

Issued 2-16-2021



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

FAX: (804) 556-5654

### Office Use Only

Application File Date: 2-16-21

Application No.: AP-2021-00190

Fee: \$25.00

Zoning Approval:  Yes *Anta Bañeres*

No:

Date: 2/10/21

Zoning Application Type: Please check appropriate box:

<input checked="" type="checkbox"/>	Residential
<input type="checkbox"/>	Commercial

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: *Elliot Kirk Umberger*

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

Address: *5390 River Road West*

Cell phone: *804-852-1691*

*Goochland VA 23063*

FAX: \_\_\_\_\_

E-mail: *BUPNET@gmail.com*

Name of Applicant: \_\_\_\_\_

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

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

Cell phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

FAX: \_\_\_\_\_

### Property Information

Street Address: *5390 River Road West*

Zoning: *A1*

GPIN Number: *6709-91-1096*

Acreage: *5*

Existing Use: *Agricultural / Residential*

Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire: \_\_\_\_\_

### Project Information

1. Estimated square footage of the building(s): *1,500*      2. Value of Building: *\$16,978.00*

3. Written Description of Proposed Physical Improvements:

*Metal building for storage of machinery, equipment and farm supplies*

# BUILDING PERMIT APPLICATION

Application Date: 12-8-20  
 Permit Number: BP-2020-01212  
 GPIN/Tax Map: 69316-06-3942 / 40-8-0-0-2  
 Issued: 1-5-20  
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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: 1461 Rockcastle Road Goochland, VA 23063  
 Owner: MATT TONGY Phone #: 804-870-5028  
 Address: 3898 OLD STAGE ROAD Goochland VA 23063 Email:

**APPLICANT INFORMATION**  
 Applicant/Contact: Jim Starke Phone #: 804-519-6270  
 Address: 1707 SHALLOW WOOD RD. MANASSAS - SHOOT VA 23103 Email: Jim Starke @ Gmatic.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: None Proffer:  Yes  No Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 Front Setback: 55' from PL / ROW Center Line Setback: \_\_\_\_\_ Rear Setback: 5' CUP/Variance/COA:  
 Side Setback: 5' Side Setback: 5' Flood Zone: X \_\_\_\_\_ A1  
 APPROVED  REJECTED  COMMENTS:  
 Planning & Zoning Officer: David Kesy Date: 12/9/2020

**CONTRACTOR INFORMATION**  
 Contractor: STARKE CONSTRUCTION Phone: 804-519-6270  
 Address: 1707 SHALLOW WOOD RD. MANASSAS - SHOOT VA 23103 Email: Jim Starke @ gmatic.com  
 Contractor License Number: 2705038805 Type: CBC RBC Expiration: 30 April 2021

**DESCRIPTION OF WORK**  
 Scope of Work: REVISED. 21-21- 32 x 32 w/  
NEW DETACHED GARAGE 32 x 48 UNFINISHED SECOND FLOOR  

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>1536</u>	<u>1536-1866</u>	

**Building Only - Excludes All Trades Permits**  
 Value of Work: \$40,000 ~~\$49,920.00~~ ~~\$20,645~~ 1866  
 I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: [Signature] Date: 7 Dec 2020  

Application Fee	\$ <u>2316.64</u>
State Levy Fee	\$ <u>4.93</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>2106.37</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: January 20, 2021

Permit Number: BP-2021-00084

GPIN/Tax Map: 15-5-0-29-0 / 5189-78-1920

Issued: 2-2-21

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 2715 Ravenwood Road, Columbia, Virginia 23038	
	Owner <b>Eric &amp; Bethany Jessee</b>	Phone # <b>(703) 638-8448</b>
	Address 2715 Ravenwood Road, Columbia, Virginia 23038	Email <b>Btubach@yahoo.com</b>

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

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

CONTRACTOR INFORMATION	Contractor <b>JES Construction, LLC</b>		Phone <b>(804) 495-4646</b>
	Address 2410 Southland Drive, Chester, Virginia 23831		Email <b>Kvasquez@jeswork.com</b>
	Contractor License Number <b>2705068655</b>	Type	Expiration <b>04-30-2022</b>

DESCRIPTION OF WORK	Scope of Work: <b>Install five (5) Wall Anchors</b>				
	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 2.0	# of Bedrooms 3.0	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 994		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>34.50</u>
Value of Work	<b>5,000.00</b>	State Levy Fee \$ <u>0.09</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 <u>Karen Vasquez</u> Date <u>January 20, 2021</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total <b>\$35.19</b>



# BUILDING PERMIT APPLICATION

Application Date: 01-13-2021

Permit Number: BP-2021-00069

GPIN/Tax Map: 6780-07-6312 / 44-15-1-9-0

Issued: 2-2-2021

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>1933 Coventry Road</u>	
	Owner <u>Monique &amp; John Neal</u>	Phone # <u>540-273-0708</u>
	Address <u>1933 Coventry Road</u>	Email <u>beatrice.gates@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Anna Leon</u>	Phone # <u>661-714-8243</u>
	Address <u>3902 Floyd Ave, Richmond, 23221</u>	Email <u>annaleondesign@gmail.com</u>

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

CONTRACTOR INFORMATION	Contractor <u>ODAMA Construction LLC</u>		Phone <u>661-714-8243</u>
	Address <u>PO Box 37158</u>		Email <u>annaleon design@gmail.com</u>
	Contractor License Number <u>2705172635</u>	Type <u>CLASS A</u>	Expiration <u>7-31-2021</u>

DESCRIPTION OF WORK	Scope of Work: <u>mezzanine level in foyer drywall, painting, trim, add mezzanine, built in shelves</u>				
	Proposed Use <u>mezzanine lounge</u>	Current Use <u>open foyer</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>none</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes (No)	Finished Sq. Ft. <u>116</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>116</u>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>97.27</u>
Value of Work <u>\$18,950</u>		State Levy Fee \$ <u>1.95</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
Signature of Applicant <u>[Signature]</u>	Date <u>1/12/2021</u>	Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>99.22</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-2021-00025  
 GPIN/Tax Map: 6778-79-5311 / 32-10-1-22-0  
 Issued: 2-2-2021  
 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: 2483 Shady Oaks Trl Maidens, VA 23102  
 Owner: Bryan R. Blocker  
 Address: " "  
 Phone #: 804-840-7686  
 Email: Bryan-Blocker@yahoo.com

**APPLICANT INFORMATION**  
 Applicant/Contact: " "  
 Address: " "  
 Phone #: " "  
 Email: " "

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: Three Oaks Proffer  Yes  No Amount: — Date Paid: —  
 Front Setback: 55' from P/L/POW Center Line Setback: — Rear Setback: 5' CUP/Variance/COA: —  
 Side Setback: 5' Side Setback: 5' Flood Zone: — A-2

APPROVED  REJECTED  COMMENTS: —  
 Planning & Zoning Officer: [Signature] Date: 1/19/21

**CONTRACTOR INFORMATION**  
 Contractor: Steve Caraber (Superior Buildings) Phone: 804-937-0446  
 Address: 4998 Shipp Lane Email: Steve@superiorbuilding.net  
 Contractor License Number: 21865 Type: pro. engineer Expiration: 4-30-21

**DESCRIPTION OF WORK**  
 Scope of Work: 2705-128439  
Detached Garage 30x40 + 12x40 lean to  

Proposed Use: <u>private</u>	Current Use: <u>—</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>—</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>—</u>	# of Bedrooms: <u>—</u>	# of floors: <u>—</u>
Will a foundation be installed within 20 ft. of any septic system components? Yes/No: <u>No</u>	Finished Sq. Ft.: <u>1200</u>	Unfinished Sq. Ft.: <u>1200 + 1680</u>	Total Sq. Ft.: <u>1200 + 1680</u>	

**Building Only - Excludes All Trades Permits**

Value of Work: <u>\$35,000</u> <u>\$54,600</u>	Application Fee: \$ <u>257.70</u>
	State Levy Fee: \$ <u>5.15</u>
	Septic/Well Fee: \$ <u>—</u>
	Zoning Fee: \$ <u>25.00</u>
	RLD: \$ <u>—</u>
	SWP: \$ <u>—</u>
Signature of Applicant: <u>[Signature]</u> Date: <u>1-7-21</u>	Total: \$ <u>287.85</u>

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



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 10-21-2020 ~~11-12-2020~~

Permit Number: BP-2020-0109

GPIN/Tax Map: 7716-03-4315/57-1-056-A1

Issued: 2-2021

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.

RECEIVED

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

Site Address: 14 Starwood Lane Manakin Sabot, VA 23103

Owner: Rockyd Land LLC

Address: SAME

Applicant/Contact: Christopher Irby

Address: 123 Libbie Ave

Phone #: 804-664-4117

Email: cirby@manakinco.com

Phone #: SAME

Subdivision: None	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: 55' from Prop Line / Rear	Center Line Setback: _____	Rear Setback: 5'	CUP/Variance/COA: _____
Side Setback: 5'	Side Setback: 5'	Flood Zone: _____	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____			
Planning & Zoning Officer: <u>Dwight Floyd</u>		Date: 11/17/2020	

Contractor: Newman Builders Inc (Owner)

Address: 1000 Cycle Lane South Hill VA 23070

Phone: 434-917-3826

Email: N/A

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

Scope of Work: Structure is existing - Personal use only!  
 Erect carport/shed 44x31 detached storage structure

Proposed Use: farm equipment storage	Current Use: _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed): NONE		
SEWER: Public/Private NONE	WATER: Public/Private _____	# of Bathrooms: NONE	# of Bedrooms: NA	# of floors: 1
Will a foundation be installed within 20 ft. of any septic system components? Yes (No)	Finished Sq. Ft.: N/A	Unfinished Sq. Ft.: 1364	Total Sq. Ft.: 1364	

Building Only - Excludes All Trades Permits

Value of Work: ~~12000~~ 37,510

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: 11.11.20

Application Fee	\$ 180.79
State Levy Fee	\$ 3.62
Septic/Well Fee	\$ _____
Zoning Fee	\$ 2500
RLD	\$ _____
SWP	\$ _____
Total	\$ 209.41

# BUILDING PERMIT APPLICATION

Application Date: 01/12/2021

Permit Number: BP-2021-00109

GPIN/Tax Map: 7738-21-5725

Issued: 2-3-21

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.

County of Building Inspection  
 Box 119  
 Highland, 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: 6100 Pouncey Tract Rd.

Owner: 7 Eleven Inc Phone #: \_\_\_\_\_

Address: 3200 Hackberry Road, Irving, TX 75063 Email: \_\_\_\_\_

**APPLICANT INFORMATION**

Applicant/Contact: Jeff Lee Phone #: 804-605-1396

Address: 2510 Willis Rd, N. Chesterfield, VA 23237 Email: jeff.lee@SuperiorSignsRVA.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>None</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>5' from PL/ROW</u>	Center Line Setback: <u>30'</u>	Rear Setback: _____	CUP/Variance/COA: _____
Side Setback: _____	Side Setback: _____	Flood Zone: _____	

APPROVED  REJECTED  COMMENTS: B1

Planning & Zoning Officer: [Signature] Date: 1/29/21

**CONTRACTOR INFORMATION**

Contractor: Superior Signs LLC Phone: 804-271-5685

Address: 2510 Willis Rd, N. Chesterfield, VA 23237 Email: jeff.lee@SuperiorSignsRVA.com

Contractor License Number: 2705156399 Type: CBC, RBC Expiration: 03-31-2021

**DESCRIPTION OF WORK**

Scope of Work: Replace (4) wall signs, reface (1) wall sign, install (3) wall signs, & refurbish (1) monument sign per attached plans.

