



# BUILDING PERMIT APPLICATION

Application Date: 5-18-2021

Permit Number: BP-2021-00635

GPIN/Tax Map: 0805-92-3449/1-6-0-12-0

Issued: 6-9-21

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.

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 Austin Williamson		Phone #
	Owner 6040 Broadstreet Rd		
	Address Kent store Va.		Email

APPLICANT INFORMATION	Applicant/Contact Chris Winder		Phone # 540-872-6942
	Address 12115 Shannon Hill Rd Louisa Va 23093		Email Kibwinder06@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Deer Run	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' from PL/POC	Center Line Setback 125'	Rear Setback 5'	CUP/Variance/COA RR
	Side Setback 5'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David Ford Date: 5/24/21			

CONTRACTOR INFORMATION	Contractor Christopher S Winder		Phone
	Address 12115 Shannon Hill Rd		Email
	Contractor License Number 2705117925	Type Pool Class B	Expiration 9-30-2021

DESCRIPTION OF WORK	Scope of Work: 14' by 30' Inground Pool Auto Cover				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. 420	Total Sq. Ft. 420	

Building Only - Excludes All Trades Permits

Value of Work	35,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant: Christopher S Winder Date: 5-18-2021

Application Fee	\$ 1169.50
State Levy Fee	\$ 3.39
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 1197.89



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5-18-2021  
 Permit Number: BP-2021-00636  
 GPIN/Tax Map: 7717-22-6943 / 47-23-0-3-0  
 Issued: 6-8-21  
 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: 2139 Proffit Road Manakin Sabot Va 23103  
 Owner: Glen Davis  
 Address: 2139 Proffit Road Manakin Sabot  
 Phone #: 804-517-8014  
 Email: \_\_\_\_\_

**APPLICANT INFORMATION**  
 Applicant/Contact: Chris Winder  
 Address: 12115 Shannon Hill Ln Louisa Va 23093  
 Phone #: 540-872-6942  
 Email: kibwinder06@gmail.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>Proffitt</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>75' from driveway</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: _____	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Lloyd Date: 5/24/21

**CONTRACTOR INFORMATION**  
 Contractor: Chris Winder  
 Address: 12115 Shannon Hill Ln Louisa Va 23093  
 Contractor License Number: 2705117925 Type: B-Pol Expiration: 9-30-2021  
 Phone: 540-872-6942  
 Email: kibwinder06@gmail.com

**DESCRIPTION OF WORK**  
 Scope of Work: 16 by 32 Inground Pool w/ fence Barrier

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>512</u>	Total Sq. Ft. <u>512</u>	

Building Only - Excludes All Trades Permits

Value of Work: 38,000

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 Winder Date: \_\_\_\_\_

Application Fee	\$ <u>183.00</u>
State Levy Fee	\$ <u>3.66</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>211.66</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5-19-21

Permit Number: **BP-2021-00640**

GPIN/Tax Map: 58-53-0-35-0/7726-24-551

Issued: 6-8-21

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 12103 Ebb Pointe Circle	
	Owner James DeFord	Phone # 998-3864
	Address 12103 Ebb Pointe Circle	

APPLICANT INFORMATION	Applicant/Contact BNW Builders		Phone # 994-3429
	Address 8601 Staple Mill Rd.		Email DAN@bnwbuilders.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Readers Branch	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 30' from PL/PWL	Center Line Setback 55'	Rear Setback 25'	CUP/Variance/COA RPUD
	Side Setback 10'	Side Setback 10'	Flood Zone X	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Lloyd Date: 5/25/21

CONTRACTOR INFORMATION	Contractor BNW Builders		Phone 994-3429
	Address 8601 Staples Mill Rd.		Email DAN@bnwbuilders.com
	Contractor License Number 2705 102 250	Type CLASS A	Expiration 6-30-2022

DESCRIPTION OF WORK	Scope of Work: Demo old deck and build a new 27' x 16 deck with a 17' x 16' porch. pvc decking and Aluminum powder coated rails.				
	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. 432	

Building Only - Excludes All Trades Permits

Value of Work	40,000
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Application Fee	\$ 192.00
State Levy Fee	\$ 3.84
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
<b>Total</b>	<b>\$ 220.84</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: BNW Date: 5-19-21

Approved - Robby Felts 6/8/21



# 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

Application Date: MAY 4, 2021

1 of 5

Permit Number: BP-2021-00548

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

Issued: 6-9-21

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.

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone #

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		Email ADMIN@BRACWALLS.COM

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

APPROVED  REJECTED  COMMENTS:  
Planning & Zoning Officer David Floyd Date 5/7/21

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - A				
	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. 350		

Building Only - Excludes All Trades Permits

Value of Work	\$19,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant Vicki Barnett Date May 4, 2021

Application Fee	\$298.01
State Levy Fee	\$5.96
Septic/Well Fee	\$
Zoning Fee	\$50-
RLD	\$
SWP	\$
Total	\$353.97

353



# 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: MAY 4, 2021 **2 of 5**  
 Permit Number: **BP-2021-00549**  
 GPIN/Tax Map: GPIN: 7726-71-9334 / TAX PARCEL ID: 59-5-0-1-0  
 Issued: **6-9-2021**

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone # 804.396.8775
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Avery Point</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback —	Center Line Setback —	Rear Setback —	CUP/Variance/COA —
	Side Setback —	Side Setback —	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>David Floyd</i> Date: <i>5/7/21</i>			

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - 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	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 630		

Building Only – Excludes All Trades Permits

Value of Work	\$34,198.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: *Vicki Barnett* Date: *May 4, 2021*

Application Fee	\$256.48
State Levy Fee	\$5.13
Septic/Well Fee	\$
Zoning Fee	\$50-
RLD	\$
SWP	\$
Total	\$311.61



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
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 Goochland, VA 23063  
 (804) 556-5815 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: MAY 4, 2021

3 of 5

Permit Number: BP-2021-00550

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

Issued: 6-9-2021

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.

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233	
	Owner ERICKSON LIVING, AVERY POINT, LLC	Phone # 410.242.2880
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228	Email

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

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

APPROVED  REJECTED  COMMENTS:  
 Planning & Zoning Officer: *Diana Lopez* Date: *5/7/21*

CONTRACTOR INFORMATION	Contractor BRAC RETAINING WALLS AND EXCAVATING, LLC	Phone 804.798.5097
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	
	Contractor License Number 2705131869	Type CLASS A CONTRACTOR

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - C1				
	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. 198		

Building Only - Excludes All Trades Permits

Value of Work	\$10,747.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *Vicki Barnett* Date: *MAY 4, 2021*

Application Fee	\$ 80.60
State Levy Fee	\$ 1.61
Septic/Well Fee	\$
Zoning Fee	\$ 50.-
RLD	\$
SWP	\$
Total	\$ 132.21



# BUILDING PERMIT APPLICATION

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

Application Date: MAY 4, 2021 4 of 5

Permit Number: BP-2021-00551

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

Issued: 6-9-2021

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.

