



BUILDING PERMIT APPLICATION

Application Date: 2/18/20Permit Number: DP-2020-00149GPIN/Tax Map: 7726-71-9334/59-5-0-1-0Issued: 1-5-2021This 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>1000 AVERY POINT WAY</u>		Phone # <u>23233</u>	
	Owner <u>AVERY POINT LLC DAVID BERRIEN</u>		Phone # <u>410 402 2484</u>	
APPLICANT INFORMATION	Address <u>701 MAIDEN CHOICE LN, BARTOWNE MD 21228</u>		Email <u>DAVID.BERRIEN@ERICKSON.COM</u>	
	Applicant/Contact <u>MIKE STUMPFOLL / MOSELEY ARCHITECTS</u>		Phone # <u>CELL-443 889 2239</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>1414 KEY HOLE BARTOWNE MD 21230</u>		Email <u>MSTUMPFOLL@MOSELEYARCHITECTS.COM</u>	
	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100' from Prop. Line</u>	Center Line Setback <u>30'</u>	Rear Setback <u>50'</u>	CUP/Variance/COA <u>POD-2019-22</u>
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer <u>David Ford</u>		Date <u>3/27/2020</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>COMMUNITY BLDG. I. COMMONS BLDG -</u> <u>NEW CONSTRUCTION FOR COMMUNITY BUILDING WITH POOL AND APARTMENTS</u> <u>AGNE.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors <u>3 + P5MNT</u>
	Finished Sq. Ft. <u>70,848</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>70,848</u>		

Building Only - Excludes All Trades Permits		Application Fee	<u>\$70,091.03</u>
Value of Work	<u>9,345,471.00</u>	State Levy Fee	<u>\$1,401.82</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>
Signature of Applicant <u>Michael Stumpfoll</u> Date <u>2/18/20</u>		RLD	\$
		SWP	\$
		Total	<u>\$71,592.85</u>



BUILDING PERMIT APPLICATION

Application Date: 2/18/20Permit Number: 2020-00150GPIN/Tax Map: 790-11-933A/59-5-0-1-0Issued: 1-5-2021

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>3000 AVERY POINT WAY</u>		<u>23233</u>
	Owner <u>AVERY POINT LLC DAVID BERRIEN</u>	Phone # <u>410 402 2484</u>	
	Address <u>701 MARIEN CHOICE LN BALTIMORE MD 21228</u>	Email <u>DAVID.BERRIEN@ECKERSON.COM</u>	
APPLICANT INFORMATION	Applicant/Contact <u>MIKE STUMPFOLL / MOSELEY ARCHITECTS</u>		Phone # <u>410-443-889 2239</u>
	Address <u>1414 KEY HOLE BALTIMORE MD 21230</u>		Email <u>MSTUMPFOLL@MOSELEYARCHITECTS.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100' from Property line</u>	Center Line Setback	Rear Setback <u>50'</u>	CUP/Variance/COA <u>POD-2019-22</u>
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Landscape Package C.</u>			
Planning & Zoning Officer <u>David Stumpfoll</u>		Date <u>3/27/2020</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>RESIDENTIAL BUILDING 1</u>			
	New construction for residential apartment building #1. for every point			
	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
	Finished Sq. Ft. <u>159,928</u>		Unfinished Sq. Ft.	Total Sq. Ft. <u>159,928</u>

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>163,126.41</u>
Value of Work	<u>16,537,364.00 / 21,750,208.00</u>	State Levy Fee	\$ <u>3,262.53</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>166,489.09</u>
Signature of Applicant <u>Michael Stumpfoll</u>		Date <u>2/18/20</u>	



BUILDING PERMIT APPLICATION

Application Date: 2/18/20

Permit Number: 2020-00151

GPIN/Tax Map: 7726-71-9334 / 59-5-0-1-0

Issued: 1-5-2024

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>9000 AVERY POINT WAY</u>		<u>23233</u>
	Owner <u>AVERY POINT LLC</u>	<u>DAVID BERRIEN</u>	Phone # <u>410 402 2484</u>
	Address <u>701 MAIDEN CHOICE LN BALTIMORE MD 21228</u>		Email <u>DAVID.BERRIEN@PICKSON.COM</u>
APPLICANT INFORMATION	Applicant/Contact <u>MIKE STUMPFOLL / MOSELEY ARCHITECTS</u>		Phone # <u>CELL-443 889 2239</u>
	Address <u>1414 KEY HWY BALTIMORE MD 21230</u>		Email <u>MSTUMPFOLL@MOSELEYARCHITECTS.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>100' from Prop. Line</u>	Center Line Setback _____	Rear Setback <u>50'</u>	CUP/Variance/COA <u>POD-2019-00022</u>
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Landscape Package</u> Planning & Zoning Officer <u>David [Signature]</u> Date <u>3/07/2020</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>RESIDENTIAL BLDG. 2</u>		
	New construction for residential apartment building #2 for <u>Avery Point Community Ctr</u>		
	Proposed Use <input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	Current Use <input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) _____
	# of Bathrooms _____	# of Bedrooms _____	# of floors <u>4</u>
Finished Sq. Ft. <u>142,876</u>		Unfinished Sq. Ft. _____	Total Sq. Ft. <u>142,876</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>14,724,096.00</u> ¹⁰⁰ <u>21,750,208.00</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 Michael Stumpfoll Date 2/18/20

Application Fee	\$ <u>163,126.56</u>
State Levy Fee	\$ <u>3,262.53</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>166,489.09</u>



BUILDING PERMIT APPLICATION

Application Date: 11/30/2020

Permit Number: BP-2020-01179

GPIN/Tax Map: 7725-06-9394 / 58-54-4-19-0

Issued: 1-4-21

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 12048 Talavera Terrace <i>Richmond, VA 23238</i>	Phone # 6094103035
	Owner HHHunt Homes, LLC	Email agshafi@hhhunthomes.com
APPLICANT INFORMATION	Address 11237 Nuckols Road Glen Allen, VA 23059	Phone # 6094103035
	Applicant/Contact Amir Shafi	Email agshafi@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>Dec</i>
	Front Setback <i>25' from Prop Line / Prop</i>	Center Line Setback —	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback <i>10'</i>	Side Setback —	Flood Zone <i>X</i>	

APPROVED REJECTED COMMENTS: ** Cash Proffer due before issuing C.O. RPHD*

Planning & Zoning Officer: *David Floyd* Date: *12/1/2020* ** Survey to locate SETBACKS*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor
		Expiration 1/31/2021

Scope of Work: 5 unit townhome with attached garages.

Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,125 square feet		
SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
Finished Sq. Ft. 2239	Unfinished Sq. Ft. 424	Total Sq. Ft. 2663		

Building Only - Excludes All Trades Permits

Value of Work ~~\$100,000~~ \$271,626.00

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 11/30/2020

Application Fee	\$ 2037.20
State Levy Fee	\$ 40.74
Septic/Well Fee	\$
Zoning Fee	\$ 100-
RLD	\$ 100-
SWP	\$
Total	\$ 2277.94



BUILDING PERMIT APPLICATION

Application Date: 11/30/2020

Permit Number: BP-2020-01180

GPIN/Tax Map: 7725-06-9390/58-54-4-20-0

Issued: 1-5-21

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 12046 Talavera Terrace <i>Richmond, VA 23238</i>	Phone # 6094103035
	Owner HHHunt Homes, LLC	Email agshafi@hnhunthomes.com

APPLICANT INFORMATION	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hnhunthomes.com
	Applicant/Contact Amir Shafi	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hnhunthomes.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 / Row</i>	Center Line Setback <i>---</i>	Rear Setback <i>25'</i>	CUP/Variance/COA <i>---</i>
	Side Setback <i>---</i>	Side Setback <i>---</i>	Flood Zone <i>X</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <i>*Cash Pmt due before issuing C.O. R.P.U.D. Survey locate Se Grades</i>		
	Planning & Zoning Officer <i>David Floyd</i>	Date <i>12/2/2020</i>		

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hnhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,125 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 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 \$100,000 \$265,608.00

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 11/30/2020

Application Fee	\$ 1992.00
State Levy Fee	\$ 39.84
Septic/Well Fee	\$
Zoning Fee	\$ 100.-
RLD	\$ 100.-
SWP	\$
Total	\$ 2231.90



BUILDING PERMIT APPLICATION

Application Date: 11/30/2020

Permit Number: BP-2020-01181

GPIN/Tax Map: 7725-06-9297/58-54-4-21-D

Issued: 1-5-21

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 12044 Talavera Terrace <i>Richmond, VA 23238</i>	
	Owner HHHunt Homes, LLC	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hnhunthomes.com

APPLICANT INFORMATION	Applicant/Contact Amir Shafi	
	Address 11237 Nuckols Road Glen Allen, VA 23059	Phone # 6094103035 Email agshafi@hnhunthomes.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>Dec</i>
	Front Setback <i>25' from Prop Line / Rows</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 setbacks</i>			

Planning & Zoning Officer *David Boyd* Date *12/2/2020*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@hnhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,125 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

Value of Work	\$100,000 <i>\$280,602.00</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 11/30/2020

Application Fee	<i>\$2104.52</i>
State Levy Fee	<i>\$42.09</i>
Septic/Well Fee	\$
Zoning Fee	<i>\$100-</i>
RLD	<i>\$100-</i>
SWP	\$
Total	<i>\$2346.61</i>



BUILDING PERMIT APPLICATION

Application Date: 11/30/2020

Permit Number: BP-2020-01182

GPIN/Tax Map: 7725-06-9294/58-54-4-22-0

Issued: 1-5-21

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 12042 Talavera Terrace <i>Richmond, VA 23238</i>	
	Owner HHHunt Homes, LLC	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	

APPLICANT INFORMATION	Applicant/Contact Amir Shafi		Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@hnhunthomes.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>Dec</i>
	Front Setback <i>25' from Prop. Line/Road</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 setbacks.</i>			