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: \$4800.00

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: 01/12/2021

Application Fee	\$ <u>36.00</u>
State Levy Fee	\$ <u>.72</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>86.72</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 12/30/20  
Permit Number: BP-2020-01281  
GPIN/Tax Map: 6767-03-4917  
Issued: 2-4-2021  
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: 3001 River Road West  
Owner: Goochland Homes Phone #: 804-556-6260  
Address: 3001 River Road W Email:

**APPLICANT INFORMATION**  
Applicant/Contact: Ops Construction Phone #: 804/621-7718  
Address: 2410 Southland Email: JSalvatore@jeswork.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
Subdivision: \_\_\_\_\_ Proffer  Yes  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: Jes Construction Phone: 804 621 7718  
Address: 2410 Southland Dr  
Contractor License Number: 27605 06 8655 Type: A Expiration: 4-30-22

**DESCRIPTION OF WORK**  
Scope of Work: 132 Water Management Orceage, Sump Pump  
Proposed Use: \_\_\_\_\_ Current Use: \_\_\_\_\_ Environmental Impacts (stream crossing, wetlands, amt land disturbed): \_\_\_\_\_  
 SEWER Public/Private   WATER Public/Private  # of Bathrooms: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_ # of floors: \_\_\_\_\_  
Finished Sq. Ft.: \_\_\_\_\_ Unfinished Sq. Ft.: \_\_\_\_\_ Total Sq. Ft.: \_\_\_\_\_

**Building Only - Excludes All Trades Permits**  
Value of Work: 12,940.00

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: 12-28-20

Application Fee	\$ <u>9710</u>
State Levy Fee	\$ <u>1.94</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>9904</u>

1-19-2021



# 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: January 16, 2021

Permit Number: BP-2021-00077

GPIN/Tax Map: 6726-03-4292/50-9-0-8-0

Issued: 2-5-2021

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.

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: 1106 Castle View Drive, Goochland VA 23063

Owner: Joseph M Ayres Jr. Phone #: 804-543-8729

Address: 1106 Castle View Drive, Goochland VA 23063 Email: jmaj94@hughes.net

**APPLICANT INFORMATION**

Applicant/Contact: Joe Ayres Phone #: 804-543-8729

Address: 1106 Castle View Drive, Goochland VA 23063 Email: jmaj94@hughes.net

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: Castle View Proffer:  Yes  No Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Front Setback: 55' from PC/RAW Center Line Setback: \_\_\_\_\_ Rear Setback: 5' CUP/Variance/COA: \_\_\_\_\_

Side Setback: 5' Side Setback: 5' Flood Zone: \_\_\_\_\_

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

Planning & Zoning Officer: David Boyd Date: 1/26/21

**CONTRACTOR INFORMATION**

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

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

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

**DESCRIPTION OF WORK**

Scope of Work: Addition of 20' x 50' to existing garage

Proposed Use <b>Garage</b>	Current Use <b>Garage</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components? Yes ( ) No ( <u>X</u> )	Finished Sq. Ft. <u>1000</u>	Unfinished Sq. Ft. <u>1000</u>	Total Sq. Ft. <u>1000</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$ 40,000</u>	Application Fee	<u>\$ 192.00</u>
		State Levy Fee	<u>\$ 3.84</u>
		Septic/Well Fee	<u>\$ _____</u>
		Zoning Fee	<u>\$ 25.00</u>
		RLD	<u>\$ _____</u>
		SWP	<u>\$ _____</u>
		Total	<u>\$ 220.84</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: Joe M Ayres Date: 01-16-2021



# BUILDING PERMIT APPLICATION

Application Date: 1-15-2021  
 Permit Number: BP-2021-00047  
 GPIN/Tax Map: 7738-20-3902/48-17-0-21-0  
 Issued: 2-5-2021  
 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>7040 Benhall cir Glen Allen Va. 23059</u>	
	Owner <u>William M. Thomas jr.</u>	Phone # <u>804 709-1929</u>
	Address <u>7040 Benhall cir.</u>	Email
APPLICANT INFORMATION	Applicant/Contact	
	Address	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parkside Village</u>	Proffer <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' Per Perimeter</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>1/19/21</u>			

CONTRACTOR INFORMATION	Contractor <u>William M. Thomas jr. owner</u>		Phone <u>804 709-1929</u>
	Address <u>7040 Benhall cir</u>		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Stoop on Back House</u> <u>75x40</u> <u>10 1/2</u> <u>in</u> <u>in</u> <u>sq ft</u> <u>6.25</u> <u>x</u> <u>3.33</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>3000 21</u> <u>3000 21</u>

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30-</u>
Value of Work	<u>\$ 1000.00</u>	State Levy Fee	\$ <u>.60</u>
		Septic/Wall Fee	\$
		Zoning Fee	\$ <u>25-</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>55.60</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 William M. Thomas jr. Date 12-29-2020



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: December 9, 2020

Permit Number: BP-2020-01230

GPIN/Tax Map: 7715-46-4442 / 58-48-8-55-0

Issued: 2-4-21

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 854 Merewood Court Manakin VA 23103	
	Owner Mr and Mrs Kevin Rotty	Phone #
	Address 854 Merewood Ct Manakin VA 23103	Email
APPLICANT INFORMATION	Applicant/Contact Matt Helms	Phone # 804-690-9605
	Address 2508 Turkey Creek Rd Oilville VA 23129	Email mathelms@westviewcompanies.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Kinloch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>30' from boundary</u>	Center Line Setback —	Rear Setback <u>50' B/S</u>	CUP/Variance/COA <u>RPUD</u>
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>12/18/2020</u>			

CONTRACTOR INFORMATION	Contractor WestView Companies, Inc	Phone 804-690-9605
	Address 2508 Turkey Creek Rd Oilville VA 23129	Email mathelms@westviewcompanies.com
	Contractor License Number 2705117309	Type A

DESCRIPTION OF WORK	Scope of Work: Extend existing masonry porch at rear of structure and add flat roof. Foundation and finish floor to be brick and stone. Roof to be finished with TPO <i>by 100 sq ft 250.</i>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</u>	# of floors <u>N/A</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>504 - 100</u>	<u>504 - 100</u>	<u>250 sq ft</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	18,000	250 sq ft	Application Fee	\$ <u>93.00</u>
			State Levy Fee	\$ <u>1.86</u>
			Septic/Well Fee	\$
			Zoning Fee	\$ <u>25.00</u>
			RLD	\$
			SWP	\$
			Total	\$ <u>119.86</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.

Signature of Applicant [Signature] Date 12/9/2020

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

Residential  Commercial

Permit Number: 12-4-2020  
 BP-2020-01221

GPIN/Tax Map: 6767-29-3012

Issued: 2-5-21

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 2732 Fairground Rd. Goochland, Va 23063	
	Owner Court House Ventures, LLC <sup>OR COURTHOUSE COMMONS LLC</sup>	Phone # 804-301-3600
	Address 4708 Heartstone Rd. Glen Allen, Va. 23059	Email arth93@rcn.com

APPLICANT INFORMATION	Applicant/Contact Michael Woodson		Phone # 804-837-1358
	Address 1231 Gladstone Glen pl. Midlothian, Va 23114		Email classicsignsopsmgr@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 checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: No change in footprint or size. <sup>P1</sup>			
	Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>12/15/2020</u>			

CONTRACTOR INFORMATION	Contractor MVM Cardinal Sign Co.		Phone 804-837-1358
	Address <del>Dome as</del> 2629 LEAN DR VA BEACH, VA		Email classicsignsopsmgr@gmail.com
	Contractor License Number 2701015316-A	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Please contact Mr. Woodson when permit is ready. Replace existing channel letter sign on front of building with new LED channel letter sign, Replace 2 faces in monument sign with new.				
	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. Same as existing	
	Building Only - Excludes All Trades Permits				

Value of Work	\$4,000.00	Application Fee	\$ 30.00
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.		State Levy Fee	\$ 60
		Septic/Well Fee	\$
		Zoning Fee	\$
		RLD	\$
		SWP	\$
Signature of Applicant: <u>Michael Woodson</u>	Date: <u>11/4/2020</u>	Total	\$ 30.00



# 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: 1-25-21

Permit Number: BP-2021-00089

GPIN/Tax Map: 7704-85-6237/62-38-0-49-0

Issued: Issued 2-5-21

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>409 Powhatan Hill Place</u>			
	Owner <u>Richard + Cynthia Longerbeam</u>	Phone # <u>467-4861</u>		
APPLICANT INFORMATION	Address <u>409 Powhatan Hill Place</u>		Email <u>vtlongerbeam@verizon.net</u>	
	Applicant/Contact <u>Jack Bergman</u>		Phone # <u>804-229-3764</u>	
	Address <u>17801 Hull St Rd Moseley VA</u>		Email <u>jack@thedeck-tech.com</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer _____		Date _____	

CONTRACTOR INFORMATION	Contractor <u>JB Contracting Inc DBA The Deck Tech</u>		Phone <u>804-744-1001</u>
	Address <u>17801 Hull St Rd Moseley VA 23120</u>		Email <u>jack@thedeck-tech.com</u>
	Contractor License Number <u>2705127080</u>	Type <u>Class A</u>	Expiration <u>4-30-21</u>

DESCRIPTION OF WORK	Scope of Work: <u>12x14 Screen Porch w/ new Fatus staying in existing footprint</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# 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>168'</u>	

Building Only - Excludes All Trades Permits		Application Fee <u>\$156.00</u>	
Value of Work <u>\$32,000.00</u>		State Levy Fee <u>\$3.12</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>[Signature]</u> Date <u>1/18/21</u>		Septic/Well Fee <u>\$</u>	
		Zoning Fee <u>\$</u>	
		RLD <u>\$</u>	
		SWP <u>\$</u>	
		Total <u>\$159.12</u>	



# BUILDING PERMIT APPLICATION

Application Date: 1-11-21

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

Permit Number: BP-2021-00101

GPIN/Tax Map: 72A-60-3057 / 6A-12-B-11-0

Issued: 2-5-21

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 409 Briarwood		Phone # (804) 357-1200		
	Owner <b>GREG BALES</b>		Email		
	Address 409 Briarwood		Email		
APPLICANT INFORMATION	Applicant/Contact <b>JES CONST</b>		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 <b>JES CONSTRUCTION</b>		Phone 804-621-7718		
	Address 2410 SOUTHLAND DR		Email JSALVATORE@JESWORK.COM		
	Contractor License Number 2705068655	Type A	Expiration 4-30-22		
DESCRIPTION OF WORK	Scope of Work: 136 LF WATER MANAGMENT DRAINAGE, SUMP PUMP, 1060 CRAWL SEAL LINER, DEHUMIDIFIER				
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work	16,989.00
---------------	-----------

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

Signature of Applicant Jeannie Salvatore Date 1-11-21

Application Fee	\$ <u>88.45</u>
State Levy Fee	\$ <u>1.77</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>90.22</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: 1-27-21

Permit Number: 2021-00106

GPIN/Tax Map: 7704-25-1641 / 62-38-0-32-0

Issued: 2-5-21

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>308 Libby Hill Court</u>			
	Owner <u>Roland + Brenda Turner</u>	Phone # <u>356-1814</u>		
	Address <u>308 Libby Hill ct Manakin-Sabot VA 23103</u>	Email <u>Roland.turner50@gmail.com</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Jack Bergman</u>			
	Address <u>17801 Hull St Rd Moseley VA 23120</u>	Phone # <u>804-229-3964</u>	Email <u>jack@thedeck-tech.com</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
Planning & Zoning Officer _____ Date _____				

CONTRACTOR INFORMATION	Contractor <u>JB Contracting Inc DBA The Deck Tech</u>		Phone <u>804-744-1001</u>
	Address <u>17801 Hull St Rd Moseley VA 23120</u>		Email <u>jack@thedeck-tech.com</u>
	Contractor License Number <u>2705127080</u>	Type <u>CLASS A HIC, etc RLD</u>	Expiration <u>4-30-21</u>

DESCRIPTION OF WORK	Scope of Work: <u>Remove Rails on Existing deck - in Porch area. Add 12x10 Screen Porch onto Existing deck w/ new Footers</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>SEWER</u> Public/Private	<u>WATER</u> 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>120'</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$22,800</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: 1/27/21

Application Fee	\$ <u>114.89</u>
State Levy Fee	\$ <u>2.30</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
<b>Total</b>	\$ <u>117.19</u>



# BUILDING PERMIT APPLICATION

Application Date: 1-14-21

Permit Number: BP-2021-00046

GPIN/Tax Map: 6786-87-7726 / 45-1-0-43-A

Issued: 2-5-21

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Amber Lake</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>—</u>	<u>—</u>
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>75' from PL/ROW</u>	<u>—</u>	<u>35'</u>	
Side Setback	Side Setback	Flood Zone		
	<u>20'</u>	<u>30'</u>	<u>—</u>	<u>A2</u>
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer		<u>David Floyd</u>		Date <u>1/15/21</u>