<b>OWNER INFORMATION</b>	Site Address <u>AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233</u>		Phone # <u>410.242.2880</u>	
	Owner <u>ERICKSON LIVING, AVERY POINT, LLC</u>		Email	
	Address <u>701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228</u>		Phone #	
<b>APPLICANT INFORMATION</b>	Applicant/Contact <u>VICKI BARNETT</u>		804.396.8775	
	Address <u>10423 DOW GIL ROAD, ASHLAND, VA 23005</u>		Email <u>ADMIN@BRACWALLS.COM</u>	
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	
	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>[Signature]</u> Date: <u>5/7/21</u>		Date Paid	
<b>CONTRACTOR INFORMATION</b>	Contractor <u>BRAC RETAINING WALLS AND EXCAVATING, LLC</u>		Phone <u>804.798.5097</u>	
	Address <u>10423 DOW GIL ROAD, ASHLAND, VA 23005</u>			
	Contractor License Number <u>2705131869</u>	Type <u>CLASS A CONTRACTOR</u>	Expiration <u>11.30.2021</u>	
<b>DESCRIPTION OF WORK</b>	Scope of Work: <u>INSTALL SEGMENTAL RETAINING WALL - C2</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>219</u>	
Building Only - Excludes All Trades Permits		Application Fee \$ <u>89.16</u>		
Value of Work <u>\$11,887.</u>	State Levy Fee \$ <u>1.78</u>		Septic/Well Fee \$	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Vicki Barnett</u> Date <u>May 4, 2021</u>		Zoning Fee \$ <u>50 -</u>	RLD \$	
		SWP \$	Total \$ <u>140.94</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: MAY 4, 2021

5 of 5

Permit Number: BP-2021-00552

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

Issued:

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

Residential  Commercial

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

OWNER INFORMATION	Site Address	AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233	
	Owner	ERICKSON LIVING, AVERY POINT, LLC	Phone # 410.242.2880
	Address	701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228	Email
APPLICANT INFORMATION	Applicant/Contact	VICKI BARNETT	Phone # 804.396.8775
	Address	10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<i>Avery Point</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	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:		Date <i>5/7/21</i>		
Planning & Zoning Officer: <i>[Signature]</i>				

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - E				
	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. 732		

Building Only - Excludes All Trades Permits

Value of Work	\$39,734.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *Vicki Barnett* Date: *May 4, 2021*

Application Fee	\$ 298.01
State Levy Fee	\$ 5.96
Septic/Well Fee	\$
Zoning Fee	\$ 50.-
RLD	\$
SWP	\$
Total	\$ 353.97



# 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: MAY 4, 2021 **1 of 9**  
 Permit Number: **BP-2021-00557**  
 GPIN/Tax Map:  
 GPIN: 7726-71-9334 / TAX PARCEL ID: 59-5-0-1-0

Issued: **6-9-21**

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.

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone # 804.396.8775
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Avery Point</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <i>* Not Subject To Setbacks.</i>	
Planning & Zoning Officer: <i>David Floyd</i>		Date: <i>5/10/21</i>		

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - D				
	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. 732		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>129.94</u>
Value of Work	\$17,326.00	State Levy Fee \$ <u>2.60</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: <i>Vicki Barnett</i> Date: <i>May 4, 2021</i>		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>50.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>182.54</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: MAY 4, 2021 2 of 9

Permit Number: BP-2021-00558

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

Issued: 6-9-21

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233	
	Owner ERICKSON LIVING, AVERY POINT, LLC	Phone # 410.242.2880
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228	Email

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

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

APPROVED  REJECTED  COMMENTS: \*No Subject to Setbacks  
 Planning & Zoning Officer: [Signature] Date: 5/10/21 M

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - G1				
	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. 227		

Building Only - Excludes All Trades Permits

Value of Work	\$5,373.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: Vicki Barnett Date: May 4, 2021

Application Fee	\$ 4029
State Levy Fee	\$ .81
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 96.10



# 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: MAY 4, 2021 3 of 9

Permit Number: BP-2021-00559

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

Issued: 6-9-21

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233	
	Owner ERICKSON LIVING, AVERY POINT, LLC	Phone # 410.242.2880
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228	

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		Email ADMIN@BRACWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	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>Not Subject To Setbacks.</u>		Date <u>5/10/21</u>	

Planning & Zoning Officer: David Lloyd

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - G2				
	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. 72		

**Building Only - Excludes All Trades Permits**

Value of Work	\$1,704.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Vicki Barnett Date: May 4, 2021

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.10</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$
SWP	\$
Total	\$ <u>80.10</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: MAY 4, 2021

4 of 9

Permit Number: BP-2021-00560

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

Issued: 6-9-21

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.

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone # 804.396.8775
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	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>*Not Subject to Setback</u>			
	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>5/10/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - H				
	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. 351		

Building Only - Excludes All Trades Permits

Value of Work	\$8,308.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: Vicki Barnett Date: May 4, 2021

Application Fee	\$ <u>62.31</u>
State Levy Fee	\$ <u>1.25</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$
SWP	\$
Total	\$ <u>113.56</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: MAY 4, 2021

5 of 9

Permit Number: BP-2021-00561

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

Issued: 6-9-21

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.

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880	
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email	
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone # 804.396.8775	
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM	
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____ Date Paid _____	
	Front Setback _____	Center Line Setback _____	Rear Setback _____ CUP/Variance/COA _____	
	Side Setback _____	Side Setback _____	Flood Zone _____ MI	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>[Signature]</u> Date <u>5/10/21</u>			
CONTRACTOR INFORMATION	Contractor BRAC RETAINING WALLS AND EXCAVATING, LLC		Phone 804.798.5097	
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005			
	Contractor License Number 2705131869	Type CLASS A CONTRACTOR	Expiration 11.30.2021	
DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - I			
	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
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 468	
Building Only - Excludes All Trades Permits				
Value of Work	\$11,077.00			
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 <u>Vicki Barnett</u>		Date <u>May 4, 2021</u>		
		Application Fee \$ <u>33.08</u>		
		State Levy Fee \$ <u>1.66</u>		
		Septic/Well Fee \$ _____		
		Zoning Fee \$ <u>50.00</u>		
		RLD \$ _____		
		SWP \$ _____		
		Total \$ <u>134.74</u>		



# BUILDING PERMIT APPLICATION

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

Application Date: MAY 4, 2021

6 of 9

Permit Number: BP-2021-00562

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

Issued: 6-9-21

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.

