Proposed Use B - Business	Current Use B - Business	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 9,334		

Building Only - Excludes All Trades Permits

Value of Work	2,088,959.00
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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 *Mark Hourigan Jr.* Date 11/26/2019

Application Fee	\$ <u>12,661.20</u>
State Levy Fee	\$ <u>313.34</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>15,980.54</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: 12/27/19

Permit Number: BP-2019-01170

GPIN/Tax Map:

Issued: 1-16-2020

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>1625 shallow well road, Manakin Sabot, VA 23103</u>	
	Owner	<u>Scott and Sarah Schubert</u>	Phone # <u>(540) 272-6878</u>
	Address	<u>301 Virginia street, unit 1113, Richmond VA 23219</u>	Email <u>maggie_schubert@iclad.com</u>
APPLICANT INFORMATION	Applicant/Contact	<u>John Gray</u>	Phone # <u>(804) 317-7010</u>
	Address	<u>1606 Woodgrove circle</u>	Email <u>John@Dntkm.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75 from Row</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer David Floyd Date 12/30/19

CONTRACTOR INFORMATION	Contractor	<u>Dntkm Const. Co & Crystal Win</u>		Phone <u>(804) 740-4071</u>
	Address	<u>1606 Woodgrove circle, Richmond VA 23238</u>		Email <u>Jim@Dntkm.net</u>
	Contractor License Number <u>2705024854</u>	Type <u>BLDA</u>	Expiration	

DESCRIPTION OF WORK	Scope of Work: <u>Detached Garage</u>				
	Proposed Use <u>Garage</u>	Current Use <u>Land</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>no no</u>		
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>75</u>	Unfinished Sq. Ft. <u>1000</u>	Total Sq. Ft. <u>1000</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>75,000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Bernard White Date 12/27/19

Application Fee	\$ <u>349.50</u>
State Levy Fee	\$ <u>6.99</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>381.49</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: 1-7-2020Permit Number: BP-2020-00019GPIN/Tax Map: 7734-10-1859 / 64-22-B-18-0Issued: 1-16-2020

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>13274 KELLINGTON LANE GOOCHLAND VA</u>	
	Owner	<u>STEPHEN & VICTORIA CHEN</u>	
	Address	<u>13274 KELLINGTON LANE</u>	

APPLICANT INFORMATION	Applicant/Contact	Phone #	<u>804-647-9120</u>
	Address	Email	<u>NATE SEABORN CONSTRUCTION @GMAIL.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Rivergate</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u> </u>	<u> </u>
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>40' from ROW</u>	<u> </u>	<u>5'</u>	

APPROVED REJECTED COMMENTS:

Planning & Zoning Officer David Boyd Date 1/10/2020 RI

CONTRACTOR INFORMATION	Contractor	Phone	<u>804 614 5510</u>
	Address	Email	<u> </u>
	Contractor License Number	Type	Expiration

Scope of Work: NEW POOL HOUSE AND PORCH

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
<u> </u>	<u> </u>	<u>1</u>	<u>0</u>	<u>1</u>
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u>835</u>	<u>434</u>	<u>1269</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$69,795</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Date 1-7-2020

Application Fee	\$ <u>351.08</u>
State Levy Fee	\$ <u>6.52</u>
Septic/Well Fee	\$ <u> </u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u> </u>
SWP	\$ <u> </u>
Total	\$ <u>375.60</u>



BUILDING PERMIT APPLICATION

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

Application Date: December 23, 2019 *Rec 12.27.19*

Permit Number: *BP-2019-01173*

GPIN/Tax Map: 6777-39-4886 / *43-1-0-69-T*

Issued: *1-16-19*

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

Residential Commercial

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

OWNER INFORMATION	Site Address 1845 Hawk Town Road, Maidens, VA 23102		Phone # 804-901-7433
	Owner Nicholas, William W.	Email stuart.squier@gdnsites.com	
	Address 1991 Hawk Town Road, Maidens, VA 23102	Phone # 804-901-7433	
APPLICANT INFORMATION	Applicant/Contact Stuart Squier for TowerCo		Email stuart.squier@gdnsites.com
	Address 3126 W. Cary St., #604, Richmond, VA 23221		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>None</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>7.5' from R/W</i>	Center Line Setback _____	Rear Setback <i>5'</i>	CUP/Variance/COA <i>CU-2019-5</i>
	Side Setback <i>5'</i>	Side Setback _____	Flood Zone _____	<i>POD-2019-21</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <i>No change to existing footprint.</i>		
Planning & Zoning Officer <i>David Lloyd</i>		Date <i>12/31/19</i>		