CONTRACTOR INFORMATION	Contractor	<u>Same</u>		
	Address			
	Contractor License Number	Type	Expiration <u>extend</u>	

DESCRIPTION OF WORK	Scope of Work: <u>Structural improvements to existing shed/canopy framing to support a blue stone tile patio. See attached app summary and Engineering Report. 250sq ft of decking for pool</u>			
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)	
	<u>Patio</u>	<u>shed/canopy</u>	<u>N/A</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
				<u>Pool</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>(No)</u>		<u>~ 250</u>	<u>~ 250</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>34.50</u>
Value of Work	<u>\$5,000</u>	State Levy Fee	\$ <u>.69</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ <u>—</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>—</u>
		SWP	\$ <u>—</u>
		Total	\$ <u>60.19</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>1/12/21</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: 1/20/2021  
 Permit Number: BP-2021-00115  
 GPIN/Tax Map: 7123-66-2301 / 67-1-0-10-C  
 Issued: 2-5-21

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>12659 River Rd Richmond VA 23238</u>	
	Owner <u>Bradley Richards</u>	Phone # <u>804-955-9952</u>
	Address <u>12659 River Rd Richmond VA 23238</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Nate Wean (2 Flippin Wean's, LLC)</u>	
	Address <u>895 Manakin Rd, Manakin Sobot VA 23103</u>	
	Phone # <u>804-484-4951</u>	Email <u>nhuoc21@aol.com</u>

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

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

CONTRACTOR INFORMATION	Contractor <u>To Flippin Wean's, LLC</u>		Phone <u>804-484-4951</u>
	Address <u>895 Manakin Rd Manakin Sobot VA 23103</u>		Email <u>nhuoc21@aol.com</u>
	Contractor License Number <u>2105165985</u>	Type <u>CLB</u>	Expiration <u>2-28-2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>Finishing 3rd Floor space that has existing framing from original builder. Installing electrical, HVAC, sheetrock, paint &amp; flooring.</u>				
	Proposed Use <u>Entertainment space</u>	Current Use <u>Unfinished</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NA</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>3.5</u>	# of Bedrooms <u>3</u>	# of floors <u>3</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>No</u>	Finished Sq. Ft. <u>3574</u>	Unfinished Sq. Ft. <u>405</u>	Total Sq. Ft. <u>3979</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$8500</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 1/18/2021

Application Fee	\$ <u>20.25</u>
State Levy Fee	\$ <u>1.01</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>5426</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: 1/20/2021  
 Permit Number: BP-2021-00085  
 GPIN/Tax Map: 0780 - 93 - 5914/55-10-6A-C  
 Issued: 2-5-21  
 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>1498 Cardwell Road Crozier, VA 23029</u>	
	Owner <u>TAKI and MAURIZIO BARTOLINI</u>	Phone # <u>540-478-3110</u>
APPLICANT INFORMATION	Address <u>2958 RIVER Road West, Goochland, VA 23063</u>	Email <u>NATHAN BRCH@gmail.com</u>
	Applicant/Contact <u>Blue Ridge Custom Homes / NATHAN JANOCKA</u>	Phone # <u>540-478-3110</u>
	Address <u>2958 RIVER Road West, Goochland, VA 23063</u>	Email <u>NATHAN BRCH@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>75' from Rd/Prop</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>Left Side 35' from Rd</u>	Side Setback <u>5'</u>	Flood Zone	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Date <u>1/28/21</u>		

CONTRACTOR INFORMATION	Contractor <u>Blue Ridge Custom Homes</u>		Phone <u>540-478-3110</u>
	Address <u>2958 RIVER Road West, Goochland, VA 23063</u>		Email <u>NATHAN BRCH@gmail.com</u>
	Contractor License Number <u>2705084712</u>	Type <u>A - CBC RBC</u>	Expiration <u>7-31-2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>2 story detached garage Office finished space UPS tower</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>2,300 sq. ft</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u>	# of Bedrooms <u>0</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>508</u>	Unfinished Sq. Ft. <u>072</u>	Total Sq. Ft. <u>1,180</u>

Building Only - Excludes All Trades Permits

Value of Work	<del>20,000</del> <u>\$46,420.00</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: 1/20/2021

Application Fee	\$ <u>220.00</u>
State Levy Fee	\$ <u>4.42</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>250.37</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: 1-14-2021

Permit Number: BP-2021-00076

GPIN/Tax Map: 7706-81-7238/57-39-0-2-0

Issued: 2-8-21

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>1305 Sabot Creek Ct Manakin Sabot VA 23103</u>	
	Owner <u>P. Daryl Crone</u>	Phone # <u>804-400-3090</u>
APPLICANT INFORMATION	Address <u>1305 Sabot Creek Ct Manakin Sabot VA 23103</u>	Email <u>CRONCORP@GMAIL.COM</u>
	Applicant/Contact <u>SAMIS</u>	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Sabot Creek</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$10,755.00</u>	Date Paid <u>DEC</u>
	Front Setback <u>40' from PC/PW</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Varlance/COA <u>RP</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Denial / No</u> Date <u>1/26/21</u>	
Planning & Zoning Officer <u>[Signature]</u>				

CONTRACTOR INFORMATION	Contractor <u>Crone Construction Corporation</u>		Phone <u>804-744-4541</u>
	Address <u>1748 Oakliffe Road Middlebrook VA 23112</u>		Email <u>CRONECORP@GMAIL.COM</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Detached GARAGE with Storage Above</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / <u>No</u>	Finished Sq. Ft. <u>579</u>	Unfinished Sq. Ft. <u>1567</u>	Total Sq. Ft. <u>1567</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>48000</u>	<u>50,927.50</u>	<u>69,745.00</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 1/14/21

Application Fee	\$ <u>325.85</u>
State Levy Fee	\$ <u>6.52</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>357.37</u>

1-19-2021



# 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: **January 6, 2020**

Permit Number: **BP-2021-00078**

GPIN/Tax Map: **6822-06-7921 / 11-16-0-29-D**

Issued: **2-10-2021**

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: **3075 Double Eagle Ct**

Owner: **Jeffrey Jarrells**      Phone #: **804-335-0080**

Address: **3075 Double Eagle Ct**      Email:

**APPLICANT INFORMATION**

Applicant/Contact: **Jessica Howell**      Phone #: **864-906-5077**

Address: **14241 Midlothian Turnpike #241, Midlothian, VA 23113**      Email: **jessica@deckcreations.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: **Deck Creations, LLC**      Phone: **804-320-2212**

Address: **14241 Midlothian Turnpike #241, Midlothian, VA 23113**      Email: **jessica@deckcreations.com**

Contractor License Number: **2705120631**      Type: **Class A, CBC, RBC**      Expiration: **10-31-2022**

**DESCRIPTION OF WORK**

Scope of Work: **Replace existing deck in same footprint, approx 545 sq ft.**

Proposed Use <b>Deck</b>	Current Use <b>Deck</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>None</b>		
<b>SEWER</b> Public/Private	<b>WATER</b> 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.	
		<b>545</b>	<b>545</b>	

**Building Only - Excludes All Trades Permits**

Value of Work	<b>\$63,300</b>
---------------	-----------------

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

Signature of Applicant: *J Howell*      Date: **1/7/2021**

Application Fee	\$ <b>296.85</b>
State Levy Fee	\$ <b>5.94</b>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <b>302.79</b>



# BUILDING PERMIT APPLICATION

Application Date: 12/16/2020

RECEIVED

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

Permit Number: BP-2020-01275

GPIN/Tax Map: 7725-06-9195 / 58-54-4-24-0

Issued: 2-9-2021

Residential  Commercial

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

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

OWNER INFORMATION	Site Address <b>12038 Talavera Terrace</b>	
	Owner <b>HHHunt Homes, LLC</b>	Phone # <b>6094103035</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>	Email <b>agshafi@hhhunthomes.com</b>

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

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/RW</u>	Center Line Setback <u>50'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA —
	Side Setback <u>Left 10'</u>	Side Setback	Flood Zone <u>X</u>	—
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Cash Proffer due before issuing C.O. * Survey locate setbacks</u>			
	Planning & Zoning Officer <u>David Floyd</u>		Date <u>1/4/21</u>	

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

DESCRIPTION OF WORK	Scope of Work: <b>5 unit townhome with attached garages.</b>				
	Proposed Use <b>Townhomes</b>	Current Use <b>None</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>Land disturbance of 25,759 square feet</b>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <b>3</b>	# of Bedrooms <b>3</b>	# of floors <b>2</b>
	Finished Sq. Ft. <b>2239</b>		Unfinished Sq. Ft. <b>424</b>	Total Sq. Ft. <b>2663</b>	

Building Only – Excludes All Trades Permits		Application Fee \$ <u>2037.20</u>
Value of Work	<u>\$100,000 - \$271,626.00</u>	State Levy Fee \$ <u>40.74</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
		Zoning Fee \$ <u>100.00</u>
		RLD \$
		SWP \$
		Total \$ <u>2177.94</u>
Signature of Applicant <u>[Signature]</u>		Date <u>12/16/2020</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

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

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

APPROVAL [Signature] DATE 1/22/2021  
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: 12/16/2020

Permit Number: **BP-2020-01276**

GPIN/Tax Map: **58-54-425-07725-06-9191** **12-29-2020**

Issued: **2-09-2021**

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 <b>12036 Talavera Terrace</b>	
	Owner <b>HHHunt Homes, LLC</b>	Phone # <b>6094103035</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>	

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

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

Planning & Zoning Officer: **David Ford** Date: **1/14/21**

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

DESCRIPTION OF WORK	Scope of Work: <b>5 unit townhome with attached garages.</b>				
	Proposed Use <b>Townhomes</b>	Current Use <b>None</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>Land disturbance of 25,759 square feet</b>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <b>2.5</b>	# of Bedrooms <b>2</b>	# of floors <b>2</b>
	Finished Sq. Ft. <b>2149</b>		Unfinished Sq. Ft. <b>455</b>	Total Sq. Ft. <b>2604</b>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <b>1992.06</b>
Value of Work	<b>\$100,000</b> <b>\$265,608.00</b>	State Levy Fee \$ <b>39.94</b>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
Signature of Applicant <b>[Signature]</b>	Date <b>12/16/2020</b>	Zoning Fee \$ <b>100.00</b>
		RLD \$
		SWP \$
		Total \$ <b>2131.90</b>

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE RS # STORIES 2 CONSTRUCTION TYPE IB OCCUPANY LOAD 4 CODE EDITION 2015

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

APPROVAL [Signature] DATE 1/22/2021  
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: 12/16/2020

Permit Number: BP-2020-01277 RECEIVED

GPIN/Tax Map: 58-54-4260 7725-06-9098 12-29-2020

Issued: 2-9-2021

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 <b>12034 Talavera Terrace</b>		Phone # <b>6094103035</b>
	Owner <b>HHHunt Homes, LLC</b>		Email <b>agshafi@hhhunthomes.com</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>		

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

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'</u>	Center Line Setback <u>          </u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>          </u>
	Side Setback <u>          </u>	Side Setback <u>          </u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Cash Proffer due before issuing C.O. *Survey locate setbacks.</u>			
Planning & Zoning Officer <u>David Lloyd</u>		Date <u>1/4/21</u>		

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

DESCRIPTION OF WORK	Scope of Work: <b>5 unit townhome with attached garages.</b>				
	Proposed Use <b>Townhomes</b>	Current Use <b>None</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>Land disturbance of 25,759 square feet</b>		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <b>2.5</b>	# of Bedrooms <b>2</b>	# of floors <b>2</b>
	Finished Sq. Ft. <b>2149</b>		Unfinished Sq. Ft. <b>455</b>	Total Sq. Ft. <b>2604</b>	

Building Only - Excludes All Trades Permits

Value of Work	<b>\$100,000 \$ 265,000.00</b>
---------------	--------------------------------

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

Signature of Applicant: [Signature] Date: 12/16/2020

Application Fee	\$ <u>1992.06</u>
State Levy Fee	\$ <u>39.84</u>
Septic/Well Fee	\$ <u>          </u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$ <u>          </u>
SWP	\$ <u>          </u>
<b>Total</b>	\$ <u>2131.90</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 IB OCCUPANY LOAD 4 CODE EDITION 2015