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone # 804.396.8775
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Avery Point</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA <i>M1</i>
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <i>David Lloyd</i> Date <i>5/10/21</i>	

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - K				
	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. 176		

Building Only - Excludes All Trades Permits

Value of Work: \$4,166.00

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

Signature of Applicant: *Vicki Barnett* Date: *May 4, 2021*

Application Fee	\$ 31.25
State Levy Fee	\$ .62
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 81.87



# 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: MAY 4, 2021

7 of 9

Permit Number: BP-2021-00563

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

Issued: 6-9-21

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 AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233	
	Owner ERICKSON LIVING, AVERY POINT, LLC	Phone # 410.242.2880
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228	Email

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

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

APPROVED  REJECTED  COMMENTS: Planning & Zoning Officer David Lloyd Date 5/10/21

CONTRACTOR INFORMATION	Contractor BRAC RETAINING WALLS AND EXCAVATING, LLC	Phone 804.798.5097
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	
	Contractor License Number 2705131869	Type CLASS A CONTRACTOR

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - L				
	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. 186		

Building Only - Excludes All Trades Permits

Value of Work	\$4,402.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant Vicki Barnett Date May 5, 2021

Application Fee	\$ 33.02
State Levy Fee	\$ 1.46
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 83.48



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: MAY 4, 2021

8 of 9

Permit Number: BP-2021-005104

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

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

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

OWNER INFORMATION	Site Address AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233	
	Owner ERICKSON LIVING, AVERY POINT, LLC	Phone # 410.242.2880
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228	Email

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

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

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_ Date *5/10/21*

Planning & Zoning Officer: *David Lloyd*

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - M				
	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. 242		

Building Only - Excludes All Trades Permits

Value of Work	\$5,728.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *Vicki Barnett* Date: *May 5, 2021*

Application Fee	\$ 42.96
State Levy Fee	\$ .80
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 93.82



# 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: MAY 4, 2021

9 of 9

Permit Number: BP-2021-00565

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

Issued:

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

Residential  Commercial

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

OWNER INFORMATION	Site Address AVERY POINT PHS 1B - 12000 AVERY POINT WAY, RICHMOND, VA 23233		Phone # 410.242.2880
	Owner ERICKSON LIVING, AVERY POINT, LLC		Email
	Address 701 MAIDEN CHOICE LANE, BALTIMORE, MD 21228		Phone # 804.396.8775
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Avery Point</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA <u>M1</u>
	Side Setback	Side Setback	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>5/10/21</u>				

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

Scope of Work: INSTALL SEGMENTAL RETAINING WALL - N

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. 257		

Building Only - Excludes All Trades Permits

Value of Work	\$6,083.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant Vicki Barnett Date May 5, 2021

Application Fee	\$ <u>45.00</u>
State Levy Fee	\$ <u>.91</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50.00</u>
RLD	\$
SWP	\$
Total	\$ <u>96.91</u>



# BUILDING PERMIT APPLICATION

Application Date: MAY 5, 2021

1 of 4

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-2021-00623**

GPIN/Tax Map: 7725-05-8916 - 7725-30-0045  
58-54-0-3.0

Issued: **6-9-21**

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.

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 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD		Phone # 804.708.5139
	Owner BOONE HOMES, INC.		Email
APPLICANT INFORMATION	Address 62 BROAD STREET ROAD, SUITE B, MANAKIN-SABOT, VA 23103		Phone # 804.396.8775
	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
Address 10423 DOW GIL ROAD, ASHLAND, VA 23005			

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>Mosaic</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <b>5/24/21</b>	
Planning & Zoning Officer <i>[Signature]</i>				

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

DESCRIPTION OF WORK	Scope of Work: <b>MOSAIC @ WEST CREEK SEC 8 - LOTS 1-5</b> <b>Segmental retaining wall</b>			
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	# of floors	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 4,242

**Building Only - Excludes All Trades Permits**

Value of Work	\$77,675.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant *Vicki Barnett* Date **May 5, 2021**

Application Fee	\$582.50
State Levy Fee	\$11.65
Septic/Well Fee	\$
Zoning Fee	\$50-
RLD	\$
SWP	\$
Total	\$644.21



# 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

Application Date: MAY 5, 2021

2 of 4

Permit Number: BP-2021-00624

GPIN/Tax Map: 58-54-0-3-0 7725-05-8916 7725-30-0045

Issued: 6-9-21

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.

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 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD	
	Owner BOONE HOMES, INC.	Phone # 804.708.5139
	Address 62 BROAD STREET ROAD, SUITE B, MANAKIN-SABOT, VA 23103	

APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		Email ADMIN@BRACWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</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	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Papp</u> Date: <u>5/24/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: MOSAIC @ WEST CREEK SEC 8 - LOTS 6-17				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/> <input type="checkbox"/> WATER Public/Private <input type="checkbox"/>		# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 7,775		

**Building Only - Excludes All Trades Permits**

Value of Work	\$142,367.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Vicki Barnett Date: May 5, 2021

Application Fee	\$ 1067.75
State Levy Fee	\$ 21.34
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
<b>Total</b>	<b>\$ 1139.11</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

Application Date: MAY 5, 2021

3 of 4

Permit Number: BP-2021-00625

GPIN/Tax Map: 58-54-03-0 7725-05-8916 7725-30-0045-

Issued: 6-9-21

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.

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 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD	Phone # 804.708.5139
	Owner BOONE HOMES, INC.	Email
APPLICANT INFORMATION	Address 62 BROAD STREET ROAD, SUITE B, MANAKIN-SABOT, VA 23103	Phone # 804.396.8775
	Applicant/Contact VICKI BARNETT	Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>David Teep</i> Date: <i>5/24/21</i>			

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

DESCRIPTION OF WORK	Scope of Work: MOSAIC @ WEST CREEK SEC 8 - LOTS 27-34			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 10,376	

Building Only - Excludes All Trades Permits

Value of Work	\$189,994.00
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Application Fee	\$ 1424.95
State Levy Fee	\$ 28.50
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 1503.45

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

Signature of Applicant: *Vicki Barnett* Date: *May 5, 2021*



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: MAY 5, 2021

4 of 4

Permit Number: BP-2021-00626

GPIN/Tax Map: 58-54-0-3-0 7725-05-8916 7725-30-0045

Issued: 6-9-21

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 INTERSECTION OF TUCKAHOE CREEK PKWY AND HOCKETT ROAD		Phone # 804.708.5139
	Owner BOONE HOMES, INC.	Email	
	Address 62 BROAD STREET ROAD, SUITE B, MANAKIN-SABOT, VA 23103		Phone # 804.396.8775
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT		Email ADMIN@BRACWALLS.COM
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS			
Planning & Zoning Officer <i>David Taylor</i>		Date <i>5/24/21</i>		

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

DESCRIPTION OF WORK	Scope of Work: MOSAIC @ WEST CREEK SEC 8 - LOTS 44-48				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 981		

Building Only - Excludes All Trades Permits

Value of Work	\$17,963.00
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Application Fee	\$ 134.73
State Levy Fee	\$ 2.69
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 187.42

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

Signature of Applicant *Vicki Barnett* Date *May 5, 2021*

# BUILDING PERMIT APPLICATION

*Building Inspection*

, VA 23063  
 5815 Fax (804) 566-5651  
 VA Relay

Residential  Commercial

Application Date: 5/25/2021

Permit Number: *BP-2021-00701*

GPIN/Tax Map: *42-1-0-31-0 / 6767-01-5022*

Issued: *6-10-21*

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 <b>2875 River Road West</b>	
	Owner <b>Goochland County Historical Society</b>	Phone # 804-556-3966
	Address 2924 River Road West Goochland, VA. 23063	Email goochlandhistory@com

