



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8-12-2020

Permit Number: BP-2020-00771

GPIN/Tax Map: 29-1-0-68-0 / 6749-54-4240

Issued: 8-24-2020

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	TBD Bell Road	
	Owner	John Tokarz	Phone # 804-551-7124
	Address	8447 Dwayne Ln. N. Chesterfield VA 23235	
APPLICANT INFORMATION	Applicant/Contact	CNH Homes Inc. / Teresa Kite	Phone # 540-742-4467
	Address	11716 Jefferson Davis Hwy. Chester, VA 23831	Email teresa.kite.20@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback 35'	CUP/Variance/COA
	Side Setback 50'	Side Setback 30'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:	Date 8/17/2020

CONTRACTOR INFORMATION	Contractor	CNH Homes	Phone 804-796-4870
	Address	11716 Jefferson Davis Hwy. Chester, VA 23831	
	Contractor License Number	Type CLASS A - MHC	Expiration 4-30-2021

DESCRIPTION OF WORK	Scope of Work: 2018 28' x 56' Doublewide manuf. home using existing well, septic & driveway. Front Porch: 6' x 6' Covered Rear Deck: 15' x 8'				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 7375		
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms 2	# of Bedrooms 3	# of floors 1
	Finished Sq. Ft. 1475	Unfinished Sq. Ft. 156	Total Sq. Ft. 1631		

Building Only - Excludes All Trades Permits

Value of Work	137,565.00
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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 _____ Date 8/6/2020
 CNH Homes

Application Fee	\$ 631.04
State Levy Fee	\$ 12.02
Septic/Well Fee	\$
Zoning Fee	\$ 50.-
RLD	\$
SWP	\$
Total	\$ 693.06

Serial# DHC027907UCAB

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: Statewide Settlement Services Telephone: 540-209-3167

Mailing Address: 2282 Lillards Ford Rd. Brightwood, VA 22715

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 1 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROCKING DATE 8-21-20
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: 8/10/2020

Permit Number: BP-2020-00761

GPIN/Tax Map: 0028-81-6369/48-1-0-7-A

Issued: 8-21-2020

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 <u>2262 ASHLAND RD, ROCKVILLE, VA, 23146</u>		
	Owner <u>PENNY NUCKOLS MINOR</u>	Phone # <u>(804) 749-4211</u>	
APPLICANT INFORMATION	Address <u>2262 ASHLAND RD, ROCKVILLE, 23146</u>		Email <u>PENNYMINOR@AOL.COM</u>
	Applicant/Contact <u>ABBY SMALLWOOD</u>		Phone # <u>(804) 359-2997</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>17387 ELHO MEADOWS RD, ROCKVILLE VA, 23146</u>		Email <u>HANNAH@SMALLWOODRENOVATIONS.COM</u>
	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>
	Front Setback <u>100' from Prop. Line / Rear</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone <u>—</u>
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>NO change to existing footprint</u> A2			
Planning & Zoning Officer: <u>David Floyd</u> Date: <u>8/13/2020</u>			
CONTRACTOR INFORMATION	Contractor <u>SMALLWOOD RENOVATIONS LLC</u>		Phone <u>(804) 359-2997</u>
	Address <u>17387 ELHO MEADOWS RD, ROCKVILLE, VA</u>		Email <u>HANNAH@SMALLWOODRENOVATIONS.COM</u>
	Contractor License Number <u>2705152746</u>	Type <u>VA CLASS A</u>	Expiration <u>7/2022</u>
DESCRIPTION OF WORK	Scope of Work: <u>12' x 22' TREX COMPOSITE DECKING, PT WOOD FRAMING, 4' WIDE STAIRS, DECK.</u>		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER <u>Public</u>	WATER <u>Public</u>	# of Bathrooms
			# of Bedrooms
		# of floors	
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
		<u>264</u>	<u>264 SQ. FT.</u>

Building Only - Excludes All Trades Permits

Value of Work: \$10,012.50

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

Signature of Applicant: [Signature] Date: 8/10/2020

Application Fee	\$ <u>57.06</u>
State Levy Fee	\$ <u>1.14</u>
Septic/Well Fee	\$ <u>—</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>—</u>
SWP	\$ <u>—</u>
Total	\$ <u>83.20</u>



BUILDING PERMIT APPLICATION

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

Application Date: 8-11-20Permit Number: BP-2020-00755GPIN/Tax Map: 1133-15-9952 / 107-10-024-0Issued: 8-21-2020

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 6- Roads End LN Richmond VA 23238	
	Owner Steven J and Laura B Maestrello	Phone # (804) 874-8396
	Address Same	Email

APPLICANT INFORMATION	Applicant/Contact Chris Wamsley	Phone # (804) 389-2514
	Address 11800 Beach Rd Chesterfield VA 23838	Email crwamsley@gmail.com

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

Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION	Contractor Chris Wamsley	Phone (804) 389-2514
	Address 11800 Beach Rd Chesterfield VA 23838	Email crwamsley@gmail.com
	Contractor License Number 2705130603	Type Class B Contractor CBC RBC

DESCRIPTION OF WORK	Scope of Work: Install header in existing basement block wall for new interior opening.				
	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		Application Fee: \$ <u>100.00</u> State Levy Fee: \$ <u>2.04</u> Septic/Well Fee: \$ _____ Zoning Fee: \$ _____ RLD: \$ _____ SWP: \$ _____ Total: \$ <u>102.04</u>
Value of Work	\$20,000	
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: <u>Chris Wamsley</u>		Date: <u>8/11/20</u>

Rec: 8-11-20



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: Aug 7, 2020

Permit Number: BP-2020-00760

GPIN/Tax Map: 6850-20-6882/21-15-1-9-0

Issued: 8-21-2020

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: 2805 Preston Park Way Sandy Hook, VA

Owner: Michael Jewell Phone #: 434-960-1745

Address: 2805 Preston Park Way Sandy Hook VA Email: _____

APPLICANT INFORMATION

Applicant/Contact: W.C. Mack Phone #: 804-551-2632

Address: 7424 River Pine Dr Mechanicsville VA 23111 Email: Mackrescue3@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Preston Park Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: 40' from Prop Line / Road Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____

Side Setback: 15' Side Setback: 15' Flood Zone: _____

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David Floyd Date: 8/12/2020

CONTRACTOR INFORMATION

Contractor: W.C. Mack Phone: 804-551-2632

Address: 7424 River Pine Dr Mechanicsville VA 23111 Email: mackrescue3@gmail.com

Contractor License Number: 2905174301 Type: CLASS C RBC Expiration: 11/30/2021

DESCRIPTION OF WORK

Scope of Work: Adding a 12x10 Deck to existing Porch/Deck

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>120</u>	<u>120</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$7,000</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: W.C. Mack Date: 8/7/20

Application Fee	\$ <u>30-</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>55.60</u>



BUILDING PERMIT APPLICATION

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

Application Date: 8-4-2020

Permit Number: BP-2020-00744

GPIN/Tax Map: 6813-91-5092/5-1-0-25-0

Issued: 6-21-2020

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 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>3551 County Line Road, Kents Store, VA 23084</u>			
	Owner <u>Ronald & Elnora Johnson</u>		Phone # <u>7</u>	
	Address <u>3551 County Line Road, Kents Store, VA</u>		Email <u>391-372-8701</u>	
APPLICANT INFORMATION	Applicant/Contact <u>Andrew Campbell</u>		Address <u>23084</u>	
	Address <u>14007 Colony Forest Place, Midlothian VA 23114</u>		Phone # <u>804-426-9312</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>75' from Prop. ln Road</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>35' from Euscript</u>	Side Setback <u>20'</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>A1</u>			
	Planning & Zoning Officer <u>David Lloyd</u> Date <u>8/13/2020</u>			

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 14' x 20' wood, freestanding deck</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft. <u>280</u>	Total Sq. Ft. <u>280</u>	
	Building Only - Excludes All Trades Permits			

Value of Work <u>\$ 2,950.00</u>	Application Fee <u>\$ 30 -</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>8-4-2020</u>	State Levy Fee <u>\$.60</u>
	Septic/Well Fee <u>\$</u>
	Zoning Fee <u>\$ 25 -</u>
	RLD <u>\$</u>
	SWP <u>\$</u>
	Total <u>\$ 55.60</u>



BUILDING PERMIT APPLICATION

Application Date: 8/18/2020

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-2020-00784

GPIN/Tax Map: 7724-91-7222/64-28-F-9-D

Issued: 8-21-2020

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 168 Button Bush Goochland Va 23238	
	Owner Gwen Weeks	Phone # 804-918-2854
	Address Same	Email

APPLICANT INFORMATION	Applicant/Contact Roger G McClure	Phone # 804-822-1165
	Address 12060 Bridgeforth Mill Dr	Email Roger@rbmremodels.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>West Oak</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <i>30' from Pavement</i>	Center Line Setback —	Rear Setback <i>50' B/S</i>	CUP/Variance/COA
	Side Setback <i>30' B/S</i>	Side Setback <i>30' B/S</i>	Flood Zone —	—
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>David Floyd</i> Date <i>8/20/2020</i>	RPUD		

CONTRACTOR INFORMATION	Contractor RBM Remodeling Solutions LLC	Phone 804-561-2659
	Address 12060 Bridgeforth Mill Dr	Email Roger@rbmremodels.com
	Contractor License Number 270611689	Type HIC/RBC

DESCRIPTION OF WORK	Scope of Work: Build 14' x 20' rear deck				
	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		Application Fee	\$ 75.00
Value of Work	14,000.00	State Levy Fee	\$ 1.50
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <i>[Signature]</i> Date <i>8/18/2020</i>		Septic/Well Fee	\$
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 101.50

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 \$40.00 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 OCCUPANT LOAD _____ CODE EDITION 2015

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 8/20/20

Code Official

Face



BUILDING PERMIT APPLICATION

Application Date: **8-11-20**

Permit Number: **AP-2020-00759**

GPIN/Tax Map: **6840-70-3247/20-1-D-84-B**

Issued: **8-21-2020**

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

Residential Commercial

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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 3727 Whitehall Rd Sandy Hook, VA 23153	
	Owner Karen Witt	Phone # 804-971-2011 (cell)
	Address 3727 Whitehall Rd Sandy Hook, VA 23153	Email kwitt.providercorp@gmail.com

APPLICANT INFORMATION	Applicant/Contact Karen Witt / Grant Riley		Phone # 505-615-3844 (Grant cell)
	Address 3727 Whitehall Rd Sandy Hook, VA 23153		Email grant@grant-riley.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 OWNER 5056153844		Phone 804-511-1450
	Address		Email
	Contractor License Number OWNER	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: 48" wood - three board fence with wire mesh on exterior side (away from pool) - replacement current fence and extension to enclose pool - all gates with self-closing/latching - swing open away from pool - 5ft tall				
	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	\$ 8900
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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 Karen Witt Date 8/7/2020

Application Fee	\$ 52.08
State Levy Fee	\$ 1.04
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ 53.09

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 Karen Witt of (address) Sandy Hook, VA 23153 affirm that I am the owner of a certain tract of parcel of land located at 3727 Whitehall Rd 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.