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

APPROVAL [Signature] DATE 1/22/2021  
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: 12/16/2020

Permit Number: BP-2020-01278

GPIN/Tax Map: 58-54-4-210 7725-06-9095 12-29-2020

Issued: 12-9-2021

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>12032 Talavera Terrace Richmond, VA 23238</u>
	Owner <b>HHHunt Homes, LLC</b>
	Phone # <b>6094103035</b>
	Address 11237 Nuckols Road Glen Allen, VA 23059
	Email agshafi@hhhunthomes.com

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Dec</u>
	Front Setback <u>25' from PL/Road</u>	Center Line Setback	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Cash Proffer Due before issuing C.O. * Survey locate Setbacks.</u>	Planning & Zoning Officer <u>David Boyd</u>	Date <u>1/4/21</u>	

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

DESCRIPTION OF WORK	Scope of Work: <u>5 unit townhome with attached garages.</u>			
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,759 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. 2149	Unfinished Sq. Ft. 455	Total Sq. Ft. 2604

Building Only - Excludes All Trades Permits

Value of Work	<u>\$100,000</u> <del>\$265,608.00</del>
---------------	------------------------------------------

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 12/16/2020

Application Fee	\$ <u>1992.00</u>
State Levy Fee	\$ <u>3984</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>100.00</u>
RLD	\$
SWP	\$
Total	\$ <u>2131.90</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 IB OCCUPANY LOAD 6 CODE EDITION 2015

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

APPROVAL [Signature] DATE 1/22/2021  
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: 12/16/2020

Permit Number: **BP-2020-01279**

GPIN/Tax Map: **58-54-428-0** 7725-06-9091 **12-29-2020**

Issued: **2-9-2021**

Residential  Commercial

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

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

OWNER INFORMATION	Site Address <b>12030 Talavera Terrace</b>	
	Owner <b>HHHunt Homes, LLC</b>	Phone # <b>6094103035</b>
	Address <b>11237 Nuckols Road Glen Allen, VA 23059</b>	Email <b>agshafi@hhhunthomes.com</b>

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>Mosaic</b>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <b>\$4966.00</b>	Date Paid <b>Done</b>
	Front Setback <b>25' from PLYWOOD</b>	Center Line Setback	Rear Setback <b>25'</b>	CUP/Variance/COA
	Side Setback <b>Right - 10'</b>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <b>* Cash Proffer due before issuing C.O. * Survey locate setbacks</b>			
	Planning & Zoning Officer <b>David Floyd</b>		Date <b>1/4/21</b>	

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

DESCRIPTION OF WORK	Scope of Work: <b>5 unit townhome with attached garages.</b>				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 25,759 square feet		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms <b>3</b>	# of Bedrooms <b>3</b>	# of floors <b>2</b>
	Finished Sq. Ft. <b>2239</b>		Unfinished Sq. Ft. <b>424</b>	Total Sq. Ft. <b>2663</b>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <b>2037.20</b>	
Value of Work	<b>\$100,000</b> <b>\$271,626.00</b>	State Levy Fee	\$ <b>40.74</b>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  Signature of Applicant <b>[Signature]</b> Date <b>12/16/2020</b>		Septic/Well Fee	\$
		Zoning Fee	\$ <b>100.00</b>
		RLD	\$
		SWP	\$
		Total	\$ <b>2177.94</b>

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

**OWNER'S STATEMENT**

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

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

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

APPROVAL \_\_\_\_\_ DATE 1/22/2021

Code Official

POOL HOUSE



**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: 1-20-21  
 Permit Number: BP-2021-0065  
 GPIN/Tax Map: 12840-70-3247/20-1-0-84 B  
 Issued: 2-9-21  
 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: 3727 Whitehall Rd Sandy Hook, VA 23153  
 Owner: KAREN WITT (Husband Grant Riley) Phone # 505 615 3844  
 Address: 3727 Whitehall Rd Sandy Hook Email grant@grant-riley.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Grant Riley Cell Phone # 505-615-3844  
 Address: Same Email Grant@Grant-Riley.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
<u>None</u>			
Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
<u>75' from PL/ROW</u>	<u>100'</u>	<u>5'</u>	
Side Setback	Side Setback	Flood Zone	
<u>5'</u>	<u>5'</u>		<u>141</u>

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Long Date: 1/26/21

**CONTRACTOR INFORMATION**

Contractor: OWNER Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 Contractor License Number: \_\_\_\_\_ Type: \_\_\_\_\_ Expiration: \_\_\_\_\_

**DESCRIPTION OF WORK**

Scope of Work: SEE ATTACHED - POOL HOUSE

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>POOL HOUSE</u>	<u>N/A</u>	<u>N/A</u>		
SEWER	WATER	# of Bathrooms	# of Bedrooms	# of floors
<u>Public/Private</u>	<u>Public/Private</u>	<u>1</u>	<u>0</u>	<u>1</u>
Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft.
<u>32.6 x 14 = 456</u>		<u>554</u>		<u>554</u>

Building Only - Excludes All Trades Permits  
 Value of Work: \$ 70,000

Application Fee	\$ <u>327.00</u>
State Levy Fee	\$ <u>6.54</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>358.54</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: [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: BP2021-00108

GPIN/Tax Map: 6795-86-1664/56-15-0-66

Issued: 2-10-21

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>1180 YELLOW GATE LANE</u>	
	Owner <u>CRYSTAL H GOODWIN</u>	Phone # <u>804-514-6766</u>
	Address <u>SAME</u>	Email <u>CRYSTALHGOODWIN@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>KEVIN MONTAGUE</u>	Phone # <u>804 514-6194</u>
	Address <u>310 RIVER ROAD WEST MANASSAS VA 23103</u>	Email <u>KRMONTAGUE@aol.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Hebron Springs</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from PC line</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA <u>PCR</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 Taylor</u> Date <u>1/29/21</u>			

CONTRACTOR INFORMATION	Contractor <u>JOHN W. MONTAGUE JR INC</u>		Phone <u>804-784-4776</u>
	Address <u>310 RIVER ROAD WEST MANASSAS VA 23103</u>		Email <u>KRMONTAGUE@aol.com</u>
	Contractor License Number <u>A14152</u>	Type <u>CLASS A</u>	Expiration <u>10/31/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>256 sq ft Pavilion</u> <u>BUILD A SHED BY POOL</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors
	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>256</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>147.00</u>
Value of Work	<u>\$30,000</u>	State Levy Fee	\$ <u>25.00</u> <u>2.94</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>174.94</u>
Signature of Applicant <u>[Signature]</u>		Date	<u>1/12/21</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: 1-26-2021

Permit Number: BP-2021-00132

GPIN/Tax Map: 6777-65-1199/43-40-C-22-0

Issued: 2-10-2021

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>2103 JOCKEY RIDGE ROAD, MAIDENS, VA 23102</u>	
	Owner <u>JOHN SALMON</u>	Phone # <u>804-304-2591</u>
	Address <u>2103 JOCKEY RIDGE RD. MAIDENS VA 23102</u>	Email <u>JSALMON@RITEHITE.COM</u>

APPLICANT INFORMATION	Applicant/Contact <u>JOHN SALMON</u>	
	Address <u>2103 JOCKEY RIDGE RD. MAIDENS VA 23102</u>	Phone # <u>804-304-2591</u>
		Email <u>JSALMON@RITEHITE.COM</u>

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

CONTRACTOR INFORMATION	Contractor <u>JOHN SALMON - SELF PERFORM</u>		Phone <u>804-304-2591</u>
	Address <u>2103 JOCKEY RIDGE ROAD MAIDENS VA 23102</u>		Email <u>JSALMON@RITEHITE.COM</u>
	Contractor License Number <u>NA</u>	Type <u>NA</u>	Expiration <u>NA</u>

DESCRIPTION OF WORK	Scope of Work: <u>FINISH FRAMED IN SECTION OF STORAGE SPACE. ADD HVAC DUCT WORK, ADD 7 RECEPTACLES, 5 RECESSED LIGHTS, 2 CEILING FANS, INSULATION, DRY WALL, HARDWOOD</u>				
	Proposed Use <u>BONUS ROOM</u>	Current Use <u>UNFINISHED</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NA</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>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 / No	Finished Sq. Ft. <u>2019 456</u>	Unfinished Sq. Ft. <u>456</u>	Total Sq. Ft. <u>3375 456</u>	

**Building Only - Excludes All Trades Permits**

Value of Work	<del>\$10,000.00</del> \$6,000.00
---------------	-----------------------------------

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: John Salmon      Date: 1/26/21

Application Fee	\$ <u>39-</u>
State Levy Fee	\$ <u>.78</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>39.78</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: 1/27/2021

Permit Number: DP-2021-00131

GPIN/Tax Map: 6721-40-9136/39-1-0-86-0

Issued: 2-11-21

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>4650 Three Square Rd</u>	
	Owner <u>Tina + James <sup>Todd</sup> GRAHAM</u>	Phone # <u>804 503-5439 804 898-9557</u>
	Address <u>4650 Three Square Rd</u>	Email <u>j.toddgraham@gahoo.com captiva3@gahoo.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Tina Graham / James Graham</u>	
	Address <u>4650 Three Square Rd</u>	Phone # <u>804 503-5439 804 898-9557</u> Email <u>j.toddgraham@gahoo.com captiva3@gahoo.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>15' from PC/Road</u>	Center Line Setback <u>100'</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>AL</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>2/1/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>non-diving vinyl liner swimming pool 20'x40' no <del>auto cover</del> fenced barrier</u>				
	Proposed Use <u>Swimming</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 checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>800</u>	Total Sq. Ft. <u>800</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>\$ 50,000</u>	Application Fee \$ <u>237.00</u>
	State Levy Fee \$ <u>4.74</u>
	Septic/Well Fee \$
	Zoning Fee \$ <u>25.00</u>
	RLD \$
	SWP \$
	Total \$ <u>266.74</u>

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

Signature of Applicant Uma Andrew Date 1/27/2021



# BUILDING PERMIT APPLICATION

Application Date: 1-27-21  
 Permit Number: BP-2021-00112  
 GPIN/Tax Map: 6187-285772/44-27-0-10-0  
 Issued: 2-11-21

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

Residential  Commercial

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

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

OWNER INFORMATION	Site Address <u>1210 HAWKWELL DRIVE, MAIDENS, VA 23102</u>	
	Owner <u>BRIAN AND KAREN RAUGH</u>	Phone # <u>804-240-8716</u>
	Address <u>SAME</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>MICHAEL R. HOTT</u>	Phone # <u>804-402-2756</u>
	Address <u>15279 VERDON RD, BEAVERDAM, VA 23015</u>	Email <u>HOTTHES@AOL.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>SOMERSET</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>5'</u>	CUP/Variance/COA  <u>RP</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	

APPROVED  REJECTED  COMMENTS:  
 Planning & Zoning Officer: David Ford Date: 1/28/21

CONTRACTOR INFORMATION	Contractor <u>HANOVER EQUIPMENT SERVICES, INC.</u>	Phone <u>804-402-2756</u>
	Address <u>15279 VERDON ROAD</u>	Email <u>HOTTHES@AOL.COM</u>
	Contractor License Number <u>2705057820</u>	Type <u>CLASS A, H/H, RFC</u>

DESCRIPTION OF WORK	Scope of Work: <u>INSTALL INGROUND FIBERGLASS POOL, 12x31 1 fence barrier</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? Yes/No <u>No</u>	Finished Sq. Ft. <u>372</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>372</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$38,038.00</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 R. Hott Date 1-21-2021

Application Fee	\$ <u>183.11</u>
State Levy Fee	\$ <u>3.66</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>211.83</u>



# BUILDING PERMIT APPLICATION

Application Date: 1/26.2021

Permit Number: BP2021-00095

GPIN/Tax Map: 6161-67-5949 / 43-11-0-1-0

Issued: 2-12-2021

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 2461 Fairground Rd.	
	Owner Mae DeBruin	Phone # 3158866645
APPLICANT INFORMATION	Address 2461 Fairground Rd.	Email mhdb210@gmail.com
	Applicant/Contact Kristopher Taffner	Phone # 3158866644
	Address 2461 Fairground Rd.	Email ktaffner@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>100' from PC/ROW</u>	Center Line Setback <u>125'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Non-conforming. Cannot build closer than existing structure.</u>			
Planning & Zoning Officer: <u>[Signature]</u> Date: <u>2/3/21</u>				