CONTRACTOR INFORMATION	Contractor Horne Brothers Construction Incorporated		Phone 800-998-0320
	Address 1662 Middle River Loop, Fayetteville, NC 28312		
	Contractor License Number 2705063678	Type Class A (CBC, ELE)	Expiration 2021-06-30

Scope of Work:
Collocate antennas and equipment at 199' monopole communications facility.

Proposed Use Utility	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
<input type="checkbox"/> SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms NA	# of Bedrooms NA	# of floors NA
Finished Sq. Ft. NA	Unfinished Sq. Ft. NA	Total Sq. Ft. NA		

Building Only - Excludes All Trades Permits

Value of Work	\$64,436
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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: 12/23/2019

Application Fee	\$ <i>483.27</i>
State Levy Fee	\$ <i>9.67</i>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <i>200-</i>
RLD	\$ _____
SWP	\$ _____
Total	\$ <i>692.94</i>



JAMES RIVER EQUIPMENT

11047 Leadbetter Road
Ashland, VA 23005
Phone (804) 798-6001
Toll Free (800) 969-6001
Fax (804) 752-7111
Cell (804) 543-0784

Rusty Perkins
Sales Representative

perkins@jamesriverequipment.com
www.jamesriverequipment.com



JOHN DEERE

WHEN READY.

Application Date:	1/3/2020 1-7-19
Permit Number:	2020-00008
GPIN/Tax Map:	7116-98-3730-9999 / 47-1-0-43-A1
Issued:	1-14-20
This application is <u>not</u> authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.	

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 52 Broad Street Rd. Manakin-Sabot VA 23103		Phone # 804-556-5304
	Owner GCVFRA GOOCHLAND COUNTY VOLUNTEER FIRE RESCUE ASSOCIATION INC		Email rwperkins15@gmail.com
APPLICANT INFORMATION	Applicant/Contact Russell Perkins Jr.		Phone # 804-543-0784
	Address 52 Broad Street Rd. Manakin-Sabot VA 23103		Email rwperkins15@gmail.com
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —
	Front Setback 100' from Row	Center Line Setback —	Rear Setback 35'
	Side Setback 35'	Side Setback 20'	Flood Zone —
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * No change to existing footprint.		
Planning & Zoning Officer <i>[Signature]</i>		Date 1/8/2020 A2	
CONTRACTOR INFORMATION	Contractor Centerville Co.3		Phone 804-784-4068
	Address 52 Broad St. Rd. Manakin-Sabot VA		Email rwperkins15@gmail.com
	Contractor License Number N/A	Type —	Expiration —
DESCRIPTION OF WORK	Scope of Work: Upfit of storage / auxiliary closet. Electrical and Plumbing for new washer / dryer - utility room. 36" - 48" Case Opening upfit. — REMOVE NON-BEARING WALL.		
	Proposed Use utility room	Current Use storage room	Environmental Impacts (stream crossing, wetlands, amt land disturbed) n/a
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 4
	Finished Sq. Ft. 96		# of Bedrooms 2
Unfinished Sq. Ft. —		# of floors 1	
Total Sq. Ft. 96			
Building Only - Excludes All Trades Permits			
Value of Work	\$14,289.00		
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	<i>[Signature]</i> Date 1/3/2020		
Application Fee	\$ 107.17		
State Levy Fee	\$ 2.14		
Septic/Well Fee	\$ —		
Zoning Fee	\$ —		
RLD	\$ —		
SWP	\$ —		
Total	\$ 109.31		



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: ^{12/10/19} 1-7-20
 Permit Number: BP-2020-00007
 GPIN/Tax Map: 62-15-0-A-0/7704-45-0898
 Issued: 1-14-20