APPLICANT INFORMATION	Applicant/Contact <b>Christina Dunn / President</b>		Phone # 804-840-5290 (cell)
	Address 2924 River Road West Goochland, VA. 23063		Email cidunn46@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <b>n/a</b>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to first print</i> Planning & Zoning Officer: <i>David Long</i> Date: <i>6/9/21</i>			

CONTRACTOR INFORMATION	Contractor <b>n/a</b>		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <b>Change of use from office to residential</b>				
	Proposed Use <b>residential</b>	Current Use <b>office</b>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>n/a</b>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2	# of Bedrooms 2	# of floors 2 plus basement
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <b>2239</b>	Unfinished Sq. Ft. <b>200</b>	Total Sq. Ft. <b>2439 approximately</b>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>30.00</i>
Value of Work <i>\$0.00 - \$1,200.00</i>		State Levy Fee	\$ <i>.60</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.		Zoning Fee	\$ <i>100.00</i>
Signature of Applicant <i>Christina Dunn</i>		RLD	\$
Date <i>6-8-2021</i>		SWP	\$
		Total	\$ <i>130.60</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

Application Date: 5-14-21

Permit Number: BP-2021-00606

GPIN/Tax Map: 7704-96-4532/62-24-0-16-0

Issued: 6-10-2021

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 425 Edgehill WOOD Manakin-Sabot, VA 23103		Phone #
	Owner SAXTON CRAIG		Email
	Address 425 EDGEHILL WOOD DR		Phone # 804-621-7718
APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE		Email JSALVATORE@JESWORK.COM
	Address 2410 SOUTHLAND DR CHESTER VA 23831		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Edgehill of Manakin Woods</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	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>All interior work</u>	
Planning & Zoning Officer <u>David Floyd</u>		Date <u>5/18/21</u>		

CONTRACTOR INFORMATION	Contractor JES CONST		Phone 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831		Email JSALVATORE@JESWORK.COM
	Contractor License Number 2705-06-8655	Type A	Expiration 04-30-22

DESCRIPTION OF WORK	Scope of Work: 22 LF OF SUPPLEMENTAL BEAM, 1414 CRAWL SEAL LINER AS VAPOR BARRIER ONLY 5 INTELI JACKS.				
	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	12,896.36
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant Jeannie Salvatore Date \_\_\_\_\_

Application Fee	\$ 70.03
State Levy Fee	\$ 1.40
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 96.43

5.28.2021



# 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: 5-13-21

Permit Number: BP-2021-00668

GPIN/Tax Map: 6777-67-7058 / 43-40-C-6-D

Issued: 6-10-2021

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>2118 Jockey Ridge Rd</b>	Phone # <b>8043807084</b>
	Owner <b>Stuart Norton</b>	Email stuartcnorton@gmail.com
APPLICANT INFORMATION	Address <b>2118 Jockey Ridge Rd, Maidens, VA 23102</b>	Phone # <b>8047617904</b>
	Applicant/Contact <b>Billy's Pool Service/Billy Becker</b>	Email poolsbybilly@yahoo.com
Address <b>13372 Greenwood Church Rd, Ashland, VA 23005</b>		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from P/R Road</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David [Signature]</u> Date <u>6/2/21</u>			

CONTRACTOR INFORMATION	Contractor <b>Billy's Pool Service</b>	Phone <b>8047617904</b>
	Address <b>13372 Greenwood Church Rd, Ashland, VA 23005</b>	Email poolsbybilly@yahoo.com
	Contractor License Number <b>2705136588</b>	Type <b>Class B (POL)</b>

**Scope of Work:**  
install inground fiberglass pool 16'x35' (Whitsunday 2 by Barrier Reef)

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>560</b>	

**Building Only - Excludes All Trades Permits**

Value of Work	<b>23,000.00</b>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 5-13-21

Application Fee	\$ <u>115.50</u>
State Levy Fee	\$ <u>231</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>2500</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>142.81</u>

R5 UB ~~2005~~ 2010



# BUILDING PERMIT APPLICATION

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

Application Date: 5-24-21

Permit Number: DP-2021-00641

GPIN/Tax Map: 1726-14-9558 / 58-53-0-40-0

Issued: 6-10-21

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>12125 Branch Overlook Dr</u>	
	Owner	<u>Wanda &amp; Ham Morris</u>	
APPLICANT INFORMATION	Address	<u>12125 Branch Overlook Dr</u>	
	Applicant/Contact	<u>Scott Kresge</u>	
APPLICANT INFORMATION	Address	<u>286 River Rd West</u>	
	Phone #	<u>804-370-8354</u>	
APPLICANT INFORMATION	Email	<u>ghmorris13@gmail.com</u>	
	Phone #	<u>540-476-0892</u>	
APPLICANT INFORMATION	Email	<u>skresge@homemasons.com</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Readers Branch</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>30' from PL/ROW</u>	<u>55'</u>	<u>25'</u>	
Side Setback	Side Setback	Flood Zone		
<u>10'</u>		<u>X</u>	<u>RPUD</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>off rear of structure</u>				
Planning & Zoning Officer <u>Diana Boyd</u> Date <u>5/25/21</u>				

CONTRACTOR INFORMATION	Contractor	<u>HomeMasons Inc.</u>		Phone	<u>804-784-1200</u>
	Address	<u>286 River Rd West</u>		Email	<u>aboschen@homemasons.com</u>
	Contractor License Number	<u>2705020224</u>	Type	<u>A</u>	Expiration

**Scope of Work:**  
Building a small, 2 foot deep structure on the back of the house to accommodate new gas fireplace in the living room.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>Unchanged</u>	<u>N/A</u>	<u>None</u>		
SEWER	WATER	# of Bathrooms	# of Bedrooms	# of floors
<u>Public/Private</u>	<u>Public/Private</u>	<u>2.5</u>	<u>3</u>	<u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	

Building Only - Excludes All Trades Permits

Value of Work 11,000.00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant [Signature] Date 5/24/21

Application Fee	\$ <u>101.50</u>
State Levy Fee	\$ <u>1.23</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>127.73</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

Residential  Commercial

Application Date: 5-5-2021  
Permit Number: BP-2021-00545  
GPIN/Tax Map: 6785-83-0799/56-1-0-19-0  
Issued: 6-11-2021  
This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>1043 River Road</u>		Phone # <u>804 725 9457</u>
	Owner <u>1373 River Road</u>		Email
APPLICANT INFORMATION	Address <u>Goochland VA 23069</u>		Phone # <u>804 725 9457</u>
	Applicant/Contact <u>Wendy Kirby</u>		Email <u>wendy.kirby@gmail.com</u>

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 P.U./P.O.W</u>	Centerline Setback <u>80'</u>	Rear Setback <u>30'</u>	CUP/Variance/COA <u>B1/A2</u>
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
Date 5/7/21  
Planning & Zoning Officer Daniel Floyd