CONTRACTOR INFORMATION	Contractor Owner		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Update front stoop to add wood deck and gable roof				
	Proposed Use Covered area for packages	Current Use Uncovered area for packages	Environmental Impacts (stream crossing, wetlands, amt land disturbed) none		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 0
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. 0	Unfinished Sq. Ft. +20	Total Sq. Ft. 40	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>300.00</u>
Value of Work	\$2,000	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 \$
		Zoning Fee \$ <u>2500</u>
		RLD \$
		SWP \$
		Total \$ <u>55.60</u>
Signature of Applicant <u>Mae DeBruin</u> Date <u>1/26/2021</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: 01/11/2021

Permit Number: BP-2021-00117

GPIN/Tax Map: 12-1-59C/4832-42-685E

Issued: 2-16-21

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	3958 TBD MANIE'S WAY, GUMSPRING, VA 23065	
	Owner	SEAN EDWARDS	
APPLICANT INFORMATION	Address	3950 MANIE'S WAY, GUMSPRING, VA 23065	
	Applicant/Contact	OAKWOOD / DBA CMH HOMES	

Phone #	804-248-6864
Email	SEANJB25@YAHOO.COM
Phone #	804-798-9135
Email	R702@CLAYTON.NET

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	—	—
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	55' from PL/ROW	—	35'	—
Side Setback	Side Setback	Flood Zone		
FT. Size 35' from Road	20'	X	A1	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer: <u>[Signature]</u> Date: 1/21/21				

CONTRACTOR INFORMATION	Contractor	CMH HOMES   OAKWOOD HOMES		Phone	804-798-9135
	Address	11160 WASHINGTON HWY, GLEN ALLEN, VA 23059		Email	R702@CLAYTON.NET
	Contractor License Number	Type	Expiration		
	2705 048123	2BS MAC RBC	4-30-2021		

DESCRIPTION OF WORK	Scope of Work: CLEARING, SETUP OFF FRAME MODULAR ON FOUNDATION, HVAC, ELECTRIC, PLUMBING, 6'x12' FRONT PORCH, 10'x14' BACK DECK, 5'x5' BACK STEPS, NEW WELL AND SEPTIC.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	RESIDENT	VACANT			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		3	2	ONE	
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	2184 SQ.FT	<del>237</del> 237 SQ.FT	2,421 <del>2184</del> SQ.FT.		

Building Only - Excludes All Trades Permits		Application Fee	\$ 165.64
Value of Work	\$ 167,475.00	State Levy Fee	\$ 15.31
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	\$ 50.00
		RLD	\$ 100.00
		SWP	\$
		Total	\$ 930.95
Signature of Applicant	<u>[Signature]</u> AGENT	Date	1/11/2021

**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: COMMONWEALTH ESCROW & TITLE Telephone: 804-359-2382

Mailing Address: 5609 PATTERSON AVE, SUITE C, 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 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 6 CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE 2.10.21

Code Official



# BUILDING PERMIT APPLICATION

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

Application Date: 12-26-19

Permit Number: BP-2019-01164

GPIN/Tax Map: 6757-91-9552 42-40-0-19-0

Issued: 1-20-2020

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

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>3008 Swanns Inn Crescent Goochland, VA 23063</u>	
	Owner <u>Vertical Builders LLC</u>	Phone # <u>804-440-6647</u>
	Address <u>3700 West End Drive Henrico, VA 23294</u>	Email <u>BStine@verticalbuilders.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Shanat Hardy</u>		Phone # <u>804-440-6647</u>
	Address <u>3700 West End Drive Henrico, VA 23294</u>		Email <u>SHardy@verticalbuilders.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Swanns Inn</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$19,348.00</u>	Date Paid <u>Due</u>
	Front Setback <u>40' from Row</u>	Center Line Setback <u>10'</u>	Rear Setback <u>25'</u>	CUP/Variance/GOA
	Side Setback <u>10'/35'</u>	Side Setback <u>10'/35'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>CASH Proffer due before issuing C.O.</u>			
	Planning & Zoning Officer: <u>[Signature]</u>		Date: <u>1/2/20</u>	

CONTRACTOR INFORMATION	Contractor <u>Vertical Builders LLC</u>		Phone <u>804-440-6647</u>
	Address <u>3700 West End Drive Henrico, VA 23294</u>		Email <u>BStine@verticalbuilders.com</u>
	Contractor License Number <u>2705-103062</u>	Type <u>Class A</u>	Expiration <u>02-29-2020</u>

DESCRIPTION OF WORK	Scope of Work: <u>Construct 4 Bedroom, 3 Bath single family dwelling w/ garage attached</u> <u>Revision 1-7-2021 New House Plans</u>				
	Proposed Use single family detached	Current Use none	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>18,729</u>		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms <u>3</u>	# of Bedrooms <u>4</u>	# of floors <u>2</u>
	Finished Sq. Ft. <u>2518</u> <u>2373</u>	Unfinished Sq. Ft. (Front & Rear) <u>722</u> <u>1474 (garage, attic, rear deck)</u>	Total Sq. Ft. <del>3992</del> <u>3895</u> <u>3302</u>		

Building Only - Excludes All Trades Permits 929

Value of Work	<u>244,125</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: Shanat Hardy Date: 12/20/19

Application Fee	\$ <u>1110.50</u>
State Levy Fee	\$ <u>22.21</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>200.00</u>
Total	\$ <u>1482.71</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: Harvey & Williams, PLC Telephone: 804-396-3580

Mailing Address: 7516 Right Flank Rd #210 Mechanicsville, VA 23116

**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 25 # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 15

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

APPROVAL [Signature] DATE 3-23-19  
Code Official

2-8-2021



# 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

Residential  Commercial

Application Date: 2/4/21

Permit Number: AP-2021-00167

GPIN/Tax Map: 6767-02-6166/42-1-0-380

Issued: 2-16-2021

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 <b>2913 River Rd W, Suite D</b>	
	Owner <b>Courthouse Village, LLC</b>	Phone # <b>804-750-9914</b>
	Address <b>9301 River Rd, Richmond, VA 23229</b>	
APPLICANT INFORMATION	Applicant/Contact <b>Evan Pettrey</b>	
	Address <b>2374 Jefferson Hwy, Suite 106, Waynesboro, VA 22980</b>	
		Phone # <b>804-774-8545</b>
		Email <b>signpartnersva@gmail.com</b>

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	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	<u>COA-2020-15</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Wall sign, no setbacks needed.</u>			
Planning & Zoning Officer: <u>David Floyd</u>		Date: <u>2/10/21</u>		

CONTRACTOR INFORMATION	Contractor <b>Royle Sign Co</b>		Phone <b>804-774-8545</b>
	Address <b>11905 Laurel Hill Ln, Amelia, VA 23002</b>		Email <b>signpartnersva@gmail.com</b>
	Contractor License Number <b>2705176411</b>	Type <b>C</b>	Expiration <b>2022-12-31</b>

**Scope of Work:**  
Installation of sign on building front + installation of graphics on door of storefront, no illumination.

Proposed Use <b>Insurance Office</b>	Current Use <b>Insurance Office</b>	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	<b>3,081.33</b>	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.		State Levy Fee	\$ <u>.60</u>
		Septic/Well Fee	\$
		Zoning Fee	\$ <u>0.00</u>
		RLD	\$
		SWP	\$
Signature of Applicant: <u>[Signature]</u>	Date: <u>2/4/21</u>	Total	\$ <u>30.00</u>

# BUILDING PERMIT APPLICATION

Application Date: 1/28/2021

Permit Number: BP-2021-00130

GPIN/Tax Map: 6966-06-7631 / 53-10-7A

Issued: 2-16-21

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  
 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 East Side Rt. 522 at River	
	Owner County of Goochland 23063	Phone # 804 556-5855
	Address Po Box 10 Goochland VA	Email dstamey@goochlandva.us

APPLICANT INFORMATION	Applicant/Contact John George	
	Address 5005 W. Clay St. Richmond VA 23230	Phone # 804 350-8448
		Email john@johnkgeorgeandcompany.co

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: *No zoning approval required. Planning & Zoning Officer: [Signature] Date: 2/11/21			

CONTRACTOR INFORMATION	Contractor John K. George & Co.		Phone 804 350-8448
	Address 5005 W. Clay St. Richmond VA 23230		Email john@johnkgeorgeandcompany.co
	Contractor License Number 2201-039901	Type Class A Bldg, HH	Expiration 1-31-2022

DESCRIPTION OF WORK	Scope of Work: Construct open-pile supported timber walk way. for Tuckerpark			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None	
	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. 1,600	Total Sq. Ft. 1,600

Building Only - Excludes All Trades Permits

Value of Work: \$140,000

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: 1/28/2021

Application Fee	\$
State Levy Fee	\$
Beneficial Fee	\$
Zoning Fee	\$
BLD	\$
SWP	\$
Total	\$ -0-



# BUILDING PERMIT APPLICATION

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

Application Date: 2-3-21  
Permit Number: BP-2021-00145  
GPIN/Tax Map: 7716-76-9759 / 47-38-0-100L  
Issued: 2-17-21

Residential       Commercial

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

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

OWNER INFORMATION	Site Address <u>1491 CAMBERLEY LN MANAKIN SABOT</u>	
	Owner <u>NATHAN SHOR</u>	Phone # <u>804 539 7404</u>
APPLICANT INFORMATION	Address <u>1491 CAMBERLEY LN MANAKIN SABOT 23103</u>	
	Applicant/Contact <u>TIM COLLINS INTEGRITY CONSTRUCTION</u>	Email <u>NATHAN@SHORREALESTATE.COM</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>639 KINGS HWY FREDERICKSBURG VA 22405</u>	
	Applicant/Contact <u>TIM COLLINS INTEGRITY CONSTRUCTION</u>	Phone # <u>703 754 9392</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>639 KINGS HWY FREDERICKSBURG VA 22405</u>	
	Applicant/Contact <u>TIM COLLINS INTEGRITY CONSTRUCTION</u>	Email <u>TIMCOLLINS07@COMCAST.NET</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint. R.P.U.D.</u>			
Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>2/3/21</u>				

CONTRACTOR INFORMATION	Contractor <u>INTEGRITY CONSTRUCTION LLC</u>		Phone <u>703 754 9392</u>
	Address <u>639 KINGS HWY FREDERICKSBURG VA 22405</u>		Email <u>TIMCOLLINS07@COMCAST.NET</u>
	Contractor License Number <u>2705174405</u>	Type <u>CLASS A</u>	HIC <u>RBC</u> Expiration <u>1/31/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>INSTALL 19X12 SHED ROOF SCREEN PORCH ON EXISTING DECK. INSTALL NEW FOOTING/BEAM. CLOSE IN EXISTING STAIR OPENING. INSTALL WOOD SKIRTING. INSTALL CAN LIGHTS + CEILING FAN</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>SEWER</u> Public/Private	<u>WATER</u> Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / <u>No</u>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>228</u>	

**Building Only - Excludes All Trades Permits**

Value of Work <u>34,500 33,500</u>	Application Fee \$ <u>162.76</u>
	State Levy Fee \$ <u>3.25</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ _____
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>166.01</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: 2/2/21



# BUILDING PERMIT APPLICATION

Application Date: 2-2-21Permit Number: BP-2021-00141GPIN/Tax Map: 7138-11-7942 / 48-18-0-32-0Issued: 2-17-21This 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>7212 Shenfield Ln, Glen Allen, VA</u>	Phone # <u>757-705-9875</u>
	Owner <u>Bob Jernell</u>	Email <u>Bobjernell@gmail.com</u>
APPLICANT INFORMATION	Address <u>7212 Shenfield Ln, Glen Allen, VA</u>	Phone # <u>804-640-0370</u>
	Applicant/Contact <u>Joshua Comrie</u>	Email <u>josh@jcsiding.com</u>
	Address <u>12761 Oak Lake Ct, Mid, VA 23112</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parkside Village</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>30' from Perimeter</u>	Center Line Setback _____	Rear Setback <u>50' B/S</u>	CUP/Variance/COA _____
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>2/2/21</u>			