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 115 Ben Dover Road		Phone # <u>434-238-0359</u>
	Owner Firstmark Farm LLC/ Thresa Riddle		Email
	Address 115 Ben Dover Road		
APPLICANT INFORMATION	Applicant/Contact Jeannie M. Salvatore		Phone # 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831		Email jsalvatore@jeswork.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 Jes construction		Phone 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831		Email jsalvatore@jeswork.com
	Contractor License Number 2705-06-8655	Type A	Expiration 04/30/20

DESCRIPTION OF WORK	Scope of Work: <u>Installing 13CP Drain tile + Sump Pump</u>					
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)			
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors	
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>10,694</u>			

Building Only - Excludes All Trades Permits		Application Fee \$ <u>30.75</u>
Value of Work 4,470.00	<u>4,100.00</u>	State Levy Fee \$ <u>.61</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>jeannie salvatore</u> Date <u>12/10/19</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>31.06</u>

Ball 1-17-2020



BUILDING PERMIT APPLICATION

Application Date: Dec. 17 2019

Permit Number: BP-2019-0179

GPIN/Tax Map: 6830-89-6953

Issued: 1-14-2020

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

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

Residential Commercial

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

OWNER INFORMATION	Site Address <u>3843 Cedar Plains Rd.</u>		Phone #
	Owner <u>John Nemetz</u>		Email <u>john.nemetz@gmail.com</u>
	Address <u>3843 Cedar Plains Rd.</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Danny Queensberry</u>		Phone #
	Address <u>2538 Fairground Rd.</u>		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from Row</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>12/31/19</u> A1			

CONTRACTOR INFORMATION	Contractor <u>Delta Deck Company</u>		Phone <u>804-241-3920</u>
	Address <u>2538 Fairground Rd.</u>		
	Contractor License Number <u>2705161359</u>	Type <u>A' RBC'</u>	Expiration <u>1-31-20</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build 20x23'4" addition including 2 closets, bathroom & master bedroom, 5'x3'8" stoop</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>460</u>	Unfinished Sq. Ft. <u>15</u>	Total Sq. Ft. <u>475</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>183.00</u> State Levy Fee \$ <u>3.66</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>211.66</u>
Value of Work	<u>38,000</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>12-17-19</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: _____ 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 1 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 1-13-2020

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: 12-2-19

Permit Number: DP-2019-01112

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

Issued: 1-7-20

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>12330 Patterson Ave Richmond, VA 23238</u>	
	Owner	<u>TuckatHoe Pines Retirement Comm. LLC</u>	Phone # <u>402-420-2335</u>
APPLICANT INFORMATION	Address	<u>7101 S. 82nd St. Lincoln NE. 68516</u>	Email <u>CMiddleTON@CameronGeneralContractors.com</u>
	Applicant/Contact	<u>Ella Springfield</u>	Phone # <u>402-890-3502</u>
	Address	<u>12330 Patterson Ave Richmond, VA 23238</u>	Email <u>ESpringfield@CameronGeneralContractors.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	<u>None</u>	Center Line Setback	<u>—</u>
	Side Setback	<u>5'</u>	Rear Setback	<u>—</u>
			Flood Zone	<u>COA-2019-13</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Date <u>1/3/20</u> '151		
	Planning & Zoning Officer <u>[Signature]</u>			

CONTRACTOR INFORMATION	Contractor	<u>Cameron General Contractors</u>		Phone <u>402-890-3502</u>
	Address	<u>12330 Patterson Ave</u>		Email <u>ESpringfield@CameronGeneralContractors.com</u>
	Contractor License Number	Type	Expiration	
	<u>2705166535</u>	<u>CLASS A</u>	<u>11-30-2020</u>	

DESCRIPTION OF WORK	Scope of Work: <u>MONUMENT SIGN: 5x13</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 <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>0</u>
	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>0</u>	<u>65</u>	Total Sq. Ft. <u>0</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>75.00</u>
Value of Work <u>10,000.00</u>		State Levy Fee \$ <u>1.50</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ <u>Waived</u>
Signature of Applicant <u>[Signature]</u>	Date <u>12-2-19</u>	Zoning Fee \$ <u>—</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>76.50</u>