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@hnhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,125 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 \$ <i>2104.52</i>	
Value of Work	\$100,000 <i>\$280,602.00</i>	State Levy Fee	\$ <i>42.09</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.-</i>
		RLD	\$ <i>100.-</i>
		SWP	\$
		Total	\$ <i>2346.61</i>
Signature of Applicant <i>[Signature]</i>		Date 11/30/2020	



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: 11/30/2020

Permit Number: BP-2020-01183

GPIN/Tax Map: 7725-06-9290 / 58-54-4-23-D

Issued: 1-5-21

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 12040 Talavera Terrace <i>Richmond, VA 23238</i>	
	Owner HHHunt Homes, LLC	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hhhunthomes.com

APPLICANT INFORMATION	Applicant/Contact Amir Shafi		Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@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 PL/ROW</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>	<i>R.P.U.D</i>
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>* Cash Proffer due before issuing C.O. * Survey locate setbacks.</i>			
	Planning & Zoning Officer: <i>David Floyd</i>		Date: <i>12/3/2020</i>	

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,125 square feet		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2239	Unfinished Sq. Ft. 424	Total Sq. Ft. 2663		

Building Only - Excludes All Trades Permits

Value of Work: *\$100,000* *\$271,626.00*

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: 11/30/2020

Application Fee	\$ <i>2039.20</i>
State Levy Fee	\$ <i>40.74</i>
Septic/Well Fee	\$
Zoning Fee	\$ <i>100-</i>
RLD	\$ <i>100-</i>
SWP	\$
Total	\$ <i>2279.94</i>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/17/2020

Permit Number: BP-2020-01265

GPIN/Tax Map: 7733-27-3791

Issued: 1-4-21

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>32 LOWER TUCKAHOE ROAD EAST</u>	
	Owner <u>SHAWN HANDLEY</u>	Phone # <u>804 288 4999</u>
APPLICANT INFORMATION	Address <u>32 LOWER TUCKAHOE ROAD EAST</u>	
	Applicant/Contact <u>TOM PAUL</u>	Phone # <u>804 837-8998</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>15 EAST GLENBROOKE CIRCLE</u>	
	Email <u>TOM@PDCVA.COM</u>	

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>PREMIERE DESIGN & CON., INC</u>		Phone <u>804 837 8998</u>
	Address <u>15 EAST GLENBROOKE CIRCLE</u>		Email <u>TOM@PDCVA.COM</u>
Contractor License Number <u>A 2705-043273</u>		Type <u>G.C.</u>	Expiration <u>1/31/2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>ADD OPEN PORCH ROOF Porch is existing</u>		
	Proposed Use <u>SFD</u>	Current Use <u>SAME</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private	WATER Public/Private	# of Bathrooms # of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>400</u>	Unfinished Sq. Ft. Total Sq. Ft.

Building Only - Excludes All Trades Permits

Value of Work <u>15,000</u>	Application Fee \$ <u>79.50</u>
	State Levy Fee \$ <u>1.59</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ _____
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>81.09</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 12/17/2020

BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-8-20
 Permit Number: BP-2020-01212

GPIN/Tax Map: 6936-06-3942 / 40-8-0-D-2
 Issued: 1-5-21

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>1461 ROCKCASTLE ROAD Goochland, VA 23063</u>	
	Owner <u>MATT TONGY</u>	Phone # <u>804-878-5028</u>
	Address <u>3898 OLD STAGE ROAD Goochland VA 23063</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>JIM STARK</u>	Phone # <u>804 519 6270</u>
	Address <u>1707 SHALLOW WOOD RD. MANASSAS - SHOOT VA 23103</u>	Email <u>JIM STARK @ 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>55' from PL / ROW</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>X</u>	<u>A1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Perry</u> Date <u>12/9/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>STARK CONSTRUCTION</u>	Phone <u>804 519 6270</u>
	Address <u>1707 SHALLOW WOOD RD. MANASSAS - SHOOT VA 23103</u>	Email <u>JIM STARK @ GMAIL.COM</u>
	Contractor License Number <u>2705038805</u>	Type <u>CBC RBC</u>

DESCRIPTION OF WORK	Scope of Work: <u>NEW DETACHED GARAGE 32 x 48</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
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1536</u>	Total Sq. Ft. <u>1536</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>2310.64</u>
Value of Work	<u>\$40,000</u> <u>\$49,920.00</u>	State Levy Fee	\$ <u>4.93</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>2106.37</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>7 Dec 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: 12/17/2020

Permit Number: BP-2020-01266

GPIN/Tax Map: 7733-26-8712

Issued: 1-5-21

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>12 BUCK BRANCH DR.</u>	
	Owner <u>RANDALL HANSEN</u>	Phone # <u>804 288 4999</u>
APPLICANT INFORMATION	Address <u>12 BUCK BRANCH DR.</u>	
	Applicant/Contact <u>TOM PAUL, PRES.</u>	Phone # <u>804 837 8998</u>
Address <u>15 EAST GLENBROOKE CIR.</u>		Email <u>TOM@POCVA.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lower Tuckahoe</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from PL / ROW</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>RI</u>
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Taylor</u> Date: <u>12/22/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>PREMIERE DESIGN & CON., INC</u>		Phone <u>804 837 8998</u>
	Address <u>15 EAST GLENBROOKE CIRCLE</u>		Email <u>TOM@POCVA.COM</u>
	Contractor License Number <u>A 2705 043273</u>	Type <u>G.C.</u>	Expiration <u>1/31/2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>Will remain a 5 bedroom house</u> <u>ADD 2 CAR GARAGE WITH NEW BEDROOM ABOVE, REMODEL OLD GARAGE SPACE AND CONVERT EXISTING BEDROOM INTO HALLWAY</u>				
	Proposed Use <u>SFD</u>	Current Use <u>SAME</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u>	# of Bedrooms <u>1</u>	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>890</u>	Unfinished Sq. Ft. <u>630</u>	Total Sq. Ft. <u>1520</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>125,000</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: [Signature] Date: 1/17/2020

Application Fee	\$ <u>374.50</u>
State Levy Fee	\$ <u>1149</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>2610.99</u>



BUILDING PERMIT APPLICATION

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

Application Date: 12/18/20Permit Number: BP-2020-01263GPIN/Tax Map: 46-24-0-3-0Issued: 1-5-2021

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>764 three Chopt Road</u>	
	Owner <u>JAMES + Nancy Morton</u>	Phone # <u>387-3230</u>
	Address <u>764 three Chopt Road</u>	Email <u>burke.morton@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>BNW Builders</u>		Phone # <u>994-3429</u>
	Address <u>8601 Staples Mill Rd.</u>		Email <u>Dan@bnwbuilders.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>153'</u>	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback <u>82'</u>	Side Setback <u>135'</u>	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer _____ Date _____			

CONTRACTOR INFORMATION	Contractor <u>BNW Builders</u>		Phone <u>994-3429</u>
	Address <u>8601 Staples Mill Rd.</u>		Email <u>Dan@bnwbuilders.com</u>
	Contractor License Number <u>2705 108 250</u>	Type <u>CLASS A</u>	Expiration <u>6-30-2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>Redo front porch framing and do new pvc decking. Roof stays and brick piers stay.</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
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>294</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>37.00</u>
Value of Work <u>10,000</u>		State Levy Fee \$ <u>1.14</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>[Signature]</u> Date <u>12-18-20</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>58.14</u>



BUILDING PERMIT APPLICATION

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

Application Date: June 18, 2020

Permit Number: BP-2020-00216

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

Issued: 7-21-2020

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

Residential Commercial

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

OWNER INFORMATION	Site Address 1800 Sandy Hook Rd. Goochland, VA 23063				
	Owner Goochland County (Derek Stamey Owner Representative)		Phone # 804-556-5855		
	Address 1800 Sandy Hook Rd. Goochland, VA 23063		Email dstamey@goochlandva.us		
APPLICANT INFORMATION	Applicant/Contact Woodland Construction, Inc. / John Selko		Phone # 804-399-5898		
	Address 5008 Evelyn Byrd Rd. Richmond, VA 23225		Email jselko@woodlandconst.com		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid	
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA	
	Side Setback	Side Setback	Flood Zone		
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	Planning & Zoning Officer _____ Date _____				

CONTRACTOR INFORMATION	Contractor Woodland Construction, Inc.		Phone 804-360-0545	
	Address 5008 Evelyn Byrd Rd. Richmond, VA 23225		Email jselko@woodlandconst.com	
	Contractor License Number 2705025277	Type Class A CBC RBC	Expiration 8/31/2020	

DESCRIPTION OF WORK	Scope of Work: Renovation <u>01-05-2020 Revision Submitted w. den door & add door & lighting</u> Renovation of approx 4,500 sq. ft of the Administration Building including new finishes, interior walls, ceilings, lighting, electrical, mechanical systems and plumbing				
	Proposed Use Business	Current Use Business	Environmental Impacts (stream crossing, wetlands, amt land disturbed) NA		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft. 4,500		Unfinished Sq. Ft. 0	Total Sq. Ft. 4,500	

Building Only - Excludes All Trades Permits

Value of Work: 333,175.00 ~~497,175.00~~ 351,175.00

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: Joe Selko Date: 6/18/2020

Application Fee	\$
State Levy Fee	\$
Septic/Well Fee	\$ <u>Waived</u>
Zoning Fee	\$ <u>Waived</u>
RLD	\$
SWP	\$ <u>County</u>
Total	\$ <u>Proct</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: 1-6-21
 Permit Number: BP-2021-00011
 GPIN/Tax Map: 1705-63-5632/57-32-0-3-0
 Issued: 1-8-21

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>808 COVER BLUFF PLACE</u>	
	Owner <u>MILKE HOOD</u>	Phone #
	Address <u>808 COVER BLUFF PLACE</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>THOMAS SEABORN</u>	Phone # <u>804-347-4497</u>
	Address <u>3125 ROCK CRESS LAKE</u>	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>THOMAS SEABORN</u>	Phone <u>804-347-4497</u>
	Address <u>3125 ROCK CRESS LAKE</u>	Email <u>thomase@tgsidwos.com</u>
	Contractor License Number <u>2705-12753A</u>	Type <u>License</u>