Karen Witt Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL _____ DATE _____

Code Official



BUILDING PERMIT APPLICATION

Application Date: 7-28-20

Permit Number: BP-2020-00746

GPIN/Tax Map: 6788-01-5027/44-26-0-19-0

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.

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 1212 Copperstone Court, Maidens Va 23102	
	Owner Fred & Elizabeth Forsmark	Phone #
	Address 1212 Copperstone Court, Maidens Va 23102	

APPLICANT INFORMATION	Applicant/Contact Genaro Barron		Phone # 1-915-790-9605
	Address 6540 Emmaus Church Rd. Suite 101 Providence Forge, Va 23140		Email uniquepools@hotmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Preserve AT Deerfield	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 40' from Prop. Line	Center Line Setback	Rear Setback 5'	CUP/Variance/COA
	Side Setback 5'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: Date 8/10/2020		

CONTRACTOR INFORMATION	Contractor Genaro Barron		Phone 1-915-790-9605
	Address 6540 Emmaus Church Rd. Suite 101 Providence Forge, Va 23140		Email uniquepools@hotmail.com
	Contractor License Number 2705172451	Type A	Expiration 3-31-2022

DESCRIPTION OF WORK	Scope of Work: Inground 12 x 24 fiberglass pool w/ auto cover DeRay				
	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. 288	Total Sq. Ft. 288		

Building Only - Excludes All Trades Permits

Value of Work	25,000.00
---------------	-----------

Application Fee	\$ 124.50
State Levy Fee	\$ 2.49
Septic/Well Fee	\$
Zoning Fee	\$ 25-
RLD	\$
SWP	\$
Total	\$ 151.99

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: Genaro Barron Date: 7/28/20



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: 8/10/2020
 Permit Number: BP-2020-00776
 GPIN/Tax Map: 6735-33-0376/51-S-D-A-D
 Issued: 8-24-2020

Residential Commercial

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

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

OWNER INFORMATION

Site Address: 700 ROCK CASTLE RD, GOOCHLAND, VA 23063

Owner: HUNTER & STEPHANIE LANSING Phone #: 804-615-9760

Address: 700 ROCK CASTLE ROAD, GOOCHLAND, VA 23063 Email:

APPLICANT INFORMATION

Applicant/Contact: Travis Jowers Phone #: 804-749-4706

Address: 2175 Lanier Lane, Rockville, VA 23146 Email: travis@ultimatepools.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

Front Setback: 15' from Prop. Line / Row Center Line Setback: _____ Rear Setback: 5' CUP/Variance/COA: _____

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

APPROVED REJECTED COMMENTS: *RI*

Planning & Zoning Officer: *David Lloyd* Date: 8/19/2020

CONTRACTOR INFORMATION

Contractor: Ultimate Pools Phone: 804-749-4706

Address: 2175 Lanier Lane, Rockville, VA 23146

Contractor License Number: 2705026339 Type: Class A, CBC, RBC, RFC Expiration: 02/28/2021

DESCRIPTION OF WORK

Scope of Work: In-Ground Pool 20' x 40' Rectangle 3' to 6' deep
 AND 7'6" x 7'6" SQUARE SPA AUTO COVER

Proposed Use	Current Use	Existing Buildings on Property	# of Floors
SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms
Finished Sq. Ft.	Unfinished Sq. Ft. 800	Total Sq. Ft. 800	

Building Only - Excludes All Trades Permits

Value of Work: 30,000.00

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

Signature of Applicant: *[Signature]* Date: 8/10/2020

Application Fee	\$ 147.-
State Levy Fee	\$ 2.94
Septic/Wall Fee	\$
Zoning Fee	\$ 25.-
RLD	\$
SWP	\$
Total	\$ 174.94

174.



BUILDING PERMIT APPLICATION

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

Application Date: 8/6/2020

Permit Number: BP-2020-00774

GPIN/Tax Map: 7733-15-4681/67-10-0-17-0

Issued: 8-24-2020

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 27 Lower Tuckahoe Rd West, Richmond 23238	
	Owner Jason & Julie Herzog	Phone # 804-955-5246
	Address 27 Lower Tuckahoe Rd West, Richmond 23238	Email

APPLICANT INFORMATION	Applicant/Contact Travis Jowers		Phone # 804-749-4706
	Address 2175 Lanier Lane, Rockville, VA 23146		Email travis@ultimatepools.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Lower Tuckahoe	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 40' from Prop. Line / Rear	Center Line Setback _____	Rear Setback 5'	CUP/Variance/COA RI
	Side Setback 5'	Side Setback 5'	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____			
	Planning & Zoning Officer <i>David [Signature]</i>		Date 8/17/2020	

CONTRACTOR INFORMATION	Contractor Ultimate Pools		Phone 804-749-4706
	Address 2175 Lanier Lane, Rockville, VA 23146		
	Contractor License Number 2705026339	Type Class A, CBC,RBC,RFC	Expiration 02/28/2021

DESCRIPTION OF WORK	Scope of Work: In-Ground Pool 20' x 40' Rectangle with Auto Cover and 7'6" x 7'6" Square Spa			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	800	Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$ 147-
Value of Work	30,000.00	State Levy Fee	\$ 2.94
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant _____ Date 8/6/2020		Septic/Well Fee	\$ _____
		Zoning Fee	\$ 25-
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ 174.94



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-6661
 TDD 711 VA Relay

Residential Commercial

Application Date: 7/30/20

Permit Number: BP-2020-00729

GPIN/Tax Map: 47-1-0-98-B / 7727-21-7384

Issued: 8-24-2020

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 1751 Ashland Road	
	Owner Wise Associates LLC	Phone # NA
	Address 2415 Grenoble Road, Richmond, VA 23294	Email NA

APPLICANT INFORMATION	Applicant/Contact Kelsey Williams	Phone # 336-789-4074	<u>ext 107</u>
	Address 1078 South Main Street, Mount Airy, NC 27030	Email kelsey@kdsignllc.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA <u>COA-2020-14</u>
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No Setbacks. Signs @ Pumps.</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>8/14/2020</u>			

CONTRACTOR INFORMATION	Contractor K & D Signs	Phone 336-789-4074
	Address 1078 South Main Street, Mount Airy, NC 27030	Email kelsey@kdsignllc.com
	Contractor License Number 2705162507	Type C

DESCRIPTION OF WORK	Scope of Work: Sign Installation - See Renderings				
	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		Application Fee	\$ <u>30.00</u>
Value of Work	\$800.00	State Levy Fee	\$ <u>.60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Kelsey Williams</u> Date: <u>7/30/2020</u>		Septic/Well Fee	\$
		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>80.60</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 _____ 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 \$40.00 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 1 CONSTRUCTION TYPE VIS OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER NA FIRE ALARM NA MODIFICATION N

APPROVAL [Signature] DATE 8-20-2020

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: 8/13/2020

Permit Number: BP-2020-00773

GPIN/Tax Map: 6090-SA-1291/AS-18-0-33-0

Issued: 8-27-2020

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>1747 Fox Downs Lane Oilville, VA 23129</u>	
	Owner <u>Andrew & Julie Johnson</u>	Phone # <u>804 690 2367</u>
	Address <u>1747 Fox Downs Lane Oilville, VA 23129</u>	Email <u>aj.johnson5000@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Andrew & Julie Johnson</u>	Phone # <u>804 690 2367</u>
	Address <u>1747 Fox Downs Lane Oilville, VA 23129</u>	Email <u>aj.johnson5000@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Fox Downs</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from Prop. Line / Road</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>C</u>	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>8/17/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>Andrew & Julie Johnson - owner</u>	Phone <u>804 690 2367</u>
	Address <u>1747 Fox Downs Lane Oilville, VA 23129</u>	Email <u>aj.johnson5000@gmail.com</u>
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Installation of above ground pool, 21' and 10' x 16' decking, with gate, attached to the pool.</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>441 (+) 160</u>	Total Sq. Ft. <u>441 160</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>43.50</u>
Value of Work	<u>\$7000.00</u>	State Levy Fee	\$ <u>187</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>7/10/20</u> <u>[Signature]</u> <u>7/10/20</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25-</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>69.37</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 35-98.01 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 Andrew & Julie Johnson of (address) 1747 Fox Downs Lane Oilville, VA 23129 affirm that I am the owner of a certain tract of parcel of land located at 1747 Fox Downs Lane Oilville, VA 23129 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.

Johnson 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 2015

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL *Bill* DATE 8/27/20

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: 07/01/2020

Permit Number: *BP 2020-00673*

GPIN/Tax Map: *716-05-6A21/58-30-09-0*

Issued: *716-05-0780/58-45-0-20-0*
8-27-2020

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 1501 Centerville Parke Drive Manakin-Sabot, VA 23103	
	Owner Vladimir Kleyman	Phone # 804-840-2724
	Address 1501 Centerville Parke Drive Manakin-Sabot, VA 23103	Email vladkley2000@yahoo.com

APPLICANT INFORMATION	Applicant/Contact Steven Cohen	Phone # 804-752-0052
	Address 12134 Washington Hwy Ashland, VA 23005	Email scohen@bclsllc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Parke @ Centerville</i>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>30' from pavement</i>	Center Line Setback	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>5'</i>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <i>Survey to correct setbacks</i>		

Planning & Zoning Officer: *David Lloyd* Date: *8/24/2020* A2

CONTRACTOR INFORMATION	Contractor BCLS, LLC. <i>Owner</i>	Phone 804-752-0052
	Address 12134 Washington Hwy Ashland, VA 23005	Email info@bclsllc.com
	Contractor License Number 2705163057	Type Class A Contractor

DESCRIPTION OF WORK	Scope of Work: Installation of 12'x12' Vinyl Pavillion			
	Proposed Use n/a	Current Use n/a	Environmental Impacts (stream crossing, wetlands, amt land disturbed) n/a	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms n/a	# of Bedrooms n/a
	Finished Sq. Ft. 144	Unfinished Sq. Ft. 0	Total Sq. Ft. 144	

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>45.74</i>
Value of Work	\$7,500.00	State Levy Fee	\$ <i>.92</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: 07/01/2020		Septic/Well Fee	\$
		Zoning Fee	\$ <i>25.00</i>
		RLD	\$
		SWP	\$
		Total	\$ <i>71.66</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 38-98.01 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 Vladimir Kleyman of (address) 1501 Centerville Park Drive Manakin-Sabot, VA 23103 affirm that I am the owner of a certain tract of parcel of land located at 1501 Centerville Park Drive 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.