BUILDING PERMIT APPLICATION

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

Application Date: December 23, 2019 *Rec 12.27.19*

Permit Number: *BP-2019-01171*

GPIN/Tax Map: 6777-39-4886 / *43-1-0-69-T*

Issued: *1-7-20*

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 1845 Hawk Town Road, Maidens, VA 23102		Phone # 804-901-7433		
	Owner Nicholas, William W.		Email stuart.squier@gdnsites.com		
	Address 1991 Hawk Town Road, Maidens, VA 23102		Phone # 804-901-7433		
APPLICANT INFORMATION	Applicant/Contact Stuart Squier for TowerCo		Email stuart.squier@gdnsites.com		
	Address 3126 W. Cary St., #604, Richmond, VA 23221		Phone # 804-901-7433		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>None</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____	
	Front Setback <i>75' from Row</i>	Center Line Setback _____	Rear Setback <i>5'</i>	CUP/Variance/COA <i>CU-2019-5</i>	
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone _____	<i>POD-2019-27</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>David Lloyd</i> Date: <i>12/31/19</i> <i>A2</i>				
CONTRACTOR INFORMATION	Contractor JDH Contracting Incorporated		Phone 410-549-2945		
	Address 8109 Network Drive, Plainfield, IN 46168		Expiration 2021-03-31		
	Contractor License Number 2705127082	Type Class A (CEM,ELE,H/H)	Expiration 2021-03-31		
DESCRIPTION OF WORK	Scope of Work: Construct 199' monopole communications facility on concrete foundation, within 60'x60' compound.				
	Proposed Use Utility	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 14,350sf total land disturbance		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms NA	# of Bedrooms NA	# of floors NA
	Finished Sq. Ft. NA	Unfinished Sq. Ft. NA	Total Sq. Ft. NA		
Building Only - Excludes All Trades Permits			Application Fee \$ <i>1060.50</i>		
Value of Work \$221,400			State Levy Fee \$ <i>33.21</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>200.00</i>		
			RLD \$ _____		
			SWP \$ _____		
			Total \$ <i>1893.71</i>		
Signature of Applicant <i>Stuart Squier</i>			Date 12/23/2019		

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE U # STORIES Two CONSTRUCTION TYPE 5b OCCUPANY LOAD Ø CODE EDITION 15

FIRE SPRINKLER N FIRE ALARM N MODIFICATION N

APPROVAL [Signature] DATE 1-2-20

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: 12/9/2019

Permit Number: BP-2019-01172

GPIN/Tax Map: 6804-42-121/4-1-0-3-0

Issued: 01-06-2020

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 5025 Tabscott Rd. Kents Store, VA 23084		Phone # 4345898461
	Owner Nancy Bowles		Email bowl8216@bellsouth.net
	Address 5025 Tabscott Rd. Kents Store, VA 23084		Phone # 434.465.6788 ext.119

APPLICANT INFORMATION	Applicant/Contact Sigora Solar LLC		Email permitting@sigorasolar.com
	Address 1222 HARRIS STREET, CHARLOTTESVILLE, VA 22903		Phone # 434.465.6788 ext.119

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from Property Line</u>	Center Line Setback _____	Rear Setback <u>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: David Lloyd Date: 1/3/20 AI

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC		Phone 434.465.6788 ext.119
	Address 1222 Harris Street, Charlottesville, VA 22903		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type AES ELE	Expiration 7/31/20

DESCRIPTION OF WORK	Scope of Work: Installation of a Ground Mounted Solar Photovoltaic System System Size: 14.06 kWp DC				
	Proposed Use Residential Single Family	Current Use Residential Single Family	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	Building Only - Excludes All Trades Permits				

Value of Work: \$49,568.80

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: Michael Graves Date: 12/9/2019

Application Fee	\$ <u>235.06</u>
State Levy Fee	\$ <u>4.70</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>264.76</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 RS # STORIES _____ CONSTRUCTION TYPE VB OCCUPANY LOAD _____ CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 1/3/2020