DESCRIPTION OF WORK	Scope of Work: <u>FINISH EXISTING ATTIC SPACE TO BE ART STUDIO</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
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>15,000.00</u>
---------------	------------------

Application Fee	\$ <u>99.50</u>
State Levy Fee	\$ <u>1.59</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>81.09</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 1-5-2021



BUILDING PERMIT APPLICATION

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

Application Date: December 30, 2020

Permit Number: 2021-00002

GPIN/Tax Map: 56-1-0-52-0

Issued: 1-13-21

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 1397 Genito Road, Manakin-Sabot, Virginia 23103	
	Owner Burn Brae II LLC	Phone # (804) 667-7378
	Address 2710 Hardings Trace Lane, Richmond, Virginia 23233	Email Tmcdaniel@stosh.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 Kvasquez@jeswork.com
	Contractor License Number 2705068655	Type A	Expiration 04/30/2022

DESCRIPTION OF WORK	Scope of Work: Install five (5) Intellijack and 19' Lin.Ft. of Supplemental Beam.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1,140		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>43.21</u>
Value of Work 6935.40		State Levy Fee \$ <u>.86</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
Signature of Applicant <u>Karen Vasquez</u>	Date <u>December 30, 2020</u>	Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>44.07</u>

OK # 1111



BUILDING PERMIT APPLICATION

Application Date: 11-25-2020

Permit Number: BP-2020-01172

GPIN/Tax Map: 6823 74-6566 / 6-1-0-10-0

Issued: 1-13-2021

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>4479 Walton Rd Louisa VA 23093</u>	
	Owner <u>Dale Davis</u>	Phone # <u>804-357-4190</u>
	Address	Email <u>dale.davis1998@gmail.com</u>

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>15' from PL / Row</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>Survey locate Eros Setback</u>		

Planning & Zoning Officer: David Boyd Date: 1/11/21

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

DESCRIPTION OF WORK	Scope of Work: <u>Covered Front porch & ^{2ft} Bumpout on Left side of Home</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? <u>(Yes) (No)</u>	Finished Sq. Ft. <u>24</u>	Unfinished Sq. Ft. <u>120</u>	Total Sq. Ft. <u>144</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>39.00</u>
Value of Work	\$ <u>6000.00</u>	State Levy Fee	\$ <u>200.78</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>604.78</u>
Signature of Applicant: <u>Dale P. Davis</u>		Date: <u>11/24/20</u>	



BUILDING PERMIT APPLICATION

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

 Residential

 Commercial

 Application Date: 12/16/2020

 Permit Number: BP-2020-01251

 GPIN/Tax Map: 7723-45-4535/67-12-0-10-0

 Issued: 1-14-2021

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>10 Partridge Hill Rd, Goochland, VA</u>		
	Owner	<u>Chris and Thu-Hang Groome</u>		Phone # <u>804-519-9251</u>
APPLICANT INFORMATION	Address	<u>6005 Stoneville Ct, Lake Allen, VA 23059</u>		Email <u>chrisgroome@me.com</u>
	Applicant/Contact			Phone #
	Address	<u>Same as above</u>		Email <u>Same as above</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date <u>12/21/2020</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Detached Garage / Covered Patio - POOL HOUSE</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
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>124.50</u>
Value of Work	<u>200K 25K</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.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>151.99</u>
Signature of Applicant		Date	<u>12/8/2020</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: December 24, 2020

Permit Number: BP-2020-01272

GPIN/Tax Map: 18-7-0-E-0 / 6820-08-6858

Issued: Issued 1-13-2021

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 4856 Whitehall Road, Goochland, Virginia 23063	
	Owner Katie Cox	Phone # (804) 513-7072
	Address P.O. Box 621, Goochland, Virginia 23063	Email Katiemjgc@aol.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 Kvasquez@jeswork.com
	Contractor License Number 2705068655	Type A	Expiration 04/30/2022

DESCRIPTION OF WORK	Scope of Work: Install two (2) Intellijack.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1,468		

Building Only – Excludes All Trades Permits	
Value of Work	2,404.35

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 December 24, 2020

Application Fee	\$ 30.00
State Levy Fee	\$ 1.60
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 30.60



BUILDING PERMIT APPLICATION

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

Application Date: 1/13/2021Permit Number: BP-2021-00041GPIN/Tax Map: 1800-31-3339/16-1-0-87-DIssued: 1-13-2021

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: 5570 OLD COLUMBIA RD. GOOCHLAND VA 23063

Owner: GARLAND L. MEADOR JR. Phone #: 804-382-8883

Address: 9101 HUDNALLS RD. MECHANICSVILLE VA 23116 Email: linmeador@comcast.net

APPLICANT INFORMATION
 Applicant/Contact: "LIN" GARLAND MEADOR JR. Phone #: 804-382-8883

Address: SAME Email: SAME

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 Phone: _____

Address: _____ Email: _____

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: INSTALL FOUNDATION ANCHORS ON L. & R. SIDE

Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2</u>	# of Bedrooms <u>3</u>	# of floors <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>960</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$1,000.00</u>	Application Fee	\$ <u>30.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>1/13/2021</u>		State Levy Fee	\$ <u>.60</u>
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>30.60</u>



BUILDING PERMIT APPLICATION

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

Application Date: 10-29-2020

Permit Number: BP-2020-01052

GPIN/Tax Map: 7727-03-9412/47-3-0-A0

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 <u>1938</u> <u>1440 Ashland Rd Rockville Va 23146</u>	Phone #
	Owner <u>Martin Marietta Pruitt</u>	
	Address <u>Same as above</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>William A Richardson</u>	Phone # <u>804 690 1729</u>
	Address <u>10007 Enderly Ct Chesterfield Va 23832</u>	Email <u>WARLLC @ Comcast.net</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>20' from Prop. Line/Road</u>	Center Line Setback <u>—</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>M2</u> <u>B1/A2</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>10/30/2020</u>			

CONTRACTOR INFORMATION	Contractor <u>William A Richardson Cont.</u>	Phone <u>804 690 1729</u>
	Address <u>10007 Enderly Ct Chesterfield Va 23832</u>	Email <u>WARLLC @ Comcast.net</u>
	Contractor License Number <u>2705144567</u>	Type <u>Class A</u>

DESCRIPTION OF WORK	Scope of Work: <u>move employee Building rehook utilities</u>				
	Proposed Use <u>meeting Room</u>	Current Use <u>Same</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>225.00</u>
Value of Work	<u>\$30,000</u>	State Levy Fee	\$ <u>4.50</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>279.50</u>
Signature of Applicant <u>William A Pruitt</u>		Date	<u>10-29-2020</u>



ZONING COMPLIANCE APPLICATION

COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office

P.O. Box 103

Goochland, VA 23063

Phone: (804) 556-5860

Web: www.goochlandva.us

FAX: (804) 556-5654

Office Use Only

Application File Date: 1/12/21 Application No.: AP-2021-00035 Fee: \$25.00

Zoning Approval: Yes [Signature] No: _____ Date: _____

Zoning Application Type: *Please check appropriate 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: Swift Creek Enterprises

Telephone: 516 650-2101

Address: 1555 Millers Ln

Cell phone: 516 650-2101

Manakin Sabot VA 23103

FAX: N/A

E-mail: john@twinklssingr.com

Name of Applicant: DAVID HUDSON

Telephone: 804 339-3190

Address: 506 Chandler Cir

Cell phone: 804 339-3190

Henrico VA 23229

FAX: N/A

E-mail: hudsoncontracting@verizon.net

Property Information

Street Address: 1555 Millers Ln Manakin Sabot

Zoning: A2

GPIN Number: 7706-62-1579

Acreage: 27

Existing Use: Agriculture

Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire: N/A

Project Information

1. Estimated square footage of the building(s): 2500 sq ft 2. Value of Building: \$115 K

3. Written Description of Proposed Physical Improvements:

8 stall horse stables w/ tack room and 1/2 bath



ZONING COMPLIANCE APPLICATION

COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office

P.O. Box 103

Goochland, VA 23063

Phone: (804) 556-5860

Web: www.goochlandva.us

FAX: (804) 556-5654

Office Use Only

Application File Date: <u>12/11/2020</u>	Application No.: <u>AD-2020-01237</u>	Fee: \$25.00
Zoning Approval: Yes <u>David Floyd</u>	No: _____	Date: <u>12/11/2020</u>

Zoning Application Type: Please check appropriate 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: <u>Richard and Susan Carchman</u>	Telephone: <u>804-457-4693</u>
Address: <u>4451 Tabscott Rd</u>	Cell phone: <u>804-338-4733</u>
<u>Columba, VA 23038</u>	FAX: _____
E-mail: <u>walntz@msn.com</u>	

Name of Applicant: <u>Richard and Susan Carchman</u>	Telephone: <u>804-457-4693</u>
Address: <u>4451 Tabscott Rd</u>	Cell phone: <u>804-338-4733</u>
<u>Columbia, VA 23038</u>	FAX: _____
E-mail: <u>walntz@msn.com</u>	

Property Information

Street Address: <u>4451 Tabscott Rd, Columbia VA 23038</u>	Zoning: <u>A-1</u>
GPIN Number: <u>6813-33-3455</u>	Acreage: <u>45.688</u>
Existing Use: <u>hay production and forestry</u>	
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): 2,128 2. Value of Building: \$130,000

3. Written Description of Proposed Physical Improvements:
A 38' x 56' center aisle, horse and goat barn which includes 5 animal stalls and storage for feed.