V. Kleyman 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 38-89.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL _____ DATE _____

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 8/20/2020

Permit Number: BP-2020-00807

GP/IK/Tax Map: 6759-48-6480/21-4-0-5-0

Issued: 8-27-2020

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 2519 Old Dam Rd.	
	Owner Cora Epps	Phone # (804) 556-2331
	Address 2519 Old Dam Rd.	Email

APPLICANT INFORMATION	Applicant/Contact Power Home Solar / Bryan Law	Phone # (919) 300-7976
	Address 919 N Main St., Mooresville, NC 28115	Email permitva@powerhome.com

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

CONTRACTOR INFORMATION	Contractor Power Home Solar	Phone (919) 300-7976
	Address 919 N Main St. Mooresville, NC 28115	Email permitva@powerhome.com
	Contractor License Number 2705165346	Type Class A Contractor

DESCRIPTION OF WORK	Scope of Work: 15 roof mounted solar modules, 4.8kW, adding battery, install on existing structure.				
	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		Application Fee	\$ 30.00
Value of Work	\$1,000	State Levy Fee	\$.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.		Septic/Well Fee	\$
		Zoning Fee	\$
		RLD	\$
		SWP	\$
		Total	\$ 30.60
Signature of Applicant	<i>Bryan J. Law</i>	Date	8/20/2020

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and for the purpose of Section 54.98.04 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: Bryan D. Law Telephone: (919) 300-7976

Mailing Address: 919 N Main St. Mooresville, NC 28115

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 36-89.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.60 per 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 OCCUPANT LOAD _____ CODE EDITION 2015

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL B. Bell DATE 8/27/20
Code Official

1001



BUILDING PERMIT APPLICATION

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

Application Date: 8.11.2020
Permit Number: BP-2020-00758
GPIN/Tax Map: 6840-70-3247/20-1-0-84-B
Issued: 8-21-2020

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>3727 Whitehall Rd Sandy Hook, VA 23153</u>	
	Owner <u>Karen Witt</u>	Phone # <u>804-971-2011 (cell)</u>
	Address <u>3727 Whitehall Rd Sandy Hook, VA 23153</u>	Email <u>Kwitt.providencepc@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Karen Witt / Grant Riley</u>	Phone # <u>505-615-3844 (Grant cell)</u>
	Address <u>3727 Whitehall Rd Sandy Hook, VA 23153</u>	Email <u>grant@grant-riley.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>75' from Prop. Line/Road</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>X</u>	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>8/13/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>JDM Pools and Construction LLC (Sean Barrett)</u>	Phone <u>540-223-0540</u>
	Address <u>13702 Cross County Rd Mineral, VA 23117</u>	Email _____
	Contractor License Number <u>2705133372</u>	Type <u>HIC POL RFL</u>

DESCRIPTION OF WORK	Scope of Work: <u>Installation of 20'x50' swimming pool - concrete footer, vermiculite bottom, vinyl, bonding electric, filter/plumbing, steps, ladder, handrail, safety cover</u>				
	Proposed Use <u>recreation</u>	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>1000</u>	Total Sq. Ft. <u>1000</u>	_____	

Building Only - Excludes All Trades Permits	Application Fee \$ <u>198.74</u>
Value of Work <u>\$4,500</u>	State Levy Fee \$ <u>3.98</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-</u>
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>227.72</u>

Signature of Applicant Karen Witt Date 8/3/2020

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 Karen Witt of (address) 3227 Whitehall Rd Sandyhook VA 23153 affirm that I am the owner of a certain tract of parcel of land located at 3227 Whitehall Rd 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.

Karen Witt 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 2015

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL B. Hill DATE 8/20/2020
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: 8-6-20

Permit Number: BP-2020-0075A

GPIN/Tax Map: 1778-03-1135/31-25-0-16-0

Issued: 8-20-2020

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 2209 Craig Run Court		Owner Sarfaty, Katherine and Steve		Phone # 556-3344
	Address 2209 Craig Run Court		Email		
	Applicant/Contact Jeannie Salvatore		Phone # 804-621-7718		Email JSALVATORE@JESWORK.COM
APPLICANT INFORMATION	Address 2410 SOUTHLAD DR CHESTER VA 23831		Email JSALVATORE@JESWORK.COM		
	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		
TO BE COMPLETED BY ZONING DEPARTMENT	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	Planning & Zoning Officer _____		Date _____		
CONTRACTOR INFORMATION	Contractor JES CONSTRUCTION		Phone 804-621-7718		
	Address 2410 SOUTHLAND DR		Email		
	Contractor License Number 2705-06-8655	Type A	Expiration 04/30/22		
DESCRIPTION OF WORK	Scope of Work: 2213 CRAWL SEAL LINER WITH DEHUMIDIFIER FOR ENCAPSULATION				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only -- Excludes All Trades Permits

Value of Work: 14,200.00

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

Signature of Applicant: Jeannie Salvatore Date: 08/05/20

Application Fee	\$ <u>73.90</u>
State Levy Fee	\$ <u>1.52</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>75.42</u>



BUILDING PERMIT APPLICATION

Application Date: 7/27/2020

Permit Number: BP-2020-00709

GPIN/Tax Map: 715-32-5413/63-1-0-110-A

Issued: 8-19-2020

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: 895 Manakin Rd, Manakin Sabot, VA 23103

Owner: Nate Wean Phone #: 804-484-4951

Address: _____ Email: nhvac21@aol.com

APPLICANT INFORMATION

Applicant/Contact: Nate Wean Phone #: 804-484-4951

Address: 895 Manakin Rd Manakin Sabot, VA 23103 Email: nhvac21@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

Front Setback: 100' from Prop. Line Center Line Setback: _____ Rear Setback: 5' CUP/Variance/COA: _____

Side Setback: 5' Side Setback: _____ Flood Zone: _____ A2

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David Floyd Date: 7/31/2020

CONTRACTOR INFORMATION

Contractor: Owner Phone: _____

Address: _____ Email: _____

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK

Scope of Work: 2 car garage addition

Proposed Use <u>Garage</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>.1 Acre</u>		
SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>NA</u>	# of Bedrooms <u>NA</u>	# of floors <u>1</u>
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>660</u>	<u>660</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 20,000</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: 7/27/2020

Application Fee	\$ <u>102</u>
State Levy Fee	\$ <u>204</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>129.04</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 Walter Wilson of (address) 895 Manakin Rd affirm that I am the owner of a certain tract of parcel of land located at 895 Manakin Rd, Manakin S. of 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 \$26.60 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$60.00
Zoning all other structures \$ 26.00

OFFICE USE ONLY

USE RS # STORIES _____ CONSTRUCTION TYPE VB OCCUPANT LOAD _____ CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 8/19/20
Code Official



BUILDING PERMIT APPLICATION

Application Date: 8-5-20

Permit Number: PP-2020-00734

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

Issued: 8.19.2020

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>13263 Adon Court Richmond Va 23233</u>	
	Owner <u>Cory & Janine Hoffer</u>	Phone # <u>804-986-8517</u>
	Address <u>Cory/hoffer@comcast.net</u>	

APPLICANT INFORMATION	Applicant/Contact		Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Rivergate</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40 from Prop. Line/Was</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>RI</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>8/7/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>Exquisite Pools</u>		Phone <u>804-912-3331-804-744-4444</u>
	Address <u>17099 Chisholm Trail Rockville Va 23146</u>		Email <u>exquisitepools@gmail.com</u>
	Contractor License Number <u>2705152021</u>	Type <u>CBC RBC</u>	Expiration <u>10-31-2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>In Ground Granite Swimming Pool with Auto Cover 20x40</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>800</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>66,400</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: Bob Hill Date: 8/17/20 RS VB 2015

Application Fee	\$ <u>288.30</u>
State Levy Fee	\$ <u>5.77</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>319.07</u>



BUILDING PERMIT APPLICATION

Application Date: 8-5-20

Permit Number: DP-2020-00735

GPIN/Tax Map: 7715-21-0719/12-29-0-4-0

Issued: 8.19.2020

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>899 Hermitage Rd. Manakin Sabot</u>	
	Owner <u>Larry Hayes</u>	Phone #
APPLICANT INFORMATION	Address <u>899 Hermitage Rd Manakin Sabot</u>	Email <u>Larry.Hayes@eziz</u>
	Applicant/Contact <u>L</u>	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Cedar Run Estates</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>55' from Prop Line / RW</u>	Center Line Setback <u>—</u>	Rear Setback <u>5'</u>	CUP/Variances/COA <u>RR</u>
	Side Setback <u>5'</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>8/17/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>Exquisite Pools</u>	Phone <u>804-912-3331 Cell</u>
	Address <u>17099 Chimholm Trail Rockville Va 23146</u>	Email <u>exquisitepools@gmail</u>
	Contractor License Number <u>2705152021</u>	Type <u>—</u>

DESCRIPTION OF WORK	Scope of Work: <u>Inground Gunite Swimming Pool with Auto Cover 18'x36' 3-6" 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. <u>648</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>648</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>44,600</u>
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Application Fee	\$ <u>212.70</u>
State Levy Fee	\$ <u>4.25</u>
Septic/Well Fee	\$ <u>—</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>—</u>
SWP	\$ <u>—</u>
Total	\$ <u>241.95</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 Jeffrey Hayes Date 7-30-2020
Bobell 8/17/20 RS TB 2015



BUILDING PERMIT APPLICATION

Application Date: 5-13-20

Permit Number: BP-2020-00381

GPIN/Tax Map: 6812-11-2925/10-12-04-A

Issued: 2-12-20

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>3951 Tabscott Rd Columbia Va 23038</u>		
	Owner	Phone #	<u>804 357-5432</u>	
APPLICANT INFORMATION	Address	Email	<u>sjlandscaping@aol.com</u>	
	Applicant/Contact	Phone #		
APPLICANT INFORMATION	Address	Email		
	Address	<u>same as above</u>		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivisor	Proffer	Amount	Date Paid
	<u>None</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u> </u>	<u> </u>
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/GOA
	<u>15' from Prop. Line</u>	<u> </u>	<u>5'</u>	<u> </u>
	Side Setback	Side Setback	Flood Zone	
	<u>5'</u>	<u>5'</u>	<u> </u>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Survey locate side Setback etc.</u>	
	Planning & Zoning Officer	Date	<u>David [Signature]</u> <u>7/28/2021</u>	

CONTRACTOR INFORMATION	Contractor	Phone	<u>AI</u>	
	<u>J. Monroe Johnson, Inc.</u>	<u>434 589-3369</u>		
	Address	Email	<u>johnsonmargie7@gmail.com</u>	
	<u>3530 Venable Rd Kent's Store Va 23084</u>			
	Contractor License Number	Type	Expiration	
	<u>2701015858</u>	<u>State CBE</u>	<u>10-31-21</u>	

DESCRIPTION OF WORK	Scope of Work: <u>40' x 58' pole barn, includes lean to.</u>			
	<u>30x36 2 14x40 lean to</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<u> </u>	<u> </u>	<u> </u>	
SEWER	WATER	# of Bathrooms	# of Bedrooms	# of floors
Public/Private	Public/Private	<u> </u>	<u> </u>	<u> </u>
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u> </u>	<u>1080 + 1120 lean to</u>	<u>2,200</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>333.76</u>
Value of Work	\$ <u>71,500</u>	State Levy Fee	\$ <u>6.67</u>
<u>\$15,000</u>		Septic/Well Fee	\$ <u>X</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.		Zoning Fee	\$ <u>25.00</u>
Signature of Applicant	<u>[Signature]</u>	RLD	\$ <u>X</u>
	Date <u>5-11-2020</u>	SWP	\$ <u>X</u>
		Total	\$ <u>365.43</u>