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: 12/26/2019

Permit Number: **BP-2019-01176**

GPIN/Tax Map: **6749-42-8747/29-10-0-4-0**

Issued: **1-3-2020**

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 3825 Riddles Bridge Rd Goochland, VA 23063	Phone # 804-840-6668
	Owner Mary-Beth Geiger	Email mbgeiger14@gmail.com
APPLICANT INFORMATION	Address 3825 Riddles Bridge Rd. Goochland, VA 23063	Phone # 434.465.6788 ext.119
	Applicant/Contact Sigora Solar LLC	Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision The Woods @ Riddle Bridge	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 75' From Fw	Center Line Setback	Rear Setback 35'	CUP/Variance/COA
	Side Setback 20'	Side Setback 20'	Flood Zone	

APPROVED REJECTED COMMENTS: **No change to footprints.**

Planning & Zoning Officer: **David Boyd** Date: **12/31/19** A1

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC	Phone 434.465.6788 ext.119
	Address 1222 Harris Street, Charlottesville, VA 22903	Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type AES ELE Expiration 7/31/20

Scope of Work: Installation of a Flush Roof Mounted Solar Photovoltaic System
System Size: 12.40 kWp DC

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

Building Only - Excludes All Trades Permits

Value of Work	\$5,399.90	Application Fee	\$30.30
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.		State Levy Fee	\$0.73
		Septic/Well Fee	\$
		Zoning Fee	\$
		RLD	\$
		SWP	\$
Signature of Applicant Michael Graves	Date 12/26/2019	Total	\$37.03



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: 12/13/2019

Permit Number: BP-2019-01141

GPIN/Tax Map: 7715-59-7984/58-51-05-0

Issued: ~~12/13/2019~~ 1-2-2020

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 1138 Getaway Ln Manakin Sabot, VA 23103	
	Owner Jennifer Vanderbeck	Phone # (215) 805-2916
	Address 1138 Getaway Ln Manakin Sabot, VA 23103	Email jen.vanderbeck@gmail.com

APPLICANT INFORMATION	Applicant/Contact Sigora Solar LLC		Phone # 434.465.6788 ext.119
	Address 1222 HARRIS STREET, 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 ext.119
	Address 1222 Harris Street, Charlottesville, VA 22903		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type AES ELE	Expiration 7/31/20

DESCRIPTION OF WORK	Scope of Work: Installation of a Flush Roof Mounted Solar Photovoltaic System System Size: 24.80 kWp DC				
	Proposed Use Residential Single Family	Current Use Residential Single Family	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. 1444.80	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only – Excludes All Trades Permits		Application Fee \$ <u>43.14</u> State Levy Fee \$ <u>.86</u> Septic/Well Fee \$ _____ Zoning Fee \$ _____ RLD \$ _____ SWP \$ _____ Total \$ <u>44.00</u>	
Value of Work	\$6,919.20		
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>12/13/2019</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: 1-8-20

Permit Number: BP-2020-00010

GPIN/Tax Map: 7726-15-6562/58-55-2-6-0/7726-15-7414/58-55-2

Issued: 1-31-20

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.

Site Address 12205 Bremner Ridge Circle, Manakin Sabot, VA 23103
1501 HOCKETT ROAD, MANAKIN SABOT, VA 23103

OWNER INFORMATION
 Owner: READERS BRANCH PARTNERS, LLC
 Phone #

Address: 2250 OLD BRICK ROAD, SUITE 220, GLEN ALLEN, VA 23060
 Email

APPLICANT INFORMATION
 Applicant/Contact: BRACT RETAINING WALLS AND EXCAVATING, LLC - VICKI BARNETT
 Phone #: 804.798.5097

Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005
 Email: ADMIN@BRACTWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	<u>Readers Branch</u>			
	Front Setback <u>30' from top line</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone		

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: [Signature] Date: 1/8/2020

