

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

Application Date: 3-13-19  
 Permit Number: 2019-00252  
 Old Map Number: 42-40-0-18-0  
 GPIN: 6757-91-9452

*Issued*

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

OWNER INFORMATION

Site Address <u>Lot 18 - 3006 SWANN'S INN Crescent</u>	District <u>LICKINGHOLE</u>
Owner <u>England Homes, Inc</u>	Phone # <u>804 708 9733</u>
Address <u>PO Box 29795, Richmond, VA 23242</u>	
Proposed Use <u>Single Family Home</u>	Current Use <u>-</u>
Proposed Occupant Load (Commercial)	Existing Buildings on Property <u>None</u>
Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>19,348.00</u>	Date Paid: <u>DUE</u>
New Street Address <u>3006 Swanns Inn Crescent</u>	Zoning District <u>R-3</u>		
Front Setback <u>65' CL</u>	Center Line Setback <u>ROW</u>	Rear Setback <u>25</u>	C.U. Permit
Side Setback <u>10</u>	Side Setback <u>15</u>	Census Tract	Flood Zone
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>CASH Proffer Paid before C.O. is issued.</u>			

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

Planning & Zoning Office: [Signature] Date 3-14-2019

Applicant/Contact: Bill England - England Homes - Phone 804 334 2455  
 Email: ENG HOM INC @ COMCAST, NET

CONTRACTOR INFORMATION

Contractor <u>England Homes, Inc</u>	Phone <u>804 708 9733</u>
Address <u>PO Box 29795, Richmond VA 23242</u>	
Contractor License Number <u>2701034798</u>	Type <u>CLASS "A"</u>
Expiration <u>07-31-2019</u>	

Description of Work

Scope of Work: Delayed 7-17-20 to add 302 sq ft of unfinished space to finished for Rec Room Single Family Dwelling

SEWER Public/Private	WATER Public/Private	# of Floors <u>2</u>	Total Sq. Ft. <u>2,224</u>	Finished Sq. Ft. <u>2,324 + 302</u>	Unfinished Sq. Ft. <u>Porch 310 Deck</u>	# of Bedrooms <u>4</u>
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TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

Building	VALUE OF WORK <u>\$ 212,000 -</u> Excludes All Trades Permits	<p style="font-size: 2em; text-align: center;">Total \$1,353.68</p>	Application Fee	\$ <u>984.00</u>
			Septic/Well Fee	\$ <u>-</u>
			State Levy Fee	\$ <u>19.68</u>
			Zoning Fee	\$ <u>50.00</u>
			Total	\$ <u>1,353.68</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 W. B. England

7-2-20



# BUILDING PERMIT APPLICATION

Application Date: 6/29/2020

Permit Number: BP-2020-00652

GPIN/Tax Map: 6841-91-8997 / 20-11-0-12-0

Issued: 7-30-20

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.

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>3257 Countryside West Drive, Gum Spring, VA 23065</u>	
	Owner <u>Walker Lewellyn &amp; Allison Bates</u>	Phone # <u>804-955-7122</u>
	Address <u>3257 countryside west Drive, Gum Spring, VA</u>	Email <u>walkerlewellyn@comcast.net</u>
APPLICANT INFORMATION	Applicant/Contact <u>Walker Lewellyn</u>	
	Address <u>3257 countryside west drive, Gum Spring, VA</u>	Phone # <u>804-955-7122</u>
		Email <u>walkerlewellyn@comcast.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Countryside West</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from Prop. Line</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback	Side Setback <u>30'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS	Planning & Zoning Officer <u>David Floyd</u> Date <u>7/15/2020</u> AI		

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

DESCRIPTION OF WORK	Scope of Work: <u>Removal of rotted deck to replace with <sup>12x16</sup> new deck (safety concerns)</u>			
	Proposed Use <u>Leisure</u>	Current Use <u>Leisure</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>	
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</u>
	Finished Sq. Ft. <u>192</u>		Unfinished Sq. Ft. <u>N/A</u>	Total Sq. Ft. <u>192</u>

Building Only - Excludes All Trades Permits

Value of Work <del>XXXXXX</del> <u>\$5,280</u>	Application Fee \$ <u>35.76</u>
	State Levy Fee \$ <u>7.00</u>
	Septic/Well Fee \$
	Zoning Fee \$ <u>25.00</u>
	RLD \$
	SWP \$
Signature of Applicant <u>Walker Lewellyn</u> Date <u>6/28/20</u>	Total \$ <u>36.76</u>

\$ 101.48



# BUILDING PERMIT APPLICATION

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

Application Date: 7-14-20

Permit Number: BP-2020-00666

GPIN/Tax Map: 6739-06-1225/28-18-0-5-0

Issued: 7-29-20

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 <u>4000 VINTNER LANE GOOCHLAND VA 23063</u>	
	Owner <u>CRAIG &amp; ELIZABETH PEARCE</u>	Phone # <u>804-432-2418</u>
	Address <u>4000 VINTNER LANE GOOCHLAND VA 23063</u>	Email <u>CETRUCKINGOFGOOCHLAND@GMAIL.COM</u>

APPLICANT INFORMATION	Applicant/Contact <u>CRAIG OR ELIZABETH PEARCE</u>	Phone # <u>804-304-2146</u>
	Address <u>4000 VINTNER LANE GOOCHLAND VA 23063</u>	Email <u>ELIZABETH.PEARCE@GMAIL.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Chapel Bridge</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>55' from Prop. Line</u>	Center Line Setback <u>80'</u>	Rear Setback <u>5'</u>	CUP/Variance/GOA —
	Side Setback <u>Rt. Side 35'</u>	Side Setback <u>5'</u>	Flood Zone <u>C</u>	—
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>7/17/2020</u> <u>AI</u>			

CONTRACTOR INFORMATION	Contractor <u>OWNERS</u>	Phone <u>804-432-2418</u> <u>804-304-2146</u>
	Address	Email <u>CETRUCKINGOFGOOCHLAND@GMAIL.COM</u> <u>ELIZABETH.PEARCE@GMAIL.COM</u>
	Contractor License Number	Type Expiration

DESCRIPTION OF WORK	Scope of Work: <u>30x24 detached CAR PORT</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. <u>720'</u>	Unfinished Sq. Ft. <u>720'</u>	Total Sq. Ft. <u>720'</u>		

Building Only -- Excludes All Trades Permits		Application Fee \$ <u>69.60</u>
Value of Work <u>4000</u>	<u>\$10,800.<sup>00</sup></u>	State Levy Fee \$ <u>1.21</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>Craig Pearce</u> Date _____		Septic/Well Fee \$
		Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>96.81</u>



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5641  
 TDD 711 VA Relay

Application Date: 7/16/2020

Permit Number: DP-2020-00667

GPIN/Tax Map: 21-9-0-13-0 6850-50-8957

Issued: 7-28-20

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 2789 Checketts Drive Sandy Hook, VA 23153	
	Owner William Webster	Phone # 804-972-1091
	Address 2789 Checketts Drive Sand Hook VA 23153	Email wwashw@aol.com

APPLICANT INFORMATION	Applicant/Contact owner	Phone # same
	Address same	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>High Grove</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>55' from Prop. Line</u>	Center Line Setback —	Rear Setback <u>35'</u>	CUP/Variance/COA —
	Side Setback <u>15'/35'</u>	Side Setback <u>15'/35'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>7/17/2020</u> <span style="float: right;">RR</span>			

CONTRACTOR INFORMATION	Contractor owner	Phone same
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>DIMENSIONS 26' x 23'4"</u> Construction of an attached garage per attached drawings.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>858</u>	Total Sq. Ft. <u>858</u>		

<b>Building Only -- Excludes All Trades Permits</b>		Application Fee \$ <u>237.00</u>
Value of Work \$50,000		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/Well Fee \$
		Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>266.74</u>
Signature of Applicant <u>William Webster</u> Date <u>7/16/2020</u>		



# BUILDING PERMIT APPLICATION

Application Date: 7-9-2020

Permit Number: BP-2020-00650

GPIN/Tax Map: 6815-02-1326

Issued: 1-6-0-5-0

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) 556-5851  
TDD 711 VA Relay

Residential  Commercial

**ISSUED 7-24-20**

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>5608 Whitesell Rd Louisa, VA 23093</u>	
	Owner <u>Richard E. Phillips</u>	Phone # <u>804-539-1815</u>
	Address <u>5608 Whitesell Rd Louisa, VA 23093</u>	Email <u>Ricky.Phillips@bdnreit.com</u>

APPLICANT INFORMATION	Applicant/Contact	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Deer Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from Prop. Line</u>	Center Line Setback <u>80'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>15' N.W. COR 35'</u>	Side Setback <u>15' W. COR 35'</u>	Flood Zone	<u>RR-1993-2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>7/14/2020</u> <span style="float: right;">RR</span>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Addition of bedroom, bathroom, and closet. Convert existing bedroom to office 16x25</u>				
	Proposed Use <u>Residential</u>	Current Use <u>Residential</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>3</u>	# of Bedrooms <u>3</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>448</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>448</u>		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <u>151.50</u>
Value of Work <u>31,000.00</u>		State Levy Fee	\$ <u>3.03</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>Richard C Phillips</u> Date <u>7-7-20</u>		Septic/Well Fee	\$
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>179.53</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/11/20Permit Number: BP-2020-00535GPIN/Tax Map: 7716-23-9983 / 58-21-B-2-0Issued: 7-24-20

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 <u>21 Hunting Ridge Road</u>		Phone # <u>804-347-3516</u>
	Owner <u>Dewey &amp; Deborah Daniel</u>		Email <u>ddaniel337@aol.com</u>
APPLICANT INFORMATION	Address <u>21 Hunting Ridge Road, Manakin Sabot VA</u>		Phone # <u>804-347-3516</u>
	Applicant/Contact <u>Deborah Daniel</u>		Email <u>ddaniel337@aol.com</u>
	Address <u>Same as above</u>		

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

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

DESCRIPTION OF WORK	Scope of Work: <u>Replacing existing deck adding porch roof to a portion - Relocate kitchen wall</u>				
	Proposed Use <u>Porch</u>	Current Use <u>Deck</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work	<u>50,000</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 [Signature] Date 6/11/20

Application Fee	\$ <u>237.00</u>
State Levy Fee	\$ <u>4.74</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>241.74</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/8/2020

Permit Number: BP-2020-00520

GPIN/Tax Map: 6769-30-6562 / 30-13-A-1-0

Issued: 7-24-20

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  
 2913 Fieldcourt Lane Goochland, VA 23063

OWNER INFORMATION	Owner	Richard D. Galster III	Phone #	215-432-5229
	Address	2913 Fieldcourt Lane Goochland, VA 23063	Email	RWACK23@GMAIL.COM
	Applicant/Contact	Richard D. Galster III	Phone #	215-432-5229

APPLICANT INFORMATION	Address	2913 Fieldcourt Lane Goochland, VA 23063	Email	RWACK23@GMAIL.COM
	Applicant/Contact	Richard D. Galster III	Phone #	215-432-5229

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	LDM ASSOCIATES	Phone	804-514-7482
	Address	8936 GANTON CT CHESTERFIELD, VA 23832	Email	ldmassociatesllc@gmail.com
	Contractor License Number	2705086508	Type	A

DESCRIPTION OF WORK	Scope of Work: Finish Basement Game Room / Living Room "Den" Dry wall Flooring only All other work was on prior permit			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.		Unfinished Sq. Ft.	Total Sq. Ft.
	0000			1

Building Only - Excludes All Trades Permits

Value of Work	\$25,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *[Signature]* Date: 6/8/20

Application Fee	\$ 124.51
State Levy Fee	\$ 2.49
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 127.00



# BUILDING PERMIT APPLICATION

Application Date: 7-7-20

Permit Number: BP-2020-00627

GPIN/Tax Map: 6777-66-2232/43-40-C-2-0

Issued: 7-24-20

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.

Department of Building Inspection  
P.O. Box 119  
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(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 <b>2110 Jockeys Ridge Road</b>	
	Owner <b>Don &amp; Sara Kamencik</b>	Phone # <b>804-339-7669</b>
	Address <b>2110 Jockeys Ridge Road</b>	Email <b>kamencik5@gmail.com</b>

APPLICANT INFORMATION	Applicant/Contact <b>Catherine Gallagher</b>		Phone # <b>804-333-9192</b>
	Address <b>196 Selftown Road, Warsaw, VA 22572</b>		Email <b>catherine@riverpoolsandspas.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze H-71</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40' from Prop. Line</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5' Side 35'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>7/7/2020</u> <span style="float: right;">RP</span>			

CONTRACTOR INFORMATION	Contractor <b>River Pools &amp; Spas</b>		Phone <b>804-333-9192</b>
	Address <b>196 Selftown Road, Warsaw, VA 22572</b>		Email <b>catherine@riverpoolsandspas.com</b>
	Contractor License Number <b>2706099652</b>	Type <b>A</b>	Expiration <b>8/30/21</b>

DESCRIPTION OF WORK	Scope of Work: <b>install inground 16'x40' fiberglass pool ? barrier</b>				
	Proposed Use residential	Current Use residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>640</u>	Total Sq. Ft. <u>880 640</u>		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <u>169.50</u>
Value of Work	<u>35000</u>	State Levy Fee	\$ <u>3.39</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>2500</u>
Signature of Applicant <u>Catherine Gallagher</u> Date <u>6-18-2020</u>		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>197.89</u>



# BUILDING PERMIT APPLICATION

Application Date: 7-9-20

Permit Number: BP-2020-00639

GPIN/Tax Map: 770464-9459 162-18-0-7-0

Issued: 7-23-20

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.