CONTRACTOR INFORMATION	Contractor <u>SC Siding &amp; Const.</u>	Phone <u>804-640-0370</u>
	Address <u>12761 Oak Lake Ct, Mid, VA 23112</u>	Email <u>josh@jcsiding.com</u>
	Contractor License Number <u>2705 <del>7</del> 151386</u>	Type <u>Class A H/C/RBC</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build roof over top existing deck. New footers for HOA required <del>side</del> brick piers.</u>				
	Proposed Use <u>Screen Porch</u>	Current Use <u>Deck</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</u>	# of Floors <u>N/A</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes (No) <u>No</u>	Finished Sq. Ft. <u>N/A</u>	Unfinished Sq. Ft. <u>168'</u>	Total Sq. Ft. <u>168'</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$14,000</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: 1/12/20

Application Fee	\$ <u>55.29</u> <del>75.00</del>
State Levy Fee	\$ <u>.66</u> <del>1.50</del>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>98.45</u> <del>101.50</del>



# BUILDING PERMIT APPLICATION

Application Date: 2-2-21

Permit Number: BP-2021-00142

GPIN/Tax Map: 7705-96-6651 / 57-7-0-5-0

Issued: 2-17-21

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 <u>1708 Devon Way</u>	
	Owner <u>Christopher Wyatt</u>	Phone #
	Address <u>1708 Devon Way</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Harrington Construction / JCH</u>	Phone # <u>804-741-6772</u>
	Address <u>1814 Ryandale Rd. Richmond VA 23238</u>	Email <u>Harrington Construction &amp; Co@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Dover Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from PL/RW</u>	Center Line Setback <u>80'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>R2-1987-5</u>
	Side Setback <u>35' Et Side</u>	Side Setback <u>15' / 35'</u>	Flood Zone	<u>RR</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Daniel Boyd</u> Date: <u>2/3/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Harrington Construction Co. Inc.</u>	Phone <u>Same</u>
	Address <u>1814 Ryandale Road Richmond VA 23238</u>	Email <u>Same</u>
	Contractor License Number <u>2705022365</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Construct a 26'x26' attached garage</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? Yes/No <u>No</u>	Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft. <u>676 676</u>

Building Only - Excludes All Trades Permits	
Value of Work <u>50,000</u>	Application Fee \$ <u>237.00</u> State Levy Fee \$ <u>4.74</u> Septic/Well Fee \$ <u>        </u> Zoning Fee \$ <u>25.00</u> RLD \$ <u>        </u> SWP \$ <u>        </u> Total \$ <u>266.74</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.	
Signature of Applicant <u>[Signature]</u>	Date <u>1-25-21</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: 12-14-2020

Permit Number: BP-2020-01240

GPIN/Tax Map: 6719-83-2818 / 27-9-0-A0

Issued: 2-22-21

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 <u>2517 DANIELTOWN RD Goochland 23063</u>	
	Owner <u>ROSE JIMMY VAN JR TRUSTEE</u>	Phone #
	Address	Email

APPLICANT INFORMATION	Applicant/Contact <u>Bower Construction</u>	Phone # <u>804 3475774</u>
	Address <u>6401 MOSELEY RD MOSELEY VA 23120</u>	Email <u>Bower Pools at Gmail</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 checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Pool located inside addition</u> Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>12/16/2020</u> <u>BP-2020-01003</u>			

CONTRACTOR INFORMATION	Contractor <u>Bower Construction</u>	Phone <u>804 347 5774</u>
	Address <u>6401 MOSELEY RD MOSELEY VA</u>	Email <u>Bower Pool at gmail</u>
	Contractor License Number <u>2705031792</u>	Type <u>RFC</u>

DESCRIPTION OF WORK	Scope of Work: <u>Vinyl lined inground Pool 12x24</u>		
	Proposed Use <u>Swimming</u>	Current Use <u>WATER</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private	Public/Private <u>Public</u>	# 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>181.00</u>
Value of Work	<u>\$32000</u>	State Levy Fee	\$ <u>3.12</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Steve B</u> Date <u>12/14/20</u>		Septic/Well Fee	\$
		Zoning Fee	\$ <u>2500</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>184.12</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: 1/21/2021Permit Number: BP-2021-00082GPIN/Tax Map: 58-51-0-14-0 / 7716-60-9516Issued: 2-22-2021This 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.
 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 1276 Hammock Circle		Phone #
	Owner Michael & Alyssa Chalifoux		
	Address 1276 Hammock Circle		Email
APPLICANT INFORMATION	Applicant/Contact Homeplaces, Ltd.		Phone # 804-740-8100
	Address 107 Colony Lake Drive, Richmond, VA 23238		Email ahomeplace@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Tuckahoe Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>Behind Main Bldg</u>	Center Line Setback —	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>X</u>	—
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Approval for Garage Only. * Survey for Setbacks</u>			
Planning & Zoning Officer <u>David Boyd</u>		Date <u>1/27/21</u>		

CONTRACTOR INFORMATION	Contractor Homeplaces, Ltd.		Phone 804-740-8100
	Address <u>107 Colony Lake Dr. Richmond VA 23238</u>		Email <u>ahomeplace@aol.com</u>
	Contractor License Number 2705026916	Type class A	Expiration 01/31/2023

DESCRIPTION OF WORK	Scope of Work: <b>Detached Garage</b>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft. 0	Unfinished Sq. Ft. 900	Total Sq. Ft. 900	

Building Only - Excludes All Trades Permits

Value of Work	24750.00
---------------	----------

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 1/21/21

Application Fee	\$ 123.37
State Levy Fee	\$ 2.47
Septic/Well Fee	\$
Zoning Fee	\$ 25-
RLD	\$
SWP	\$
Total	\$ 150.84

**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: Dankos, Gordon & Tucker PC Telephone: 804-262-8000

Mailing Address: 1360 E. Parham Road, Suite 200, Richmond, VA 23228

**OWNER'S STATEMENT**

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE U # STORIES 2 CONSTRUCTION TYPE VB OCCUPANT LOAD --- CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE 2.19.21

Code Official

Revised: 8/31/2020



# BUILDING PERMIT APPLICATION

Application Date: Jan 25 2021

Permit Number: BP-2021-00110

GPIN/Tax Map: 6719-25-7585/26-1-0-69-B

Issued: 2/22/2021

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.

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>2650 Davis Mill Rd. Goochland</u>	
	Owner <u>Delta Deck Company</u>	Phone #
	Address <u>3036 Davis Mill Rd.</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Madison Queensberry</u>	Phone # <u>804-543-7241</u>
	Address <u>3036 Davis Mill Rd.</u>	Email <u>deltadeckcompany@gmail</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from PL Low</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>AI</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>Dawn Floyd</u> Date <u>1/29/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Delta Deck Company</u>	Phone <u>804-543-7241</u>
	Address <u>3036 Davis Mill Rd.</u>	Email <u>deltadeckcompany@gmail.com</u>
	Contractor License Number <u>2705161359</u>	Type <u>A 'RBC' 'HIC'</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build 24x24 detached garage</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? Yes/No <u>No</u>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>576</u>	<u>576</u>		

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <u>102.00</u>
Value of Work	<u>20,000</u>	State Levy Fee	\$ <u>2.04</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>129.04</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>1-25-21</u>

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: Aurora Title Telephone: 729-9005

Mailing Address: 2203 Pump Rd. Richmond VA 23233

**OWNER'S STATEMENT**

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE B5 # STORIES \_\_\_\_\_ CONSTRUCTION TYPE VB OCCUPANT LOAD \_\_\_\_\_ CODE EDITION 2015

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

APPROVAL [Signature] DATE 2/22/2021

Code Official

Revised: 8/31/2020



# BUILDING PERMIT APPLICATION

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

Application Date: 2-8-21  
 Permit Number: BP-2021-00163  
 GPIN/Tax Map: 6794-99-5510 / 61-6-0-3A-0  
 Issued: 2-23-21

Residential       Commercial

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

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

OWNER INFORMATION	Site Address <u>746 Merry Go Round Rd, Manakin Sabot, VA 23103</u>	
	Owner <u>William McGuire</u>	Phone # <u>804-357-7733</u>
	Address <u>Same</u>	Email <u>McG McGuireb@stva.org</u>
APPLICANT INFORMATION	Applicant/Contact <u>Exquisite Pools Inc. - Griffent Yancey <sup>m</sup> <del>804-912-3331</del></u>	
	Address <u>same as Contractor</u>	Phone # <u>804-912-3331</u> Email <u>exquisitepoolsinc@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Sabot H71</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from PUP</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>2/9/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>19'x38' inground Gunite Swimming Pool 3'-7' in depth with a 8'x8' spa and AutoCover.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, air, and 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>722</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$64,600</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 [Signature]    Date 2/12/21

Application Fee	\$ <u>302.70</u>
State Levy Fee	\$ <u>6.05</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>333.75</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 2-12-21

Permit Number: BP-2021-00213

GPIN/Tax Map: 6777-27-6700 / 43-42-D-8-D

Issued: 2-23-21

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	1767 Fishers Pond Dr <i>Maidens, VA 23102</i>	Phone #	804-387-7581
	Owner	Biringer Builders Inc	Email	ariden@biringerbuilders.com
	Address	1260 Sycamore Square, Midlothian, VA 23113	Phone #	804-761-7904

APPLICANT INFORMATION	Applicant/Contact	Billy's Pool Service	Email	poolsbybilly@yahoo.com
	Address	13372 Greenwood Church Rd, Ashland, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	<i>Breeze Hill</i>	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	—	Date Paid	—
	Front Setback	<i>40' from property 65'</i>	Center Line Setback	—	Rear Setback	<i>5'</i>	CUP/Variance/COA	
	Side Setback	<i>5'</i>	Side Setback	<i>5'</i>	Flood Zone	—	<i>RP</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS:					
Planning & Zoning Officer		<i>David Floyd</i>		Date		<i>2/22/21</i>		

CONTRACTOR INFORMATION	Contractor	Billy's Pool Service (William Becker)	Phone	804-761-7904
	Address	13372 Greenwood Church Rd, Ashland VA 23005	Email	poolsbybilly@yahoo.com
	Contractor License Number	2705136588	Type Class	<i>B - POL</i>
			Expiration	9/30/21

DESCRIPTION OF WORK	Scope of Work:				
	<b>install inground fiberglass pool 15'x30' with auto cover</b>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components? Yes (No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
		<i>450</i>	<i>450</i>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>142.50</i>
Value of Work	<del>\$24,000.00</del> <i>\$29,000.00</i> <i>BB</i>	State Levy Fee	\$ <i>2.85</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	\$
Signature of Applicant	<i>William Becker</i>	Zoning Fee	\$ <i>25.00</i>
Date	2-12-21	RLD	\$
		SWP	\$
		Total	\$ <i>170.35</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: 2-1-21  
 Permit Number: BP-2021-00137  
 GPIN/Tax Map: 7705-76-5270/57-10-0-5-0  
 Issued: 2-23-21  
 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: 1633 Devon Way, Manakin Sabot Va 23103  
 Owner: James & Christina Olmsted  
 Address: same as site  
 Phone #: 804 873-7758  
 Email: jbalmsid@gmail.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Same as owner (James Olmsted)  
 Address: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 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     REJECTED     COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

**CONTRACTOR INFORMATION**  
 Contractor: Owner/self  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contractor License Number: \_\_\_\_\_ Type: \_\_\_\_\_ Expiration: \_\_\_\_\_

**DESCRIPTION OF WORK**  
 Scope of Work:  
 - converting existing barn into recreational living space & study.  
 - adding domers.