CONTRACTOR INFORMATION
 Contractor: BRACT RETAINING WALLS AND EXCAVATING, LLC
 Phone: 804.798.5097

Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005

Contractor License Number: 2705131869 Type: CONTRACTORS A Expiration: 11.30.2021

DESCRIPTION OF WORK
 Scope of Work: INSTALL 1 SEGMENTAL BLOCK RETAINING WALL AT LOTS 5-6 = 2,705 SQ FT / 224 L FT

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 2,705		

Building Only - Excludes All Trades Permits
 Value of Work: \$39,645.00

Application Fee	\$ <u>297.00</u>
State Levy Fee	\$ <u>5.95</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$
SWP	\$
Total	\$ <u>353.28</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: JAN 2, 2020



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 1/31/20

Permit #: ELI-2020-06080

GPIN:

Tax Map:

LOCATION

Street Address: 654 FAIRHURST COURT MS

PROPERTY OWNERSHIP

Name: BEN LEWIS Phone: 804 399-5825

Mailing Address: 654 FAIRHURST CT. MANASSAS VA 23103 Email:

APPLICANT

Name: PEE SEASONN Phone: 804 388-4242

Address: RICHMOND MANAKIN ELECTRICAL INC

CONTRACTOR

Name: MANAKIN ELECTRICAL CONTRACTORS Phone: [Signature]

Mailing Address: P.O. Box 147 ROCKVILLE VA 23146 Email:

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

INSTALL 20KW GENERATOR AND TWO 200A ATS'S

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required): 10,500			

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

Signature of Applicant: PEE SEASONN Date: 1/31/20

Approval: FISHER	Office Use Only	Approval date: 1-31-2020
Permit Fee: 109.61		Issued date: 1-31-2020

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date 01.14.2020
Permit # <u>ELI-2020-00050</u>
GPIN
Tax Map

LOCATION

Street Address Circle
12112 BRANCH OVERLOOK DRIVE, MANAKIN-SABOT, VA 23103

PROPERTY OWNERSHIP

Name RICHARD & NANCY MOYERS — <u>Susan Cedillo</u>	Phone 804.919.1253
Mailing Address <u>Circle</u> 12112 BRANCH OVERLOOK DRIVE, MANAKIN-SABOT, VA. 23103	Email

APPLICANT

Name	Phone
Address	Email

CONTRACTOR

Name RJ ELECTRIC INC		Phone 804.763.4495	
Mailing Address PO BOX 6050, MIDLOTHIAN, VA. 23112		Email RJELEC1981@VERIZON.NET	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037750	Expiration 11.30.2020	License Type ELEC
		Class A	

DESCRIPTION OF WORK

WIRE FOR 22kW GENERATOR			
# of Bathrooms	Service Size N/A	Power Company N/A	Inquiry # N/A
Value of Work (required) \$7900.00			

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

Signature of Applicant: [Signature] Date: 01.14.2020

Approval: <u>Fisher</u>	Office Use Only Approval date: <u>1-24-2020</u>
Permit Fee: <u>57.68</u>	Issued date: <u>1-24-2020</u>

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date
Permit # ELI-2020-00055
GPIN
Tax Map

LOCATION

Street Address: 1163 Huntsman Circle

PROPERTY OWNERSHIP

Name: Donald DeLaurier Andrea Nash	Phone:
Mailing Address: 1163 Huntsman Circle	Email:

APPLICANT

Name: MW Butler Electrical, LLC	Phone: 804-746-2240
Address: 8420 meadowbridge Rd. Melh. VA 23116	Email: Chesney @mw

CONTRACTOR

Name: MW Butler Electrical	Phone: 804-746-2240			
Mailing Address: 8420 meadowbridge Rd. (SUITE I)	Email: Chesney @mwButlerElectrical.com			
Gas Certification: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number: 2705110673	Expiration: 1-31-2022	License Type: ELEC.	Class: A

DESCRIPTION OF WORK

Wire 22kw Generator w/ 200A ATS (Gas by others)			
# of Bathrooms: N/A	Service Size: 200A	Power Company: Dominion	Inquiry #: N/A
Value of Work (required): \$2,450			

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

Signature of Applicant: Chesney Buttr Date: 1/15/20

Approval: Fisher	Office Use Only	Approval date: 1-28-2020
Permit Fee: 32.67		Issued date: 1-28-2020

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

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date	EDF-2020-00004
Permit #	ELI-2020-00045
GPIN	
Tax Map	

LOCATION

Street Address 2348 Manakin Rd.