ZONING COMPLIANCE APPLICATION

COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office

P.O. Box 103

Goochland, VA 23063

Phone: (804) 556-5860

Web: www.goochlandva.us

FAX: (804) 556-5654

Office Use Only

Application File Date: <u>1/7/21</u>	Application No.: <u>AP-2021-00021</u>	Fee: \$25.00
Zoning Approval: Yes <u>[Signature]</u>	No: _____	Date: <u>1/11/21</u>

Zoning Application Type: *Please check appropriate 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: John Cory & Janine Hoffer
 Address: 13263 Apdon Court
 E-mail: coryhoffer@comcast.net

Telephone: 804-986-8517
 Cell phone: 804-475-3900
 FAX: _____

Name of Applicant: John Cory & Janine Hoffer
 Address: 13263 Apdon Court
 E-mail: coryhoffer@comcast.net

Telephone: 804-986-8517
 Cell phone: 804-475-3900
 FAX: _____

Property Information

Street Address: 13263 Apdon Court
 GPIN Number: 7734-10-7868 Parcel ID: 64-22-B-22-0
 Existing Use: Residential

Zoning: R1
 Acreage: 2.147

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): 144 square feet
2. Value of Building: \$10,000
3. Written Description of Proposed Physical Improvements:
Prefabricated shed manufactured by Hillbrook Collections (size 9 x16) will be placed on concrete slab to house pool equipment, a sink, and a toilet.
The structure will be placed about 12' off of the northwest side of the pool.



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

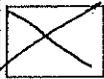
FAX: (804) 556-5654

Office Use Only

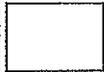
Application File Date: 11/10/2021 Application No.: PA-2020-01196 Fee: \$25.00

Zoning Approval: Yes David Taylor No: — Date: 12/4/2020

Zoning Application Type: 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: Sri Sai Narayana Org.
Address: 1646 Manakin Rd
Manakin Sabot VA 23103
E-mail: sjammi69@gmail.com

Telephone: 804 868 5751
Cell phone: _____
FAX: _____

Name of Applicant: Sarada Jamm
Address: 1646 Manakin Rd
Manakin Sabot VA 23103
E-mail: sjammi69@gmail.com

Telephone: 804 868 5781
Cell phone: _____
FAX: _____

Property Information

Street Address: 1646 Manakin Rd
GPIN Number: _____
Existing Use: Green house at my residence
Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire: _____

Zoning: Residential
Acreage: 3.392 acres

Project Information

1. Estimated square footage of the building(s): 24 x 48 ft 2. Value of Building: 38,000.00

3. Written Description of Proposed Physical Improvements:

A green house – wooden structure with polycarbonate panels and roof with heating equipment to maintain temperature for the tropical plants.



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/29/2020 11-13-2020

Permit Number: BP-2020-01140

GPIN/Tax Map: 6777-65-2457 / 43-40-C-210

Issued: 1-11-2021

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 2105 Jockey Ridge Road. Maidens, VA 23102	
	Owner Terry & Zarina Nicholas	Phone # 8047144827
	Address 2105 Jockey Ridge Rd. Maidens, VA 23102	Email terrynicholas@gmail.com

APPLICANT INFORMATION	Applicant/Contact Terry Nicholas		Phone # 8047144827
	Address 2105 Jockey Ridge Rd. Maidens, VA 23102		Email terrynicholas@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 Owner		Phone 8047144827
	Address 2105 Jockey Ridge Rd. Maidens, VA 23102		Email terrynicholas@gmail.com
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Finish 1250 sq ft basement. Workout room, recreation room, bedroom & bathroom. This includes insulation, sheetrock, and flooring.				
	Proposed Use Living quarters	Current Use Unfinished	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# of Bedrooms 1	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. 1237	Unfinished Sq. Ft. 0	Total Sq. Ft. 1237	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$4,500</u>
---------------	----------------

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

Signature of Applicant [Signature] Date 10/29/2020

Application Fee	\$ <u>32.25</u>
State Levy Fee	\$ <u>.65</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>32.90</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: November 18, 2020

Permit Number: BP-2020-01139
1-15-21

GPIN/Tax Map: 7723-26-0038 / 66-1-0-2-0

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.

Site Address: 12829 River Road, Richmond, Va 23238

Owner: Benedictine Schools of Richmond Phone #: 804/708-9500

Address: 12829 River Road, Richmond, Va. 23238 Email: jgrapes@benedictineschools.org

Applicant/Contact: John Locher Phone #: 804-233-9856

Address: 3941 Deep Rock Road, Ste A, Richmond, Va. 23233 Email: john@taylor-perrish.com

Subdivision: <u>None</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>75' from Prop. Line/PA</u>	Center Line Setback: _____	Rear Setback: <u>35'</u>	CUP/Variance/COA: <u>POD-2020-24 App.</u>
Side Setback: <u>20'</u>	Side Setback: <u>30'</u>	Flood Zone: _____	<u>CA-2011-4A App.</u>

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: Dennis Floyd Date: 11/23/2020

Contractor: Taylor & Parrish, Inc. Phone: 804-233-9856

Address: 3941 Deep Rock Road, Ste A., Richmond, Va. 23233 Email: john@taylor-perrish.com

Contractor License Number: 270100451B Type: CLASS A Expiration: 9/30/22

Scope of Work: New High School 1-15-21 approved for structural & foundation package footing & foundation only

Proposed Use: <u>High School - Education</u>	Current Use: _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed): _____		
SEWER: <u>Public</u> (Private)	WATER: <u>Public</u> (Private)	# of Bathrooms: _____	# of Bedrooms: _____	# of floors: _____
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.: <u>36,764</u>	Unfinished Sq. Ft.: <u>11,774</u>	Total Sq. Ft.: <u>50,000 48,538</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 15,581,400</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: 11/18/2020

Application Fee	\$ <u>116,810.50</u>
State Levy Fee	\$ <u>2,337.21</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>119,247.71</u>



BUILDING PERMIT APPLICATION

Application Date: 12/10/2020

Permit Number: BP-2020-01226

GPIN/Tax Map: 7725-06-8210/5854-4-7-0

Issued: 1-15-21

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 12041 Talavera Terrace <i>Richmond, VA 23238</i>	Phone # 6094103035
	Owner HHHunt Homes, LLC	Email agshafi@hnhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059	

APPLICANT INFORMATION	Applicant/Contact Amir Shafi	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hnhunthomes.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>DM</i>
	Front Setback <i>25' from PL/ROW</i>	Center Line Setback	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback <i>Left 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 Floyd* Date *12/15/2020*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hnhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 24,700 square feet		
	<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.		

<i>Building Only - Excludes All Trades Permits</i>		Application Fee	\$ <i>2104.52</i>
Value of Work	\$100,000 <i>\$280,602.00</i>	State Levy Fee	\$ <i>42.09</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-</i>
		RLD	\$ <i>100-</i>
		SWP	\$
		Total	\$ <i>2346.61</i>
Signature of Applicant	<i>[Signature]</i>	Date	12/10/2020

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 IB OCCUPANY LOAD 6 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 1/5/2021

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/10/2020

Permit Number: BP-2020-D1227

GPIN/Tax Map: 7725-06-8214 / 58-54-4-8-0

Issued: 1-15-21

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>12043 Talavera Terrace Richmond, VA 23238</u>	Phone # <u>6094103035</u>
	Owner <u>HHHunt Homes, LLC</u>	Email <u>agshafi@hnhunthomes.com</u>
	Address <u>11237 Nuckols Road Glen Allen, VA 23059</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Amir Shafi</u>	Phone # <u>6094103035</u>
	Address <u>11237 Nuckols Road Glen Allen, VA 23059</u>	Email <u>agshafi@hnhunthomes.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Due</u>
	Front Setback <u>25' from PL/POW</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 Payment due before issuing C.O. *Survey locate setbacks.</u>		

Planning & Zoning Officer: David Boyd Date: 12/15/2020

CONTRACTOR INFORMATION	Contractor <u>HHHunt Homes, LLC</u>	Phone <u>6094103035</u>
	Address <u>11237 Nuckols Road Glen Allen, VA 23059</u>	Email <u>agshafi@hnhunthomes.com</u>
	Contractor License Number <u>2705119751 A</u>	Type Contractor <u> </u>

DESCRIPTION OF WORK	Scope of Work: <u>5 unit townhome with attached garages.</u>				
	Proposed Use <u>Townhomes</u>	Current Use <u>None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>Land disturbance of 24,700 square feet</u>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <u>2.5</u>	# of Bedrooms <u>3</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>2310</u>	Unfinished Sq. Ft. <u>441</u>	Total Sq. Ft. <u>2751</u>		

Building Only - Excludes All Trades Permits

Value of Work	\$100,000 <u>\$280,602.00</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: [Signature] Date: 12/10/2020

Application Fee	<u>\$2104.52</u>
State Levy Fee	<u>\$42.09</u>
Septic/Well Fee	<u>\$</u>
Zoning Fee	<u>\$100-</u>
RLD	<u>\$100-</u>
SWP	<u>\$</u>
Total	<u>\$2346.61</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 1/5/2021
Code Official



BUILDING PERMIT APPLICATION

Application Date: 12/10/2020

Permit Number: BP-2020-D1231

GPIN/Tax Map: 7725-06-8217/58-5A4-9-0

Issued: 1-15-21

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 12045 Talavera Terrace <i>Richmond, VA 23238</i>	Phone # 6094103035
	Owner HHHunt Homes, LLC	Email agshafi@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059	

APPLICANT INFORMATION	Applicant/Contact Amir Shafi	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@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 PL/ROW</i>	Center Line Setback	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback	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. * Sydney locate setbacks.</i>		
Planning & Zoning Officer <i>David Floyd</i> Date <i>12/15/2020</i>				

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 24,700 square feet		
	<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. 2149	Unfinished Sq. Ft. 455	Total Sq. Ft. 2604		
	Building Only - Excludes All Trades Permits				

Value of Work	\$100,000 <i>\$265,608.00</i>	Application Fee	<i>\$1992.00</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.		State Levy Fee	<i>\$39.84</i>
		Septic/Well Fee	\$
		Zoning Fee	<i>\$100 -</i>
		RLD	<i>\$100 -</i>
		SWP	\$
		Total	<i>\$2231.90</i>
		Signature of Applicant	<i>[Signature]</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 IB OCCUPANY LOAD 6 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 1/5/2021