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>505 Calm Creek Drive Manakin Sabot VA 23103</u>	
	Owner <u>Julie &amp; Dan Scott</u>	Phone # <u>804-683-3254</u>
	Address <u>505 Calm Creek Dr. Manakin Sabot VA 23103</u>	Email <u>Juliesco3100@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Amy Boschen</u>	Phone # <u>804-784-1200</u>
	Address <u>286 River Rd W, Manakin Sabot, VA 23103</u>	Email <u>aboschen@homemasons.com</u>

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

CONTRACTOR INFORMATION	Contractor <u>HomeMasons, Inc.</u>	Phone <u>804-784-1200</u>
	Address <u>286 River Rd W, Manakin Sabot, VA 23103</u>	Email <u>aboschen@homemasons.com</u>
	Contractor License Number <u>2705020224</u>	Type <u>Class A</u>

DESCRIPTION OF WORK	Scope of Work: <u>all interior</u> <b>Renovate bedroom, bath, powder room, foyer &amp; kitchen</b>				
	Proposed Use <u>Single Fam Home</u>	Current Use <u>Single Fam Home</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>4.5</u>	# of Bedrooms <u>3</u>	# of floors
	Finished Sq. Ft. <u>2595</u>		Unfinished Sq. Ft. <u>480</u>		Total Sq. Ft. <u>3075</u>

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>867.00</u>
Value of Work <u>190,000</u>		State Levy Fee \$ <u>17.34</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>7/6/20</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>884.34</u>

7-2-20



**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: 7/1/20

Permit Number: BP-2020-00640

GPIN/Tax Map: 7726-57-8698 / 48-2-C-12-0

Issued: 7-23-20

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>12667 Fawn Lane</u>		Phone # <u>(804) 264-7058</u>
	Owner <u>Mitchell, Rick Carter, Christine</u>		Email <u>rmitch.sm3@gmail.com</u>
	Address <u>12667 Fawn Lane</u>		Phone # <u>(804) 218-1781</u>

APPLICANT INFORMATION	Applicant/Contact <u>Archadeck of Richmond / Spencer Monroe</u>		Email <u>smonroe@archadeck.net</u>
	Address <u>2165 Oatthampton Pl, Henrico, VA 23233</u>		

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

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

CONTRACTOR INFORMATION	Contractor <u>Monroe Design and Construction dba Archadeck of Richmond</u>		Phone <u>(804) 218-1781</u>
	Address <u>2165 Oatthampton Place, Henrico VA 23233</u>		Email <u>smonroe@archadeck.net</u>
	Contractor License Number <u>2705166852</u>	Type <u>RES RDC-</u>	Expiration <u>2/28/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>Add pergola over existing deck 12' out x 15' across</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. <u>180 ft<sup>2</sup></u>		Unfinished Sq. Ft.		Total Sq. Ft. <u>180</u>

Building Only - Excludes All Trades Permits		Application Fee \$ <u>34.27</u>
Value of Work	<u>\$4500 4,950-</u>	State Levy Fee \$ <u>.69</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
Signature of Applicant <u>[Signature]</u>	Date <u>7/1/20</u>	Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>34.96</u>



# BUILDING PERMIT APPLICATION

Application Date: 11/29/2018

Permit Number: BP-2018-001013

GPIN/Tax Map: 6788-24-1383 / 32-18-0-35-0

Issued: 12.26.2018

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

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

Residential  Commercial

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

OWNER INFORMATION	Site Address <u>1702 Bridgewater Ct</u>		Phone # <u>804-549-4899</u>
	Owner <u>Evan S. Weiner</u>		Email <u>esw@evanweiner.com</u>
	Address <u>1702 Bridgewater Ct, Maidens, VA 23102</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Evan S. Weiner</u>		Phone # <u>804-549-4899</u>
	Address <u>1702 Bridgewater Ct, Maidens, VA 23102</u>		Email <u>esw@evanweiner.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Bridgewater</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from low</u>	Center Line Setback <u>80'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>15'/35'</u>	Side Setback <u>15'/35'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Ford</u> Date _____ <u>RR</u>			

CONTRACTOR INFORMATION	Contractor <u>Evan S. Weiner</u>		Phone <u>804-549-4899</u>
	Address <u>1702 Bridgewater Ct, Maidens, VA 23102</u>		Email _____
	Contractor License Number <u>N/A</u>	Type <u>N/A</u>	Expiration <u>N/A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Add unfinished basement and 2 new bedrooms with bathrooms.</u> <u>Convert existing bedroom to playroom. Revisited 7-21 to add and additional 115 unfinished and 91 finished sq</u>				
	Proposed Use <u>Residential</u>	Current Use <u>Residential</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>2</u>	# of Bedrooms <u>2</u>	# of floors <u>1 + basement</u>
	Finished Sq. Ft. <u>638 + 91 = (729)</u>		Unfinished Sq. Ft. <u>613 + 115 = (728)</u>		Total Sq. Ft. <u>1457</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>\$40,000.00</u> <del>\$1,947.50</del> <u>\$60,115.00</u>
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Application Fee	\$ <u>245.00</u>
State Levy Fee	\$ <u>4.92</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>275.68</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 \_\_\_\_\_ Date 11/29/2018

44 for LUMBER @ 2018



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: June 17, 2020

Permit Number: BP-2020-00590

GPIN/Tax Map: 6749-09-7651-9999 / 20-1-0-26-7

Issued: 7-21-20

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 4007 Whitehall Road, Sandy Hook, VA 23153	
	Owner Gathright, Rodger	Phone # 804-901-7433
	Address 104 Tiffany Dr., Waynesboro, VA 22980	Email stuart.squier@gdnsites.com

APPLICANT INFORMATION	Applicant/Contact Stuart Squier for Verizon	Phone # 804-901-7433
	Address 3126 W. Cary St., #604, Richmond, VA 23221	Email stuart.squier@gdnsites.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: <u>No change to front private</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>6/26/2020</u>			

CONTRACTOR INFORMATION	Contractor Virginia Tower Construction, LLC		Phone 804-901-7433
	Address 330 James Madison Hwy, Gordonsville, VA 22942		
	Contractor License Number 2705156956	Type Class A (CBC)	Expiration 2021-04-30

DESCRIPTION OF WORK	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"/> WATER <input type="checkbox"/> Public/Private	# 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	\$66,280
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Application Fee	\$ <u>497.10</u>
State Levy Fee	\$ <u>9.94</u>
Septic/Well Fee	\$ <u>      </u>
Zoning Fee	\$ <u>200.00</u>
RLD	\$ <u>      </u>
SWP	\$ <u>      </u>
Total	\$ <u>707.04</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.

Signature of Applicant: [Signature] Date: 6/17/2020



# BUILDING PERMIT APPLICATION

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

Application Date: 7-2-20

Permit Number: BP-2020-00654

GPIN/Tax Map: 6759-68-9573 / 21-9-0-38-0

Issued: 7-20-20

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 <u>2725 PARKHOUSE COURT SANDY HOOK VA 23153</u>	
	Owner <u>CARLA PRUIETT</u>	Phone # <u>804 380 7681</u>
	Address <u>2725 PARKHOUSE COURT SANDY HOOK VA 23153</u>	

APPLICANT INFORMATION	Applicant/Contact <u>CENTRAL VIRGINIA POOLS LLC - JOE KIRBY</u>		Phone # <u>434 806 8543</u>
	Address <u>3925 BOSTON CREEK DR CHARLOTTESVILLE VA 22902</u>		Email <u>JKirby@CENTRALVAPools.COM</u>

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

APPROVED  REJECTED  COMMENTS \_\_\_\_\_  
 Planning & Zoning Officer: David Ford Date: 7/14/2020 RR

CONTRACTOR INFORMATION	Contractor <u>CENTRAL VIRGINIA POOLS LLC</u>		Phone <u>434 806 8543</u>
	Address <u>3925 BOSTON CREEK DR CHARLOTTESVILLE VA 22902</u>		Email <u>JKirby@CENTRALVAPools.COM</u>
	Contractor License Number <u>2705175379</u>	Type <u>CLASS A</u>	Expiration <u>03/31/2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>Inground polymer wall vinyl liner pool 18x36 w/ fence barrier with 8FT STEP - 6FT DIVING BOARD 3FT TO 8' DEEP</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.	Total Sq. Ft.	
			<u>248</u>	<u>648</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$40,000</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: [Signature] Date: 6/24/20

Application Fee	\$ <u>192.00</u>
State Levy Fee	\$ <u>384</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>220.84</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 7-2-20

Permit Number: BP-2020-0024

GPIN/Tax Map: 6716-93-3665/55-18-0-1-0

Issued: 7-20-20

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 <u>1509 Beaverdam Crk Rd Crozier 23039</u>	
	Owner <u>Roger L &amp; Valerie B Turner</u>	Phone # <u>(804) 920-2103</u>
	Address	Email <u>rltinva@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Valerie B Turner</u>	
	Address <u>same</u>	Phone # Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Deer Field</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from Prop. Line</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>7/7/2020</u> <u>RR</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>28' x 44' carport</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft. <u>1,232</u>	Total Sq. Ft. <u>1,232</u>	

*Building Only - Excludes All Trades Permits*

Value of Work	<u>\$ 7,000</u> <del>\$ 18,480.00</del>
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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 Valerie B Turner Date 6/25/20

Application Fee	\$ <u>95.16</u>
State Levy Fee	\$ <u>1.90</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>122.06</u>



# BUILDING PERMIT APPLICATION

Application Date: 07/18/2020 *7-16-20*

Permit Number: *BP-2020-00664*

GPIN/Tax Map: 7727-10-2316 / 47-1-0-92-0

Issued: *7-20-20*

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.

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 <b>1729 ST. MATHEWS LANE</b>	
	Owner <b>MANIE LYNN &amp; RONALD E SALMON</b>	Phone # <b>804-516-9723</b>
	Address <b>1729 ST. MATHEWS LANE</b>	Email
APPLICANT INFORMATION	Applicant/Contact <b>ADD A DECK, INC.</b>	Phone # <b>804-285-4239</b>
	Address <b>6408 MALLORY DR.</b>	Email <b>ADMIN@ADDADECK.COM</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>None</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>75' from Prop. Line</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 <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>David Flood</i> Date: <i>7/17/2020</i> <span style="float: right;"><i>A2</i></span>			

CONTRACTOR INFORMATION	Contractor <b>ADD A DECK, INC.</b>	Phone <b>804-285-4239</b>
	Address <b>6408 MALLORY DR.</b>	Email <b>ADMIN@ADDADECK.COM</b>
	Contractor License Number <b>2701-033201A</b>	Type <b>RES 7 COM CLASS A</b>

DESCRIPTION OF WORK	<b>Scope of Work:</b> BUILD AN APPROX. 16' X 45' PRESSURE TREATED DECK AND RAMP ON SIDE & REAR OF EXISTING DWELLING				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <b>956</b>	Total Sq. Ft. <b>456</b>		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <i>73.00</i>
Value of Work	<b>\$18,000.00</b>	State Levy Fee	\$ <i>1.86</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <i>Stephen J. Murphy</i> Date: <i>7/19/2020</i>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <i>25.00</i>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <i>119.86</i>



# BUILDING PERMIT APPLICATION

Application Date: 06/25/2020 7-1-20

Permit Number: BP-2020-0622

GPIN/Tax Map: 7716-96-6194 / 58-45-0-5-0

Issued: 7-20-20

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.

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>LANE</u> 1643 CENTERVILLE PARKE <sup>LANE</sup> MANAKIN-SABOT, VA 23103	Phone # 763-203-1129
	Owner TOM & DIANE GILBRIDE	Email
	Address <u>LANE</u> 1643 CENTERVILLE PARKE <sup>LANE</sup> MANAKIN-SABOT, VA 23103	Phone # 804-285-4239
APPLICANT INFORMATION	Applicant/Contact ADD A DECK, INC.	Email smurphy@addadeck.com & ADMIN@ADDADECK.COM
	Address 6408 MALLORY DR.	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parke at Centerville</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>*No change to existing footprint.</u>		
Planning & Zoning Officer <u>David Floyd</u>		Date <u>7/6/2020</u> <u>RPUD</u>		

CONTRACTOR INFORMATION	Contractor ADD A DECK, INC.	Phone 804-285-4239
	Address 6408 MALLORY DR.	Email ADMIN@ADDADECK.COM & smurphy@addadeck.com
	Contractor License Number 2701-033201A	Type Class A

DESCRIPTION OF WORK	Scope of Work: <b>Build a 11'x 12' porch on existing deck</b>				
	Proposed Use SCREENED PORCH	Current Use OPEN DECK	Environmental Impacts (stream crossing, wetlands, amt land disturbed) NONE		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
		125 sq ft <u>132</u>	<u>132</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>166.00</u>
Value of Work	<del>XXXXXX</del> <u>\$12,000<sup>00</sup></u>	State Levy Fee	\$ <u>1.32</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>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>—</u>
		SWP	\$ <u>—</u>
		Total	\$ <u>22.32</u>
Signature of Applicant <u>Stephen T. Murphy</u>		Date	<u>6/25/2020</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/9/2020

Permit Number: BP-2020-00525

GPIN/Tax Map: 7725-16-4385 158-5A-150

Issued: 7-15-20

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 <u>14014 Mosaic Nook Richmond, VA. 23238</u>	
	Owner <u>HHHunt Homes, LLC</u>	Phone # <u>804-762-4800</u>
	Address <u>11237 Nuckols Road Glen Allen, VA 23059</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Morgan Leonard</u>	
	Address <u>11237 Nuckols Road Glen Allen, VA 23059</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Due</u>
	Front Setback <u>25' from Prop. Line</u>	Center Line Setback <u>                    </u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>                    </u>
	Side Setback <u>10' Left Side</u>	Side Setback <u>                    </u>	Flood Zone <u>                    </u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Cash Author due before issuing C.O. * Survey loca to RPAD Setback.</u>			
	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>6/15/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>HHHunt Homes, LLC</u>		Phone <u>804-762-4800</u>
	Address <u>11237 Nuckols Road Glen Allen, VA 23059</u>		Email <u>mbleonard@hhhunthomes.com</u>
	Contractor License Number <u>2705119751 A</u>	Type Contractor <u>                    </u>	Expiration <u>1/31/2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>3 unit townhome with attached garages.</u>				
	Proposed Use <u>Single family dwellings</u>	Current Use <u>None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of <del>31,983</del> square feet <u>15,657.21</u>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <u>2.5</u>	# of Bedrooms <u>3</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>2310</u>	Unfinished Sq. Ft. <u>441</u>	Total Sq. Ft. <u>2751</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>2,965.50</u>
Value of Work	<u>\$395,400.00</u>	State Levy Fee	\$ <u>59.31</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>6/9/2020</u>		Septic/Well Fee	\$ <u>                    </u>
		Zoning Fee	\$ <u>100-</u>
		RLD	\$ <u>100-</u>
		SWP	\$ <u>                    </u>
		Total	\$ <u>3,224.81</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: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

\_\_\_\_\_ Owner's Signature

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

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

APPROVAL [Signature] DATE 7/9/2020  
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: 6/9/2020