BUILDING PERMIT APPLICATION

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

Application Date: 07/24/2020

Permit Number: *BP-2020-00708*

GPIN/Tax Map: 7726-06-1061 / 58-42-0-15-0

Issued: *8-12-20*

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 1602 CENTERVILLE PARKE MANAKIN-SABOT, VA				
	Owner KEITH & SUSAN HICKEY		Phone # 804-387-9637		
	Address 1602 CENTERVILLE PARKE MANAKIN-SABOT, VA		Email		
APPLICANT INFORMATION	Applicant/Contact ADD A DECK, INC.		Phone # 804-285-4239		
	Address 6408 MALLORY DR.		Email ADMIN@ADDADECK.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 ADD A DECK, INC.		Phone 804-285-4239		
	Address 6408 MALLORY DR.		Email ADMIN@ADDADECK.COM		
	Contractor License Number 2701-033201A	Type RES/COM	Expiration 11/31/2020		
DESCRIPTION OF WORK	Scope of Work: Build a 12'x 16' screened porch on existing masonry patio with full foundation. No change to footprint.				
	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. 192 SQ FT	Total Sq. Ft. <i>192</i>		

Building Only - Excludes All Trades Permits

Value of Work: \$18,000.00

*#9486
Per Loretta*

Application Fee	\$ <i>93.00</i>
State Levy Fee	\$ <i>1.86</i>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <i>94.86</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: *[Signature]* Date: *7/29/2020*



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: 05-06-2020
 Permit Number: BP-2020-00365
 GPIN/Tax Map: 1726-25-0307/58-55-2-B-0
 Issued: 8-12-20
 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 12293 North Crossing Drive	
	Owner EAGLE CONSTRUCTION OF VA., LLC	Phone #
APPLICANT INFORMATION	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060	
	Applicant/Contact BERTON JAMES	Phone # 8043472895
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060	
	Email BJAMES@EAGLEOFVA.COM	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from Prop. Line</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone <input checked="" type="checkbox"/>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer <u>Daniel [Signature]</u>		Date <u>5/11/2020</u>		<u>RPMD</u>

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone 8047414663
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		Email BJAMES@EAGLEOFVA.COM
	Contractor License Number 2705096467A	Type CLASS A	Expiration 6-30-2021

DESCRIPTION OF WORK	Scope of Work: NEW CLUBHOUSE CONSTRUCTION <i>for Readers Branch</i>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms 2	# of Bedrooms 1	# of floors 1
	Finished Sq. Ft. 2113		Unfinished Sq. Ft. 347 X 2	Total Sq. Ft. 2460	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2,693.70</u>	
Value of Work	<u>250,000.00</u> 359,160.00	State Levy Fee	\$ <u>53.87</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>100.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>2,847.57</u>
Signature of Applicant <u>Berton James</u>		Date <u>05-06-2020</u>	



BUILDING PERMIT APPLICATION

Application Date: 6-12-2020
 Permit Number: BP-2020-00553
 GPIN/Tax Map: 17-1-93A / 6810-21-1321
 Issued: 8-10-20

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.

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>2787 Hadensville-Fife Rd, Goochland, VA 23063</u>	
	Owner <u>Sylvester Bryce</u>	Phone # <u>804 347-5671</u>
	Address <u>2787 Hadensville-Fife Rd, Goochland, VA 23063</u>	Email <u>robbin.bryce@fifeinc.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Robbin Bryce</u>	
	Address <u>2787 Hadensville-Fife Rd, Goochland, VA 23063</u>	Phone # <u>804-347-9171</u>
		Email <u>robbin.bryce@fifeinc.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>25' from Prop Line</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>20'</u>	Side Setback <u>29'</u>	Flood Zone <u>—</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date <u>6/18/2020</u> A1				

CONTRACTOR INFORMATION	Contractor <u>Fife Incorporated</u>		Phone <u>(804) 457-2730</u>
	Address <u>2744 Hadensville-Fife Rd Goochland, VA 23063</u>		Email
	Contractor License Number <u>2705062758</u>	Type <u>CBC-RBC</u>	Expiration <u>4-30-2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install Master Bathroom addition</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>600 sq feet</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. <u>224</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>224</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>67.99</u>	
Value of Work	<u>12,000.00 \$ / 12,320.</u>	State Levy Fee	\$ <u>1.35</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>93.79</u>
Signature of Applicant <u>AC Bryce</u>		Date <u>6-12-2020</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

Residential Commercial

Application Date: 7/27/20

Permit Number: BP-2020-00706

GPIN/Tax Map: 6779-40-273/31-11-01-0

Issued: 8-14-2020

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.

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 2177 Broad ST. Rd Maidens, VA, 23102	
	Owner Steven Strand	Phone # 804-366-5937
APPLICANT INFORMATION	Address 2177 Broad ST, Rd.	
	Applicant/Contact	Phone #
	Address	
	Email	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 55' from Prop. line	Center Line Setback —	Rear Setback 35'	CUP/Variance/COA —
	Side Setback 35' from Road	Side Setback 20'	Flood Zone C	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer David Floyd Date 7/30/2020	RR		

CONTRACTOR INFORMATION	Contractor R.B. Contractor INC.		Phone 804-405-9343	
	Address 10 East Washington ST Henrico VA,		Email	
	Contractor License Number 2705104867	Type class A	Expiration 3-31-2022	

DESCRIPTION OF WORK	Scope of Work: cover & screen in existing Deck & add 6'x12' Deck			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft. 72	Unfinished Sq. Ft.	Total Sq. Ft. 72	

Building Only -- Excludes All Trades Permits

Value of Work	16,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 7/27/22

Application Fee	\$ 84.00
State Levy Fee	\$ 1.68
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 110.68



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: 6/25/20
6/23/20

Permit Number: DP-2020-00614

GPIN/Tax Map: 7725-16-6018/58-54-1-12-0

Issued: Issued 8-17-2020

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 14000 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 <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Done</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> </u>	Side Setback <u> </u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Cash Proffer due before issuing C.O. * Survey locate setbacks</u>			

Planning & Zoning Officer: David Floyd Date: 7/7/2020

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: <u>4</u> 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>31,883</u> square feet <u>16,917.91</u>		
	<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 2	# of floors 2
	Finished Sq. Ft. 2149	Unfinished Sq. Ft. 455	Total Sq. Ft. 2604		

Building Only - Excludes All Trades Permits

Value of Work	\$394,310.00 <u>\$225,906</u>	Application Fee	\$ <u>2,144.29</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.		State Levy Fee	\$ <u>42.89</u>
Signature of Applicant <u>[Signature]</u>	Date <u>6/23/2020</u>	Septic/Well Fee	\$ <u> </u>
		Zoning Fee	\$ <u>100.00</u>
		RLD	\$ <u>100.00</u>
		SWP	\$ <u> </u>
		Total	<u>2,387.18</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 4 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION

APPROVAL [Signature] DATE 7/30/2020 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: *6/25/2020* *6-30-20*

Permit Number: *BP-2020-00628*

GPIN/Tax Map: *7725-16-6244*

Issued: *8-17-2020*

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 14004 Mosaic Nook	
	Owner HHHunt Homes, LLC	Phone # 804-762-4800
	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 <i>Rt. Side 10'</i>	Side Setback	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 setbacks.</i>			

Planning & Zoning Officer: *Daniel Ford* Date: *7/9/2020*

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 31,883 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 2.5	# of Bedrooms 2	# of floors 2
	Finished Sq. Ft. 2149	Unfinished Sq. Ft. 455	Total Sq. Ft. 2604		

Building Only - Excludes All Trades Permits		Application Fee <i>2,144.29</i>	
Value of Work	\$356,950.00 <i>\$285,906</i>	State Levy Fee	\$ <i>42.89</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <i>100.00</i>
		RLD	\$ <i>100.00</i>
		SWP	\$
		Total	\$ <i>2,387.18</i>
Signature of Applicant	<i>[Signature]</i>	Date	<i>6/25/2020</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 8/17/2020
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: 6/25/2020

Permit Number: *BP-2020-00631*

GPIN/Tax Map: 7725-16-6217

Issued: *8-17-2020*

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 14006 Mosaic Nook	
	Owner HHHunt Homes, LLC	Phone # 804-762-4800
	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>Done</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</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 <i>3</i> 5 unit townhome with attached garages.				
	Proposed Use Single family dwellings	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 37,989 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. 2085	Unfinished Sq. Ft. <i>341</i> 483	Total Sq. Ft. 2085 2568		
	Building Only - Excludes All Trades Permits				

Value of Work \$394,310.00 <i>\$261,936</i>	Application Fee \$ <i>1,964.52</i>
	State Levy Fee \$ <i>39.29</i>
	Septic/Well Fee \$
	Zoning Fee \$ <i>100.00</i>
	RLD \$ <i>100.00</i>
	SWP \$
Signature of Applicant <i>[Signature]</i> Date 6/25/2020	Total \$ <i>2,203.81</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 8/17/2020
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: 6/25/2020

Permit Number: 20-2020-00633

GPIN/Tax Map: 7725-16-5288

Issued: 8-17-2020

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 14008 Mosaic Nook	
	Owner HHHunt Homes, LLC	Phone # 804-762-4800
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email mbleonard@hhhunthomes.com

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 <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$49660.00</u>	Date Paid <u>Done</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>Lt. Side 10'</u>	Side Setback <u> </u>	Flood Zone <u>X</u>	<u> </u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Cash Proffer due before issuing C.O.</u> Planning & Zoning Officer <u>David Floyd</u> Date <u>7/9/2020</u> <u>*Survey locate RPD - SETBACKS.</u>			

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: <u>3</u> 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>31,953</u> square feet <u>16,917.91</u>	
	<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. <u>44T 592</u>
	Total Sq. Ft. <u>2650 2831</u>			

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2,165.72</u>
Value of Work	<u>\$405,170.00</u> <u>\$288,762</u>	State Levy Fee \$ <u>43.31</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.		Septic/Well Fee \$ <u> </u>
		Zoning Fee \$ <u>100.00</u>
		RLD \$ <u>100.00</u>
		SWP \$ <u> </u>
		Total \$ <u>2,409.03</u>
Signature of Applicant <u>[Signature]</u> Date 6/25/2020		

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 8/17/2020
Code Official

Rec: 6-25



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: 6/23/20
Permit Number: 2020-0068
GPIN/Tax Map: 7725-16-5055/58-5A-L-14-0
Issued: 8-17-2020
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: 14003 Mosaic Nook
Owner: HHHunt Homes, LLC
Phone #: 804-762-4800
Address: 11237 Nuckols Road Glen Allen, VA 23059
Email: mbleonard@hhhunthomes.com

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: Mosaic
Proffer: Yes
Amount: \$4966.00
Date Paid: Due
Front Setback: 25' From Prop. Line
Center Line Setback:
Rear Setback: 25'
Side Setback: RT. Side 10'
Side Setback:
Flood Zone:
APPROVED [checked] REJECTED []
COMMENTS: Cash proffer due before receiving C.O. #511 only to locate REPID setbacks.
Planning & Zoning Officer: [Signature] Date: 7/7/2020

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: 4 unit townhome with attached garages.
Proposed Use: Single family dwellings
Current Use: None
Environmental Impacts: Land disturbance of 31,983 square feet 16,917.91
SEWER: Public/Private
WATER: Public/Private
of Bathrooms: 3
of Bedrooms: 3
of floors: 2
Finished Sq. Ft.: 2239
Unfinished Sq. Ft.: 441
Total Sq. Ft.: 2680

Building Only - Excludes All Trades Permits
Value of Work: \$405,170.00 \$288,762
Application Fee: 2,165.72
State Levy Fee: 43.31
Septic/Well Fee: \$
Zoning Fee: \$ 100.00
RLD: \$ 100.00
SWP: \$
Total: 2,409.03
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: 6/23/2020