Code Official



BUILDING PERMIT APPLICATION

Application Date: 12/10/2020

Permit Number: BP-2020-01232

GPIN/Tax Map: 7725-06-8311/58-54-4-10-0

Issued: 1-15-21

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 12047 Talavera Terrace <i>Richmond, VA 23238</i>	Phone # 6094103035
	Owner HHHunt Homes, LLC	Email agshafi@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059	

APPLICANT INFORMATION	Applicant/Contact Amir Shafi	Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@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 PL/ROW</i>	Center Line Setback	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback	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</i>		
	Planning & Zoning Officer <i>Daniel Ford</i>	Date <i>12/15/2020</i>		

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email agshafi@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 24,700 square feet		
	<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		Application Fee	<i>\$104.92</i>
Value of Work	\$100,000 <i>\$280,602.00</i>	State Levy Fee	<i>\$42.09</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-</i>
		RLD	<i>\$100-</i>
		SWP	\$
		Total	<i>\$2346.11</i>
Signature of Applicant	<i>[Signature]</i>	Date	12/10/2020

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 IB OCCUPANY LOAD 6 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 1/5/2021
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 12/10/2020

Permit Number: BP-2020-000001234

GPIN/Tax Map: 7725-06-8315/88-54-4-11-0

Issued: 1-15-21

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 12049 Talavera Terrace		Phone # 6094103035
	Owner HHHunt Homes, LLC		Email agshafi@hnhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

APPLICANT INFORMATION	Applicant/Contact Amir Shafi		Phone # 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@hnhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$ 4966.00	Date Paid <i>Due</i>
	Front Setback <i>25' from PL/RW</i>	Center Line Setback	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback <i>Rt. Side 10'</i>	Side Setback	Flood Zone	
	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: *David Floyd* Date: *12/15/2020*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 6094103035
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email agshafi@hnhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2021

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 24,700 square feet		
	<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
	2239 Finished Sq. Ft.	424 Unfinished Sq. Ft.	2663 Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work	\$100,000 <i>\$271,626.00</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: 12/10/2020

Application Fee	\$ 2037.20
State Levy Fee	\$ 40.74
Septic/Well Fee	\$
Zoning Fee	\$ 100 -
RLD	\$ 100 -
SWP	\$
Total	\$ 2277.94

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 1/5/2021
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: 1-10-21
Permit Number: BP-2021-00041
GPIN/Tax Map: 7724-33-7169 / 64-1-0-74A
Issued: 1-19-21
This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>12330 Patterson Ave</u>	
	Owner <u>Tuckahoe Pines Ret. Comm. LLC</u>	Phone # <u>402-890-3502</u>
	Address <u>12330 Patterson Ave</u>	Email <u>ESpringfield@camerongeneralcontractors.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Ella Springfield</u>	Phone # <u>402-890-3502</u>
	Address <u>12330 Patterson Ave Richmond, VA 23238</u>	Email <u>ESpringfield@camerongeneralcontractors.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55 from PL/PLW</u>	Center Line Setback <u>110'</u>	Rear Setback <u>5'</u>	CUP/Variances/COA <u>131</u>
	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 Ford</u> Date: <u>1/15/2021</u>		

CONTRACTOR INFORMATION	Contractor <u>Cameron General Contractors</u>	Phone <u>402-890-3502</u>
	Address <u>12330 Patterson Ave</u>	Email <u>ESpringfield@CameronGeneralContractors.com</u>
	Contractor License Number <u>2705/66535</u>	Type <u>Class-A</u>

DESCRIPTION OF WORK	Scope of Work: <u>12x60 Mobil office trailer</u>		Feb mar APR 1	
	Proposed Use <u>office work</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>0</u>	# of floors <u>0</u>
	SEWER Public/Private	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	
	Will a foundation be installed within 20 ft. of any septic system components? Yes (No)	Finished Sq. Ft. <u>720</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>720</u>

Building Only - Excludes All Trades Permits

Value of Work <u>3000.00 Rental Fee</u>	Application Fee \$ <u>30.00</u>
	State Levy Fee \$ <u>.60</u>
	Septic/Well Fee \$
	Zoning Fee \$ <u>50.00</u>
	RLD \$
	SWP \$
	Total \$ <u>120.60</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: 1-11-21



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: 1-12-21

Permit Number: BP 2021-00042

GPIN/Tax Map: 6778-51-2393 / 42-1-0-6A-A

Issued: 1-19-21

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 Whistle Lane, Maidens VA	
	Owner Meleta & Kevin Leonard	Phone # 804-840-5950
	Address 2142 Whistle Lane	Email meletaleonard@yahoo.com

APPLICANT INFORMATION	Applicant/Contact Meleta Leonard	Phone # Same as above
	Address <u>Same</u>	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>Owner</u>	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: Remove none structural wall / replace with header beam				
	Proposed Use Private Residential	Current Use private residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2	# of Bedrooms 5	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. no change	Unfinished Sq. Ft. no change	Total Sq. Ft. no change	

Building Only - Excludes All Trades Permits

Value of Work	500.00
---------------	---------------

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 Meleta Leonard Date 1/11/2021

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>6.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>36.60</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 1/05/2021
 Permit Number: BP-2021-00023
 GPIN/Tax Map: 6758-41-5717 / 42-33-E-20-0
 Issued: 1-19-2021
 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>2526 Crest Hollow Court, Goochland 23063</u>	
	Owner <u>Richard Austin Reynolds</u>	Phone # <u>804-301-7655</u>
	Address <u>2526 Crest Hollow Court, Goochland 23063</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>R. Austin Reynolds</u>	
	Address <u>2526 Crest Hollow Court, Goochland 23063</u>	Phone # <u>804-301-7655</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Holland Hills</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>Up from P.U./P.O.W.</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>X</u>	<u>RI</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>1/12/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Detached garage with lean to</u> <u>30 x 30 with 12 x 30 porch</u>				
	Proposed Use <u>Garage</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>1260</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>1260</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>24,000</u>	<u>\$34,105.00</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 [Signature] Date 1/05/2021

Application Fee	\$ <u>107.92</u>
State Levy Fee	\$ <u>3.36</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>20.00</u>
SWP	\$ _____
Total	\$ <u>196.28</u>



BUILDING PERMIT APPLICATION

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

Application Date: 1-6-21
 Permit Number: BP-2021-00024

GPIN/Tax Map: 6717-81-6211 / 39-1-0-49-0

Issued: 1-20-2021

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>1611 SALMONTOWN ROAD GOOCHLAND VA</u>	
	Owner	<u>BERT WHITE</u>	Phone # <u>804-477-4812</u>
APPLICANT INFORMATION	Address	<u>2150 MANAKIWO ROAD MANAKIWO VA</u>	
	Applicant/Contact	<u>AS ABOVE</u>	Email <u>LTCONCESSIONS@AALCO</u>
	Address	_____	
		Phone #	_____
		Email	_____

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>None</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
	Front Setback	Center Line Setback	Rear Setback	GUP/Variance/COA
	<u>75' from PC/PWS</u>	_____	<u>35'</u>	_____
Side Setback	Side Setback	Flood Zone		
<u>20'</u>	<u>20'</u>	_____	<u>A1</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____				
Planning & Zoning Officer		Date		
<u>David Lloyd</u>		<u>1/15/21</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>12' x 32' Deck</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
	Will a foundation be installed within 20 ft. of any septic system components? Yes/(No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>384</u>	<u>384</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>30.00</u>	
Value of Work	<u>\$3000.00</u> <u>\$3840.00</u>	State Levy Fee	\$ <u>.60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ _____
Signature of Applicant	<u>Bert White</u>	Zoning Fee	\$ <u>25.00</u>
Date	<u>1-6-21</u>	RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>55.60</u>

Issued 12/23/20
Application Date: 12/01/20

BUILDING PERMIT APPLICATION

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

Permit Number: 12-3-2020
BP-2020-01191
Old Map Number: 48-17-4-32-0
GPIN: 7738-10-5438

LOT 32-4 PARKSIDE VILLAGE

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 7159 Yare Street			District		
	Owner EAGLE CONSTRUCTION OF VA., LLC			Phone # 804-741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060					
	Proposed Use		Current Use		Existing Buildings on Property	
	Proposed Occupant Load (Commercial)		Lot Size		Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Parkside Village</i>		Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Amount: \$ 4937.00	
	New Street Address				Date Paid: <i>Due</i>	
					Zoning District <i>R-PUD</i>	
	Front Setback <i>30' from R</i>		Center Line Setback		Rear Setback <i>25'</i>	
	Side Setback <i>10'</i>		Side Setback <i>10'</i>		C.U. Permit	
				Variance		
				Census Tract <i>5107540102</i>		
				Flood Zone		
APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>		COMMENTS: <i>* Cash Proffer due before issuing C.O. * Survey locate setbacks</i>		

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

Planning & Zoning Officer *Daniel Floyd* Date *12/4/2020*

Applicant/Contact: BERTON JAMES Phone (804)217-6910
Email: bjames@eagleofva.com

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC			Phone (804)741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060					
	Contractor License Number 2705096467A			Type CLASS A		Expiration 6-30-2021

Description of Work

Scope of Work: NEW DWELLING WITH ATTACHED GARAGE. NOTE IF BASEMENT

Revised 1-20-21 to change deck to ground

SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private		WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private		2.5		# of Bathrooms <i>Full</i>	
# of Floors		Total Sq. Ft.		Finished Sq. Ft.		Unfinished Sq. Ft.	
1		2470		1790		680	
						# of Bedrooms 2	

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

VALUE OF WORK

Building	\$138,450.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ 685.03
Septic/Well Fee	\$
State Levy Fee	\$ 12.70
Zoning Fee	\$ 50.00
Total	\$ 697.73