Permit Number: BP-2020-00522

GPIN/Tax Map: 7725-16-5312/58-5A-1-6-0

Issued: 7-15-20

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 14012 Mosaic Nook		Phone # 804-762-4800
	Owner HHHunt Homes, LLC		Email mbleonard@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

APPLICANT INFORMATION	Applicant/Contact Morgan Leonard		Phone # 804-762-4800 ext. 201
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email mbleonard@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>25' from Prop. Line</i>	Center Line Setback _____	Rear Setback <i>25'</i>	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer due before issuing C.O. *Survey locate RPUD Setbacks</i>			

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 804-762-4800
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email mbleonard@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: 3 unit townhome with attached garages.				
	Proposed Use Single family dwellings	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of <del>34,983</del> square feet <i>15,657</i>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 2.5	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 1916	Unfinished Sq. Ft. 437	Total Sq. Ft. 2353		
	Building Only - Excludes All Trades Permits				

Value of Work <b>\$360,425.00</b>	Application Fee \$ <i>2,703.19</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  Signature of Applicant <i>[Signature]</i> Date 6/9/2020	State Levy Fee \$ <i>54.06</i>
	Septic/Well Fee \$ _____
	Zoning Fee \$ <i>100-</i>
	RLD \$ <i>100-</i>
	SWP \$ _____
	Total \$ <i>2,957.25</i>

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

\_\_\_\_\_ Owner's Signature

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

Other Fees that may be applicable

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

**OFFICE USE ONLY**

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

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

APPROVAL [Signature] DATE 7/9/2020  
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: **6/9/2020**

Permit Number: **BP-2020-00521**

GPIN/Tax Map: **7725-16-5330 158-54-1-7-0**

Issued: **7-15-20**

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 <b>14010 Mosaic Nook</b>	
	Owner <b>HH Hunt Homes, LLC</b>	Phone # <b>804-762-4800</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>	

APPLICANT INFORMATION	Applicant/Contact <b>Morgan Leonard</b>		Phone # <b>804-762-4800 ext. 201</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>		Email <b>mbleonard@hhhunthomes.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>Mosaic</b>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <b>\$ 4966.00</b>	Date Paid <b>Due</b>
	Front Setback <b>25' From Prop Line</b>	Center Line Setback	Rear Setback <b>25'</b>	CUP/Variance/COA
	Side Setback <b>10'</b>	Side Setback	Flood Zone <b>X</b>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <b>* Cash Proffer due before issuing C.O. * Survey for use</b>		

Planning & Zoning Officer: **David Floyd** Date: **6/15/2020**

CONTRACTOR INFORMATION	Contractor <b>HH Hunt Homes, LLC</b>		Phone <b>804-762-4800</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>		Email <b>mbleonard@hhhunthomes.com</b>
	Contractor License Number <b>2705119751 A</b>	Type <b>Contractor</b>	Expiration <b>1/31/2021</b>

DESCRIPTION OF WORK	Scope of Work: <b>3 unit townhome with attached garages.</b>				
	Proposed Use <b>Single family dwellings</b>	Current Use <b>None</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of <b>37,983</b> square feet <b>15,657.21</b>		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms <b>3</b>	# of Bedrooms <b>3</b>	# of floors <b>2</b>
	Finished Sq. Ft. <b>2239</b>	Unfinished Sq. Ft. <b>424</b>	Total Sq. Ft. <b>2663</b>		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <b>2,912.89</b>
Value of Work	<b>\$396,385.00</b>	State Levy Fee	\$ <b>59.46</b>
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: <b>[Signature]</b> Date: <b>6/9/2020</b>		Septic/Well Fee	\$
		Zoning Fee	\$ <b>100.00</b>
		RLD	\$ <b>100.00</b>
		SWP	\$
		Total	\$ <b>3,232.35</b>

**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: MeyerGoergen PC Telephone: 804-288-3600

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

**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

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OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

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

APPROVAL [Signature] DATE 7/9/2020  
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: 6-26-20

Permit Number: BP-2020-00600

GPIN/Tax Map: 7733-09-0975/64-28-D-60

Issued: 7-15-20

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>164 Grayash</u>		
	Owner <u>Gary and Alison Cosby</u>	Phone #	
	Address <u>164 Grayash</u>	Email	
APPLICANT INFORMATION	Applicant/Contact <u>Jeff Graeber</u>		Phone # <u>804-350-5830</u>
	Address <u>8212 Kingsdown Court, Henrico, Va. 23229</u>		Email <u>j.graeber@comcast.net</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Grayash</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>
	Side Setback <u>30' B/S</u>	Side Setback <u>30' B/S</u>	Flood Zone
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>6/29/2020 RMD</u>		
CONTRACTOR INFORMATION	Contractor <u>Graeber Homes</u>		Phone <u>804-350-5830</u>
	Address <u>8212 Kingsdown Court Henrico, Va 23229</u>		Email <u>j.graeber@comcast.net</u>
	Contractor License Number <u>2705046911</u>	Type <u>BLD-A</u>	Expiration <u>9-3-2021</u>
DESCRIPTION OF WORK	Scope of Work: <u>add covered porch to rear of house using existing footing/piering</u>		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private	WATER Public/Private	# of Bathrooms
	Finished Sq. Ft.		Unfinished Sq. Ft. <u>340</u>

Building Only - Excludes All Trades Permits

Value of Work 31,800

Application Fee	\$ <u>155.10</u>
State Levy Fee	\$ <u>3.10</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>183.20</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 Jeff M. Graeber Date June 25, 2020



# BUILDING PERMIT APPLICATION

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

Application Date: **6/5/2020**

Permit Number: **BP-2020-00516**

GPIN/Tax Map: **7715-41-3485 - 63-1-0-105-0**

Issued: **7-13-20**

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 <b>855 Manakin Rd., Manakin-Sabot, VA 23103</b>	
	Owner <b>Doug Daniels &amp; Lindsay Neist</b>	Phone # <b>804-338-1062</b>
	Address	Email <b>dougsvm@aol.com</b>

APPLICANT INFORMATION	Applicant/Contact <b>Spruce Construction (Jordan Hutchins)</b>	Phone # <b>804-316-3667</b>
	Address <b>526 N. Arthur Ashe Blvd., Richmond, VA 23220</b>	Email <b>jordan@sprucerva.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>None</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <b>100' from Prop. Line</b>	Center Line Setback —	Rear Setback <b>35'</b>	CUP/Variance/COA —
	Side Setback <b>35' from Easement</b>	Side Setback <b>20'</b>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <b>David [Signature]</b> Date <b>6/12/2020</b> <span style="float: right;"><b>A2</b></span>			

CONTRACTOR INFORMATION	Contractor <b>Spruce Homes, LLC. (Spruce Construction)</b>	Phone <b>804-316-3667</b>
	Address <b>526 N. Arthur Ashe Blvd., Richmond, VA 23220</b>	Email <b>jordan@sprucerva.com</b>
	Contractor License Number <b>2705152633</b>	Type Class A

DESCRIPTION OF WORK	<b>Scope of Work:</b> Master Bedroom and bathroom addition, and screened in porch addition to the rear of the existing house and complete renovation of the existing house. Also an addition to the right side of the house to add a bedroom and bathroom.				
	Proposed Use Single Family	Current Use Single Family	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 1,000		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3	# of Bedrooms 4	# of floors 1
	Finished Sq. Ft. 2,686		Unfinished Sq. Ft. 600		Total Sq. Ft. 3,286

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <b>1474.50</b>
Value of Work <b>\$325,000</b>		State Levy Fee \$ <b>29.49</b>
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 <b>[Signature]</b> Date <b>6/5/20</b>		Septic/Well Fee \$
		Zoning Fee \$ <b>25.00</b>
		RLD \$
		SWP \$
		Total \$ <b>1528.99</b>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 6-15-20  
Permit Number: DP-2020-00527  
GPIN/Tax Map: 7725-30-9628 158-54-0-1-A  
Issued: 7-13-20

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.

Site Address MOSAIC SECTION 2 @ WEST CREEK MOSAIC CREEK BLVD  
INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916

Owner: HHHUNT MOSAIC, LLC  
Phone #: 804.762.4800

Address: 11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059  
Email: JONATHAN RIDOUT

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

Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005  
Email: ADMIN@BRACKTWALLS.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: BRACKT RETAINING WALLS AND EXCAVATING, LLC  
Phone: 804.798.5097

Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005

Contractor License Number: 2705131869 Type: A Expiration: 11.30.2021

Scope of Work: INSTALL SEGMENTAL RETAINING WALL #5A and #5B - WEST SIDE OF LOT 46

DESCRIPTION OF WORK	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" 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.		
	377		377		

Building Only - Excludes All Trades Permits  
Value of Work: \$7809.00

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: Vicki Barnett Date: June 9, 2020

Application Fee	\$ 58.57
State Levy Fee	\$ 1.17
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 59.74



# BUILDING PERMIT APPLICATION

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

Application Date: 6-15-20  
 Permit Number: BP-2020-00529  
 GPIN/Tax Map: 7725-30-9628-158-540-1-A  
 Issued: 7-13-20

Residential  Commercial

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

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

Site Address MOSAIC SECTION 2 @ WEST 10960 MOSAIC CREEK BLVD  
 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916

OWNER INFORMATION  
 Owner: HHHUNT MOSAIC, LLC  
 Phone #: 804.762.4800

Address: 11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059  
 Email: JONATHAN RIDOUT

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

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

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

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

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

Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005

Contractor License Number: 2705131869 Type: A Expiration: 11.30.2021

DESCRIPTION OF WORK  
 Scope of Work: INSTALL SEGMENTAL RETAINING WALL #2 at Lot 10

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input checked="" 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. 1,834	Unfinished Sq. Ft.	Total Sq. Ft. 1,834		

Building Only - Excludes All Trades Permits  
 Value of Work: \$37,874

Application Fee	\$ <u>284.06</u>
State Levy Fee	\$ <u>5.68</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>289.74</u>

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

Signature of Applicant: Vicki Barnett Date: June 9, 2020



# BUILDING PERMIT APPLICATION

Application Date: 6-15-20

Permit Number: BP-2020-00530

GPIN/Tax Map: 7725-30-9628/58-54-0-1-A

Issued: 7-13-20

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.

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>MOSAIC SECTION 2 @ WESTSIDE MOSAIC CREEK BLVD</u> INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916	
	Owner HHHUNT MOSAIC, LLC	Phone # 804.762.4800
	Address 11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059	Email JONATHAN RIDOUT
APPLICANT INFORMATION	Applicant/Contact BRACK RETAINING WALLS AND EXCAVATING, LLC --- VICKI BARNETT	
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Phone # 804.798.5097  Email ADMIN@BRACKWALLS.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 BRACK RETAINING WALLS AND EXCAVATING, LLC		Phone 804.798.5097	
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005			
	Contractor License Number 2705131869	Type A	Expiration 11.30.2021	

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL #3 <u>behind lots 14-16</u>				
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" 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. 416	Unfinished Sq. Ft.	Total Sq. Ft. 416		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>62.98</u>
Value of Work	\$8,397	State Levy Fee \$ <u>1.26</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Vicki Barnett</u> Date <u>June 9, 2020</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>64.24</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/15/20

Permit Number: BP-2020-00531

GPIN/Tax Map: 7725-30-9628/58-54-0-1-A

Issued: 7-13-20

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 MOSAIC SECTION 2 @ WEST BERRY MO SAIC CREEK BLVD  
 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916

**OWNER INFORMATION**  
 Owner: HHHUNT MOSAIC, LLC  
 Address: 11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059  
 Phone #: 804.762.4800  
 Email: JONATHAN RIDOUT

**APPLICANT INFORMATION**  
 Applicant/Contact: BRACKT RETAINING WALLS AND EXCAVATING, LLC --- VICKI BARNETT  
 Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005  
 Phone #: 804.798.5097  
 Email: ADMIN@BRACKTWALLS.COM

**TO BE COMPLETED BY ZONING DEPARTMENT**

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

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

**CONTRACTOR INFORMATION**  
 Contractor: BRACKT RETAINING WALLS AND EXCAVATING, LLC  
 Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005  
 Phone: 804.798.5097  
 Contractor License Number: 2705131869 Type: A Expiration: 11.30.2021

**DESCRIPTION OF WORK**  
 Scope of Work: INSTALL SEGMENTAL RETAINING WALL #4 Behind lots 22-24

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input checked="" 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. 403	Unfinished Sq. Ft.	Total Sq. Ft. 403		

**Building Only - Excludes All Trades Permits**

Value of Work	\$8,397
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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: Vicki Barnett Date: June 9, 2020

Application Fee	\$ <u>62.98</u>
State Levy Fee	\$ <u>1.26</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>64.24</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6-15-20

Permit Number: BP-2020-00536

GPIN/Tax Map: 7725-30-9628-58-54-0-1-A

Issued: 7-13-20

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: MOSAIC SECTION 2 @ WEST CREEK 700 MOSAIC CREEK BLVD  
 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916

Owner: HHHUNT MOSAIC, LLC Phone #: 804.762.4800

Address: 11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059 Email: JONATHAN RIDOUT

**APPLICANT INFORMATION**

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

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

**TO BE COMPLETED BY ZONING DEPARTMENT**

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

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_

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

**CONTRACTOR INFORMATION**

Contractor: BRACKT RETAINING WALLS AND EXCAVATING, LLC Phone: 804.798.5097

Address: 10423 DOW GIL ROAD, ASHLAND, VA 23005

Contractor License Number: 2705131869 Type: A Expiration: 11.30.2021

**DESCRIPTION OF WORK**

Scope of Work: INSTALL SEGMENTAL RETAINING WALL #6A and #6B BEHIND LOT #36

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input checked="" 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>665</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>665</u>		

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$13,772.00</u>	Application Fee	\$ <u>103.29</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Vicki Barnett</u> Date: <u>June 9, 2020</u>		State Levy Fee	\$ <u>2.07</u>
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>105.36</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6-16-20  
 Permit Number: BD-2020-00539  
 GPIN/Tax Map: 7725-30-9628/58-54-0-1-A  
 Issued: 7-13-20  
 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: ~~MOSAIC SECTION 2 @ WEST 15700 MOSAIC CREEK BLVD~~  
 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916

OWNER INFORMATION	Owner HHHUNT MOSAIC, LLC	Phone # 804.762.4800
	Address 11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059	Email JONATHAN RIDOUT

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 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 BRACT RETAINING WALLS AND EXCAVATING, LLC	Phone 804.798.5097
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	
	Contractor License Number 2705131869	Type A Expiration 11.30.2021