22-2:22A

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 4 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 7/30/2020
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: 6/23/20

Permit Number: BP-2020-00617

GPIN/Tax Map: 7125-16-6140/58-5A-1-11-0

Issued: 8-17-2020

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 14002 Mosaic Nook	
	Owner HHHunt Homes, LLC	Phone # 804-762-4800
	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 <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Done</u>	
	Front Setback <u>25' from Prop. Line</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA	
	Side Setback <u>6.5' 10'</u>	Side Setback	Flood Zone		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Cash letter is due before issuing C.O. *Survey locate</u>				
	Planning & Zoning Officer <u>Daniel Taylor</u> Date <u>7/7/2020</u> <u>ICPD SET BACKS.</u>				

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: 4 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
	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. 2310		Unfinished Sq. Ft. 441		Total Sq. Ft. 2751

Building Only - Excludes All Trades Permits		Application Fee <u>2,211.62</u>	
Value of Work	\$356,950.00 <u>\$294,882</u>	State Levy Fee	<u>44.23</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>6/23/2020</u>		Septic/Well Fee	\$ <u>—</u>
		Zoning Fee	\$ <u>100.00</u>
		RLD	\$ <u>100.00</u>
		SWP	\$ <u>—</u>
		Total	<u>2,455.85</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 4 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 7/30/2020
Code Official

6/25/20



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: 6/25/20

Permit Number: BP-2020-00616

GPIN/Tax Map: 7725-16-5086/58-54-1-13-0

Issued: 8-17-2020

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: 14001 Mosaic Nook

Owner: **HHHunt Homes, LLC** Phone #: 804-762-4800

Address: 11237 Nuckols Road Glen Allen, VA 23059 Email: mbleonard@hhhunthomes.com

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: Mosaic Proffer: Yes No Amount: \$4966.00 Date Paid: Due

Front Setback: 25' from Prop. Line Center Line Setback: 25' Rear Setback: 25' CUP/Variance/COA: —

Side Setback: — Side Setback: — Flood Zone: X

APPROVED REJECTED COMMENTS: *Cash Proffer due before Issuing C.G. *Survey locate

Planning & Zoning Officer: David Floyd Date: 7/7/2020 REPAID SETBACK

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: 4 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>84,983</u> square feet <u>16,917.91</u>		
<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
2310 Finished Sq. Ft.	441 Unfinished Sq. Ft.	2751 Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work: \$405,170.00 \$294,882

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: 6/23/2020

Application Fee	\$ <u>221.62</u>
State Levy Fee	\$ <u>44.23</u>
Septic/Well Fee	\$ <u>—</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>—</u>
Total	\$ <u>2,455.85</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 4 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 7/30/2020
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: 8/3/2020

Permit Number: BP-2020-00742

GPIN/Tax Map: 723-08-6686 / 63-32-D-C-1

Issued: Issued 8-17-2020

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 390 Flag Station Rd. Richmond, VA 23238	
	Owner Daniell and Ronald Paquette	Phone # 804-564-3151
	Address 390 Flag Station Rd. Richmond, VA 23238	

APPLICANT INFORMATION	Applicant/Contact Sigora Solar LLC		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 <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer _____ Date _____			

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC		Phone 434.465.6788 ext.119
	Address 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: 13.12 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	\$4,560.60
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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: Michael Graves Date 8/3/2020

Application Fee	\$ 32.52
State Levy Fee	\$ 0.65
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 33.17

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 \$40.00 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 OCCUPANY LOAD _____ CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL B. Bell DATE 8/14/20

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: 7-15-2020

Permit Number: BP-2020-00685

GPIN/Tax Map: 7725-33-0619/5832-3-A-0

Issued: 8-18-2020

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 CAPITAL ONE - WEST CREEK - BUILDING 1 15040 CAPITAL ONE DRIVE, RICHMOND, VA 23238	
	Owner CAPITAL ONE - CLIF WHITE - SENIOR PROJECT MANAGER	Phone # 804-229-2935
	Address 15070 Capital One Drive, Richmond, VA 23238	Email clif.white@capitalone.com
APPLICANT INFORMATION	Applicant/Contact MARK TURNER CONSTRUCTION - KEVIN SUTER	
	Address 10474 COBBS ROAD, GLEN ALLEN, VA 23059	Phone # 804-240-4928
		Email ksuter@markturnerconstruction.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 MARK TURNER CONSTRUCTION - KEVIN SUTER		Phone O: 804-998-0068 C: 804-240-4928	
	Address 10474 COBBS ROAD, GLEN ALLEN, VA 23059		Email ksuter@markturnerconstruction.com	
	Contractor License Number 2705164039	Type A	Expiration 6/30/21	

DESCRIPTION OF WORK	Scope of Work: Capital One - West Creek 1 - Interior architectural refresh, minor changes to wall layouts and finishes in various areas of the building on Floors 1, 2, 3, and 4.				
	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	\$1,294,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 7/14/2020

Application Fee	\$ 9705.00
State Levy Fee	\$ 194.10
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 9899.10

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 A3/52/B # STORIES 4 CONSTRUCTION TYPE 11B OCCUPANT LOAD 148 CODE EDITION 2015

FIRE SPRINKLER Y FIRE ALARM Y MODIFICATION _____

APPROVAL [Signature] DATE 8/12/2020

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: 7-15-2020

Permit Number: BP-2020-00684

GPIN/Tax Map: 7725-33-0619/5832-3-A-D

Issued: 8-18-2020

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 CAPITAL ONE - WEST CREEK - BUILDING 4 15040 CAPITAL ONE DRIVE, RICHMOND, VA 23238	
	Owner CAPITAL ONE - CLIF WHITE - SENIOR PROJECT MANAGER	Phone # 804-229-2935
	Address 15070 Capital One Drive, Richmond, VA 23238	Email clif.white@capitalone.com

APPLICANT INFORMATION	Applicant/Contact MARK TURNER CONSTRUCTION - KEVIN SUTER		Phone # 804-240-4928
	Address 10474 COBBS ROAD, GLEN ALLEN, VA 23059		Email ksuter@markturnerconstruction.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 MARK TURNER CONSTRUCTION - KEVIN SUTER		Phone O: 804-998-0068 C: 804-240-4928	
	Address 10474 COBBS ROAD, GLEN ALLEN, VA 23059		Email ksuter@markturnerconstruction.com	
	Contractor License Number 2705164039	Type A	Expiration 6/30/21	

DESCRIPTION OF WORK	Scope of Work: Capital One - West Creek 4 - Interior architectural refresh, minor changes to wall layouts and finishes in various areas of the building on Floors 1, 2, 3, and 4.				
	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	\$770,800.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 7/14/2020

Application Fee	\$ 5781.00
State Levy Fee	\$ 115.62
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 5896.62

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 A3/52/B # STORIES 4 CONSTRUCTION TYPE 11B OCCUPANT LOAD 84 CODE EDITION 2015

FIRE SPRINKLER Y FIRE ALARM Y MODIFICATION _____

APPROVAL [Signature] DATE 8/12/2020
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: 8-6-20

Permit Number: BP-2020-00736

GPIN/Tax Map: 0181-6A-5163/44-1-0-46-0

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.

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>Randolph Elementary School</u> <u>1552 Sheppard Town Rd., Crozier, VA, 23039</u>	Phone # <u>(804) 346-4015</u>
	Owner <u>Goochland Co. School Board</u>	Email <u>tsteelcy@glnv.k12.va.us</u>
	Address <u>2938 River Rd W. Goochland 23063</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Stanimir Bozhilov</u>	Phone # <u>804/349-6061</u>
	Address <u>3006 Lincoln Ave, Richmond, VA, 23228</u>	Email <u>stan@fixandpaint.net</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>CPE Contractors</u>	Phone <u>804-441-8278</u>
	Address <u>3006 Lincoln Ave, Richmond, VA, 23228</u>	Email <u>estimate@fixandpaint.net</u>
	Contractor License Number <u>2705091578</u>	Type <u>Class A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install wall around water heater.</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>20</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>20</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$1,500.00</u>
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Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</u>

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

Signature of Applicant [Signature] Date 8/5/20

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

Todd Stealey of (address) 1930 Triple T Rd, Councilbluff affirm that I am the owner of a certain tract of parcel of land located at 1552 Shopped Town Rd, Councilbluff 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 2 # STORIES 1 CONSTRUCTION TYPE TB OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER N FIRE ALARM N MODIFICATION N

APPROVAL Code Official DATE 8-14-2020



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 656-5815 Fax (804) 656-5651
 TDD 711 VA Relay

Application Date: 8-5-20
 Permit Number: BP-2020-00737
 GPIN/Tax Map: 6119-09-71A3/17-1-0-82-0
 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.

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: Byrd Elementary School
2704 Hadensville - Fife Rd, Goochland, VA, 23063
 Owner: Goochland Co School Board Phone #: (804) 396-4015
 Address: 2938 River Rd W. Goochland 23063 Email: fsteeley@goochland.k12.va.us

APPLICANT INFORMATION
 Applicant/Contact: Stanimir Bozhilov Phone #: 804/349-6061
 Address: 3006 Lincoln Ave, Richmond, VA, 23228 Email: stan@fixandpaint.net

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED 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: 6/31/21

DESCRIPTION OF WORK
 Scope of Work: Install wall around water heater

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>20-</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>20</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$1,500.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 8/5/20

Application Fee	\$ <u>3000</u>
State Levy Fee	\$ <u>100</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>3000</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

T. Field Streeby of (address) 1940 Triple T Rd, Goochland affirm that I am the owner of a certain tract of parcel of land located at 2704 Hodensville/F.R. Rd, Goochland 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 Stomwater \$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 1 CONSTRUCTION TYPE Ib OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER N FIRE ALARM N MODIFICATION N

APPROVAL [Signature] DATE 8-14-2020

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: 8-5-20

Permit Number: BP-2020-00750

GPIN/Tax Map: 1708-00-5347

Issued: 8-18-2020

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>1006 SEAY Rd - MANAKIN Sabot, VA 23103</u>	
	Owner	Phone #
	<u>STEVEN CRAIG SHELL</u>	<u>804-245-1078</u>
	Address	Email
	<u>1006 SEAY Rd MANAKIN Sabot, VA 23103</u>	<u>STEVENCSHELL@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact	Phone #
	<u>STEVE SHELL</u>	<u>804-245-1078</u>
	Address	Email
	<u>1006 SEAY Rd MANAKIN Sabot, VA 23103</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Other	Amount	Date Paid
	<u>None</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	Setback/Height/Code
	<u>35' Min</u>			
	Side Setback	Side Setback	Flood Zone	
	<u>5'</u>			
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS	
	<u>Permit Application</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>30x51 METAL Building</u>			
	<u>DETACHED GARAGE</u>			
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)	
	<u>STORAGE</u>	<u>N/A</u>	<u>N/A</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
		<u>0</u>	<u>0</u>	<u>1</u>
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u>1830</u>	<u>1530</u>	<u>7830</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$18,400</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: Steve Shell Date: 8-3-20

Application Fee	235
Sign Fee	47
Seal Fee	250
Stamp Fee	
Other	
Total	265

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

STEVE SHELL of (address) 1006 SEAY RD affirm that I am the owner of a certain tract of parcel

of land located at 1006 SEAY RD 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.