CONTRACTOR INFORMATION	Contractor <u>Wendy V Kirby and Son, Inc</u>		Phone <u>804 725 9457</u>
	Address <u>10433 Courtyard Rd</u>		Email <u>wendy.kirby@gmail.com</u>
	Contractor License Number <u>2721502099</u>	Type <u>A</u>	Expiration <u>12/31/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>Screen Porch Addition. Revised 6/10/2021 to enclosed porch with screened windows.</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	# 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>N/A</u>	Unfinished Sq. Ft. <u>48'</u>	Total Sq. Ft. <u>52'</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>79.50</u>
Value of Work	<u>15,000</u>	State Levy Fee	\$ <u>1.59</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>[Signature]</u> Date <u>6/11/2021</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>106.99</u>

Rec: 5-21



**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: 5/20/21

Permit Number: BP-2021-00645

GPIN/Tax Map: 6795-97-0403 / 56-15-0-3-0

Issued: 6-11-21

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	1200 YELLOW GATE LANE MANAKIN SABOT, VA 23103		
	Owner	SMYTH RODERICK A SMYTH SUSAN J	Phone #	(804) 241-6737
APPLICANT INFORMATION	Address	1200 YELLOW GATE LANE MANAKIN SABOT, VA 23103		
	Applicant/Contact	Henry Keith (Sigora Solar)	Email	5smyths@comcast.net
APPLICANT INFORMATION	Address	490 Westfield Road Suite A Charlottesville, VA 22901		
	Applicant/Contact	Henry Keith (Sigora Solar)	Phone #	(434) 996-6141
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	Hebron Springs	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Front Setback	Center Line Setback	Rear Setback	CUP/Varlance/COA
	Side Setback	Side Setback	Flood Zone	RR
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint.</u> Date <u>5/25/21</u>				
Planning & Zoning Officer <u>David Floyd</u>				

CONTRACTOR INFORMATION	Contractor	Sigora Solar LLC		
	Address	490 Westfield Road Suite A Charlottesville, VA 22901		
CONTRACTOR INFORMATION	Contractor License Number	2705141338	Type	A
	Expiration	7/31/22		
CONTRACTOR INFORMATION	Contractor	Sigora Solar LLC		
	Address	490 Westfield Road Suite A Charlottesville, VA 22901		
CONTRACTOR INFORMATION	Contractor License Number	2705141338	Type	A
	Expiration	7/31/22		
CONTRACTOR INFORMATION	Contractor	Sigora Solar LLC		
	Address	490 Westfield Road Suite A Charlottesville, VA 22901		
CONTRACTOR INFORMATION	Contractor License Number	2705141338	Type	A
	Expiration	7/31/22		
CONTRACTOR INFORMATION	Contractor	Sigora Solar LLC		
	Address	490 Westfield Road Suite A Charlottesville, VA 22901		
CONTRACTOR INFORMATION	Contractor License Number	2705141338	Type	A
	Expiration	7/31/22		

**Scope of Work:**  
 Installation of a flush roof mounted solar photovoltaic system. System Size: 16.920 kWp DC

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

Building Only - Excludes All Trades Permits

Value of Work	5,837.4
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Application Fee	\$ <u>38.26</u>
State Levy Fee	\$ <u>77</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>64.03</u>

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

Signature of Applicant Henry Keith Date 5/20/21



# 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

Application Date: 5/21/2021

Permit Number: BP-2021-00644

GPIN/Tax Map: 6739-61-9926 / 28-16-0-9-0

Issued: 6-11-21

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.

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>4201 RIDDLES BRIDGE ROAD</b>		Phone # 804929-6834
	Owner <b>SAMUEL G &amp; WENDY C HOFFMAN</b>		Email SGHOFFMAN14@GMAIL.COM
	Address 4201 RIDDLES BRIDGE ROAD		

APPLICANT INFORMATION	Applicant/Contact <b>STEVE MURPHY ADD A DECK, INC</b>		Phone # 804-285-4239
	Address <b>6408 MALLORY DRIVE HENRICO, VA 23226</b>		Email SMURPHY@ADDADECK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Riddles Bridge Estates</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
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Lead</u>		Date <u>5/25/21</u>	

CONTRACTOR INFORMATION	Contractor <b>ADD A DECK, INC</b>		Phone 804-285-4239
	Address <b>6408 MALLORY DRIVE HENRICO, VA 23226</b>		Email SMURPHY@ADDADECK.COM
	Contractor License Number 2701-033201A	Type RES & COM CLASS A	Expiration 11/30/2022

DESCRIPTION OF WORK	<b>Scope of Work:</b> <b>RESURFACE &amp; RERAIL EXISTING 12' X 12' DECK &amp; BUILD NEW STEPS</b>				
	Proposed Use DECK	Current Use DECK	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.	Total Sq. Ft.	
			144 SQ FT	144 SQ FT	

**Building Only - Excludes All Trades Permits**

Value of Work	\$8,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Steve Murphy Date: 5/21/2021

Application Fee	\$ <u>48.00</u>
State Levy Fee	\$ <u>.96</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
<b>Total</b>	\$ <u>73.96</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: 5-26-21  
 Permit Number: BP-2021-00663

GPIN/Tax Map: 7704-38-9981 / 62-31-A-2-0  
 Issued: 4-14-21

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>505 MEADOW VIEW LANE MANAKIV SABOT, VA. 23103</u>	
	Owner	<u>JIM + Pam HACKER</u>	
	Address	<u>505 MEADOW VIEW LANE MANAKIV SABOT VA. 23103</u>	
APPLICANT INFORMATION	Applicant/Contact	<u>TOM HOMER</u>	
	Address	<u>12536 PATTERSON AVE RICHMOND VA. 23238</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	<u>The Meadows at Manakin</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	KR		
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>* All interior work</u>		Date <u>5/28/21</u>		

CONTRACTOR INFORMATION	Contractor	<u>LANE HOMES + REMODELING INC.</u>		Phone	<u>804-784-0012</u>
	Address	<u>12536 PATTERSON AVE RICHMOND VA. 23238</u>		Email	<u>Tom@lanebuilt.com</u>
	Contractor License Number	<u>#2701 0291 25 A</u>	Type	<u>A</u>	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Remodel Kitchen + Family Room</u>					
	<u>NO EXTERIOR WORK</u>					
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)			
	<u>SAME</u>	<u>SAME</u>	<u>NONE</u>			
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors		
<u>Private</u>	<u>Private</u>	<u>SAME</u>	<u>SAME</u>	<u>SAME</u>		
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.			
	<u>SAME</u>	<u>SAME</u>	<u>SAME</u>			

Building Only - Excludes All Trades Permits

Value of Work \$ 87,500.00

Application Fee	\$ <u>405.75</u>
State Levy Fee	\$ <u>8.12</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>438.87</u>