Scope of Work:  
 INSTALL SEGMENTAL RETAINING WALL #7 - BEHIND LOT 37

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<input checked="" 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. 168	Unfinished Sq. Ft.	Total Sq. Ft. 168		

Building Only - Excludes All Trades Permits

Value of Work	\$3,443
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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: Vicki Barnett Date: June 9, 2020

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>- 60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</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: 6-16-20

Permit Number: BP-2020-00540

GPIN/Tax Map: 7725-30-9628 / 58-54-0-1-A

Issued: 7-13-20

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 <u>MOSAIC SECTION 2 @ WEST <del>15100</del> MOSAIC CREEK BLVD</u> <u>INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- GPIN #7725-05-8916</u>		Phone # 804.762.4800
	Owner <u>HHHUNT MOSAIC, LLC</u>		Email <u>JONATHAN RIDOUT</u>
	Address <u>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059</u>		Phone # 804.798.5097
APPLICANT INFORMATION	Applicant/Contact <u>BRACKT RETAINING WALLS AND EXCAVATING, LLC --- VICKI BARNETT</u>		Email <u>ADMIN@BRACKTWALLS.COM</u>
	Address <u>10423 DOW GIL ROAD, ASHLAND, VA 23005</u>		

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

CONTRACTOR INFORMATION	Contractor <u>BRACKT RETAINING WALLS AND EXCAVATING, LLC</u>		Phone 804.798.5097
	Address <u>10423 DOW GIL ROAD, ASHLAND, VA 23005</u>		
	Contractor License Number <u>2705131869</u>	Type <u>A</u>	Expiration <u>11.30.2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>INSTALL SEGMENTAL RETAINING WALL #1</u> <u>Behind lots 2 &amp; 3</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" 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>208</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>208</u>		

**Building Only - Excludes All Trades Permits**

Value of Work	\$4,283.00
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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 Vicki Barnett Date June 9, 2020

Application Fee	\$ <u>32.12</u>
State Levy Fee	\$ <u>.64</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>32.76</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 7-17-2020

Permit Number: BP-2020-00630

GPIN/Tax Map: 7716-95-2185/58-416-0-15-8

Issued: 7-17-2020

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 <b>1671 Centerville Parke Circle Manakin Sabot VA 23103</b>				
	Owner <b>Ellen &amp; Barry Krauss</b>		Phone # <b>804-405-4782</b>		
APPLICANT INFORMATION	Address <b>1671 Centerville Parke Circle Manakin-Sabot, VA 23103</b>		Email <b>barry@transactcapital.com</b>		
	Applicant/Contact <b>Barry Krauss</b>		Phone # <b>Same</b>		
TO BE COMPLETED BY ZONING DEPARTMENT	Address <b>Same as above</b>		Email <b>Same</b>		
	Subdivision <b>Parke @ Centerville</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>                    </u>	Date Paid <u>                    </u>	
	Front Setback <b>30' from pavement</b>	Center Line Setback <u>                    </u>	Rear Setback <b>50' 6/5</b>	CUP/Variance/COA <u>                    </u>	
	Side Setback <b>20' 6/5</b>	Side Setback <b>30' 6/5</b>	Flood Zone <u>                    </u>		
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Boyd</u> Date <u>7/9/2020</u>					
CONTRACTOR INFORMATION	Contractor <b>owner</b>		Phone <u>                    </u>		
	Address <u>                    </u>		Email <u>                    </u>		
	Contractor License Number <u>                    </u>		Type <u>                    </u>	Expiration <u>                    </u>	
DESCRIPTION OF WORK	Scope of Work: <b>SCREEN-IN EXISTING REAR PORCH &amp; ad additional 12'x12' Deck</b>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>NONE</b>		
	SEWER <b>(Public) Private</b>	WATER <b>(Public) Private</b>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <b>144</b>	Total Sq. Ft. <b>144</b>		
Building Only - Excludes All Trades Permits			Application Fee \$ <u>66.00</u>		
Value of Work <u>\$12,000</u>			State Levy Fee \$ <u>1.32</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>6/30/2020</u>			Septic/Well Fee \$ <u>                    </u>		
			Zoning Fee \$ <u>25.00</u>		
			RLD \$ <u>                    </u>		
			SWP \$ <u>                    </u>		
			Total \$ <u>92.32</u>		

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

OWNER'S STATEMENT

I BARRY KRAUSS of (address) 1671 Centerville Pike Cir affirm that I am the owner of a certain tract of parcel of land located at 1671 Centerville Pike Cir 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 R5 # STORIES \_\_\_\_\_ CONSTRUCTION TYPE VB OCCUPANT LOAD \_\_\_\_\_ CODE EDITION 15

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

APPROVAL [Signature] DATE 7/16/20  
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: June 18, 2020

Permit Number: **BP-2020-00216**

GPIN/Tax Map: **6757-97-8457 / 42-1-0-64-0**

Issued: **7-21-2020**

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 1800 Sandy Hook Rd. Goochland, VA 23063				
	Owner Goochland County (Derek Stamey Owner Representative)			Phone # 804-556-5855	
	Address 1800 Sandy Hook Rd. Goochland, VA 23063			Email dstamey@goochlandva.us	
APPLICANT INFORMATION	Applicant/Contact Woodland Construction, Inc. / John Selko			Phone # 804-399-5898	
	Address 5008 Evelyn Byrd Rd. Richmond, VA 23225			Email jselko@woodlandconst.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 Woodland Construction, Inc.			Phone 804-360-0545	
	Address 5008 Evelyn Byrd Rd. Richmond, VA 23225			Email jselko@woodlandconst.com	
	Contractor License Number 2705025277	Type Class A CBC RBC	Expiration 8/31/2020		
DESCRIPTION OF WORK	Scope of Work: Renovation of approx 4,500 sq. ft of the Administration Building including new finishes, interior walls ceilings, lighting, electrical, mechanical systems and plumbing				
	Proposed Use Business	Current Use Business	Environmental Impacts (stream crossing, wetlands, amt land disturbed) NA		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. 4,500		Unfinished Sq. Ft. 0	Total Sq. Ft. 4,500	

**Building Only - Excludes All Trades Permits**

Value of Work **333,175.00** *Wan, 8/18/2020*

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 *Joe Selko* Date 6/18/2020

Application Fee	\$	
State Levy Fee	\$	
Septic/Well Fee	\$	<i>Waived</i>
Zoning Fee	\$	<i>Waived</i>
RLD	\$	<i>County</i>
SWP	\$	<i>Traded</i>
Total	\$	

**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**

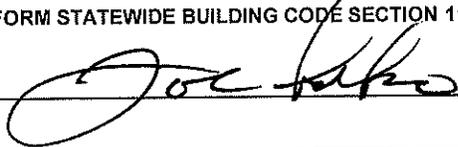
I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_ 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 B # STORIES 3 CONSTRUCTION TYPE T/B OCCUPANT LOAD N.A. CODE EDITION 15

FIRE SPRINKLER Yes FIRE ALARM Yes MODIFICATION No

APPROVAL \_\_\_\_\_ DATE 07 21 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: 6/23/20

Permit Number: BP-2020-00625

GPIN/Tax Map: 772615-1232/58-55-2-29-0

Issued: 7-21-2020

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.

Site Address: 12274 North Crossing Drive Manakin Sabot VA 23103 (Readers Branch)

OWNER INFORMATION	Owner	Phone #
	Michele + John Rouse	804-638-4253

OWNER INFORMATION	Address	Email
	12274 North Crossing Drive Manakin Sabot VA 23103	michelina@me.com

APPLICANT INFORMATION	Applicant/Contact	Phone #
	Same as owner	

APPLICANT INFORMATION	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	Readers Branch	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
30' from Prop. Line		25'		
	Side Setback	Side Setback	Flood Zone	
	10'	10'	X	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Lloyd Date: 7/17/2020 RPLW

CONTRACTOR INFORMATION	Contractor	Phone
	B+P Contracting, LLC	804-461-1180

CONTRACTOR INFORMATION	Address	Email
	8373 Mary Mundie Ln Mechanicsville VA 23111	bpinvestments17@gmail.com

Contractor License Number	Type	Expiration
2705171047	Class C	6-30-2021

Scope of Work: Extend existing 12x12 deck to 12x20. Replace wood <sup>deck</sup>boards with Trex, Pebble Gray and remove railings.

DESCRIPTION OF WORK	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Pleasure		N/A		
	SEWER	WATER	# of Bathrooms	# of Bedrooms	# of floors
	Public/Private	Public/Private			
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
		96	96		

Building Only - Excludes All Trades Permits

Value of Work	\$4,500.00
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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: Michele Rouse Date: 6/23/20

Application Fee	\$ 32.25
State Levy Fee	\$ .65
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 5790



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 7-2-2020  
 Permit Number: BP-2020-00632  
 GPIN/Tax Map: 7733-12-5902 / 67-17-0-C-0  
 Issued: 7-2-2020  
 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: 101 Fox Gate Lane  
 Owner: Connie E Harvey (owner) Phone #: 804 201 5080  
 Address: 101 Fox Gate Lane Email: CONNIE.HARVEY@westrack.com

**APPLICANT INFORMATION**  
 Applicant/Contact: James Mcneil / Connie Harvey Phone #: 804 400 4999  
 Address: 101 Fox Gate Lane - Email: Jamesfmcneil@gmail.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: None Proffer:  Yes  No Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 Front Setback: 55' from Prop. Line Center Line Setback: \_\_\_\_\_ Rear Setback: 35' CUP/Variance/COA: \_\_\_\_\_  
 Side Setback: 20' Side Setback: 20' Flood Zone: \_\_\_\_\_

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Boyd Date: 7/9/2020

**CONTRACTOR INFORMATION**  
 Contractor: (Husband) James Mcneil Owner Phone: 804 400 4999  
 Address: 101 Fox Gate Lane - Email: Jamesfmcneil@gmail.com  
 Contractor License Number: Retired Type: \_\_\_\_\_ Expiration: \_\_\_\_\_

**DESCRIPTION OF WORK**  
 Scope of Work: Remove existing deck and replace all joists, Install ~~new~~ deck Boards, 16' x 32' from 14x27  
 Proposed Use: Deck Current Use: Deck Environmental Impacts (stream crossing, wetlands, amt land disturbed): \_\_\_\_\_  
 SEWER: Public/Private \_\_\_\_\_ WATER: Public/Private \_\_\_\_\_ # of Bathrooms: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_ # of floors: \_\_\_\_\_  
 Finished Sq. Ft.: \_\_\_\_\_ Unfinished Sq. Ft.: 134 Total Sq. Ft.: 134 - 572 sq ft

**Building Only - Excludes All Trades Permits**  
 Value of Work: 3800<sup>00</sup> 512 sq ft  
 Application Fee: \$ 30.00  
 State Levy Fee: \$ .60  
 Septic/Well Fee: \$ \_\_\_\_\_  
 Zoning Fee: \$ 25.00  
 RLD: \$ \_\_\_\_\_  
 SWP: \$ \_\_\_\_\_  
 Total: \$ 55.60  
 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: Connie Harvey Date: 7/2/2020

**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 Connie Harvey (address) 101 Fox Gate LN Richmond, VA 23238 affirm that I am the owner of a certain tract of parcel of land located at 101 Fox Gate LN 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.

Connie E Harvey 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 [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 OCCUPANT LOAD \_\_\_\_\_ CODE EDITION 15

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

APPROVAL MICHAEL BROOKING DATE 7.20.20

Code Official



# BUILDING PERMIT APPLICATION

Application Date:

Permit Number: BP-2020-006669

GPIN/Tax Map: 7733-27-9024/67-13-B-13-0

Issued: 7-29-2020

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>7 BUCK BRANCH DR</u>	
	Owner <u>STEVEN + SHANNON WEBB</u>	Phone # <u>986-6813</u>
	Address <u>7 BUCK BRANCH DR</u>	

APPLICANT INFORMATION	Applicant/Contact <u>PREFERRED Chimney Svc Inc. / JEFF AUSTIN</u>	Phone # <u>994-2189</u>
	Address <u>4296 King William Rd Aylett, VA</u>	

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

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

CONTRACTOR INFORMATION	Contractor <u>PREFERRED Chimney Svc Inc</u>		Phone <u>804-994-2189</u>
	Address <u>4296 King William Rd Aylett, VA 23009</u>		Email <u>1SHORERUNNERPC@9mm.com</u>
	Contractor License Number <u>2705 082458</u>	Type <u>B</u>	Expiration <u>2-28-2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>REMOVE STAINLESS STEEL CHIMNEY LINER AND INSTALL UL LISTED GOLDEN FLUE CAST IN PLACE MASONRY LINER.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft.