Steve Shell 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 BH DATE 8/18/20

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: 7-30-20

Permit Number: BP-2020-00718

GPIN/Tax Map: 6759-18-7457 / 21-1-0-23-0

Issued: 8-18-2020

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>3541 Whitehall rd, Sandy Hook, VA. 23153</u>	
	Owner <u>Mike Fitzgerald</u>	Phone # <u>704-400-1731</u>
	Address <u>3541 Whitehall rd</u>	Email <u>mmdfitzgerald@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Mike Fitzgerald</u>	
	Address <u>3541 Whitehall rd</u>	Email <u>mmdfitzgerald@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>75' from Prop. Line / Row</u>	Center Line Setback <u>—</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>35' left</u>	Side Setback <u>5'</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>—</u>		

Planning & Zoning Officer: Dana [Signature] Date: 8/3/2020

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

DESCRIPTION OF WORK	Scope of Work: <u>30x44 - 871- garage</u>			
	Detached Garage <u>448 Finished for Bonus Room</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.	

448 | 871 | 1319

Building Only - Excludes All Trades Permits

Value of Work	<u>48000 \$48,592.50</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: 7/24/20

Application Fee	\$ <u>230.61</u>
State Levy Fee	\$ <u>4.01</u>
Septic/Well Fee	\$ <u>—</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>—</u>
SWP	\$ <u>—</u>
Total	\$ <u>260.28</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.

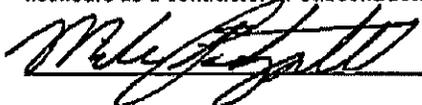
I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, Mike Fitzgerald of (address) 3541 Whitehall rd affirm that I am the owner of a certain tract of parcel of land located at 3541 Whitehall rd 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

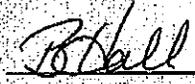
Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

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 _____ CONSTRUCTION TYPE VB OCCUPANT LOAD _____ CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL  DATE 8/18/20
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

Issued 8-17-2020
 Application Accepted: BID-2020-00732
 Old Map Number: 68-3-C-45-0
 GPIN: 7733-77-2103

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>47 EAST SQUARE LANE</u>		District		
	Owner <u>MARTIN Beyer</u>		Phone # <u>937-2260</u>		
	Address <u>47 EAST SQUARE LANE</u>				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage <u>.383</u>	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District		
	Front Setback <u>94'</u>	Center Line Setback	Rear Setback <u>36'</u>	C.U. Permit	Variance
	Side Setback <u>60'</u>	Side Setback <u>10'</u>	COA	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer _____ Date _____

Applicant/Contact: DAN Swords Phone 994-3429
 Email: DAN@bnwbuilders.com

CONTRACTOR INFORMATION	Contractor <u>BNW Builders</u>		Phone <u>994-3429</u>	
	Address <u>8601 Staples Mill Rd.</u>			
	Contractor License Number <u>2705108250</u>	Type <u>BID HIC</u>	Expiration <u>6-30-2022</u>	

Description of Work	Scope of Work: <u>Demo old deck, and build new w/ pvc decking and aluminum rails, with a 16'x13' covered porch, existing footprint</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. <u>377</u>	Finished Sq. Ft. <u>377</u>	Unfinished Sq. Ft. <u>377</u>	# of Bedrooms

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

VALUE OF WORK		Application Fee \$ <u>147.00</u>
Building <u>30,000</u>		Zoning Fee \$ <u>2</u>
Excludes All Trades Permits		Septic/Well Fee \$ _____
		State Levy Fee \$ <u>2.94</u>
		RLD \$ <u>119.94</u>

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



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: July 27, 2020

Permit Number: PD-2020-00711

GPIN/Tax Map: 4840-18-2008/20-1-0-65-A

Issued: 8-14-2020

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	<u>3035 Rocky Creek Lane, Gum Spring VA</u>		
	Owner	<u>John Coleman Martin 23065</u>		
APPLICANT INFORMATION	Address	<u>3035 Rocky Crk Lane</u>	Phone #	<u>804-398-9122</u>
	Address	<u>Gum Spring VA 23065</u>	Email	<u>epowellmartin@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact	<u>John Coleman Martin</u>	Phone #	<u>804-514-2459</u>
	Address	<u>3035 Rocky Crk Lane</u>	Email	<u>epowellmartin@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>None</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>55' from Row</u>	<u>—</u>	<u>5'</u>	
Side Setback	Side Setback	Flood Zone	<u>AI</u>	
<u>5'</u>	<u>5'</u>	<u>—</u>		

APPROVED REJECTED COMMENTS: —

Planning & Zoning Officer: Daniel Lloyd Date: 8/17/2020

CONTRACTOR INFORMATION	Contractor	<u>OWNER John Coleman Martin</u>	Phone	<u>804-398-9122</u>
	Address	<u>3035 Rocky Crk Lane Gum Spring VA 23065</u>	Email	<u>epowellmartin@gmail.com</u>
	Contractor License Number	Type	Expiration	

DESCRIPTION OF WORK	Scope of Work: <u>car port - 18x21 18 wide 21 deep/long</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	# of floors	Total Sq. Ft.
		<u>378</u>		<u>378</u> 590 <u>590</u>

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>37.52</u>
Value of Work	<u>\$2,000</u> \$5,670.00	State Levy Fee	\$ <u>.15</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>63.27</u>

Signature of Applicant: John Coleman Martin Date: July 27, 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 John Coleman Martin of (address) 3035 Rocky Creek Ln affirm that I am the owner of a certain tract of parcel of land located at Gum Spring, VA 23065 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.

John Coleman Martin 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 0 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE 8-13-20
Code Official



BUILDING PERMIT APPLICATION

Application Date: 8-3-2020
 Permit Number: BP-2020-00727
 GPIN/Tax Map: 6749-80-1802/29-15-0-13-0
 Issued: 8-14-2020

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

Residential Commercial

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

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

OWNER INFORMATION	Site Address <u>2545 Dogtown Rd.</u>	
	Owner <u>Dorothy & Louis Ruqus</u>	Phone #
	Address <u>2545 Dogtown Rd.</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>Delta Deck Co.</u>	
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from Prop. Line/Road</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA <u>A1</u>
	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>8/4/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>Delta Deck Co.</u>		Phone <u>804-543-7241</u>
	Address <u>2538 Fairground Rd.</u>		Email <u>deltadeckcompany@gmail</u>
	Contractor License Number <u>2705161359</u>	Type <u>RBC' 'HIC'</u>	Expiration <u>1-31-22</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build 15'x26' addition and 13'x16' Porch Living Room</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 <u>0</u>	# of Bedrooms <u>0</u>	# of floors
	Finished Sq. Ft. <u>390</u>	Unfinished Sq. Ft. <u>78</u>	Total Sq. Ft. <u>468</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>201.00</u>	
Value of Work <u>42,000</u>		State Levy Fee \$ <u>9.02</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>[Signature]</u> Date <u>8/14/20</u>		Septic/Well Fee \$	
		Zoning Fee \$ <u>25.00</u>	
		RLD \$	
		SWP \$	
		Total \$ <u>230.02</u>	

Ball 8/14/20 RS VA 2015

Issued 8-13-2020



ZONING COMPLIANCE APPLICATION COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office

P.O. Box 103

Goochland, VA 22063

Phone: (804) 556-5860

Web: www.co.goochland.va.us

FAX: (804) 556-5654

Office Use Only

Application File Date: 7-20-2020	Application No.: AP-2020-00693	Fee: \$25.00
Zoning Approval: Yes <i>David Lloyd</i>	No:	Date: 8/4/2020

Zoning Application Type: *Per Ms. Burns*
Please appropriate check box

Residential Accessory Structure – 256 sq. feet or less – structures over 256 sq. feet require a building permit

Farm Use Structure – Attached Farm Use Affidavit shall be completed and signed by property owner

Application Requirements

- Applicant shall submit two (2) sets of sealed surveyed site plans showing proposed location of building on property with setbacks clearly marked
- Applicant is responsible for locating the property lines and clearly marking them for inspection purposes and to assure setbacks are not violated

Applicant/Owner Information

Name of Property Owner: *Richard Locke Suzanne Gardner* Telephone: *804 301-5278*
 Address: *352 Rolling Lake Ct* Cell phone: *644*
Manakin Subst, Va 23103 FAX:
 E-mail:

Name of Applicant: *Same - Richard Locke* Telephone:
 Address: Cell phone:
 E-mail: FAX:

Property Information

Street Address: *352 Rolling Lake Ct* Zoning: *R-3*
 GPIN Number: *7715-28-7748* Acreage: *4.18 + .544 = 4.724*
 Existing Use: *Residential*
 Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire:

Project Information

1. Estimated square footage of the building(s): *240* 2. Value of Building: *4000*
 3. Written Description of Proposed Physical Improvements:
Detached Shed



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: 5/14/20 5-19-20

Permit Number: BP-2020-00405

GPIN/Tax Map: 6788-14-5525 / 32-18-0-33-0

Issued: 5-12-2020

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 2427 Bridgewater Drive, Maidens, VA	
	Owner Mary Allen	Phone # 540-314-1149
	Address 2427 Bridgewater Drive, Maidnes, VA	Email mjallen8688@gmail.com

APPLICANT INFORMATION	Applicant/Contact Kevin Brungard	Phone # 540-841-0006
	Address 2958 River Road West, Goochland, VA 23063	Email blueridge.kevin@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input 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>35' from Bridgewater</u>	Side Setback <u>15' / 35'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> OR REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>5/19/2020</u> RR			

CONTRACTOR INFORMATION	Contractor Blue Ridge Custom Homes LLC	Phone 804-614-4556
	Address 2958 River Road West	Email blueridgecustomhomes@gmail.com
	Contractor License Number 2705 086712A	Type Class A

DESCRIPTION OF WORK	Scope of Work: <u>living room - bedroom</u> Adding a two story addition with full kitchen, 2 1/2 bathrooms, deck with 2 screen porchs and garage				
	Proposed Use Residential	Current Use residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2.5	# of Bedrooms 1	# of floors 2
	Finished Sq. Ft. 1252 inside	Deck <u>Screen Porches 348</u>	Unfinished Sq. Ft. 456 garage + storage	<u>Deck 200</u>	Total Sq. Ft. 2502

Building Only - Excludes All Trades Permits		Application Fee \$ <u>597.00</u> State Levy Fee \$ <u>11.94</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>633.94</u>
Value of Work	\$130,000	
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	<u>[Signature]</u>	Date <u>5-14-20</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Aurora Title Company Telephone: 804-729-9005

Mailing Address: 2203 Pump Road, Henrico VA 23233

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 OCCUPANT LOAD 10 CODE EDITION 15

FIRE SPRINKLER — FIRE ALARM — MODIFICATION —

APPROVAL MICHAEL BROCKANE DATE 7-24-20

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: 7-16-20
 Permit Number: BSP-2020-00692
 GPIN/Tax Map: 6778-96-9088-1 32-18-0-6-0
 Issued: 8-7-2020
 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: 2431 Gammons Creek Drive Maidens VA 23102
 Owner: Barry Sweitzer + Mary-Jo Sweitzer Phone #: 804.556-0041
 Address: 2431 Gammons Ctk Dr Maidens VA 23102 Email: sweitzer7@yahoo.com