Proposed Use	Current Use <u>barn</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>none</u>		
SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>No</u>	Finished Sq. Ft. <u>~1800</u>	Unfinished Sq. Ft. <u>~1500</u>	Total Sq. Ft. <u>~1650 2000</u>	

**Building Only - Excludes All Trades Permits**

Value of Work <u>\$100,000</u>	Application Fee \$ <u>46200</u>
	State Levy Fee \$ <u>9.24</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ _____
	RLD \$ _____
	SWP \$ _____
Signature of Applicant <u>[Signature]</u>	Total \$ <u>471.24</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Date 1/22/21

# BUILDING PERMIT APPLICATION

Application Date: 2-17-21

Permit Number: BJ-2021-00199

GPIN/Tax Map: 6725-58-1409 / 51-1-0-25-A

Issued: 2-22-21

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 <u>4098 Ben Lomond Dr. Goochland VA 23063</u>	
	Owner <u>Sandra Rutherford</u>	Phone # <u>804 337 6033</u>
	Address <u>4098 Ben Lomond, Goochland</u>	Email <u>hrutherford@gmail.com</u>

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</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>5'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David King</u> Date <u>2/22/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Run in shed for horses</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>480</u>	Total Sq. Ft. <u>480</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>—</u>
Value of Work	<u>11,500.00 / 13,200.00</u>	State Levy Fee	\$ <u>1.25</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>26.25</u>
Signature of Applicant	<u>Sandra Rutherford</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: 2-3-2021  
 Permit Number: BP-2021-00147  
 GPIN/Tax Map: 7717-02-2913/46-1-0-118-0  
 Issued: 2-23-2021  
 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 2352 Manakin Road Manakin-Sabot VA 23103	
	Owner <b>David R McGeorge</b>	Phone # 804-357-8176
	Address 2352 Manakin Road Manakin-Sabot VA 23103	Email

APPLICANT INFORMATION	Applicant/Contact	Phone #
	Address	Email

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

CONTRACTOR INFORMATION	Contractor <b>GLH Systems&amp;Controls Inc</b>	Phone 804-513-6063
	Address 4667 Love Mill Road Stanfield NC 28163	Email hallock24@gmail.com
	Contractor License Number 2705089445	Type B

DESCRIPTION OF WORK	Scope of Work: Remodel interior walls to accommodate new owners desire. Enlarge master bath and remodel kitchen. Install new trim work throughout. Adjust electrical to fit owners needs.				
	Proposed Use single family	Current Use same	Environmental Impacts (stream crossing, wetlands, amt land disturbed) n/a		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 4 1/2	# of Bedrooms 4	# of floors 2
	Will a foundation be installed within 20 ft. of any septic system components? Yes (No)	Finished Sq. Ft. 4500	Unfinished Sq. Ft.	Total Sq. Ft. 4500	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>417.00</u>
Value of Work 90,000		State Levy Fee \$ <u>8.34</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant _____ Date <u>02/03/2021</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ _____
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>425.34</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: SLH SYSTEMS + CONTROLS INC Telephone: 804-513-6063

Mailing Address: 4667 LOVE MILL RD STANFIELD NC 28163

**OWNER'S STATEMENT**

I David R McGeorge of (address) 2352 Manakin Road affirm that I am the owner of a certain tract of parcel

of land located at 2352 Manakin Road 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.

DR Mc 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 DR Mc

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

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

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

APPROVAL Ball DATE 21 Feb 2021

Code Official

Revised: 8/31/2020



# BUILDING PERMIT APPLICATION

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

Application Date: 2-17-2021

Permit Number: BP-2021-00198

GPIN/Tax Map: 7715-71-7077 / 103-27-0-10-0

Issued: 2-23-2021

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 <b>57 Sadie Drive</b>	
	Owner <b>Bob Stewart</b>	Phone # <b>8046511822</b>
	Address <b>57 Sadie Drive</b>	Email <b>bob.stewart@capitalone.com</b>
APPLICANT INFORMATION	Applicant/Contact <b>Catherine Gallagher</b>	
	Address <b>196 Selftown Road, Warsaw, VA 22572</b>	Email <b>catherine@riverpoolsandspas.com</b>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>                    </u>	Date Paid <u>                    </u>
	Front Setback <u>55' from PL/ROU</u>	Center Line Setback <u>                    </u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>                    </u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>                    </u>	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>2/23/21</u>			

CONTRACTOR INFORMATION	Contractor <b>River Pools &amp; Spas</b>		Phone <b>8043339192</b>
	Address <b>196 Selftown Road, Warsaw, VA 22572</b>		Email <b>catherine@riverpoolsandspas.com</b>
	Contractor License Number <b>2705099652</b>	Type <b>A</b>	Expiration <b>10/31/21</b>

DESCRIPTION OF WORK	Scope of Work: <b>install inground 15'x28' fiberglass pool w/automatic cover</b>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <b>1120</b>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee \$ <u>1169.50</u>
Value of Work <b>35000</b>		State Levy Fee \$ <u>3.39</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Catherine Gallagher</u> Date <u>2/9/21</u>		Septic/Well Fee \$ <u>                    </u>
		Zoning Fee \$ <u>25.00</u>
		RLD \$ <u>                    </u>
		SWP \$ <u>                    </u>
		Total \$ <u>197.89</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 2/17/2021

Permit Number: BP-2021-00200

GPIN/Tax Map: 734-31-4606 / 64-22-C-1-0

Issued: 2-23-2021

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 13247 Piney Grove Court, Goochland, VA 23238		Phone # (804) 869-1296
	Owner Josh Whitlow		Email josh@theheightschurch.com
	Address same		

APPLICANT INFORMATION	Applicant/Contact Jose Oseguera		Phone # (831) 521-7775
	Address PO Box 309, Oilville, VA 23129		Email jdoenterprisesllc@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Rivergate</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>40' from PL/Pool</i>	Center Line Setback <i>65'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA  <i>R1</i>
	Side Setback <i>Rt. Side 35'</i>	Side Setback <i>5'</i>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>Daniel Floyd</i> Date: <i>2/22/21</i>			

CONTRACTOR INFORMATION	Contractor JDO Enterprises LLC		Phone (831) 521-7775
	Address P.O. Box 309, Oilville, VA 23129		Email jdoenterprisesllc@gmail.com
	Contractor License Number 2705154213	Type Class A	Expiration 12/2022

DESCRIPTION OF WORK	Scope of Work: <i>11x18</i> Additon of a fiber composite panel in ground hot tub beside an existing in ground gunite pool. Pool barrier existing.				
	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. <i>198</i>	Total Sq. Ft. <i>198</i>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>194.50</i>
Value of Work	\$35,000	State Levy Fee	\$ <i>3.39</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: _____ Date 2/17/2021		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <i>25.00</i>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <i>197.89</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: 11-18-20 11-20-2020

Permit Number: BP-2020-01154

GPIN/Tax Map: 6830-64-1780/19-1-0-55-A

Issued: 2.23.2021

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 4224 Whitehall Rd, Sandy Hook VA 23153	
	Owner Jeremy + Danielle Stout	Phone # 804-382-8973
	Address 4224 Whitehall Rd.	Email stout0515@gmail.com

APPLICANT INFORMATION	Applicant/Contact Ricky Corker Builder / Matt Corker	Phone # 804-752-5920
	Address 10384 Dow Gil Rd. Ashland VA 23005	Email Matt@Corkerbuilder.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 75' from Prop. Line / Row	Center Line Setback _____	Rear Setback 35'	CUP/Variance/COA _____
	Side Setback 20'	Side Setback 20'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: _____		

Planning & Zoning Officer: David Floyd Date: 1/19/21

CONTRACTOR INFORMATION	Contractor Ricky S. Corker Builder	Phone 804-752-5920
	Address 10384 Dow Gil Rd. Ashland VA 23005	Email Matt@Corkerbuilder.com
	Contractor License Number 034505 A	Type Contractor 5-31-2021

DESCRIPTION OF WORK	Scope of Work: Addition to include bedroom, bathroom, Laundry, Family Room + Kitchen. Renovate existing Bedrooms + bathroom				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 2,500sf		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 3	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components? (Yes/No)	Finished Sq. Ft. 1387	Unfinished Sq. Ft. 0	Total Sq. Ft. 1387	

Building Only - Excludes All Trades Permits		Application Fee \$ 577.00
Value of Work 120,000		State Levy Fee \$ 11.04
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>Matt W</u>	Date <u>11-18-20</u>	Zoning Fee \$ 25.00
		RLD \$
		SWP \$
		Total \$ 588.04



# BUILDING PERMIT APPLICATION

Application Date: 1-25-21

Permit Number: BP-2021-00088

GPIN/Tax Map: 6831-33-7829/12-1-0-40-A

Issued: 2/24/2021

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 <b>4094 Cedar Plains Rd. Sandy Hook VA 23153</b>	
	Owner <b>Mariusz Mostrag</b>	Phone # <b>434-907-2097</b>
	Address <b>3211 Sandown Park Rd. Keswick VA 22947</b>	Email <b>windowmaster@usa.com</b>

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>75' from PL/ROW</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA  <b>A1</b>
	Side Setback <u>20'</u>	Side Setback <u>25'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>2/9/21</u>			

CONTRACTOR INFORMATION	Contractor <b>self</b>	Phone <b>434-907-2097</b>
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Sun room addition</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>3</u>	# of Bedrooms <u>1.5</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>320</u>	Unfinished Sq. Ft. —	Total Sq. Ft. <u>320</u>	

<b>Building Only - Excludes All Trades Permits</b>		Application Fee	\$ <u>97.20</u>
Value of Work	<u>2,000 \$17,600</u>	State Levy Fee	\$ <u>1.82</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>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>118.02</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>1/11/2021</u>



# BUILDING PERMIT APPLICATION

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

Permit Number: BP-2021-00026

GPIN/Tax Map: 7714-34-7701 / 63-1-0-47-D

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

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision: None	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: 55' from Manakin Rd	Center Line Setback: 50'	Rear Setback: 5'	GPIN/Variance/COA: 64-2015-3 R.O.
	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  
Revision 2-23-2021 Change shape of building at 72 sq ft

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 checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.:	Unfinished Sq. Ft.:	Total Sq. Ft.:	
		2808 + 72	2808 - 2880	

Building Only - Excludes All Trades Permits

Value of Work: \$36,500.00 ~~\$91,200.00~~ \$93,600

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: 1/6/21

Application Fee	\$ 400.00
State Levy Fee	\$ 845.00
Septic/Wall Fee	\$ _____
Zoning Fee	\$ 25.00
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: 2-19-21

Permit Number: BP-2021-00222

GPIN/Tax Map: 7718-71-8144/47-35-0-3-0

Issued: 2-25-21

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 <u>207 ECHO MEADOWS RD. ROCKVILLE, VA 23146</u>				
	Owner <u>TRAVIS W. JOHNSON</u>	Phone # <u>804-564-9097</u>			
	Address <u>207 ECHO MEADOWS RD ROCKVILLE VA 23146</u>	Email <u>LEGACYHOMES09@AOL.COM</u>			
APPLICANT INFORMATION	Applicant/Contact <u>SAME AS ABOVE</u>		Phone #		
	Address		Email		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid	
	Front Setback <u>75' from P4 Road</u>	Center Line Setback <u>100'</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>No change to existing footprint.</u>				
	Planning & Zoning Officer <u>David Lloyd</u>		Date <u>2/23/21</u>		
CONTRACTOR INFORMATION	Contractor <u>OWNER</u>		Phone		
	Address		Email		
	Contractor License Number	Type	Expiration		
DESCRIPTION OF WORK	Scope of Work: <u>convert existing garage to living space</u> <u>REMODEL - ADDING 2-BEDROOM</u> <u>1-LIVING ROOM</u> <u>1-BATHROOM</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u>	# of Bedrooms <u>2</u>	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>960</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>960</u>	

Building Only - Excludes All Trades Permits

Value of Work

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 2-16-2021

Application Fee	\$ <u>3450</u>
State Levy Fee	\$ <u>.69</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>10.19</u>



# BUILDING PERMIT APPLICATION

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

Application Date: **10-15-2019**

Permit Number: **BP-2019-00928**

GPIN/Tax Map: **7728-51-2025/48-10.0-34**

Issued: **2-25-21**

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.