USE 'VALUE OF JOB' FROM PERMIT FEE CALCULATOR

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

Signature of Applicant *[Signature]*



BUILDING PERMIT APPLICATION

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

Application Date: 1-6-21

Permit Number: BP-2021-00037

GPIN/Tax Map: 58-27-0-3-0 / 7715-49-4366

Issued: 1-21-2020

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 312 GOOSE POINT COURT	
	Owner MILLIGAN DAVID R MILLIGAN ELIZABETH S JOHN	Phone # 314-7686
	Address 312 GOOSE POINT COURT	Email

APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE	Phone # 804-621-7718
	Address 2410 SOUTHLAND DR	Email JSALVATORE@JESWORK.COM

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

Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION	Contractor JES CONST	Phone
	Address 2410 SOUTHLAND DR	Email
	Contractor License Number 2705-06-8655	Type A

DESCRIPTION OF WORK	Scope of Work: 146 LF WATER MANAGMENT DRAINAGE, SUMP PUMP				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>76.16</u>
Value of Work	14,256.00	State Levy Fee	\$ <u>1.52</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Jeannie Salvatore</u> Date: <u>1-6-21</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>77.68</u>



BUILDING PERMIT APPLICATION

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

Application Date: 12-16-20

Permit Number: *BP-2020-01271*

GPIN/Tax Map: 46-27-A-5-0

Issued: *1-21-21*

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 2379 WHEATLANDS DRIVE	
	Owner ALLISON BRYCE G ALLISON JULIE L	Phone # 804-380-9015
	Address 2379 WHEATLANDS DRIVE	Email

APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE	
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Phone # 804-621-7718
		Email JSALVATORE@JESWORK.COM

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

CONTRACTOR INFORMATION	Contractor JES CONSTRUCTION		Phone 804-621-7718
	Address 2410 SOUTHLAND DR		Email JSALVATORE@JESWORK.COM
	Contractor License Number 2705-06-8655	Type A	Expiration 04-30-22

DESCRIPTION OF WORK	Scope of Work: 1324 CRAWL SEAL LINER WITH DEHUMIDIFIER				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> 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	12,986.32
---------------	-----------

Application Fee	\$ 7044
State Levy Fee	\$ 141
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 7185

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 12-16-20



ZONING COMPLIANCE APPLICATION

COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office
P.O. Box 103
Goochland, VA 23063

Phone: (804) 556-5860

Web: www.goochlandva.us

FAX: (804) 556-5654

Office Use Only

Application File Date: <u>1/21/21</u>	Application No.: <u>AP-2021-00067</u>	Fee: \$25.00
Zoning Approval: Yes <u>[Signature]</u>	No: <u>—</u>	Date: <u>1/20/21</u>

Zoning Application Type: Please check appropriate 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: <u>James Woodfin</u>	Telephone: <u>804-698-0466</u>
Address: <u>4695 Payne Rd.</u>	Cell phone: _____
<u>Columbia Va. 23038</u>	FAX: _____
E-mail: <u>heat-slayer@yahoo.com</u>	

Name of Applicant: _____	Telephone: _____
Address: _____	Cell phone: _____
E-mail: _____	FAX: _____

Property Information

Street Address: <u>4695 Payne Rd.</u>	Zoning: <u>A1</u>
GPIN Number: <u>6903-64-3624</u>	Acreage: <u>10</u>
Existing Use: _____	

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): 580 2. Value of Building: \$5000.00

3. Written Description of Proposed Physical Improvements:
Hanging Pigeon Loft 12x48



BUILDING PERMIT APPLICATION

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

Application Date: 1-13-21

Permit Number: BP-2021-00033

GPIN/Tax Map: 0757-97-0457/42-1-0-VA-D

Issued: 1-21-21

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

Residential Commercial

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

OWNER INFORMATION	Site Address 1800 Sandy Hook Road		Phone #
	Owner Goochland County		
	Address P.O. Box 10 Goochland, VA 23063		Email
APPLICANT INFORMATION	Applicant/Contact Ryan Haskell		Phone # 804-357-0960
	Address 2419 Westwood Ave, Richmond, VA 23230		Email rhaskell@sermat.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 Sermat Construction Services		Phone 804-264-4800
	Address 2419 Westwood Ave, Richmond, VA 23230		Email RHASKELL@SERMAT.COM
	Contractor License Number 2701025440	Type Class A	Expiration 10/31/2021

DESCRIPTION OF WORK	Scope of Work: Remodel the interior finishes of the mens and womens bathrooms. no walls will be moved. all plumbing to be reused				
	Proposed Use Commercial	Current Use Commercial	Environmental Impacts (stream crossing, wetlands, amt land disturbed) NONE		
	SEWER <u>Public</u> Private	WATER <u>Public</u> Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. existing	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	40,000
---------------	--------

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

Signature of Applicant: [Signature] Date: 1/12/2021

Application Fee	\$
State/Levy Fee	\$
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 0-

Full water project



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-8-2020

Permit Number: BP-2020-01210

GPIN/Tax Map: 45-18-034-0

Issued: 1-22-2021

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 1773 Fox Downing	
	Owner Richard & Leigh La Clair	Phone # 804-334-9484
	Address 1773 Fox Down Lane Goochland, Virginia	Email llaclair@me.com

APPLICANT INFORMATION	Applicant/Contact Cole Interiors Inc.	Phone # 804-514-9606
	Address 1112 Manakin Rd, Rockville Va 23146	Email Coleinteriors@comcast.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Fox Downs	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 75' from PL/PW	Center Line Setback	Rear Setback 35'	CUP/Variance/COA _____
	Side Setback 20'	Side Setback 90'	Flood Zone C	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 12/9/2020

CONTRACTOR INFORMATION	Contractor Cole Interiors Inc.	Phone 804-514-9606
	Address 1112 Manakin Rd. Rockville Va 23146	Email Coleinteriors@comcast.net
	Contractor License Number 2705051138 A Class	Type Class A Expiration 06-30-2021

Scope of Work: Add Addition to Right side of House 25x26 will include Bedroom with Bathroom & Cloest

DESCRIPTION OF WORK	Proposed Use Single Family	Current Use Single Family	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# of Bedrooms 1	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft. 650	Unfinished Sq. Ft. 0	Total Sq. Ft. 650	

Building Only - Excludes All Trades Permits

Value of Work	\$109,000.00
---------------	--------------

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

Signature of Applicant: _____ Date: 12-7-2020

Application Fee	\$ 502.50
State Levy Fee	\$ 10.25
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 537.75



BUILDING PERMIT APPLICATION

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

Application Date: 1-10-21Permit Number: BP-2021-00038GPIN/Tax Map: 33-4-0-22-0Issued: 1-22-2021

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>21602 Gum Drive</u>			
	Owner <u>Debra Jacobsen Sanford</u>	Phone # <u>415-1079</u>		
APPLICANT INFORMATION	Address <u>21602 Gum Rd</u>		Email	
	Applicant/Contact <u>Jeanie Salvatore</u>	Phone # <u>804 621 7718</u>	Email <u>JSalvatore@jesurk.com</u>	
Address <u>2410 Southland Dr</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>Jes Construction</u>		Phone <u>804 621 7718</u>	
	Address <u>2410 Southland</u>			
	Contractor License Number <u>2705 068155</u>	Type <u>A</u>	Expiration <u>1-30-22</u>	

DESCRIPTION OF WORK	Scope of Work: <u>11602 Crawl Seal liner, Dehumidifier for encapsulation.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$8,600</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 Regina Williams Date 1-9-21

Application Fee	\$ <u>50.70</u>
State Levy Fee	\$ <u>1.01</u>
Septic/Wall Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>51.71</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: 1-7-21
 Permit Number: BP-2021-0000B
 GPIN/Tax Map: 42-40-0-28-0 / 6767-01-3027
 Issued: 1-25-21

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 2882 Swann's Peak Cove, Goochland, VA 23063	
	Owner Swann's Inn, LLC (Travis Johnson)	Phone # 804-564-9097
APPLICANT INFORMATION	Address 207 Echo Meadows Rd, Rockville, VA 23146	Email legacyhomes09@aol.com
	Applicant/Contact same as above	Phone # same
	Address same	Email same

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Swann's Inn</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40' from PL/ROW</u>	Center Line Setback <u>45'</u>	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: <u>Survey locates side setback</u>		
Planning & Zoning Officer <u>Daniel Lloyd</u> Date <u>1/12/21</u>				

CONTRACTOR INFORMATION	Contractor Legacy Homes, LLC	Phone 804-564-9097
	Address 207 Echo Meadows Rd	Email legacyhomes09@aol.com
	Contractor License Number <u>2705052698</u>	Type <u>Class A</u>

DESCRIPTION OF WORK	Scope of Work: New construction, 22'x22' detached garage				
	Proposed Use <u>garage</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>2 1/2</u>	# of Bedrooms <u>4</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>484</u>	Total Sq. Ft. <u>484</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.		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>151.99</u>
Signature of Applicant <u>[Signature]</u>		Date	<u>1-4-2021</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: 1-7-2021
 Permit Number: BP-2021-00043
 GPIN/Tax Map: 7715-88-4825 / 58-19-07-0
 Issued: 1-26-2021
 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: 373 Hamlet Rd., Manakin Sabot VA 23103

Owner: Nicholas + Leslie Hardesty
 Phone #: 804 543 6985

Address: 373 Hamlet Rd., Manakin Sabot, VA 23103
 Email: HAMLETCREEKHOMESLLC@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: Nicholas + Leslie Hardesty
 Phone #: 804 543 4091

Address: 373 Hamlet Rd., Manakin Sabot, VA 23103
 Email: Hamletcreekhomesllc@gmail.com

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

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION
 Contractor: Hamlet Creek Homes, LLC
 Phone: 804 543 4091

Address: 373 Hamlet Rd., Manakin Sabot, VA 23103
 Email: Hamletcreekhomesllc@gmail.com

Contractor License Number: 2705175981
 Type: B (RBC) Expiration: 8/31/2022

DESCRIPTION OF WORK
 Scope of Work: Finish basement for living space (rec room) + 1 bathroom