APPLICANT INFORMATION
 Applicant/Contact: Barry Sweitzer + Mary-Jo Sweitzer Phone #: 804.556.0041
 Address: 2431 Gammons Creek Dr Maidens VA 23102 Email: sweitzer7@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Bridgewater Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 55' from Prop. Line Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____
 Side Setback: 15'/35' Side Setback: 15'/35' Flood Zone: C+A
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Lloyd Date: 7/27/2020 RR

CONTRACTOR INFORMATION
 Contractor: OWNER Phone: _____
 Address: _____ Email: _____
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: *deck addition to existing home APPROX 16'x60'

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>900 ft²</u>		Unfinished Sq. Ft. _____		Total Sq. Ft. <u>900 ft²</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>\$10000</u>	<u>DECK ADDITION ONLY</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: Barry Sweitzer Date: 7-16-20

Application Fee	\$ <u>57.00</u>
State Levy Fee	\$ <u>1.14</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>83.14</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: N/A Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I BARRY SWETZER of (address) 2431 Gammons Creek Drive Maidens VA 23102 affirm that I am the owner of a certain tract of parcel of land located at 2431 Gammons Creek Drive Maidens VA 23102 and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[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 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 8/7/20

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

Residential Commercial

Application Date: 8/3/20
 Permit Number: BP-2020-00731
 GPIN/Tax Map: 6777-46-3053/43-42-D-19-0
 Issued: 8-7-20
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>1748 Fishers Pond Drive Marden, VA 23102</u>	
	Owner <u>Steve Thompson Builder LLC</u>	Phone # <u>539-2524</u>
APPLICANT INFORMATION	Address <u>1390 B Broad Street Rd Oilville, VA 23129</u>	Email <u>stevethompsonbuilder@comcast.net</u>
	Applicant/Contact <u>Oilville, VA 23129</u>	Phone # <u>not</u>
	Address	Email

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

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

DESCRIPTION OF WORK	Scope of Work: <u>Finish Atrc for media room</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>0</u>	WATER Public/Private <u>0</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors
	Finished Sq. Ft. <u>720</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>720</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>124.50</u>
Value of Work <u>25,000</u>		State Levy Fee \$ <u>2.49</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Steve Thompson</u> Date <u>8/3/20</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>126.99</u>

7-17-20



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: July 16, 2020

Permit Number: BP-2020-00679

GPIN/Tax Map: 3-5-0-C-0 / 5892-77-6660

Issued: 8-7-20

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 4148 Shannon Hill Road, Columbia, Virginia 23038	
	Owner Debra K & Harold L Clements	Phone # (804) 837-9036
	Address 4148 Shannon Hill Road, Columbia, Virginia 23038	Email Doormansam@gmail.com

APPLICANT INFORMATION	Applicant/Contact Karen Vasquez		Phone # (804) 318-5997
	Address 2410 Southland Drive, Chester, Virginia 23831		Email Kvasquez@jeswork.com

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

CONTRACTOR INFORMATION	Contractor JES Construction, LLC		Phone (804) 495-4646
	Address 2410 Southland Drive, Chester, Virginia 23831		Email N/A
	Contractor License Number 2705068655	Type A	Expiration 04/31/2022

DESCRIPTION OF WORK	Scope of Work: Install six (6) Intellijack to provide additional support for framing system.				
	Proposed Use Existing		Current Use		Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft. 1,764

Building Only - Excludes All Trades Permits

Value of Work	5,970.00
---------------	-----------------

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 Karen Vasquez Date July 16, 2020

Application Fee	\$ <u>38.86</u>
State Levy Fee	\$ <u>.78</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>39.64</u>



BUILDING PERMIT APPLICATION

Application Date: 7/22/20

Permit Number: BP 2020-00681

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

Issued: 8-6-20

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.

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 1702 Bridgewater Court	
	Owner Evan S. Weiner	Phone # 804-677-9544
	Address 1702 Bridgewater Court, Maidens, VA 23102	Email esw@evanweiner.com

APPLICANT INFORMATION	Applicant/Contact Evan S. Weiner	Phone # 804-677-9544
	Address 1702 Bridgewater Court, Maidens, VA 23102	Email esw@evanweiner.com

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 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>7/22/2020</u> RR			

CONTRACTOR INFORMATION	Contractor Homeowner	Phone 804-677-9544
	Address 1702 Bridgewater Court, Maidens, VA 23102	Email esw@evanweiner.com
	Contractor License Number N/A - Homeowner	Type _____

DESCRIPTION OF WORK	Scope of Work: Install pre-engineered 20x44 inground liner pool kit with automatic cover				
	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>880</u>	Total Sq. Ft. <u>980</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>120.90</u> State Levy Fee \$ <u>25.00</u> <u>2.12</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> R.L.D. \$ _____ S.W.E. \$ _____ Total \$ <u>178.32</u>
Value of Work	<u>\$7000</u> <u>\$24,200.00</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	Date <u>7/22/20</u>	



BUILDING PERMIT APPLICATION

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

Application Date: 7-16-20Permit Number: BP-2020-00668GPIN/Tax Map: 0767-37-9907 / 43-1-0-15-0Issued: 8-6-20

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 <u>2574 FAIRGROUNDS RD MAIDENS VA</u>				
	Owner <u>Patsy G. Bartell</u>		Phone # <u>804 339-7133</u>		
	Address <u>5084 ST PAULS CH RD GOOCHLAND VA</u>		Email <u>LESANDPatsy1973</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Lester Bartell</u>		Phone # <u>@GMAIL.COM</u> <u>804 334-9647</u>		
	Address <u>5084 ST PAULS CH RD GOOCHLAND VA 23063</u>		Email <u>LESAND Patsy1973</u> <u>@GMAIL.COM</u>		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____	
	Front Setback <u>107' 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>7/17/2020</u>	<u>A2</u>	
CONTRACTOR INFORMATION	Contractor <u>SELF</u>		Phone <u>804 334-9647</u>		
	Address <u>5084 ST PAULS CH RD GOOCHLAND VA</u>		Email _____		
	Contractor License Number _____	Type _____	Expiration _____		
DESCRIPTION OF WORK	Scope of Work: <u>BUILD CONCRETE PAD AND PLACE 24' X 30' STEEL GARAGE / STORAGE BUILDING</u>				
	Proposed Use <u>STORAGE</u>	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed) _____		
	SEWER <u>N/A</u> Public/Private	WATER <u>N/A</u> Public/Private	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</u>	# of floors <u>1</u>
	Finished Sq. Ft. <u>720'</u>	Unfinished Sq. Ft. _____	Total Sq. Ft. <u>720'</u>		
Building Only - Excludes All Trades Permits			Application Fee \$ <u>70.50</u>		
Value of Work <u>\$ 13,000</u>			State Levy Fee \$ <u>1.41</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>96.91</u>		
Signature of Applicant <u>[Signature]</u>			Date <u>7-14-20</u>		



BUILDING PERMIT APPLICATION

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

Application Date: ⁷⁻¹⁷⁻²⁰ ~~July 16, 2020~~

Permit Number: BP-2020-00678

GPIN/Tax Map: 6727-13-6994 / 391-0-92-A

Issued: 8-6-20

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.

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 1741 Haskin Road, Goochland, Virginia 23063	
	Owner Poulton William	Phone # (804) 517-9126
	Address 1741 Haskin Road, Goochland, Virginia 23063	Email Poultonwc@gmail.com

APPLICANT INFORMATION	Applicant/Contact Karen Vasquez		Phone # (804) 318-5997
	Address 2410 Southland Drive, Chester, Virginia 23831		Email Kvasquez@jeswork.com

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

CONTRACTOR INFORMATION	Contractor JES Construction, LLC		Phone (804) 495-4646
	Address 2410 Southland Drive, Chester, Virginia 23831		Email N/A
	Contractor License Number 2705068655	Type A	Expiration 04/31/2022

DESCRIPTION OF WORK	Scope of Work: Install four (4) Intellijack and 18' Linear Feet of Supplemental Beam. Sister 264' Linear Feet of Floor Joist. Replace 38' Linear Feet of Main Beam.				
	Proposed Use Existing	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1,152		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>86.04</u>
Value of Work 16,474.80		State Levy Fee \$ <u>1.72</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Karen Vasquez</u> Date <u>July 16, 2020</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>87.86</u>

B Hall *RS / VB / 2015 /* *8/6/2020*



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:

Permit Number:

BP-2020-00186

GPIN/Tax Map:

6728-45-1291/27-3-0-2-C

Issued:

8-6-2020

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 2142 HASKIN RD	
	Owner CLARA M. BRICE	Phone # 804-457-4763
	Address 2142 HASKIN RD	Email

APPLICANT INFORMATION	Applicant/Contact Glenn Burton	Phone # 804 822 7678
	Address 1504 Southampton Ave	Email VERIZON.NET littlebbblue1204@

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 GLENN BURTON	Phone 804-822-7678
	Address 1504 Southampton Ave	Email VERIZON.NET littlebbblue1204@
	Contractor License Number 2705073358	Type B

DESCRIPTION OF WORK	Scope of Work: Screen in porch with roof over deck 9x24				
	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. 216	Unfinished Sq. Ft.	Total Sq. Ft. 216		

Building Only - Excludes All Trades Permits

Value of Work 6878.05

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 7/14/20

Application Fee	\$ 43.90
State Levy Fee	\$.87
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 44.27

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, CLARA BRUCE of (address) 2142 HASKIN RD affirm that I am the owner of a certain tract of parcel of land located at 2142 HASKIN RD 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.