**Building Only - Excludes All Trades Permits**

Value of Work	<u>11,846<sup>00</sup></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: Jeff Austin Date: 7-7-2020

Application Fee	\$ <u>165.30</u>
State Levy Fee	\$ <u>1.31</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>166.61</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: 7-2-2020

Permit Number: BP-2020-00634

GPIN/Tax Map: 7716-64-3067 / 58-7-04-D

Issued: 7-21-2020

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>1445 Hermitage Rd</u>	
	Owner <u>Robert &amp; Janet Holland</u>	Phone #
	Address	Email

APPLICANT INFORMATION	Applicant/Contact <u>Thompson builders LLC</u>	Phone # <u>804-357-1920</u>
	Address <u>1390-B Broad Street Rd O.ville VA 23129</u>	Email <u>ThompsonbuildersLLC@yahoo.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from Prop. line</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>CA-1987-1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David [Signature]</u> Date <u>7/9/2020</u> <span style="float: right;">A2</span>			

CONTRACTOR INFORMATION	Contractor <u>Thompson builders LLC</u>	Phone <u>357-1920</u>
	Address <u>1390-B Broad Street Rd O.ville VA 23129</u>	Email <u>ThompsonbuildersLLC@yahoo.com</u>
	Contractor License Number <u>2705 038854A</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build garage 36'x34'</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1224</u>	Total Sq. Ft. <u>1224</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>163.47</u> State Levy Fee \$ <u>3.27</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>191.74</u>
Value of Work	<u>25,000</u> \$ <u>33,660.00</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<u>[Signature]</u> Date <u>7-3-20</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

Residential  Commercial

Application Date: 6/23/2020

Permit Number: BP-2020-00626

GPIN/Tax Map: 6767-43-4076/43-37-B-15-8

Issued: 7-20-2020

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 2503 Bucknell Ln, Maidens, VA 23102	
	Owner <b>Robin Wilfong</b>	Phone # <b>804-543-6374</b>
	Address 2503 Bucknell Ln. Maidens, VA 23102	

APPLICANT INFORMATION	Applicant/Contact <b>Sigora Solar LLC</b>		Phone # 434.465.6788 ext.119
	Address PO Box 7543, Charlottesville, VA 22906		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  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

CONTRACTOR INFORMATION	Contractor <b>Sigora Solar LLC</b>		Phone 434.465.6788 ext.119
	Address PO Box 7543, Charlottesville, VA 22906		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: 10.24 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 **\$3,838.80**

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 6/23/2020

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

RECEIVED

7-13-2020



**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: 06/22/20

Permit Number: **BP-2020-00-1182**

GPIN/Tax Map: 45-1-0-47-A

Issued: 7-20-2020

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 1424 Genito Road	
	Owner BOATWRIGHT DANIEL W BOATWRIGHT BRENDA H	Phone # 804-784-2967
	Address 1424 GENITO ROAD	Email bhboat4@gmail.com

APPLICANT INFORMATION	Applicant/Contact Jeannie 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 constructionb		Phone 804-621-7718
	Address 2410 southland dr chester va 23831		Email jsalvatore@jeswork.com
	Contractor License Number 2705-06-8655	Type A	Expiration 04/30/22

DESCRIPTION OF WORK	Scope of Work: 234 LF SISTER JOIST, 30 LF SIL PLATE REPLACEMENT, 783 CRAWLSEAL DEHUMIDIFIER FOR ENCAPSULATION.				
	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. -2,332-		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>80.69</u>
Value of Work	15,263.46	State Levy Fee \$ <u>1.61</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>06/22/20</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>82.30</u>

REVIEWED BY: Michael R. Bushy



# BUILDING PERMIT APPLICATION

Application Date: 7.1.20Permit Number: BP-2020-00635GPIN/Tax Map: 30.13.A.13.0 / 6769-33-2032Issued: 7-17-2020This 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>2957 Summerchase Ln</u>	
	Owner <u>Phillip Blaschick</u>	Phone # <u>804.822.1171</u>
	Address "	Email <u>Pblaschick@gmail</u>
APPLICANT INFORMATION	Applicant/Contact <u>Madison Queensberry</u>	
	Address "	Email <u>deltadeckcompany@gmail</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Aldwyck</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from Prop. Line</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David Floyd</u> Date <u>7/9/2020</u> <span style="float: right;">A2</span>			

CONTRACTOR INFORMATION	Contractor <u>Delta Deck company</u>		Phone <u>804-543-7241</u>
	Address <u>2538 Fairground Rd.</u>		Email "
	Contractor License Number <u>2705161359</u>	Type <u>A RBC HIC</u>	Expiration <u>1.31.22</u>

DESCRIPTION OF WORK	Scope of Work: <u>build 16x63 Deck</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1,008</u>	Total Sq. Ft. <u>1008</u>		

**Building Only - Excludes All Trades Permits**

Value of Work <u>8,000</u>	Application Fee \$ <u>57.36</u>
	State Levy Fee \$ <u>1.15</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ <u>25.00</u>
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>83.51</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 7.1.20

[Signature] 7/17/20

357 0308

Kimnuck@aol.com

**BUILDING PERMIT APPLICATION**

Application Data:  
Parcel Number: **39-2020-001409**  
APN: **707-14-2047/416-0-25-E**

Department of Building Inspection  
P.O. Box 618  
Charlottesville, VA 22902  
Tel: 804-974-3100 Fax: 804-974-3101  
1000 Pitt Street  
Charlottesville, VA 22902

Residential  Commercial

This application is subject to the provisions of the Virginia Uniform Statewide Building Code (VUSBC) and the Virginia Uniform Statewide Building Code (VUSBC) and the Virginia Uniform Statewide Building Code (VUSBC). The applicant is responsible for obtaining all necessary permits and approvals from the appropriate agencies. The applicant is responsible for obtaining all necessary permits and approvals from the appropriate agencies. The applicant is responsible for obtaining all necessary permits and approvals from the appropriate agencies.

1740 Commonwealth Dr., Charlottesville VA 22904

Project Name: **357 0308**

Address: **Kimnuck@aol.com**

City: **Charlottesville**

County: **Stafford**

Project Type: **Other Use**

Permit Fee: **39.00**

Inspection Fee: **34.75**

Other Fees: **0.00**

Total: **73.75**



# BUILDING PERMIT APPLICATION

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

Application Date: 6-17-2020Permit Number: BP-2020-00597GPIN/Tax Map: 6822-166-6607/11-1-0-55-AIssued: 7-17-2020

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>3986 Helmut Lane</u>		Phone #	<u>804 512 1091</u>
	Owner	<u>ERIC H. UMSTEAD</u>		Email	<u>eric.umstead@gmail.com</u>
APPLICANT INFORMATION	Address	<u>3986 Helmut Lane HADENSVILLE VA. 23067</u>		Phone #	<u>SAME</u>
	Applicant/Contact	<u>SAME</u>		Email	<u>SAME</u>
	Address	<u>SAME</u>			<u>SAME</u>

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

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

DESCRIPTION OF WORK	Scope of Work: <u>FINISH GARAGE UPSTAIRS BONUS ROOM &amp; Bathroom</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<u>BONUS ROOM</u>	<u>N/A</u>	<u>NONE</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
		<u>1</u>	<u>0</u>	
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	<u>350</u>	<u>0</u>	<u>350</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 3500.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Eric H. Umstead Date: Jun 19, 2020

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</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, Eric Umstead of (address) 3986 Helmut Lane affirm that I am the owner of a certain tract of parcel of land located at 3986 Helmut Lane HadenSVille VA 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 [Signature]

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE R5 # STORIES \_\_\_\_\_ CONSTRUCTION TYPE VB OCCUPANT LOAD \_\_\_\_\_ CODE EDITION 2015

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

APPROVAL [Signature] DATE 7/15/20

Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 419  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential       Commercial

Application Date: 4/17/2020

Permit Number: BP-2020-00615

GPIN/Tax Map: 6759-05-3979

Issued: 4-17-2020

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 2829 Dogtown Road Goochland Va 23063				
	Owner Robin Harris		Phone # 804-774-6892		
	Address 2829 Dogtown rad, Goochland Va 23063		Email niknikj305@gmail.com		
APPLICANT INFORMATION	Applicant/Contact JLJ Construction LLC		Phone # 804-222-0900		
	Address 1760 Bickerstaff road, Richmond Va 23231		Email h.salih@jljconstructionllc.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 JLJ Construction LLC		Phone 804-222-0900	
	Address 1760 Bickerstaff Road, Richmond Va 23231		Email h.salih@jljconstructionllc.com	
	Contractor License Number 2705122335	Type A	Expiration 2020-12-31	

DESCRIPTION OF WORK	<b>Scope of Work:</b> Cleaning debris from fire damaged room and other parts of the house, replace damaged drywalls in second floor, painting, HVAC and electrical works				
	Proposed Use Residential	Current Use Residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 4	# of floors 2
	Finished Sq. Ft. 912		Unfinished Sq. Ft.		Total Sq. Ft. 912

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$	
Value of Work	\$20,000.00	State Levy Fee	\$ No Charge
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	\$ No Charge
		Zoning Fee	\$ Fire Damage
		RLD	\$
		SWP	\$
		Total	\$

Signature of Applicant: Date 4/17/2020



# 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: 6/16/2020

Permit Number: BP-2020-00610

GPIN/Tax Map: 6748-41-1834 / 41-2-0-7-0

Issued: 7-17-2020

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>2381 ROCK CASTLE RD. GOOCHLAND, VA 23063</u>	
	Owner	<u>SHELLEY L. DURFEE</u>	
	Address	<u>2381 ROCK CASTLE RD. GOOCHLAND, VA 23063</u>	Phone #

APPLICANT INFORMATION	Applicant/Contact	<u>BLANCHARD &amp; ASSOCIATES GREGORY BLANCHARD RESIDENTIAL CONTRACTOR, INC.</u>	Phone #	<u>804-457-9426</u>
	Address	<u>6020 COMMUNITY HOUSE RD. COLUMBIA, VA 23038</u>	Email	<u>gregoryblchrd@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>PK Acres</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>75' from Prop. Line</u>	<u>100'</u>	<u>35'</u>	
Side Setback	Side Setback	Flood Zone		
	<u>20'</u>	<u>20'</u>	<u>                    </u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer		<u>David Feagel</u>	Date	<u>7/1/2020</u> <u>AI</u>

CONTRACTOR INFORMATION	Contractor	<u>BLANCHARD &amp; ASSOCIATES RESIDENTIAL CONTRACTOR, INC.</u>	Phone	<u>804-457-9426</u>
	Address	<u>6020 COMMUNITY HOUSE RD. COLUMBIA, VA 23038</u>	Email	<u>gregoryblchrd@gmail.com</u>
	Contractor License Number	<u>2705093745</u>	Type	<u>CBC RBC CAS 'A'</u>
			Expiration	<u>4-30-2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>DECK UP TO A POOL. 16x20 24'x24</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	<u>16</u> <u>20</u> <u>320</u>	<u>320 FT<sup>2</sup></u>	<u>320</u>	<u>320</u>	<u>576</u>
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30.90</u>
Value of Work	<u>\$4200.00</u>	State Levy Fee	\$ <u>.62</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>6/16/2020</u>		Septic/Well Fee	\$ <u>                    </u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>                    </u>
		SWP	\$ <u>                    </u>
		Total	\$ <u>56.52</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: 06/17/2020

Permit Number: BP-2020-00619

GPIN/Tax Map: 7707-14-5317 / 46-1-0-25-C

Issued: 7-17-2020

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 845 Broad Street Rd. Manakin Sabot, VA 23103	
	Owner <b>Glenn Robertson</b>	Phone # <b>(804) 497-6306</b>
	Address 845 Broad Street Rd. Manakin Sabot, VA 23103	Email rgr_consulting@hotmail.com

APPLICANT INFORMATION	Applicant/Contact <b>Nova Solar, Inc. / Sam Linton</b>		Phone # <b>(703) 472-4709</b>
	Address 2735 Maidens Rd. Goochland, VA 23103		Email sam@novasolarinc.com

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

CONTRACTOR INFORMATION	Contractor <b>Nova Solar, Inc.</b>		Phone <b>(703) 679-8607</b>
	Address <b>3305 Dye Dr. Falls Church, VA 22042</b>		novasolarinc@gmail.com
	Contractor License Number 2705160290	Type Class A	Expiration 11/30/2020

DESCRIPTION OF WORK	Scope of Work: Installation of a 13.7kW flush mounted rooftop solar PV system				
	Proposed Use Power Generation	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.		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>152.40</u>
Value of Work	\$31,200	State Levy Fee \$ <u>3.05</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>155.45</u>
Signature of Applicant	<u>Sam Linton</u>	Date <u>06/17/2020</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 Glenn Robertson of (address) 845 Broad Street Rd Manakin Sabot, VA 23103 affirm that I am the owner of a certain tract of parcel of land located at 845 Broad Street Rd Manakin Sabot VA 23103 and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

*Glenn Robertson* Owner's Signature

SignNow e-signature ID: 46478592fc...  
06/17/2020 14:58:50 UTC

**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 2015

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

APPROVAL *B. Hill* DATE 7/15/20

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: 6/12/20

Permit Number: BP-2020-00588

GPIN/Tax Map: 6777-06-8551 / 43-35-0-4-8

Issued: 7-14-2020

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.

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: 2232 Parkers Hill Drive Maidens, VA 23102

Owner: Mindy Socola Phone #: (607) 661-7178

Address: 2232 Parkers Hill Drive Maidens, VA 23102 Email: jsocola1@yahoo.com

**APPLICANT INFORMATION**

Applicant/Contact: THS Construction Phone #: (804) 525-5035

Address: 2361-B2 Greystone Court Rockville, VA 23146 Email: terry@thsconstruction.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: The Preserve @ Parkers Hill Proffer:  Yes  No Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Front Setback: 40' from Prop. Line Center Line Setback: \_\_\_\_\_ Rear Setback: 25' CUP/Variance/COA: \_\_\_\_\_

Side Setback: 20' Side Setback: 20' Flood Zone: \_\_\_\_\_

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_

Planning & Zoning Officer: David Floyd Date: 6/20/2020 RP

**CONTRACTOR INFORMATION**

Contractor: THS Construction Phone: (804) 525-5036

Address: 2361-B2 Greystone Court Rockville, VA 23146 Email: terry@thsconstruction.com

Contractor License Number: 2705-110435 Type: CLASS A Expiration: 9/30/20

**DESCRIPTION OF WORK**

Scope of Work: New 20' x 20' Screened Porch

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
R-2				
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		0	0	1
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
0	400	400		

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$34,000</u>	Application Fee	\$ <u>165.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee	\$ <u>3.30</u>
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>193.30</u>

Signature of Applicant: [Signature] Date: 06/23/2020

**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 20 # STORIES \_\_\_\_\_ CONSTRUCTION TYPE VB OCCUPANT LOAD \_\_\_\_\_ CODE EDITION 15

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

APPROVAL OBell DATE 7/10/20

Code Official

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

Application Date: 6-17-2020  
 Application Accepted: BP-2020-00571  
 Old Map Number: 64-2-0-4-0  
 GPIN: 7733-07-2735

*Issued: 7-10-20*

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.