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Living space	Unfinished living space	none		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		1	0	1
Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	1500 SF	100 SF	1600 SF	

Building Only - Excludes All Trades Permits

Value of Work: \$15,000

Application Fee	\$ 79.50
State Levy Fee	\$ 1.59
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 810.9

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: Leslie Hardesty Date: Jan. 7, 2021



BUILDING PERMIT APPLICATION

Application Date: 1/6/21 1-7-2021

Permit Number: BP-2021-00026

GPIN/Tax Map: 7714-34-7101 / 63-1-0-47-0

Issued: 1-26-2021

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 560 Manakin Rd Parcel B	
	Owner Reid Gilley	Phone # 512-6037
	Address P.O. Box 229 Manakin-Sabot VA. 23103	Email CREIDGILLEY@AOL.COM

APPLICANT INFORMATION	Applicant/Contact Reid Gilley	Phone # 804-512-6037
	Address P.O. Box 229 Manakin-Sabot VA	Email CREIDGILLEY@AOL.COM

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 P/L/K/L	Center Line Setback 50'	Rear Setback 5'	GUP/Variance/COA 11-2015-3
	Side Setback 5'	Side Setback 5'	Flood Zone C	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS Planning & Zoning Officer: [Signature] Date: 1/13/21			

CONTRACTOR INFORMATION	Contractor owner / Reid Gilley	Phone 804-512-6037
	Address P.O. Box 229 Manakin Sabot VA. 23103	Email CREIDGILLEY@AOL.COM
	Contractor License Number	Type Expiration

DESCRIPTION OF WORK	Scope of Work: 30x40 pole shed w/12' lean to on 3 sides				
	Personal Proposed Use Tractor / Tool Storage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	N/A SEWER Public/Private	N/A WATER Public/Private	# of Bathrooms N/A	# of Bedrooms N/A	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ 422.00
Value of Work	\$ 36,500.00 → \$ 91,260.00	State Levy Fee	\$ 246.00
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.		Septic/Wall Fee	\$
Signature of Applicant	[Signature]	Zoning Fee	\$ 25.00
Date	1/6/21	RLD	\$
		SWP	\$
		Total	\$ 456.12



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: 1-8-21

Permit Number: BP-2021-00039

GPIN/Tax Map: 6798-35-7844/33-1-0-9-A

Issued: 1-27-21

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: 2541 OLBVILLE RD. GOOCHLAND, VA.

Owner: MICHAEL LEBOUGH Phone #: 804-517-2480

Address: 4669 RIVER RD. WEST. GOOCHLAND VA 23063 Email: ledboughm@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: OWNER. Phone #

Address: Email

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: None Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: 75' from PC/ROW Center Line Setback: 100' Rear Setback: 35' CUP/Variance/COA: _____
 Side Setback: 20' Side Setback: 20' Flood Zone: _____

APPROVED REJECTED COMMENTS: _____ A2
 Planning & Zoning Officer: [Signature] Date: 1/27/21

CONTRACTOR INFORMATION
 Contractor: OWNER Phone: 804-517-2480.

Address: Email

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: FRONT ~~WALKWAY~~ # STEPS. COVERED PORCH.

Proposed Use: RESIDENTIAL Current Use: _____ Environmental Impacts (stream crossing, wetlands, amt land disturbed): _____

SEWER: Public/Private _____ WATER: Public/Private _____ # of Bathrooms: _____ # of Bedrooms: _____ # of floors: 1

Will a foundation be installed within 20 ft. of any septic system components? Yes / No _____ Finished Sq. Ft.: _____ Unfinished Sq. Ft.: 80 sq ft Total Sq. Ft.: 80 sq ft.

Building Only - Excludes All Trades Permits

Value of Work: \$800.00

Application Fee \$ 30.00
 State Levy Fee \$ 2.00
 Septic/Well Fee \$ _____
 Zoning Fee \$ 25.00
 RLD \$ _____
 SWP \$ _____
 Total \$ 57.00

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: 1-8-21



BUILDING PERMIT APPLICATION

Application Date: 01/8/2021

Permit Number: *DP-2021-00034*

GPIN/Tax Map: *1726-71-9334*

Issued: *1-28-21*

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 12000 Avery Point Way, Richmond VA 23233		Phone # 800-619-0017
	Owner Avery Point, LLC		
APPLICANT INFORMATION	Address 12000 Avery Point Way, Richmond VA 23233		Email bridgette.miller@erickson.com
	Applicant/Contact Brinkmann Constructors - Joe Hesse		Phone # 314-596-8322
	Address 16650 Chesterfield Grove Rd, Suite 100. Chesterfield MO 63005		Email jhesse@brinkmannconstructors.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>20' from all Row</i>	Center Line Setback	Rear Setback <i>5'</i>	CUP/Variance/COA <i>P10-2017-19</i>
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <i>M1</i>	
Planning & Zoning Officer: <i>[Signature]</i> Date: <i>1/19/21</i>				

CONTRACTOR INFORMATION	Contractor Brinkmann Constructors		Phone 314-596-8322
	Address 16650 Chesterfield Grove Rd, Suite 100. Chesterfield MO 63005		Email jhesse@brinkmannconstructors.com
	Contractor License Number 10308	Type Business License	Expiration

DESCRIPTION OF WORK	Scope of Work: <i>2016 sq ft</i> Temporary construction trailer <i>for Avery Point</i>				
	Proposed Use Construction Supervision Office	Current Use N/A	Environmental Impacts (stream-crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 - portable toilets	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. 2016	Unfinished Sq. Ft. 0	Total Sq. Ft. 2016	

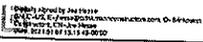
Building Only - Excludes All Trades Permits

Value of Work	\$10,821.00
---------------	-------------

Application Fee	\$ <i>81.16</i>
State Levy Fee	\$ <i>1.62</i>
Septic/Well Fee	\$
Zoning Fee	\$ <i>50.00</i>
RLD	\$
SWP	\$
Total	\$ <i>132.78</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: Joe Hesse Date: 01/07/2021





BUILDING PERMIT APPLICATION

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

Application Date: 1-20-21

Permit Number: BP-2021-00063

GPIN/Tax Map: 4813-08-1553/4-7-0-18-0

Issued: 1-28-21

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>4853 Shannon Hill Rd Columbia VA 23038</u>	Phone # <u>(540) 903-9990</u>
	Owner <u>Debra Hare</u>	Email <u>dhare31263@gmail.com</u>
APPLICANT INFORMATION	Address <u>4853 Shannon Hill Road</u>	Phone #
	Applicant/Contact <u>Debra Hare</u>	Email
	Address <u>6037 Ridge Rd Columbia VA 23038</u>	

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

CONTRACTOR INFORMATION	Contractor <u>Owner</u>	Phone <u>(540) 903-9990</u>
	Address <u>6037 Ridge Rd Columbia VA 23038</u>	Email <u>dhare31263@gmail.com</u>
	Contractor License Number	Type Expiration

Scope of Work: Remodel mobile home. Replace windows, doors, repair holes in floors and walls. Repair exterior sheathing + Remodel windows, doors, sides, replace siding where missing.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work <u>\$4000</u>	Application Fee \$ <u>3000</u>
	State Levy Fee \$ <u>60</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ _____
	RLD \$ _____
	SWP \$ _____
Signature of Applicant <u>Debra Hare</u> Date <u>1/14/2021</u>	Total \$ <u>3060</u>



BUILDING PERMIT APPLICATION

Application Date: ~~11-30-20~~ 1-19-2021

Permit Number: BP-2021-00073

GPIN/Tax Map: 58-3-C-4-0 / 7726-17-9036

Issued: 1-29-2021

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 1582 BIRCH ROAD	
	Owner Kitt Eric A	Phone # 836-4659
	Address 6505 Glenshaw Drive	

APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE		Phone # 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA		Email JSALVATORE@JESWORK.COM

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

CONTRACTOR INFORMATION	Contractor JES CONSTRUCTION		Phone 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA		Email JSALVATORE@JESWORK.COM
	Contractor License Number 2705-06-8655	Type A	Expiration 4-30-22

DESCRIPTION OF WORK	Scope of Work: 64 WATER MANAGEMENT DRAINAGE, SUMP PUMP				
	Proposed Use RES	Current Use RES	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee \$ 43.61 State Levy Fee \$.87 Septic/Well Fee \$ Zoning Fee \$ RLD \$ SWP \$ Total \$ 44.48
Value of Work	7,023.03	
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	Jeannie Salvatore Date 11-30-20	



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

mailed 1/14

P. O. Box 119 Goochland, VA 23063

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

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

Date <u>1-27-2021</u>
Permit # <u>EL-2021-00111</u>
GPIN
Tax Map

LOCATION

Street Address 104 Fox Gate Lane

PROPERTY OWNERSHIP

Name <u>Jay Jennings</u>	Phone <u>(804) 337-2014</u>
Mailing Address <u>104 Fox Gate Lane Richmond, VA 23238</u>	Email <u>—</u>

APPLICANT

Name <u>Melanie Dowler</u>	Phone <u>(804) 746-2240</u>
Address <u>8420 meadowbridge Rd Meck. VA 23116</u>	Email <u>Melanie@mwbutler electrical.com</u>

CONTRACTOR

Name <u>MW Butler Electrical</u>	Phone <u>(804) 746-2240</u>
Mailing Address <u>8420 meadowbridge Rd Meck. VA 23116</u>	Email <u>same</u>
Gas Certification <u>YES</u> <input type="checkbox"/> <u>NO</u> <input checked="" type="checkbox"/> <u>Grant by others</u>	State License Number <u>2705110673</u> Expiration <u>1/31/22</u> License Type <u>Elec.</u> Class <u>A</u>

DESCRIPTION OF WORK

Wire 22kw generator w/ (2) 200 amp transfer switches

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <u>12,000</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: Melanie Dowler Date: 1/14/21

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>76.50</u>	Approval date: <u>1-27-2021</u>
	Issued date: <u>1-27-2021</u>