PROPERTY OWNERSHIP

Name	<u>Tim Lucas</u>	Phone	
Mailing Address	<u>2348 Manakin Rd.</u>	Email	

APPLICANT

Name	<u>MW Butler Electrical</u>	Phone	<u>804-746-2240</u>
Address	<u>8420 Meadowbridge Rd. (Suite I)</u>	Email	<u>Chesney@mwbutlerelectrical.com</u>

CONTRACTOR

Name	<u>MW Butler Electrical.com</u>		Phone	<u>804-746-2240</u>	
Mailing Address	<u>8420 Meadowbridge Rd.</u>		Email	<u>Chesney@mwbutlerelectrical.com</u>	
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	Expiration	License Type	Class
		<u>2705110673</u>	<u>1-31-26</u> <u>22</u>	<u>ELEC</u>	<u>A</u>

DESCRIPTION OF WORK

<u>Wire 22kW Generator w/ TWO 200A ATS</u>			
# of Bathrooms	<u>200A</u>	Service Size	<u>Dominion Energy</u>
Value of Work (required)	<u>\$2,450</u>	Power Company	Inquiry #

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

Signature of Applicant: Chesney Butler Date: 1/20/20

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1-27-2020</u>
Permit Fee: <u>32.67</u>		Issued date: <u>1-27-2020</u>

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

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date 1-27-2020	
Permit # EL2-2019-00753	
GPIN	
Tax Map	

LOCATION

Street Address
4872 Kimber Lane Gum Spring, Va. 23065

PROPERTY OWNERSHIP

Name Old Time Builders Scott Williams	Phone 540-397-6313
Mailing Address 8202 Gaylord Rd. Henrico Va. 23229	Email

APPLICANT

Name Jeff Ramish	Phone 804 641 5252
Address 2556 Gayton Centre Dr. Henrico Va. 23238	Email jeff@elrichmond.com

CONTRACTOR

Name Electrical and Lighting Solutions Inc	Phone 804 254 9400
Mailing Address P.O. Box 70432 Richmond Va 23255	Email jeff@elrichmond.com
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705086991
Expiration 07/31/20	License Type BLD-ELE
	Class A

DESCRIPTION OF WORK

Install 20 kw generator and 200a transfer switch

# of Bathrooms	Service Size 200A	Power Company Rappahannock	Inquiry #
Value of Work (required) 8000.00			

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

Signature of Applicant: [Signature] Date: 1/27/20

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>58.14</u>	Approval date: <u>1-27-2020</u>
	Issued date: <u>1-27-2020</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

CA

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date	01/10/20
Permit #	2019-512 2019-01018
GPIN	7764-55-8411
Tax Map	62-16-0-K-2

LOCATION

Street Address
 547 W. River Road *23238*

PROPERTY OWNERSHIP

Name
 Herring Construction *B. Herring* *ELI-2019-01512*

Mailing Address
 22221 Pear Orchard Road, Moseley, VA

Phone
 804-677-8577

Email

APPLICANT

Name
 P & M elec. Corp

Address
 PO Box 1806, Midlothian, VA 23113

Phone
 804-833-6517

Email
 tmaner@aol.com

CONTRACTOR

Name
 P & M Elec. Corp

Mailing Address
 same as above

Phone
 804-833-6517

Email

Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705090921	1-31-21	ELEC	A

DESCRIPTION OF WORK

intall elec *Single family & include ATS for future generator*

# of Bathrooms	Service Size	Power Company	Inquiry #
3 1/2	300	<i> Dominion</i>	<i>10346266</i>
Value of Work (required) 9000.00			

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

Signature of Applicant: *RE* Date: 01/10/20

Approval: <u><i>RE</i></u>	Office Use Only	Approval date: <u><i>1/16/2020</i></u>
Permit Fee: <u><i>67.73</i></u>		Issued date: <u><i>1/16/2020</i></u>

(owner's statement on back)