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

Signature of Applicant Thomas G. Homer Date 5-26-21

5-26-2021



# 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: 5/25/21

Permit Number: BP-2021-00654

GPIN/Tax Map: 54-5-0-3-0 / 6766-64-7674

Issued: 6-14-21

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 1401 RIVER CLIFF DRIVE	Phone # 804-201-3447
	Owner ROBINSON DENNIS C BARKER ASHLEY D	Email
	Address 1401 RIVER CLIFF DRIVE	
APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE	Phone # 804-621-7718
	Address 2410 SOUTHLAND DRIVE	Email JSALVATORE@JESWORK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>River Cliff</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA <u>A2</u>
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* All interior work</u>		

Planning & Zoning Officer: David Boyd Date: 5/27/21

CONTRACTOR INFORMATION	Contractor jes construction	Phone 804-621-7718
	Address 2410 southland drive	Email jsalvatore@jeswork.com
	Contractor License Number 2705068655	Type a

DESCRIPTION OF WORK	Scope of Work: Crawl seal liner 1290 sq ft, dehumidifier, 515 sq ft of insulation board for encapsulation				
	Proposed Use res	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 2657		

**Building Only - Excludes All Trades Permits**

Value of Work	\$11,665.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant Jeannie Salvatore Date 05/25/21

Application Fee	\$ <u>104.99</u>
State Levy Fee	\$ <u>1.29</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>131.28</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/4/2021

Permit Number: BP-2021-00694

GPIN/Tax Map: 6757-46-8337 / 42-7-0-A1

Issued: 6-15-2021

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	1855 CEDAR POINT RD		Phone #	804-687-0420
	Owner	DONAL AND DEBORAH MOORE		Email	
	Address	1855 CEDAR POINT RD			
APPLICANT INFORMATION	Applicant/Contact	ADD A DECK, INC.		Phone #	804-285-4239
	Address	6408 MALLORY DR.		Email	ADMIN@ADDADECK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	75' from property	100'	35'	
Side Setback	Side Setback	Flood Zone		
	20'	20'		A2
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____				
Planning & Zoning Officer: <i>Daniel Boyd</i>			Date: 6/18/21	

CONTRACTOR INFORMATION	Contractor	ADD A DECK, INC.		Phone	804-285-4239
	Address	6408 MALLORY DR.		Email	ADMIN@ADDADECK.COM
	Contractor License Number	Type	Expiration		
	2701-033201A	COMMERCIAL/RESIDENTIAL	11/30/2022		

DESCRIPTION OF WORK	Scope of Work:				
	<b>BUILD NEW TREATED DECK</b>				
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed)		
	DECK	DECK	N/A		
SEWER	WATER	# of Bathrooms	# of Bedrooms	# of floors	
Public/Private	Public/Private			1	
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.			
	396				

Building Only - Excludes All Trades Permits

Value of Work	\$10,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *Stephen T. Murphy* Date: \_\_\_\_\_

Application Fee	\$ 57.00
State Levy Fee	\$ 1.14
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 83.14



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5/28/2021  
 Permit Number: SP-2021-00727  
 GPIN/Tax Map: 772A-73-9065 / 64-3-3-2-0  
 Issued: 6-23-21

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 <u>12594 Patterson Ave.</u>	
	Owner <u>PWC PROPERTIES, LLC + RP HUGUENOT HILLS, LLC</u>	Phone # <u>804-285-3800 x104</u>
	Address	Email

APPLICANT INFORMATION	Applicant/Contact <u>S.B. COX, Inc. Michael Fanelli</u>	Phone # <u>804-222-3500</u>
	Address <u>PO Box 7737 Richmond VA 23231</u>	Email <u>m.fanelli@sbcocxdemolition.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  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

CONTRACTOR INFORMATION	Contractor <u>S.B. COX, Inc.</u>	Phone <u>804-222-3500</u>
	Address <u>PO Box 7737 Richmond VA 23231</u>	Email
	Contractor License Number <u>2701010568</u>	Type <u>HIC H/H C/C</u>

DESCRIPTION OF WORK	Scope of Work: <u>Demolition of building in full.</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 including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>7,800</u>
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Application Fee	\$ <u>58.50</u>
State Levy Fee	\$ <u>7.17</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>109.67</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant [Signature] Date 5/28/21



# 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

11/19/2020  
 Permit Number: BP-2020-01159

GPIN/Tax Map: 0780-93-5914/55-10-6A

Issued: 1-11-21

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 149800 Gardner Road Crozier, VA 23039		Phone # 540-478-3110	
	Owner Maurizio and TUK BARTOLINI		Email NATHANBRCH@gmail.com	
APPLICANT INFORMATION	Address 2998 River Road West, Goochland, VA 23063		Phone # 540-478-3110	
	Applicant/Contact Blue Ridge Custom Homes / Nathan Janouky		Email NathanBRCH@gmail.com	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 55' from Flag *	Center Line Setback _____	Rear Setback 35'	CUP/Variance/COA AP2
	Side Setback Rt Side 35' from R/W	Side Setback 20'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Flag Lot			
	Planning & Zoning Officer David Floyd		Date 11/25/2020	

CONTRACTOR INFORMATION	Contractor Blue Ridge Custom Homes		Phone 540-478-3110
	Address 2998 River Road West Goochland, VA 23063		Email NATHANBRCH@gmail.com
	Contractor License Number 2709080712	Type CLASS A - CBC	Expiration 7-31-2022

DESCRIPTION OF WORK	Scope of Work: Single family dwelling <b>Revised 105 sq ft changing from unfinished to finished sq footage</b>		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 6,220 sq. ft. disturbed
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. 2024+165	# of Bedrooms 4
		Unfinished Sq. Ft. 580-165	# of floors 2
			Total Sq. Ft. (attached) 2610

Building Only - Excludes All Trades Permits

Value of Work	279,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 11/19/2020

Application Fee	\$1249.50
State Levy Fee	\$24.99
Septic/Well Fee	\$
Zoning Fee	\$50-
RLD	\$
SWP	\$
Total	\$1324.49



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5/21/21

Permit Number: BP-2021-00643

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

Issued: 6-23-21

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 <u>3250 River Rd. West Goochland VA 23063 - High School</u>	Phone #
	Owner <u>Goochland School Board</u>	Email
	Address <u>2938 River Rd. West Goochland VA 23063</u>	Phone #

APPLICANT INFORMATION	Applicant/Contact <u>Todd Steeley - Goochland Co. Public Schools</u>	Phone # <u>(804) 386-4015</u>
	Address <u>2938 River Rd. West Goochland VA 23063</u>	Email <u>tsteeley@glnd.k12.va.us</u>

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	Center Line Setback	Rear Setback	CUP/Variance/COA <u>A2</u>
	Side Setback	Side Setback	Flood Zone	

APPROVED  REJECTED  COMMENTS: David Ford Date 5/20/21  
 Planning & Zoning Officer

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

Scope of Work: Cut passthrough in block wall for dishwashing area in kitchen of Goochland High School

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

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 5000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 5/21/21