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date 1-20-2021
Permit # ELI-2021-000970
GPIN
Tax Map

LOCATION

Street Address 6051 Three Chopt Rd. Kents Store, Va 23084

PROPERTY OWNERSHIP

Name David & Brenda Tinsley	Phone 434.589.6885
Mailing Address 6051 Three Chopt Rd Kents Store	Email

APPLICANT

Name Edmund Medeiros	Phone 434-975-3275
Address 2293 Seminole Lane Charlottesville Va 22901	Email eddieneverdark@gmail.com

CONTRACTOR

Name Never Dark Whole House Generators	Phone 434-975-3275
Mailing Address 2293 Seminole Ln Charlottesville, Va 22901	Email eddieneverdark@gmail.com
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705141802 2710025076
Expiration 7.31.2021	License Type Contractors
	Class A

DESCRIPTION OF WORK

Wiring 22 KW automatic generator with automatic transfer on essential circuits only			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 5,500			

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

Signature of Applicant: Ed Medeiros Date: 1.14.21

Office Use Only

Approval: Fisher Approval date: 1-25-2021
 Permit Fee: 46.67 Issued date: 1-26-2021

1.14

\$74.10



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	1.14.2021
Permit #	2112021-0004
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.

stand alone

LOCATION

Street Address	1748 FISHERS POND	District	
----------------	-------------------	----------	--

PROPERTY OWNERSHIP

Name	JONQUIL HILL	Phone	281-620-9404
Mailing Address	1748 FISHERS POND		

APPLICANT

Name	WOODFIN HEATING	Phone	8042778603
E-Mail Address	AWILLS@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-764-4533
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	AWILLS@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
		Expiration	11/2022
		License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

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

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

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

(Signature)

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

(Notary)

My commission expires _____

Signature of Applicant *[Signature]*

Approval *[Signature]* Date 1-2021

Value of Work: 11,477

Permit fee: 74.10

Issue date: 1-2021



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

1-6-2021

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	11/12/20
Permit #	EL-2020-00005
GPIN	
Tax Map	

LOCATION

Street Address
 1650 FOX DOWNS LANE 23129

PROPERTY OWNERSHIP

Name	MATT WALTERS	Phone	804-467-8802
Mailing Address	1650 FOX DOWNS LANE 23129	Email	MWALTERS8@GMAIL.COM

APPLICANT

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

CONTRACTOR

Name	Virgina Power Solutions	Phone	804-365-0263
Mailing Address	10102 Whitesel Road, B, Ashland, VA 23005	Email	service@viriniapowersolutions.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 10KW GENERATOR WITH 16KW GENERATOR. WIRE TO EXISTING
 SELECTIVE CIRCUIT 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: 11/12/20

Office Use Only

Approval date: _____

Issued date: _____

#58.14 (owner's statement on back)

1.7

\$ 69.96



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

1-5-2021

Date	1.4.2021
Permit #	ELI-2021-00016
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	1828 LONGBRANCH DR	District	
----------------	--------------------	----------	--

PROPERTY OWNERSHIP

Name	HAL AND SHIRLEY RAGLAND	Phone	804-556-2876
Mailing Address	1828 LONGBRANCH DR		

APPLICANT

Name	WOODFIN HEATING	Phone	8042778603
E-Mail Address	AWILLS@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-764-4533
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	AWILLS@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

22 KW GENERATOR, 200 AMP ATS, SURGE			
# of Baths	Service Size	Power Company	Inquiry #

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 10,575

Signature of Applicant Bib my

Permit fee: 69.96

Approval Fisher Date 1-5-2021

Issue date: 1-7-2021

1.7

\$ 68.36



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

1-5-2021

Date	1.4.2021
Permit #	ELI-2021-00015
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	4409 RIVER RD	District	
----------------	----------------------	----------	--

PROPERTY OWNERSHIP

Name	DELORES HARRIS	Phone	917-881-3440
Mailing Address	4409 RIVER RD		

APPLICANT

Name	WOODFIN HEATING	Phone	8042778603
E-Mail Address	AWILLS@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-764-4533
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	AWILLS@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

22 KW GENERATOR, 200 AMP ATS			
# of Baths	Service Size	Power Company	Inquiry #

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 10,227

Signature of Applicant Bob [unclear]

Permit fee: 68.36

Approval Fisher Date _____

Issue date: 1-7-2021

1.8

\$63.45



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

1-5-2021

Date	1.4.2021
Permit #	ELI-2021-00017
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	17 BUCK BRANCH DR	District	
----------------	--------------------------	----------	--

PROPERTY OWNERSHIP

Name	MICHAEL ROSSETTI	Phone	804-339-1910
Mailing Address	17 BUCK BRANCH DR		

APPLICANT

Name	WOODFIN HEATING	Phone	8042778603
E-Mail Address	AWILLS@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING		Phone	804-764-4533
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230	E-mail address:	AWILLS@ASKWOODFIN.COM	
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type: Class: A
		2701037820	11/2022	CONTRACTOR

DESCRIPTION OF WORK

22 KW GENERATOR, 200 AMP ATS, SURGE

# of Baths	Service Size	Power Company	Inquiry #

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

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

_____(Signature)

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

_____(Notary)

My commission expires _____

Value of Work: 9,156

Signature of Applicant Be...

Permit fee: 63.45

Approval Fisher Date 1-7-2021

Issue date: 1-7-2021



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

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

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

Date	1-6-2021 1/5/21
Permit #	EL-2021-00006
GPIN	
Tax Map	

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

LOCATION

Street Address
2170 HASKIN ROAD 23063

PROPERTY OWNERSHIP

Name RUBY MARTIN	Phone 804-212-7577
Mailing Address 2170 HASKIN ROAD 23063	Email N/A

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

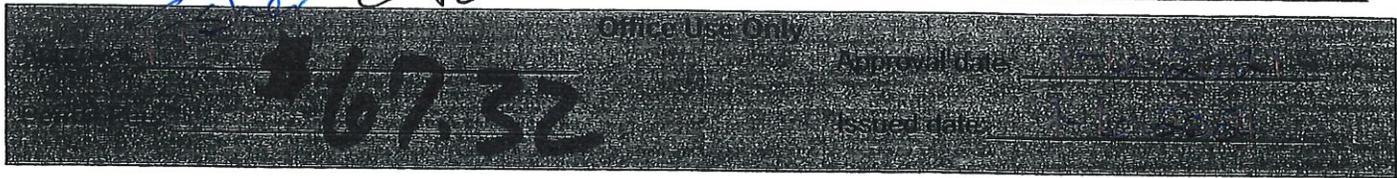
DESCRIPTION OF WORK

INSTALL 22KW GENERATOR AND 200A SWITCH

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$10,000.00			

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: 1/5/21



(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

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

1-6-21

Date 1/5/21
Permit # EU-2021-00007
GPIN
Tax Map

Type:	<input type="checkbox"/> Commercial
	<input checked="" type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input checked="" type="checkbox"/> Electrical
	<input type="checkbox"/> Mechanical
	<input type="checkbox"/> Plumbing
	<input type="checkbox"/> Gas

LOCATION

Street Address 2178 HASKIN ROAD 23063

PROPERTY OWNERSHIP

Name WILL MARTIN	Phone 804-306-1515
Mailing Address 2178 HASKIN ROAD 23063	Email N/A

APPLICANT

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

CONTRACTOR

Name Virgina Power Solutions		Phone 804-365-0263	
Mailing Address 10102 Whitesel Road, B, Ashland, VA 23005		Email service@viriniapowersolutions.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

INSTALL 22KW GENERATOR AND 200A SWITCH			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$10,000.00			

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: **1/5/21**



(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date	1-19-2021
Permit #	EL-2021-00062
GPIN	
Tax Map	

LOCATION

Street Address: 122 W Square Drive

PROPERTY OWNERSHIP

Name	Carole Bates	Phone	784-3510
Mailing Address	122 W Square Dr	Email	

APPLICANT

Name	Crystal Ferrell	Phone	355-7018
Address	1407 Cummings Dr	Email	Crystal.ferrell@ michaelandson.com

CONTRACTOR

Name	Michael and Son	Phone	355-7018		
Mailing Address	1407 Cummings Drive	Email			
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2701038423	12-31-2022		A

DESCRIPTION OF WORK

installing 20KW generator

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$7000.00			

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: C Ferrell Date: 1/18/21

Office Use Only	
Approval: <u>Fisher</u>	Approval date: <u>1-19-2021</u>
Permit Fee: <u>5355</u>	Issued date: <u>1-19-2021</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



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: 1/25/2021

Permit #: 21-00087

Map #:

LOCATION

Street Address: 2278 Sandy Hook

District:

PROPERTY OWNERSHIP

Name: Lynn Powell

Mailing Address: 2278 Sandy Hook

Phone: 804 514 1994

CONTRACTOR

Company Name: Jimmy Electrical Service

Mailing Address: 6207 Lakeside Ave, Henrico, VA 23228

State License Number: 2705020017

Expiration: 02/28/21

Gas Certification: YES NO

License Type: ELE

Class: B

Phone: 804-260-3681

DESCRIPTION OF WORK

of baths: 200

Service size: 200 amps

Power Company: 15kW

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 AFFIRM THAT I AM THE OWNER OF A CERTAIN TRACT OR PARCEL OF LAND LOCATED AT _____ OF (ADDRESS) _____ AFFIRM THAT I AM THE OWNER AS REQUIRED BY SECTION 54.1-111 OF THE CODE OF VIRGINIA.

SIGNED AND ACKNOWLEDGED BY _____ VIRGINIA ON THE _____ DAY OF _____ 20____ IN THE CITY OR COUNTY OF _____ UNDERSIGNED NOTARY. _____ (NOTARY) MY COMMISSION EXPIRES _____

Signature of Applicant: *Jimmy Powell*

Date: 1-25-21

Approval: *Fisher*

Cost of Job: \$1500.00

Permit Fee: \$30.00

Issue Date: 1-25-21

(OWNER)