OWNER INFORMATION	Site Address <u>12490 RIVER RD</u>		District		
	Owner <u>MATTHEW ROBERTS</u>		Phone # <u>804-301-8357</u>		
	Address <u>12490 River Rd Richmond VA 23238</u>				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>    </u>	Date Paid: <u>    </u>	
	New Street Address		Zoning District <u>R1</u>		
	Front Setback <u>100' from Prop. Line</u>	Center Line Setback <u>    </u>	Rear Setback <u>35'</u>	C.U. Permit <u>    </u>	Variance <u>    </u>
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	COA <u>    </u>	Flood Zone <u>    </u>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>* Addition comes no closer than existing structure.</u>		

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

Planning & Zoning Officer: David Floyd Date: 6/23/2020

Applicant/Contact: STEVE JENKINS Phone: 540-931-6116  
 Email: jenkinss@TOTALREMODELINGSYSTEMS.COM

Contractor: TOTAL REMODELING SYSTEMS Phone: 540-931-6116  
 Address: 305 ASHLAKE RD SUITE M ASHLAND VA 23065  
 Contractor License Number: 2705127904 Type: A Expiration: 4/30/2021

Description of Work	Scope of Work: <u>BUILD 11'x15' SUNROOM ON NEW FLOOR</u>				
	SEWER <u>Public/Private</u>		WATER <u>Public/Private</u>		# of Bathrooms
	# of Floors <u>1</u>	Total Sq. Ft. <u>165 SF</u>	Finished Sq. Ft. <u>165 SF</u>	Unfinished Sq. Ft.	# of Bedrooms

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

VALUE OF WORK	
Building	<u>\$50,000</u>
Excludes All Trades Permits	

Application Fee	\$ <u>239.00</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$ <u>    </u>
State Levy Fee	\$ <u>4.74</u>
<b>RLD Total</b>	\$ <u>268.74</u>

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

Signature of Applicant: [Signature]



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date:

Permit Number: BP-2020-00598

GPIN/Tax Map:

Issued: 7-2-2020

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 N: 3742447.70 E: 11735663.49	
	Owner Goochland County	Phone # 804-556-5855
	Address 1800 Sandy Hook Rd	Email Stamey, Derek <dstamey@goochlandva.us>
APPLICANT INFORMATION	Applicant/Contact Rite Lite Signs / Jessie Bonds	
	Address 1000 Biscayne Dr. Concord NC 28027	Phone # <u>441-5498</u> 704-788-7097 Email jbonds@ritelitesigns.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 checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>6/29/2020</u>			

CONTRACTOR INFORMATION	Contractor Same as above		Phone
	Address		Email
	Contractor License Number WV057934- <u>2705051391</u>	Type GENERAL BUILDING	Expiration <u>10/22/2020 - 3-31-21</u>

DESCRIPTION OF WORK	Scope of Work: <b>NEW GATEWAY SIGN FOR THE CITY</b>				
	Proposed Use SIGNAGE	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) NO		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms NA	# of Bedrooms NA	# of floors NA
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

**Building Only - Excludes All Trades Permits**

Value of Work	<u>18427.50</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.

Signature of Applicant [Signature] Date 6/9/2020

Application Fee	\$
State Levy Fee	\$
Septic/Well Fee	\$ <u>No Fee</u>
Zoning Fee	\$ <u>County Project</u>
RLD	\$
SWP	\$
Total	\$

**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 — CONSTRUCTION TYPE VB OCCUPANT LOAD 0 CODE EDITION 2015

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

APPROVAL [Signature] DATE 6/30/2020  
Code Official

APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5851  
 TDD 711 VA Relay

Residential  Commercial

6/3/2020 6-11-2020

Permit Number: BP-2020-00538  
 GPIN/Tax Map: 7704-57-7074 / 62-32-0-9-0

Issued: 7-9-2020  
 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 <b>608 Cross Ridge Lane Manakin Sabot, VA 23103</b>	
	Owner <b>Luis Cabral</b>	Phone # <b>585-370-2042</b>
	Address <b>608 Cross Ridge Lane Manakin Sabot, VA 23103</b>	Email <b>luisandjuliane@aol.com</b>

APPLICANT INFORMATION	Applicant/Contact <b>Luis Cabral</b>	Phone # <b>585-370-2042</b>
	Address <b>608 Cross Ridge Lane Manakin Sabot, VA 23103</b>	Email <b>luisandjuliane@aol.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Dovershire</u> <u>Manakin Woods</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from Prop. Line</u>	Center Line Setback	Rear Setback <u>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>[Signature]</u> Date <u>6/17/2020</u> <u>RI</u>			

CONTRACTOR INFORMATION	Contractor <b>THS Construction</b>	Phone <b>804-525-5036</b>
	Address <b>2361-B2 Greystone Court Rockville, VA 23146</b>	Email <b>terry@thsconstruction.com</b>
	Contractor License Number <b>2705-110435</b>	Type Class A

DESCRIPTION OF WORK	Scope of Work: <b>New construction of a pool pavillion</b>				
	Proposed Use <b>Pool Pavilion</b>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <b>0</b>	# of Bedrooms <b>0</b>	# of floors <b>1</b>
	Finished Sq. Ft. <b>750</b>	Unfinished Sq. Ft. <b>0</b>	Total Sq. Ft. <b>750</b>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>327.00</u>
Value of Work <b>70,000</b>		State Levy Fee \$ <u>6.54</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>[Signature]</u> Date <u>6/3/20</u>		Septic/Well Fee \$
		Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>358.54</u>

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.

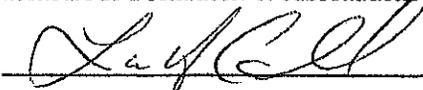
I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### OWNER'S STATEMENT

I, Luis Cabral of (address) 608 Cross Ridge Ln Manakin Sabot affirm that I am the owner of a certain tract of parcel of land located at 608 Cross Ridge Ln Manakin Sabot 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 OCCUPANT LOAD 0 CODE EDITION 15

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

APPROVAL MICHAEL BROOKING DATE 7-7-20

Code Official

6-11-2020  
6/3/2020



# APPLICATION

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

Permit Number: BP-2020-00537

GPIN/Tax Map: 7704-57-7074

Issued: 7-9-2020

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 <b>608 Cross Ridge Lane Manakin Sabot, VA 23103</b>	
	Owner <b>Luis Cabral</b>	Phone # <b>585-370-2042</b>
	Address <b>608 Cross Ridge Lane Manakin Sabot, VA 23103</b>	Email <b>luisandjuliane@aol.com</b>

APPLICANT INFORMATION	Applicant/Contact <b>Luis Cabral</b>	Phone # <b>585-370-2042</b>
	Address <b>608 Cross Ridge Lane Manakin Sabot, VA 23103</b>	Email <b>luisandjuliane@aol.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Dover Shore</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>Manakin Woods</u>			
	Front Setback <u>40' from Prop. Line</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback	Flood Zone	

APPROVED  REJECTED  COMMENTS:

Planning & Zoning Officer David Floyd Date 6/17/2020 RI

CONTRACTOR INFORMATION	Contractor <b>THS Construction</b>	Phone <b>804-525-5036</b>
	Address <b>2361-B2 Greystone Court Rockville, VA 23146</b>	Email <b>terry@thsconstruction.com</b>
	Contractor License Number <b>2705-110435</b>	Type Class A

DESCRIPTION OF WORK	Scope of Work: <u>Detached</u>			
	<b>New construction of a (4) car unfinished garage</b>			
	Proposed Use Garage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0
Finished Sq. Ft. 0		Unfinished Sq. Ft. 1400		Total Sq. Ft. 1400

**Building Only - Excludes All Trades Permits**

Value of Work	<b>70,000</b>	Application Fee	\$ <u>327.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee	\$ <u>6.54</u>
		Septic/Well Fee	\$
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
Signature of Applicant <u>Luis Cabral</u>	Date <u>6-3-2020</u>	Total	\$ <u>358.54</u>

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.

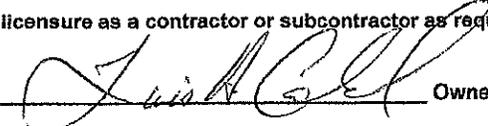
I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**OWNER'S STATEMENT**

I, Luis Cabral of (address) 608 Cross Ridge Ln Manakin Sabot affirm that I am the owner of a certain tract of parcel of land located at 608 Cross Ridge Ln Manakin Sabot 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 RESU # STORIES 1 CONSTRUCTION TYPE VB. OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE 7.7.20.

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 Fee: 6-5200Permit Number: BP-2020-005106GPIN/Tax Map: 7726-16-4907/58-3-B-7-0Issued: 6-7-9-2020

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 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>1574 Oak Lane, Manakin Sabot, VA 23103</u>			
	Owner <u>Paul White</u>		Phone # <u>804-337-9520</u>	
	Address <u>1574 Oak Lane, Manakin Sabot, VA</u>		Email	
APPLICANT INFORMATION	Applicant/Contact <u>Andrew Campbell</u>		Phone # <u>804-426-9312</u>	
	Address <u>14007 Colony Forest Place, Midlothian VA 23114</u>		Email <u>Chi.permits@gmail.com</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Hickory Haven</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from Prop. Line</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer <u>David Floyd</u> Date <u>6/23/2020</u> <span style="float: right;">RN</span>			
CONTRACTOR INFORMATION	Contractor <u>Campbell Home Improvement</u>		Phone <u>804-426-9312</u>	
	Address <u>14007 Colony Forest Place, Midlothian VA 23114</u>			
	Contractor License Number <u>2705100592</u>	Type <u>Class B</u>	Expiration <u>8/31/21</u>	
DESCRIPTION OF WORK	Scope of Work: <u>Build a 11'x32' wood, freestanding deck</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>352</u>	Total Sq. Ft. <u>352</u>	
	Building Only - Excludes All Trades Permits			

Value of Work <u>\$5280.00</u>	Application Fee \$ <u>35.76</u>
	State Levy Fee \$ <u>.72</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ <u>25.00</u>
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>161.48</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: 6-11-2020

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 36-88.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

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

Name: \_\_\_\_\_ 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 53.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

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

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

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE \_\_\_\_\_

PERMIT FEE SCHEDULE

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

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

Other Fees that may be applicable  
RLD \$100.00 for Residential disturbing over 10,000 square feet  
Stormwater \$200 for Residential in certain subdivisions  
Septic & well processing \$40.80 for Commercial & Residential  
Septic only processing \$26.50 for Commercial & Residential  
Zoning Commercial \$100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE R5 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANY LOAD — CODE EDITION 15.

FIRE SPRINKLER — FIRE ALARM —

APPROVAL MICHAEL BROOKING DATE 7.8.20.

Code Official



# BUILDING PERMIT APPLICATION

Application Date: 6-17-2020

Permit Number: BP-2020-00591

GPIN/Tax Map: 6833 91-1337 / 6-6-0-15-0

Issued: 7-9-2020

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>3664 RON DEL LANE, MINERAL VA. 23117</u>	
	Owner <u>STEVE HOFFER</u>	Phone # <u>804-502 9319</u>
	Address <u>3664 RON DEL LANE, MINERAL VA. 23117</u>	Email <u>_____</u>
APPLICANT INFORMATION	Applicant/Contact <u>SAME</u>	Phone # <u>SAME</u>
	Address <u>SAME</u>	Email <u>_____</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Hadensville Estates</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>_____</u>	Date Paid <u>_____</u>
	Front Setback <u>55' from ROW</u>	Center Line Setback <u>_____</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>_____</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>_____</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____				
Planning & Zoning Officer: <u>Diana Floyd</u> Date: <u>6/26/2020</u> <u>AI</u>				

CONTRACTOR INFORMATION	Contractor <u>OWNER</u> <del>CAROLINA CARPORTS</del>	Phone <u>1-800-670-4262</u> <u>1-336-367-6400</u>
	Address <u>187 CARDINAL RIDGE TRAIL</u> <u>P.O. BOX 1263 DOBSON N.C. 27017</u>	Email <u>FAK336-367-6410</u>
	Contractor License Number <u>_____</u>	Type <u>CARPORT</u>
		Expiration <u>_____</u>

DESCRIPTION OF WORK	Scope of Work: <u>20X21 CARPORT TO BE INSTALLED BY CAROLINA CARPORTS</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
		<u>420</u>	<u>420</u>		

Building Only - Excludes All Trades Permits

Value of Work: 2500 6300

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: 6/17/20

Application Fee	\$ <u>40.35</u>
State Levy Fee	\$ <u>.81</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>66.16</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 STEVE HOFFER of (address) 3664 RON DEL LANE affirm that I am the owner of a certain tract of parcel of land located at 3664 Ron Del Lane, MINERAL VA 23117 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 V # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROWN DATE 7.8.20.

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: 7-8-20

Permit Number: BP-2020-00629

GPIN/Tax Map: 6758-70-7265/42-11-0-3-0

Issued: 7-8-20

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: 3250 River Rd. W., Goochland, VA, 23063

Owner: Goochland County of School Board Phone #: 804-798-7663

Address: 2938 River Rd. W., Goochland, VA, 23063 Email: \_\_\_\_\_

**APPLICANT INFORMATION**  
 Applicant/Contact: Stanimir Bozhilov Phone #: 804-349-6061

Address: 3006 Lincoln Ave, Richmond, VA, 23228 Email: stan@fixandpaint.net

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	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: CPE Contractors Phone: 804-441-8278

Address: 3006 Lincoln Ave., Richmond, VA, 23228 Email: estimate@fixandpaint.net

Contractor License Number: 2705091578 Type: Class A Expiration: 04/31/2021

**DESCRIPTION OF WORK**  
 Scope of Work: Install armstrong ceiling - Room C-143

Proposed Use <u>E</u>	Current Use <u>E</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Finished Sq. Ft. <u>3034</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>3034</u>		

Building Only - Excludes All Trades Permits

Value of Work: \$ ~~25,125.00~~ \$23,000.00

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

Signature of Applicant: \_\_\_\_\_ Date: 7/8/20

Application Fee	\$ <u>172.50</u>
State Levy Fee	\$ <u>3.45</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>175.95</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/22/20  
 Permit Number: BP-2020-00579  
 GPIN/Tax Map: 7705-82-1632 / 57-370-3-0  
 Issued: 7-7-20

Residential  Commercial

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

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

OWNER INFORMATION	Site Address <u>620 Cedar Run Rd, Manakin Sabot, VA 23103</u>	
	Owner <u>Garrett Paulin</u>	Phone # <u>804-784-8798</u>
APPLICANT INFORMATION	Address <u>620 Cedar Run Rd, Manakin Sabot, VA 23103</u>	
	Applicant/Contact <u>Garrett Paulin</u>	Email <u>garrettpaulin@gmail.com</u>
APPLICANT INFORMATION	Address <u>620 Cedar Run Rd</u>	
	Applicant/Contact <u>Garrett Paulin</u>	Phone # <u>804-784-8798</u>
APPLICANT INFORMATION	Address <u>620 Cedar Run Rd</u>	
	Applicant/Contact <u>Garrett Paulin</u>	Email <u>garrettpaulin@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Cedar Run Estates</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from Prop. line</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Floyd</u> Date <u>6/24/2020</u> <u>RR</u>			