Application Fee	\$ <u>37.50</u>
State Levy Fee	\$ <u>19</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50</u>
RLD	\$
SWP	\$
Total	\$ <u>88.25</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 6-17-21

Permit Number: AP-2021-00736

GPIN/Tax Map: 7720-76-4548 / 59-10-47-0

Issued: 6-23-21

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 <u>1604 Three Chopt Road</u>	
	Owner <u>LSP Properties LLC / Agent: Clarke Jones</u>	Phone # <u>804-363-7073</u>
APPLICANT INFORMATION	Address <u>P.O. Box 72075 RVA 23255</u>	Email <u>C111@jonescorporations.com</u>
	Applicant/Contact <u>Bob Carpenter (Big Bang Fireworks)</u>	Phone # <u>804 537-2264</u>
	Address <u>5302 Ditchley Rd RVA 23226</u>	Email <u>cap2@cableone.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Not Required</u>			
Planning & Zoning Officer		Date		

CONTRACTOR INFORMATION	Contractor		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Erect Framed Signs (Temp) Pre-standing sign for sales &amp; storage</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>3000</u>
Value of Work	<u>10000</u>	State Levy Fee	\$ <u>60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>80.00</u>
Signature of Applicant <u>[Signature]</u>		Date <u>6-15-21</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: 5-11-21

Permit Number: DP-2021-00576

GPIN/Tax Map: 6759-08-8726

Issued: 6-24-21

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>3549 WHITE HALL RD. 0 WHITEHALL RD.</u>	
	Owner	<u>PATRICK &amp; LORRAINE CLIFFORD</u>	
	Address	<u>86 CALICOON CENTER RD JEFFERSONVILLE NY 12748</u>	
APPLICANT INFORMATION	Applicant/Contact	<u>SAUPE</u>	
	Address		
	Phone #	<u>845-482-5133 845-866-8357</u>	
	Email	<u>psclifford33@yahoo.com</u>	
	Phone #		
	Email		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from P.U./ROW</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>15' / 35'</u>	Side Setback <u>15' / 35'</u>	Flood Zone <u>X</u>	<u>RR</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

CONTRACTOR INFORMATION	Contractor	<u>OWNER</u>		Phone	<u>570 725 3637</u>
	Address	<u>39 WHITETAIL TRAIL LOGANTON PA 17747</u>		Email	
	Contractor License Number	Type	Expiration		

DESCRIPTION OF WORK	Scope of Work	<u>SFD 40x60 POLE BUILDING w/ 30x40 LIVING AREA ATTACHED 18x24 STORAGE BUILDING</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>HOME WITH GARAGE</u>	<u>OPEN LAND</u>	<u>NO</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	<u>Public/Private</u>	<u>Public/Private</u>	<u>1</u>	<u>2</u>	<u>1</u>
Will a foundation be installed within 20 ft. of any septic system components? Yes (No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u>No</u>	<u>1200</u>	<u>1,632</u>	<u>2,832</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>1001.68</u>
Value of Work	<u>125,000 \$ 131,040</u>	State Levy Fee	\$ <u>12.03</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>663.71</u>
Signature of Applicant	<u>Patrick Clifford</u>	Date	<u>4-30-2021</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

Application Date: 6/18/2021  
Permit Number: *BP 2021-00764*  
GPIN/Tax Map: *6758-70-7265/42-110-3-0*  
Issued: *6-24-21*  
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	3250-A River Road West, Goochland, Virginia, 23063		
	Owner	Goochland County Public Schools	Phone #	(804) 556-5619
APPLICANT INFORMATION	Address	2938-I River Road West, Goochland, Virginia 23063	Email	tharris@glnd.k12.va.us
	Applicant/Contact	Zsolt Csala	Phone #	(804) 648-2811
APPLICANT INFORMATION	Address	1531 St. James Street, Richmond, Virginia 23222	Email	info@nwmartin.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <i>No change to existing footprint/use.</i>		
Planning & Zoning Officer		<i>David Floyd</i>	Date	<i>6/23/21</i>

CONTRACTOR INFORMATION	Contractor	N.W. Martin & Bros., Inc.	Phone	(804) 648-2811
	Address	1531 St. James Street, Richmond, Virginia 23222	Email	info@nwmartin.com
	Contractor License Number	2701001308	Type	A <i>CBC RBC</i>
		Expiration	04/30/2022	

Scope of Work: *Prep of 16,000 sq ft of GHS*  
Remove EPDM membrane, install new 1-1/2" insulation and EPDM membrane.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Educational	Educational	n/a		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		n/a	n/a	n/a
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	6,000	n/a	6,000	

*Signature of Applicant*

Building Only - Excludes All Trades Permits	Application Fee	\$
Value of Work	State Levy Fee	\$
94,918.00	Zoning Fee	\$
	RLD	\$
	SWP	\$
	Total	\$ <i>0.00</i>

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

Signature of Applicant: *Zsolt Csala* Date: 6/18/2021



# 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: 6/9/21  
 Permit Number: BP-2021-00716

GPIN/Tax Map: 7717-08-6977 / 46-28-0-B-0

Issued: 6-24-21

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>2504 Manakin Rd. Manakin Sabot VA. 23103</u>	
	Owner	<u>Bill Street Patsy Valentine</u>	Phone #
APPLICANT INFORMATION	Address	<u>2504 Manakin Rd</u>	Email
	Applicant/Contact	<u>804 201 7008 David Moore</u>	Phone # <u>804 201 7008</u>
	Address	<u>1134 Bickerstaff Rd. Richmond VA 23231</u>	Email <u>David@Mooredone Contracting.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>N/A</u>			
	Front Setback <u>100' from PL/ROW</u>	Center Line Setback <u>125'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Floyd Date: 6/11/21

CONTRACTOR INFORMATION	Contractor	<u>Moore Done LLC</u>	Phone <u>804 201 7008</u>
	Address	<u>1134 Bickerstaff Rd.</u>	Email <u>David@MooreDone Contracting.com</u>
	Contractor License Number	<u>2705173661</u>	Type <u>Class A PBC</u> Expiration <u>10/31/21</u>

DESCRIPTION OF WORK	Scope of Work: <u>Bedroom in new addition / Removing Existing bedroom building an Addition to rear of home. Living / Den Area Adding porch to one side of Addition. Full length</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<u>Living / Den</u>		# of Bathrooms	# of Bedrooms
	SEWER Public/Private	WATER Public/Private	# of floors	
	Will a foundation be installed within 20 ft. of any septic system components? Yes / <u>NO</u>	Finished Sq. Ft. <u>608</u>	Unfinished Sq. Ft. <u>256</u>	Total Sq. Ft. <u>864</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>120,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 6/9/21

Application Fee	\$ <u>552.00</u>
State Levy Fee	\$ <u>11.04</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>588.04</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 7/27