CLARA M BRUCE 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 B Hall DATE 8/5/20

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: 7-31-2020
 Permit Number: BP-2020-00724
 GPIN/Tax Map: 7723-26-0038/66-1-0-2-0
 Issued: 8-4-20
 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 12829 River Road Richmond, VA 23238	Phone # 804-708-9500
	Owner Benedictine College Preparatory	Email jgrapes@benedictinecollegeprep.org
APPLICANT INFORMATION	Address 12829 River Road Richmond, VA 23238	Phone # 804-233-9856
	Applicant/Contact John Locher	Email john@taylor-parrish.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>5'</u>	Center Line Setback	Rear Setback	CUP/Variance/COA —
Side Setback —	Side Setback	Flood Zone	<u>A2/R1</u>	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer [Signature] Date 8/3/2021

CONTRACTOR INFORMATION	Contractor Taylor & Parrish	Phone 804-233-9866
	Address 3941 Deep Rock Road, Ste A, Richmond, VA 23233	Email john@taylor-parrish.com
	Contractor License Number <u>2701004518</u>	Type <u>Class A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Monument Sign - Benedictine</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits
 Value of Work \$11,600.00

Application Fee	\$ <u>87-</u>
State Levy Fee	\$ <u>1.74</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>138.74</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] Date 7/31/2020



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: 1-9-20
 Permit Number: BP-2020-00017
 GPIN/Tax Map: 7107-90-7617 / 46-32-0-30
 Issued: 8-5-20
 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>465 BROAD STREET ROAD</u>	
	Owner <u>SALEM BAPTIST CHURCH</u>	Phone # <u>804-784-1919</u>
APPLICANT INFORMATION	Address <u>465 BROAD STREET ROAD, MANAKIN, VA</u>	
	Applicant/Contact <u>ZACK EBINGEN, PASTOR</u>	Email <u>zack@saalem baptist church in</u>
	Address	Phone # <u>804-784-1919</u>
		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>5'</u>	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA <u>CU-2020-2</u>
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Approved in accordance to conditions</u> Planning & Zoning Officer <u>[Signature]</u> Date <u>7/24/2020</u> <u>Outlined in C.U.P. A2</u>			

CONTRACTOR INFORMATION	Contractor <u>CORNERSTONE, LLC (Mr. Davidson)</u>		Phone <u>804-539-8006</u>
	Address <u>540 BROAD ST RD, MANAKIN, VA</u>		Email <u>cornerstone LLC msn.com</u>
	Contractor License Number <u>2705070485</u>	Type _____	Expiration <u>7-31-20</u>

DESCRIPTION OF WORK	Scope of Work: <u>Installation of Permanent Sign</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>175.50</u> State Levy Fee \$ <u>3.45</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>-60.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>225.95</u>
Value of Work	<u>\$23,000</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant <u>[Signature]</u>		Date <u>1-7-2020</u>



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Date	8.7.20
Permit #	20.745
Old Map #	
G-Pin	7715-13-7870

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	District
997 MANAKIN ROAD	

PROPERTY OWNERSHIP

Name	ELBERT SNEAD	Phone	804-784-5667
Mailing Address	SAME AS JOB LOCATION		

APPLICANT

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

CONTRACTOR

Name	HAYNIE ELECTRICAL SERVICES INC DBA J&M ELECTRICAL SERVICES		Phone	804-276-5580
Mailing Address	400 TURNER ROAD N CHESTERFIELD VA 23225		License Type	Class
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	ELEC,PLB,GFC	A
		2705099807A	Expiration	10/31/2021

DESCRIPTION OF WORK

install (1) 22kw Automatic Standby Generator with (1) 200amp ATS Switch			
# of Baths	Service Size	Power Company	Inquiry #

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

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

_____(Owner)

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

_____(Notary) My commission expires _____

Signature of Applicant M. Haynie
Approval Fisher Date 8.7.20

Value of work: 8800.00
Permit fee: \$61.81
issue date: 8.7.20



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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.

Date	8.7.20
Permit #	20.747
Old Map #	
G-Pin	

LOCATION

Street Address 832 Elmshie Lane	District
------------------------------------	----------

PROPERTY OWNERSHIP

Name John Hockett	Phone 804-629-9004
Mailing Address 832 Elmshie Lane	

APPLICANT

Name Hill Electrical Inc	Phone 804-746-3122
E-Mail Address HillElectrical@HillElectrical.net	

CONTRACTOR

Name Hill Electrical Inc	Phone 804-746-3122
Mailing Address PO Box 158 Mechanicsville VA 23111	License Type Electrical
Class A	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701009472
	Expiration 1-31-2021

DESCRIPTION OF WORK

install 22KW generator and transfer switch			
# of Baths	Service Size	Power Company	Inquiry #

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

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

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

_____(Notary) My commission expires _____

Signature of Applicant Fisher

Value of work: 1,800.00

Permit fee: 30.60

Approval 8.7.20

8.7.20



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Date 7/14/2020

Type:

- Fire
- Electrical
- Mechanical
- Plumbing
- Gas

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

Permit #

GPIN

Tax Map

2112020-753

Please call or visit our website to calculate fee

www.goochlandva.us/permitcalc

LOCATION

Street Address

2120 Jockey Ridge Rd

PROPERTY OWNERSHIP

Name Michael Hodson

Phone 731-2635

Mailing Address 2120 Jockey Ridge Rd. Maidens, VA. 23102

Email

APPLICANT

Name

Phone

Address

Email

CONTRACTOR

Name CURRENT ELECTRIC INC

Phone 804-833-7705

Mailing Address 1618 REAMS ROAD POWHATAN VA 23139

Email CURRENTVA@OUTLOOK.COM

Gas Certification

YES

NO

State License Number

2705069990

Expiration

7/31/2021

License Type

ELE

Class

A

DESCRIPTION OF WORK

22kW

WIRE OWNER PROVIDE GENERATOR. NOTE: TRANSFER SWITCH IS EXISTING.

of Bathrooms

Service Size

Power Company

Inquiry #

Value of Work (required)

1000

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:

Date: 7/14/2020

Approval:

Fisher
\$30.60

Office Use Only

Approval date:

8-11-20

Permit Fee:

Issued date:

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

(owner's affidavit 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 inspection will be made until the permit has been issued.

Date 08/11/2020
Permit # ELI-2020-00358
GPIN
Tax Map

www.goochlandva.us/permitcalc

LOCATION

Street Address
1851 Taylor Rd Crozier VA 23

PROPERTY OWNERSHIP

Name Earl Taylor	Phone (804)338-3638
Mailing Address 1851 Taylor Rd Crozier VA 23039	Email eataylor@goochlandva.us

APPLICANT

Name Scott Kincaid	Phone (804)212-5261
Address 7197 Mill Way Dr Mechanicsville VA 23111	Email kin14@henrico.us

CONTRACTOR

Name Kincaid Electric Services	Phone (804)212-5261			
Mailing Address 7197 Mill Way Dr Mechanicsville VA	Email kincaidelectric@aol.com			
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705091343	Expiration 1-31-2021	License Type ELE	Class C

DESCRIPTION OF WORK

Electrical wiring for new residential home. Also wire in new back-up generator system **22KW**

# of Bathrooms 3	Service Size 200amp	Power Company Dominion Power	Inquiry # 10381799
Value of Work (required) \$9200.00			

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

Signature of Applicant: Date: 08/11/2020

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>8-12-2020</u>
Permit Fee: <u>63.65</u>		Issued date: <u>8-12-2020</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

Date: 8-25-2020

Permit #: ELI-2020-00804

GPIN

Tax Map

LOCATION

Street Address: 841 PRESTBURG LANE

PROPERTY OWNERSHIP

Name: <u>MIKE ELLIS</u>	Phone:
Mailing Address: <u>841 PRESTBURG LANE, MANAKIN SALEM VA 23103</u>	Email: <u>MICHAELSELLIS2003@YAHOO.COM</u>

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

INSTALL 20KW GENERATOR AND 2 200AMP ATS'S

# of Bathrooms	Service Size	Power Company	Inquiry #
	<u>10,500</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: Ric Seaborn Date: 8/25/20

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>8-25-2020</u>
Permit Fee: <u>109.61</u>		Issued date: <u>8-25-2020</u>

Owner's Statement Required if Owner Is the Applicant

I _____ of (address) _____

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

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 Signature)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5851 TDD (804) 556-5317

Date	08/20/2020
Permit #	01-2020-790
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	1519 WINDSOR WAY	District	
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PROPERTY OWNERSHIP

Name	DEBBIE BROOKS	Phone	804-748-4492
Mailing Address	1519 WINDSOR WAY		

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

generator

INSTALL 22 KW 200 AMP ATS, REPLACEMENT OF 200 AMP PANELS (2)

INSTALL 2 SURGE PROTECTORS, ADDITIONAL 200 AMP ATS

# of Baths	Service Size	Power Company	Inquiry #
	400A	DOM	N/A

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

Approval

Date

Value of Work:

Permit fee:

Issue date:

14500.00

587.98

8-27-20

Scan in



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	08/20/20
Permit #	2020-816
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	833 WOODCOVE CT	District	
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PROPERTY OWNERSHIP

Name	PETER SUYAMA	Phone	703-919-8184
Mailing Address	833 WOODCOVE CT		

APPLICANT

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

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-764-4533
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	VPITTMAN@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037620
Expiration	11/2020	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, 200 AMP ATS			
# of Baths	Service Size	Power Company	Inquiry #
	200A	DOM	N/A

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

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

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

(Signature)

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

(Notary)

My commission expires _____

Value of Work: 10,500.00

Signature of Applicant

Permit fee: 69.62

Approval

Date

8-27-20

Issue date:

8-27-20



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 8-27-2020

Permit #: ELL-2020-00763

GPIN:

Tax Map:

LOCATION

Street Address: 2622 Dogtown Rd.

PROPERTY OWNERSHIP

Name: DEREK FUNN Phone: 804 305-1908

Mailing Address: 2622 Dogtown Rd. Goochland VA. 23063 Email: -

APPLICANT

Name: BRIAN PARNISH Phone: 804 254-9400

Address: 2556 Gayton Centre Dr. Email: brianel@richmond.com

CONTRACTOR

Name: ELECTRICAL & LIGHTING SOLUTIONS, INC Phone: 804 254-9400

Mailing Address: 2556 Gayton Centre Dr. Richmond VA 23234 Email:

Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705086991	Expiration: 7-31-2022	License Type: ELE	Class: A
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DESCRIPTION OF WORK

INSTALL Kohler 12kw Generator and Automatic transfer Switch.

# of Bathrooms	Service Size: 200A	Power Company: N/A	Inquiry #: N/A
Value of Work (required): \$4000 ⁰⁰			

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

Signature of Applicant: Date: 8-27-2020

Approval: Fisher	Office Use Only	Approval date: 8-27-2020
Permit Fee: 39.78		Issued date: 8-27-2020

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date	8/24/20
Permit #	21-2020-820
GPIN	
Tax Map	67-25-0-50-0

LOCATION

Street Address **63 WEST SQUARE DRIVE 23238**

PROPERTY OWNERSHIP

Name	NANCY RIDLER		Phone	804-708-2363
Mailing Address	63 W SQUARE DRIVE	23238	Email	NARIDLER@AOL.COM

APPLICANT

Name	Virginia Power Solutions	Phone	804-365-0263	
Address	10102 Whitesel Road, B, Ashland, VA 23005		Email	service@virginiapowersolutions.com

CONTRACTOR

Name	Virginia Power Solutions		Phone	804-365-0263					
Mailing Address	10102 Whitesel Road, B, Ashland, VA 23005		Email	service@virginiapowersolutions.com					
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705123991	Expiration	8/31/22	License Type	ELE, GFC	Class	B

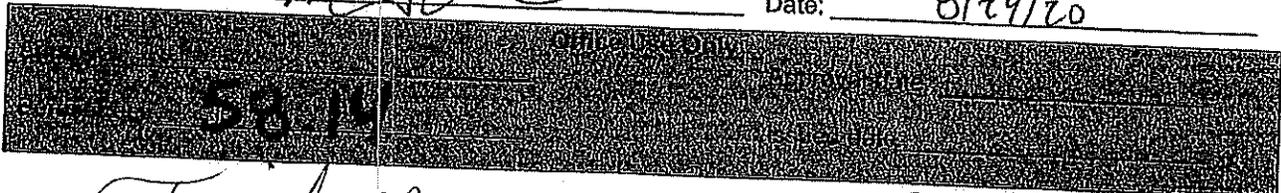
DESCRIPTION OF WORK

REPLACE EXISTING GENERATOR WITH 16KW GENERATOR WITH TO EXISTING SWITCH

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$8000.00			

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

Signature of Applicant: Date: 8/24/20



Fisher (owner's statement on back) 8-27-20