CONTRACTOR INFORMATION	Contractor <u>John Goodwin, Faith Carpentry</u>		Phone <u>540.223-3683</u>
	Address <u>PO Box 3, Kent Store, VA 23084</u>		Email <u>newventureprop@aol.com</u>
	Contractor License Number <u>2701036291</u>	Type <u>Class A</u>	Expiration <u>3-31-22</u>

DESCRIPTION OF WORK	Scope of Work: <u>16x35 ft.berg glass and 7'x7' spa</u> <u>Inground Pool w/ fence barrier</u>				
	Proposed Use <u>Leisure</u>	Current Use <u>None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms _____	# of Bedrooms _____	# of floors _____
	Finished Sq. Ft. _____	Unfinished Sq. Ft. <u>560</u>	Total Sq. Ft. <u>560</u>		

Building Only - Excludes All Trades Permits

Value of Work \$55,000

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

Signature of Applicant [Signature] Date 6/19/20

Application Fee	\$ <u>259.50</u>
State Levy Fee	\$ <u>5.19</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>2</u>
SWP	\$ _____
Total	\$ <u>289.69</u>

Rec'd: 6-19-20



# 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

Application Date: 05/11/2020 5/12/20

Permit Number: BP-2020-0051A

GPIN/Tax Map: 6759-6A-0848 / 30-1-0-115-A

Issued: 7-7-20

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 2661 Sandy Hook Rd. Goochland, VA 23063	
	Owner James English	Phone # (304) 481-4766
APPLICANT INFORMATION	Address 2661 Sandy Hook Rd. Goochland, VA 23063	Email james.e.english@gmail.com
	Applicant/Contact Jessica Jones	Phone # (304) 481-3675
	Address 2661 Sandy Hook Rd. Goochland, VA 23063	Email sydneyismommy03@hotmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 5' from Prop. Line	Center Line Setback —	Rear Setback 5'	CUP/Variance/GOA —
	Side Setback 5'	Side Setback 5'	Flood Zone C	

APPROVED  REJECTED  COMMENTS:  
 Planning & Zoning Officer: David Boyd Date: 6/23/2020 A2

CONTRACTOR INFORMATION	Contractor Home Owners Build/OWNER	Phone (304) 481-4766
	Address 2661 Sandy Hook Rd. Goochland, VA 23063	Email james.e.english@gmail.com
	Contractor License Number	Type Expiration

DESCRIPTION OF WORK	Scope of Work: Building a <sup>1 detached</sup> Garage Concrete, Framework, Electrical 38x40 = 30x50.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	Finished Sq. Ft. 1520	Unfinished Sq. Ft. 1520	Total Sq. Ft. 1520		

Building Only - Excludes All Trades Permits		Application Fee \$ 237.00
Value of Work	\$ 50,000 - 60,000	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
Signature of Applicant	Date 05/11/2020	Zoning Fee \$ 25.00
		RLD \$
		SWP \$
		Total \$ 266.74



# 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: 6-25-20

Permit Number: BP 2020-00596

GPIN/Tax Map: 7725-05-8916 7725-15-2391 <sup>58-54-1-1-J</sup>

Issued: 7-7-20

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	MOSAIC SECTION 4 @ WEST CREEK INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD --- <i>Open space - no address</i>	Phone #	804.762.4800
	Owner	HHHUNT MOSAIC, LLC		
	Address	11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059	Email	JONATHAN RIDOUT

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 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	BRACT RETAINING WALLS AND EXCAVATING, LLC	Phone	804.798.5097
	Address	10423 DOW GIL ROAD, ASHLAND, VA 23005		
	Contractor License Number	2705131869	Type	A
			Expiration	11.30.2021

DESCRIPTION OF WORK	Scope of Work:			
	INSTALL 1 SEGMENTAL RETAINING WALL RUNS BEHIND LOTS 33 - 47 <i>in mosaic Sec 4</i>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	5,674		5,674	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <u>673.98</u>
Value of Work	\$89,797	State Levy Fee	\$ <u>13.47</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Vicki Barnett</u> Date <u>JUNE 25, 2020</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>686.95</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: June 22, 2020 6-22-20

Permit Number: BP-2020-0603

GPIN/Tax Map: 6758-91-2101 / 42-1-0-74-0

Issued: 7-7-20

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: 2034 Sandy Hook Rd, Goochland, VA 23063

Owner: Stratford & Heather Slater Phone #: 804-539-3761

Address same Email: stratford@ezshipstore.com

**APPLICANT INFORMATION**

Applicant Contact: Stratford Slater Phone #: 804-539-3761

Address same Email: stratford@ezshipstore.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>None</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>100' from Prop Line</u>	Center Line Setback: _____	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
Side Setback: <u>30'</u>	Side Setback: <u>30'</u>	Flood Zone: _____	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_

Planning & Zoning Officer: David Taylor Date: 6/29/2020

**CONTRACTOR INFORMATION**

Contractor: Owner Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor License Number: \_\_\_\_\_ Type: \_\_\_\_\_ Expiration: \_\_\_\_\_

**DESCRIPTION OF WORK**

Scope of Work: Enclose existing porch to living space, add another deck.  
*12x28- FAMILY ROOM covered porch 14x36 = 576*

Proposed Use: Residential	Current Use: Residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed): none		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: none in this project	# of Bedrooms: none in this project	# of floors: 1
Finished Sq. Ft.: 480 s.f. will be created	Unfinished Sq. Ft.: 912 s.f. of deck space will be added	Total Sq. Ft.: <u>1,392</u>		

**Building Only - Excludes All Trades Permits**

Value of Work: <u>\$7,000 / 13,920.00</u>	Application Fee: \$ <u>74.64</u>
	State Levy Fee: \$ <u>1.49</u>
	Septic/Well Fee: \$ _____
	Zoning Fee: \$ <u>25.00</u>
	RLD: \$ _____
	SWP: \$ _____
	Total: \$ <u>101.13</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: H. Slater Date: 6/22/2020



# BUILDING PERMIT APPLICATION

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

Application Date: 6/18/20  
 Permit Number: BP-202000577  
 GPIN/Tax Map: 6757-87-3328/42-1-060  
 Issued: 7-6-20  
 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: 3207 RIVER ROAD WEST LOT 37, GOOCHLAND, VA 23063  
 Owner: JENKINS MOBILE HOME PARK / FRED JENKINS  
 Address: PO Box 23 GOOCHLAND, VA 23063  
 Phone #: 804-556-4568  
 Email: \_\_\_\_\_

**APPLICANT INFORMATION**  
 Applicant/Contact: SHIRLEY M BUTLER  
 Address: 3697 BROAD STREET ROAD, GUM SPRING VA 23065  
 Phone #: 804-317-4877  
 Email: shirleymbutler59@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>100' from Prop. Line</u>	Center Line Setback: _____	Rear Setback: <u>55'</u>	CUP/Variance/COA: <u>CU-1974-11</u>
Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	Flood Zone: _____	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Floyd Date: 6/24/2020 **A2**

**CONTRACTOR INFORMATION**  
 Contractor: BLUE RIDGE TRANSPORTING LLC / SAM PARKINS  
 Address: 1470 STILLHOUSE RIDGE LN, CHARLOTTESVILLE, VA 22903  
 Phone: 1-434-987-6049  
 Email: sam@blueridgemobilehome.com  
 Contractor License Number: 2705151346 Type: CLASS A Expiration: 5-31-2022

**DESCRIPTION OF WORK**  
 Scope of Work: Mobile  
INSTALLATION OF NEW MANUFACTURED HOME - 2021 year  
VIN # FLE270NA2075A03A  
 Proposed Use: RESIDENTIAL Current Use: VACANT Environmental Impacts (stream crossing, wetlands, amt land disturbed): \_\_\_\_\_  
 SEWER: Public/Private WATER: Public/Private # of Bathrooms: \_\_\_\_\_ # of Bedrooms: 1 # of floors: 1  
 Finished Sq. Ft.: 504 Unfinished Sq. Ft.: 48 + 25 = 73 Total Sq. Ft.: 504 + 577

**Building Only - Excludes All Trades Permits**

Value of Work: <u>23,957.62</u>	Application Fee: \$ <u>119.81</u>
	State Levy Fee: \$ <u>2.40</u>
	Septic/Well Fee: \$ _____
	Zoning Fee: \$ <u>50.00</u>
	RLD: \$ _____
	SWP: \$ _____
Signature of Applicant: <u>Shirley M Butler</u> Date: <u>6-18-2020</u>	Total: \$ <u>172.21</u>

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

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

OWNER'S STATEMENT

I SHIRLEY M BUTLER of (address) 3697 BROAD STREET RD GUM SPRING VA 23065 affirm that I am the RENTER owner of a certain tract of parcel of land located at 3207 RIVER ROAD WEST LOT 37 GOOCHLAND, VA 23063 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.

Shirley M Butler Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE \_\_\_\_\_

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE R5 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 2 CODE EDITION 15

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

APPROVAL MICHAEL BROOKING DATE 7.2.20.  
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: 5/26/2020

Permit Number: *BP-2020-00456*

GPIN/Tax Map: 7725-16-4067 / *58-54-1-15-0*

Issued: *7-2-2020*

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 <i>LOT #15</i> 14005 Mosaic Nook, <i>Richmond, VA 23238</i>	Phone # 804-762-4800
	Owner HHHunt Homes, LLC	Email mbleonard@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059	

APPLICANT INFORMATION	Applicant/Contact <i>Morgan Leonard / <u>Law CRAMER</u></i>	Phone # 804-762-4800 ext. 201
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email mbleonard@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>25' from Prop. Line</i>	Center Line Setback <i>—</i>	Rear Setback <i>25'</i>	CUP/Variance/COA <i>—</i>
	Side Setback <i>Left Side: 10'</i>	Side Setback <i>—</i>	Flood Zone <i>X</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <i>*Cash Proffer due before issuing C.O. *Survey locate site with R.PUD</i>		

Planning & Zoning Officer: *David Long* Date: *6/3/2020*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 804-762-4800
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email mbleonard@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: <i>3</i> unit townhome with attached garages.				
	Proposed Use Single family dwellings	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 31,985 square feet <i>16,917.91</i>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2239	Unfinished Sq. Ft. 424	Total Sq. Ft. <i>2239 2663</i>		
	Building Only - Excludes All Trades Permits				

Value of Work <b>\$394,310.00</b>	Application Fee <i>\$2,957.32</i>
	State Levy Fee <i>\$59.15</i>
	Septic/Well Fee <i>\$</i>
	Zoning Fee <i>\$100-</i>
	RLD <i>\$100-</i>
	SWP <i>\$</i>
	Total <i>\$3,216.47</i>

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

Signature of Applicant: *[Signature]* Date: 5/26/2020

**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: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

\_\_\_\_\_ Owner's Signature

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

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

APPROVAL [Signature] DATE 6/26/2020  
Code Official



# BUILDING PERMIT APPLICATION

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

Application Date: 5/23/2020  
Permit Number: BP-2020-00450  
GPIN/Tax Map: 7725-16-4130/58-54-1-16-0  
Issued: Issued 7-2-20  
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: LOT #16  
14007 Mosaic Nook, Richmond VA 23238  
Owner: HH Hunt Homes, LLC Phone #: 804-762-4800  
Address: 11237 Nuckols Road Glen Allen, VA 23059 Email: mbleonard@hhhunthomes.com

**APPLICANT INFORMATION**  
Applicant/Contact: Morgan Leonard / Morgan Leonard Phone #: 804-762-4800 ext. 201  
Address: 11237 Nuckols Road Glen Allen, VA 23059 Email: mbleonard@hhhunthomes.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
Subdivision: Mosaic Proffer:  Yes  No Amount: \$4966.00 Date Paid: Done  
Front Setback: 25' from Prop. Line Center Line Setback: 25' Rear Setback: 25' CUP/Variance/COA: RPUD  
Side Setback: --- Side Setback: --- Flood Zone: X

APPROVED  REJECTED  COMMENTS: \*Cash proffer due before issuing C.O. Survey locate entrance  
Planning & Zoning Officer: David Floyd Date: 6/5/2020

**CONTRACTOR INFORMATION**  
Contractor: HH Hunt Homes, LLC Phone: 804-762-4800  
Address: 11237 Nuckols Road Glen Allen, VA 23059 Email: mbleonard@hhhunthomes.com  
Contractor License Number: 2705119751 A Type: Contractor Expiration: 1/31/2021

Scope of Work: 3 unit townhome with attached garages.

Proposed Use Single family dwellings	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of <u>31,983</u> square feet <u>16,917.91</u>		
<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
2085 Finished Sq. Ft.	441 Unfinished Sq. Ft.	2526 Total Sq. Ft.		