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 2200 A-1 Lanier Rd Rockville, VA 23146		Phone # 804-664-4117		
	Owner Rocstone Warehouse, LLC		Email cirby@manakinincos.com		
	Address P.O. Box 202 Manakin Sabot, VA 23103		Phone # 804-664-4117		
APPLICANT INFORMATION	Applicant/Contact Chris Irby		Email cirby@manakinincos.com		
	Address 123 Libbie Avenue Richmond, VA 23226		Phone # 804-664-4117		
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 Manakin Construction, LLC		Phone 804-664-4117		
	Address 123 Libbie Avenue Richmond, VA 23226		Email cirby@manakinincos.com		
	Contractor License Number 2705112972	Type A BLD	Expiration		
DESCRIPTION OF WORK	Scope of Work: Build offices and showroom in existing warehouse				
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public/Private	WATER <input checked="" type="checkbox"/> Public/Private	# of Bathrooms 4	# of Bedrooms	# of floors 1
	Finished Sq. Ft. 2000	Unfinished Sq. Ft. 7200	Total Sq. Ft. 9200		

**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 *Chris Irby* Date 8/24/20

Application Fee	\$ <u>300.00</u>
State Levy Fee	\$ <u>6.00</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>150.00</u>
RLD	\$ _____
SWP	\$ _____
<b>Total</b>	<b>\$ <u>406.00</u></b>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 10-28-2020

Permit Number: BP-2020-01046

GPIN/Tax Map: 6788-91-2017/45-1-0-1-E1

Issued: 2-25-2021

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 <b>1420 Broadstreet Road Oilville, VA 23129</b>	
	Owner <b>H &amp; B Associates</b>	Phone # <b>804-773-1174</b>
APPLICANT INFORMATION	Address <b>3800 Patterson Ave, Richmond, VA 23221</b>	Email <b>kfrost@askwoodfin.com</b>
	Applicant/Contact <b>Brent Strickler</b>	Phone # <b>804-569-6185 x106</b>
	Address <b>8420-F Meadowbridge Rd. Mechanicsville, VA 23116</b>	Email <b>BStrickler@Graybeale.com</b>

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

CONTRACTOR INFORMATION	Contractor <b>Graybeale Construction, Inc.</b>	Phone <b>804-569-6185</b>
	Address <b>8420-F Meadowbridge Rd. Mechanicsville, VA 23116</b>	Email <b>BStrickler@Graybeale.com</b>
	Contractor License Number <b>2705052125</b>	Type <b>Class A</b>

DESCRIPTION OF WORK	Scope of Work: <u>Wood-fin</u>				
	Interior renovation of convenience store. Including, restrooms, food service areas, and sales areas.				
	Proposed Use <b>Convenience store</b>	Current Use <b>Convenience store</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>None</b>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <b>2</b>	# of Bedrooms <b>0</b>	# of floors <b>1</b>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <b>3,842</b>	Unfinished Sq. Ft. <b>0</b>	Total Sq. Ft. <b>3,842</b>	

**Building Only - Excludes All Trades Permits**

Value of Work	<b>\$ 200,000.00</b>
---------------	----------------------

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

Signature of Applicant Brent Strickler Date 10-14-2020

Application Fee	\$ <u>1500.00</u>
State Levy Fee	\$ <u>30.00</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
<b>Total</b>	\$ <u>1,630.00</u>

1-19-2021



# 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: **January 6, 2020**

Permit Number: **BP-2021-00078**

GPIN/Tax Map: **6822-06-7921 / 11-16-0-29-D**

Issued: **2-25-2021**

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 <b>3075 Double Eagle Ct</b>				
	Owner <b>Jeffrey Jarrells</b>		Phone # <b>804-335-0080</b>		
	Address <b>3075 Double Eagle Ct</b>		Email		
APPLICANT INFORMATION	Applicant/Contact <b>Jessica Howell</b>		Phone # <b>864-906-5077</b>		
	Address <b>14241 Midlothian Turnpike #241, Midlothian, VA 23113</b>		Email <b>jessica@deckcreations.com</b>		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid	
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA	
	Side Setback	Side Setback	Flood Zone		
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	Planning & Zoning Officer _____ Date _____				
CONTRACTOR INFORMATION	Contractor <b>Deck Creations, LLC</b>		Phone <b>804-320-2212</b>		
	Address <b>14241 Midlothian Turnpike #241, Midlothian, VA 23113</b>		Email <b>jessica@deckcreations.com</b>		
	Contractor License Number <b>2705120631</b>	Type <b>Class A, CBC, RBC</b>	Expiration <b>10-31-2022</b>		
DESCRIPTION OF WORK	Scope of Work: <b>Replace existing deck in same footprint, approx 545 sq ft.</b>				
	Proposed Use <b>Deck</b>	Current Use <b>Deck</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>None</b>		
	<b>SEWER</b> Public/Private	<b>WATER</b> Public/Private	# of Bathrooms	# of Bedrooms	
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			<b>545</b>	<b>545</b>	
Building Only - Excludes All Trades Permits			Application Fee \$ <b>296.85</b>		
Value of Work <b>\$63,300</b>			State Levy Fee \$ <b>5.94</b>		
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Jessica Howell</u> Date <u>1/7/2021</u>			Septic/Well Fee \$ _____		
			Zoning Fee \$ _____		
			RLD \$ _____		
			SWP \$ _____		
			Total \$ <b>302.79</b>		

# BUILDING PERMIT APPLICATION

Application Date: 1/11/21  
 Permit Number: BP-2021-00068

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

GPIN/Tax Map: 7733-37-4149

Issued: 02-26-2021

Residential  Commercial

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

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

OWNER INFORMATION	Site Address <u>46 DAHLGREN ROAD</u>	
	Owner <u>MARIELE W AND W EVERETTE STARKE JR</u>	Phone # <u>804 307 1604</u>
	Address <u>SAME</u>	Email <u>rhette@starkecompany.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>SAME</u>	
	Address <u>SAME</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/POU</u>	Center Line Setback <u>65'</u>	Rear Setback, <u>35'</u>	CUP/Variance/COA
	Side Setback <u>Left Side 35'</u>	Side Setback <u>15'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>1/21/21</u>			

CONTRACTOR INFORMATION	Contractor <u>HOMEOWNER - The Starke CO</u>		Phone
	Address <u>SAME</u>		Email
	Contractor License Number <u>2705141368</u>	Type <u>CL A HIC</u>	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>REPLACE WOODEN DECK WITH BRICK PATIO, ROOF OVER PUMP OUT WINDOW TO MAKE EAT IN BANQUET REPLACE SEVERAL WINDOWS</u>				
	Proposed Use <u>SF</u>	Current Use <u>SF</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>(No)</u>	Finished Sq. Ft. <u>20</u>	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>124.50</u>
Value of Work <u>29,000</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>
Signature of Applicant <u>[Signature]</u> Date <u>1/11/21</u>		RLD	\$
		SWP	\$
		Total	\$ <u>151.99</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

Residential  Commercial

Application Date: 2-11-2021  
 Permit Number: BP-2021-00229  
 GPIN/Tax Map: 7734-50-4359 / 64-26-0-6-0  
 Issued: 2-26-2021  
 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: 320 Wickham Glen Drive, Goochland, VA 23238  
 Owner: Christopher P. Baker Phone #: 7574388537  
 Address: Same Email: chrisbaker@virginiaair.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Same as Above Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision <u>Wickham Glen</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
Front Setback <u>40' from P4 road</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 <u>X</u>	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: Daniel Floyd Date: 2/24/21

**CONTRACTOR INFORMATION**  
 Contractor: Gary Daniel's Masonry Phone: 8043395073  
 Address: 2388 Goodluck Rd Maidens Va. 23102 Email: danielmasonry@gmail.com  
 Contractor License Number: 2705129858 Type: B Expiration: 07-31-2021

**DESCRIPTION OF WORK**  
 Scope of Work: New 2-story exterior brick chimney

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 <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$32,000.00</u>	Application Fee	\$ <u>181.00</u>
		State Levy Fee	\$ <u>3.12</u>
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>184.12</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: [Signature] Date: 1/28/21



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

Received 2/4/21

P. O. Box 119 Goochland, VA 23063

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

Type:  
 Commercial  
 Residential

Trade:  
 Fire  
 Electrical  
 Mechanical  
 Plumbing  
 Gas

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

Please call or visit our website to calculate fee  
[www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date 2-3-2021
Permit # ELI-2021-00154
GPIN
Tax Map

## LOCATION

Street Address  
7424 Aldeby St

## PROPERTY OWNERSHIP

Name Ben Manley	Phone 804-833-7190
Mailing Address 7424 Aldeby St Glen Allen, VA 23059	Email

## APPLICANT

Name Mike Loving	Phone 804-400-9224
Address 1735 Arlington Rd Richmond, VA 23230	Email mloving@master-electrical.com

## CONTRACTOR

Name Master Electrical Services	Phone 804-231-1973			
Mailing Address 1735 Arlington Rd Richmond, VA 23230	Email mloving@master-electrical.com			
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705067673	Expiration 3-31-2022	License Type	Class A

## DESCRIPTION OF WORK

Install 20kw generator to existing ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$5,000			

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: 2-3-2021

Approval: <u>Gary Fisher</u>	Office Use Only	Approval date: <u>2/4/21</u>
Permit Fee: <u>\$14.37</u>		Issued date: _____

(owner's statement on back)



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

*Received*  
2/9/21

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

Type:  
 Commercial  
 Residential

Trade:  
 Fire  
 Electrical  
 Mechanical  
 Plumbing  
 Gas

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

Please call or visit our website to calculate fee  
[www.goochlandva.us/permitcalc](http://www.goochlandva.us/permitcalc)

Date <i>2-9-21</i>
Permit # <i>ELI-2021-00168</i>
GPIN <i>7714-97-6332</i>
Tax Map <i>63-4-10</i>

### LOCATION

Street Address *664 Monacan Dr Richmond, Va. 23238*

### PROPERTY OWNERSHIP

Name <i>Jim Starnes</i>	Phone
Mailing Address <i>664 Monacan Dr</i>	Email

### APPLICANT

Name <i>Mike Loving</i>	Phone <i>804-400-9224</i>
Address <i>1735 Arlington Rd Richmond, VA 23230</i>	Email <i>mloving@master-electrical.com</i>

### CONTRACTOR

Name <i>Master Electrical Services</i>		Phone <i>804-231-1973</i>	
Mailing Address <i>1735 Arlington Rd Richmond, VA 23230</i>		Email <i>mloving@master-electrical.com</i>	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <i>2705067673</i>	Expiration <i>3-31-2022</i>	License Type <i>A</i>

### DESCRIPTION OF WORK

<i>Install 7.2kw generator to a 200 Amp ATS</i>			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <i>5,000</i>			

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

Signature of Applicant: *[Signature]* Date: *2/9/21*

Approval: <i>Garry Fisher</i>	Office Use Only Approval date: <i>2/9/21</i>
Permit Fee: <i>44.37</i>	Issued date: <i>2/9/21</i>

(owner's statement on back)

2.19.21

64.23

Received 2/12/21



# 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	2.10.2021
Permit #	EL-2021-00187
GPIN	6719-47-7953
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	2754 DAVIS MILL RD	District	
----------------	--------------------	----------	--

### PROPERTY OWNERSHIP

Name	Marion Grady	Phone	804-690-6316
Mailing Address	2754 DAVIS MILL 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

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

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 Gary Fisher Date 2/12/21

Value of Work: 9,327

Permit fee: 64.23

Issue date: 2/12/21

2.24.21

\$ 68.36

Received 2/19/21



# 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	2.11.2021
Permit #	ELI-2021-00224
GPIN	6821-81-1920
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	<b>3506 PACETOWN RD</b>	District	
----------------	-------------------------	----------	--

### PROPERTY OWNERSHIP

Name	<b>WILLIAM AND EARLENE PACE</b>	Phone	<b>804-457-4471</b>
Mailing Address	<b>3506 PACETOWN RD</b>		

### APPLICANT

Name	<b>WOODFIN HEATING</b>	Phone	<b>8042778603</b>
E-Mail Address	<b>AWILLS@ASKWOODFIN.COM</b>		

### CONTRACTOR

Name	<b>WOODFIN HEATING</b>	Phone	<b>804-764-4533</b>
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

<b>INSTALL 22KW GENERATOR, 200 AMP ATS</b>			
# of Baths	Service Size	Power Company	Inquiry #
	<b>200</b>	<b>Dom</b>	<b>N/A</b>

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: **10,227.00**

Signature of Applicant

Permit fee:

**68.36**

Approval

**Gary Fisher**

Date

**2/19/21**

Issue date:

**2/19/21**