Building Only - Excludes All Trades Permits  
Value of Work: \$356,950.00

Application Fee	<u>\$2,677.13</u>
State Levy Fee	<u>\$53.54</u>
Septic/Well Fee	<u>\$</u>
Zoning Fee	<u>\$100.</u>
RLD	<u>\$100.</u>
SWP	<u>\$</u>
Total	<u>\$2,930.67</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: 5/18/2020

**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: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

\_\_\_\_\_  
Owner's Signature

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

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

APPROVAL [Signature] DATE 6/26/2020  
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: 5/23/2020

Permit Number: **BP-2020-00457**

GPIN/Tax Map: 7725-16-4113 / 58-5A-1-17-0

Issued: **7-2-20**

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 <b>LOT #17</b> 14009 Mosaic Nook		Phone # 804-762-4800
	Owner <b>HHHunt Homes, LLC</b>		Email mbleonard@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

APPLICANT INFORMATION	Applicant/Contact <b>Morgan Leonard</b> <i>in Leonard</i>		Phone # 804-762-4800 ext. 201
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email mbleonard@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>Mosaic</b>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <b>\$4966.00</b>	Date Paid <b>Done</b>
	Front Setback <b>25' from Prop. Line</b>	Center Line Setback <b>—</b>	Rear Setback <b>25'</b>	CUP/Variance/COA <b>—</b>
	Side Setback <b>Right - 10'</b>	Side Setback <b>—</b>	Flood Zone <b>—</b>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <b>* Cash proffer due before issuing C.O. * Survey located RPDN Setback.</b> Planning & Zoning Officer <b>David Floyd</b> Date <b>6/3/2020</b>			

CONTRACTOR INFORMATION	Contractor <b>HHHunt Homes, LLC</b>		Phone 804-762-4800
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email mbleonard@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: <b>3 unit townhome with attached garages.</b>				
	Proposed Use Single family dwellings	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of <del>31,999</del> square feet <b>16,917.91</b>		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 2.5	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2085		Unfinished Sq. Ft. 441	Total Sq. Ft. 2526	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <b>3,038.77</b>	
Value of Work	<b>\$405,170.00</b>	State Levy Fee	\$ <b>60.78</b>
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 <b>5/23/2020</b>		Septic/Well Fee	\$
		Zoning Fee	\$
		RLD	\$ <b>100-</b>
		SWP	\$ <b>100-</b>
		Total	\$ <b>3,299.55</b>

**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: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

\_\_\_\_\_  
Owner's Signature

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE R5 # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 2015

TOWN HOUSES

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

APPROVAL [Signature] DATE 6/26/2020  
Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
P.O. Box 119  
Goochland, VA 23063  
(804) 556-1815 Fax (804) 556-5651  
TDD 711 VA Relay

Application Date: 6-10-20

Permit Number: BP-2020-00504

GPIN/Tax Map: 7135-49-9232/64-26-0-23-0

Issued: 7-2-20

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: 305 Wickham Glen Drive, Goochland, VA 23238

Owner: Monashee LLC Phone #: 804-400-9040

Address: 305 Wickham Glen Drive, Goochland, VA 23238 Email: gil.grattan@virginia-greenlawncare.com

**APPLICANT INFORMATION**

Applicant/Contact: CB Chandler Construction Phone #: 804-344-8085

Address: 8405 Glazebrook Ave, Henrico, VA 23228 Email: info@cbchandler.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>Wickham Glen</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>46' from Prop. Line</u>	Center Line Setback: _____	Rear Setback: <u>5'</u>	CUP/Variance/GOA: _____
Side Setback: <u>5'</u>	Side Setback: <u>5'</u>	Flood Zone: _____	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_

Planning & Zoning Officer: David Lloyd Date: 6/12/2020

**CONTRACTOR INFORMATION**

Contractor: CB Chandler Construction Phone: 804-344-8085

Address: 8405 Glazebrook Ave, Henrico, VA 23228 Email: info@cbchandler.com

Contractor License Number: 2705154000 Type: Class A Expiration: 06/30/2022

**DESCRIPTION OF WORK**

Scope of Work: Remove existing poolhouse with existing bathroom and replace with new pool house with same amount of bathrooms.

Proposed Use: <u>Pool house</u>	Current Use: <u>N/A</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>None</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>1/2</u>	# of Bedrooms: <u>0</u>	# of floors: <u>1</u>
Finished Sq. Ft.: <u>825</u>	Unfinished Sq. Ft.: <u>0</u>	Total Sq. Ft.: <u>825</u>		

**Building Only - Excludes All Trades Permits**

Value of Work: <u>\$75,000</u>	Application Fee: <u>\$349.50</u>
	State Levy Fee: <u>\$6.99</u>
	Septic/Well Fee: <u>\$</u>
	Zoning Fee: <u>\$25.00</u>
	RLD: <u>\$</u>
	SWP: <u>\$</u>
Signature of Applicant: <u>[Signature]</u> Date: <u>6/11/2020</u>	Total: <u>\$381.49</u>

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



# 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:

Permit Number: **BP-2020-00581**

GPIN/Tax Map: **6758-70-7265/4211-0-30**

Issued: **6-1-2020**

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 <b>3250 RIVER ROAD WEST</b>	
	Owner <b>Goochland County School Board</b>	Phone #
	Address <b>2938-1 RIVER ROAD WEST</b>	Email

APPLICANT INFORMATION	Applicant/Contact <b>GERALD C. LITTLE / J. KING DESHAZO</b>	Phone # <b>804-556-5619</b>
	Address <b>10009 Whitesell Rd.</b>	Email <b>THARRIS@GLND.K12.VA.US</b>

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

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

CONTRACTOR INFORMATION	Contractor <b>J. KING DESHAZO III, INC.</b>	Phone <b>804-798-7663</b>
	Address <b>10009 Whitesell Rd / Ashland Va. 23005</b>	Email <b>G.L. Little &amp; Deshazo Roofing.com</b>
	Contractor License Number <b>2701 019429</b>	Type <b>A</b>

DESCRIPTION OF WORK	Scope of Work: <b>RETRO EPDM SYSTEM w/ 1 1/2" ISO / NEW 60 EPDM NEW METAL TRIMS.</b>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft. <b>24,600 / SF (ROOF)</b>

Building Only - Excludes All Trades Permits

Value of Work	<b>173,000.-</b>
---------------	------------------

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 **Gerald C. Little** Date **6.10.20**

Application Fee	\$ <del>1220.00</del>
State Levy Fee	\$ <del>2596</del>
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$

*County Project Fee Waived*



# 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](http://www.goochlandva.us/permitcalc)

Date <span style="font-size: 1.2em;">7-6-20</span>
Permit # <span style="font-size: 1.2em;">EL-2020-00478</span>
GPIN
Tax Map

### LOCATION

Street Address 15754 Mosaic Creek Blvd.

### PROPERTY OWNERSHIP

Name <span style="font-size: 1.2em;"><del>H.H. Hunt Homes Style Craft Home</del></span>	Phone <span style="font-size: 1.2em;"><del>804-762-4667</del></span>
Mailing Address <span style="font-size: 1.2em;"><del>H237 Nuckols Road</del></span>	Email

### APPLICANT

Name <span style="font-size: 1.2em;">CR Phillips Electrical Contractors, Inc.</span>	Phone <span style="font-size: 1.2em;">804-798-8853</span>
Address <span style="font-size: 1.2em;">10996 Leadbetter Road Ashland, VA 23005</span>	Email

### CONTRACTOR

Name <span style="font-size: 1.2em;">CR Phillips Electrical Contractors, Inc.</span>		Phone <span style="font-size: 1.2em;">804-798-8853</span>	
Mailing Address <span style="font-size: 1.2em;">10996 Leadbetter Road Ashland, VA 23005</span>		Email <span style="font-size: 1.2em;">Cormac.Crpelectrical@gmail.com</span>	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number <span style="font-size: 1.2em;">2705054166</span>	Expiration <span style="font-size: 1.2em;">1-31-22</span>	License Type <span style="font-size: 1.2em;">EIE, BLD, GRG, PLB</span>
		Class <span style="font-size: 1.2em;">A</span>	

### DESCRIPTION OF WORK

<span style="font-size: 1.5em;">Wires New Single Family w/ 20KW Auto Standby Generator w/ 200 AMP Nexus Smart Switch</span>			
# of Bathrooms	Service Size <span style="font-size: 1.2em;">200 AMP</span>	Power Company <span style="font-size: 1.2em;">DOMINION</span>	Inquiry # <span style="font-size: 1.2em;">10387643</span>
Value of Work (required) <span style="font-size: 1.2em;">\$ 10,000.00</span>			

**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: Cheryl Ozman Date: 7-6-20

Approval: <span style="font-size: 1.2em; font-family: cursive;">Fisher</span>	Office Use Only Approval date: <span style="font-size: 1.2em;">7-8-2020</span>
Permit Fee: <span style="font-size: 1.2em;">10732</span>	Issued date: <span style="font-size: 1.2em;">7-8-2020</span>



# 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](http://www.goochlandva.us/permitcalc)

Date <span style="font-size: 1.5em;">7/20/20</span>
Permit # <span style="font-size: 1.5em;">ELI-2020-00674</span>
GPIN
Tax Map

### LOCATION

Street Address 1827 ROUNDFIELD RD.

### PROPERTY OWNERSHIP

Name <del>STACY DAIL</del> STACY DAIL	Phone 804 385-9351
Mailing Address 1827 ROUNDFIELD RD. MANAKIN SAUCE VA 23103	Email JTD3K@YAHOO.COM

### APPLICANT

Name RIC SEABORN	Phone 804 389-4242
Address P.O. Box 147 ROCKVILLE VA 23146	Email RICSEABORN@MANAKINELECTRICAL.NET

### CONTRACTOR

Name MANAKIN ELECTRICAL CONTRACTORS			Phone	
Mailing Address SAUCE			Email	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705018630	Expiration 12/31/2020	License Type ELE	Class B

### DESCRIPTION OF WORK

INSTALL 20 KW GENERATOR			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <span style="font-size: 1.5em;">6998.00</span>			

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

Signature of Applicant: R Seaborn Date: 7/20/20

Approval: <u>Fisher</u>	Office Use Only Approval date: <u>7-20-2020</u>
Permit Fee: <u>53.54</u>	Issued date: <u>7-20-2020</u>

(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](http://www.goochlandva.us/permitcalc)

Date: 7-20-20

Permit # 11-2020000648

GPIN

Tax Map

## LOCATION

Street Address 628 Longfield Rd

## PROPERTY OWNERSHIP

Name Richard Lee Phone 804-221-0908

Mailing Address 628 Longfield Rd Manakin Sabot 23103 Email

## APPLICANT

Name Jonathan Rybak Phone 804-647-1626

Address 1832 Berger Rd Email jonathanyrybak@yahoo.com

## CONTRACTOR

Name MASON Electric Phone 804-385-1932

Mailing Address 8820 Winterpock Rd Email CLMason72@Comcast

Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		<u>2705148998</u>	<u>11-30-20'</u>	<u>ELE</u>	<u>B</u>

## DESCRIPTION OF WORK

Installation of 22kW- Generac Generator w/ ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
	<u>200 Amp</u>		
Value of Work (required) <u>\$1,200.00</u>			

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

Signature of Applicant: Jonathan Rybak Date: 7/20/20

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>7/20/20</u>
Permit Fee: <u>\$30.60</u>		Issued date: <u>7/20/20</u>

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	07/20/20
Permit #	EU-2020-00512
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

### LOCATION

Street Address	2 BUCK BRANCH DRIVE	District	
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### PROPERTY OWNERSHIP

Name	JOHN MCDONALD	Phone	8043107126
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Mailing Address	2 BUCK BRANCH DRIVE
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### APPLICANT

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

Name	WOODFIN HEATING	Phone	804-764-4533
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Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	VPITTMAN@ASKWOODFIN.COM
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Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820	Expiration	11/2020	License Type:	CONTRACTOR	Class:	A
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### DESCRIPTION OF WORK

INSTALL 38 KW NATURAL GAS LIQUID COOLED GENERATOR, 400 AMP ATS

USING EXISTING SWITCH AND WIRES

# of Baths	Service Size	Power Company	Inquiry #
	400 AMPS		

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

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

I affirm that I am not subject to licensure as a contractor or subcontractor as required by section 54.1.1111 of the Code of Virginia.

\_\_\_\_\_(Signature)

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

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

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

Signature of Applicant [Signature]

Value of Work: 24000.00

Permit fee: 131.58 BY LESLIE

Approval Fisher

Date 7-27-2020

Issue date: 7-27-2020



# 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](http://www.goochlandva.us/permitcalc)

Date	7/28/20
Permit #	BP-011-2020-700
GPIN	6776-85-7245
Tax Map	

## LOCATION

Street Address	1561 LEW LANE, CROZIER
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## PROPERTY OWNERSHIP

Name	FRANK + ANITA HUGHES	Phone	804 641-4447
Mailing Address	1561 LEW LANE, CROZIER VA 23039	Email	ALPHAOMEGAWASH@GMAIL.COM

## APPLICANT

Name	RIC SEABORN	Phone	804 389-4242
Address	P.O. Box 147, ROCKVILLE VA 23146	Email	RICHARD@MANAKINELECTRICAL.NET

## CONTRACTOR

Name	MANAKIN ELECTRICAL CONTRACTORS			Phone	SAME				
Mailing Address	SAME			Email	SAME				
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705018630	Expiration	12/31/20	License Type	ELE	Class	B

## DESCRIPTION OF WORK

INSTALL 20KW GENERATOR AND 200AMP AUTOMATIC TRANSFER SWITCH			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$9300.			

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

Signature of Applicant: RIC SEABORN Date: 7/28/20

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>7-29-20</u>
Permit Fee:	<u>\$64.11</u>		Issued date:	<u>7-29-20</u>



# 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](http://www.goochlandva.us/permitcalc)

Date <i>7-30-20</i>
Permit # <i>2112020-00713</i>
GPIN
Tax Map

### LOCATION

Street Address *104 MILSTEAD LANE MANAKIN SABOT VA 23103*

### PROPERTY OWNERSHIP

Name <i>JANA FORSHEY</i>	Phone <i>804-708-0845</i>
Mailing Address <i>104 MILSTEAD LANE MANAKIN SABOT</i>	Email <i>JanaForshey@yahoo.com</i>

### APPLICANT

Name <i>JANA FORSHEY</i>	Phone <i>804-708-0845</i>
Address <i>104 MILSTEAD LANE MANAKIN SABOT</i>	Email <i>JanaForshey@yahoo.com</i>

### CONTRACTOR

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

### DESCRIPTION OF WORK

<i>22kw- INSTALL A whole house Generator</i>			
<i>3 1/2</i>	<i>3100 SF</i>	<i>DOMINION</i>	
# of Bathrooms <i>\$6000</i>	Service Size	Power Company	Inquiry #
Value of Work (required)			

**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: *Jana Forshey* Date: *7/30/20*

Approval: <i>J. Fisher</i>	Approval date: <i>7-30-20</i>
Permit Fee: <i>\$48.96</i>	Issued date: _____



# 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](http://www.goochlandva.us/permitcalc)

Date	7/30/20
Permit #	ELI-2020-00720
GPIN	
Tax Map	

### LOCATION

Street Address: 865 WATERBRIDGE RD.

### PROPERTY OWNERSHIP

Name: PAT AUSTIN	Phone: 804 239-8994
Mailing Address: 865 WATERBRIDGE RD, MANAKIN SABOT 23103	Email:

### APPLICANT

Name: RIC SEABORN	Phone: 804 389-4242
Address: P.O. Box 147 ROCKVILLE VA 23146	Email: RICHARD@MANAKINELECTRICAL.NET

### CONTRACTOR

Name: MANAKIN ELECTRICAL CONTRACTORS	Phone: SAME
Mailing Address: SAME	Email: SAME
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2706018630
	Expiration: 12/31/2020
	License Type: ELE
	Class: B

### DESCRIPTION OF WORK

INSTALL 20KW GENERATOR AND 400 Amp ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required): 10,770			

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

Signature of Applicant: RIC SEABORN Date: 7/30/20

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>70.85</u>	Approval date: <u>7-30-2020</u>
	Issued date: <u>7-30-2020</u>