Permit Number: BD-2021-00765

GPIN/Tax Map: 5892-44-727B 9-5-O-F-0

Issued: 6-24-21

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>6387 Community House Rd. Columbia, VA</u>	
	Owner	<u>Edward Tyler</u>	Phone # <u>434-589-8359</u>
APPLICANT INFORMATION	Address		
	Applicant/Contact	<u>Edward Tyler</u>	Phone #
	Address		
			Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>N/A</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>                    </u>	<u>                    </u>
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	<u>                    </u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>from scope of work, it should all be in Perim.</u>		
	Planning & Zoning Officer	<u>David [Signature]</u>	Date	<u>6/23/21</u>

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

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

**Building Only - Excludes All Trades Permits**

Value of Work	<u>\$200.00</u>
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Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ <u>          </u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>          </u>
SWP	\$ <u>          </u>
Total	\$ <u>30.60</u>

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

Signature of Applicant [Signature] Date



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5-25-2021  
 Permit Number: BP-2021-00655  
 GPIN/Tax Map: 7725-33-0619 / 58-32-3-A-C  
 Issued: 6-25-21  
 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>15010 Capital One Dr, Richmond Va 23238</u>		
	Owner	Phone #	<u>804-640-4406</u>	
	Address	Email	<u>sharon.kincaid@capitalone.com</u>	
APPLICANT INFORMATION	Applicant/Contact	Phone #	<u>804-513-2414</u>	
	Address	Email	<u>ramon@rlpaintingandcarpentry.com</u>	

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

APPROVED  REJECTED  COMMENTS: All interior work.  
 Planning & Zoning Officer: [Signature] Date: 5/27/21

CONTRACTOR INFORMATION	Contractor	Phone
	<u>RL Painting &amp; Carpentry Inc.</u>	<u>804-513-2414</u>
	Address	Email
<u>235 Arcadia St. Richmond Va 23225</u>	<u>ramon@rlpaintingandcarpentry.com</u>	Expiration
Contractor License Number	Type	
<u>2705107372</u>	<u>B</u>	

DESCRIPTION OF WORK	Scope of Work: <u>Erect walls &amp; acoustical ceiling work, painting, Flooring for 4th Floor in Building #1</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Office.</u>	<u>open space.</u>	<u>N.A.</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</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>500</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$45000.00</u>	Application Fee	\$ <u>337.50</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>5-25-21</u>		State Levy Fee	\$ <u>6.75</u>
		Septic/Well Fee	\$ <u>    </u>
		Zoning Fee	\$ <u>50.00</u>
		RLD	\$ <u>    </u>
		SWP	\$ <u>    </u>
		Total	\$ <u>394.25</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: ~~MAY 26, 2021~~ 6-11-21

Permit Number: BP-2021-00726

GPIN/Tax Map: 7104-25-8868 / 62-15-0-C-2

Issued: 6-25-21

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	103 LINDBERGH LANE		Phone #	
	Owner	RICHARD BOEHLING		Email	
APPLICANT INFORMATION	Address	103 LINDBERGH LANE		Phone #	804-282-5071
	Applicant/Contact	LUIS A CARRILLO		Email	STONEEMASONRY@GMAIL.COM
	Address	6503 DICKENS PLACE			

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Ben Dover</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	<u>A2</u>
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer: <u>[Signature]</u> Date: <u>6/15/21</u>				

CONTRACTOR INFORMATION	Contractor	STONEE MASONRY INC		Phone	804-282-5071
	Address	6503 DICKENS PLACE		Email	STONEEMASONRY@GMAIL.COM
	Contractor License Number	2705068658	Type	DPOR	Expiration

**Scope of Work:**  
 Installation of retaining wall at rear of property for new pool deck.

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

Building Only - Excludes All Trades Permits

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

Signature of Applicant: [Signature] Date: 6/18/21

Application Fee	\$ 124.50
State Levy Fee	\$ 2.49
Zoning Fee	\$ 25.00
RLD	\$
BWP	\$
Total	\$ 151.99

R5 VB 2015 Ball 6/25/2021



# 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: 3-25-2021

Permit Number: SP-2021-00359

GPIN/Tax Map: 6813-13-2569 / 4-5-0-3-0

Issued: 4-15-21

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

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

OWNER INFORMATION	Site Address <u>4512 Tabscott Rd. Columbia, VA 23038</u>	Phone # <u>434-962-9112</u>
	Owner <u>Lindsey Pyle</u>	Email <u>lindsey.pyle@hotmail.com</u>
	Address <u>4512 Tabscott Rd. Columbia, VA 23038</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Lindsey Pyle</u>	Phone # <u>434-962-9112</u>
	Address <u>4512 Tabscott Rd. Columbia, VA 23038</u>	Email <u>lindsey.pyle@hotmail.com</u>

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 P.U. Row</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>35' from P.U. Row</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>David [Signature]</u>		

CONTRACTOR INFORMATION	Contractor <u>Homeowner</u>	Phone <u>434-962-9112</u>
	Address <u>4512 Tabscott Rd. Columbia, VA 23038</u>	Email <u>lindsey.pyle@hotmail.com</u>
	Contractor License Number	Type —

DESCRIPTION OF WORK	Scope of Work: <u>revised 6/22/21</u> <u>14' x 14' freestanding deck to pool</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	Finished Sq. Ft.	Unfinished Sq. Ft. <u>196</u>	Total Sq. Ft. <u>140 + 196</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$1,6000.00 \$17,700.00

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: Lindsey Pyle Date: 3-25-2021

Application Fee	\$ <u>39.00</u>
State Levy Fee	\$ <u>.78</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>64.78</u>

rev fee: \$7.80



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5-19-2021  
 Permit Number: BP-2021-00628

GPIN/Tax Map: 0823-42-2572/5-15-0-40

Issued: 6-29-21

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>4161 Hidden Acres Dr Louisa VA 23093</u>	
	Owner	<u>Beatriz Lima de Barrera</u>	
APPLICANT INFORMATION	Address	<u>3113 lifsey lane chesterfield VA 23832</u>	
	Applicant/Contact	<u>Beatriz Lima de Barrera</u>	
	Phone #	<u>804 593 6463</u>	
	Email	<u>blima3604@gmail.com</u>	
	Phone #		
	Email	<u>blima3604@gmail.com</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>Hidden Acres</u>			
	Front Setback <u>55' from P4 Row</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	<u>A1</u>

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_ Date 5/25/21  
 Planning & Zoning Officer: David [Signature]

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

DESCRIPTION OF WORK	Scope of Work: <u>Existing Dwelling 1,332 s.f. to be repaired in its entirety and a new roof assembly with raised spring line a total of 115,5 s.f. are being added to main building square footage and existing pen porch will be extended</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>3</u>	# of Bedrooms <u>3</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No!	Finished Sq. Ft. <u>112</u>	Unfinished Sq. Ft. <u>96</u>	Total Sq. Ft. <u>208</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>60,000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: B Barrera Date: 5/19/21

Application Fee	\$ <u>307.00</u>
State Levy Fee	\$ <u>5.64</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>2500</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>312.64</u>

Rec: 6-21-21



# BUILDING PERMIT APPLICATION

Application Date: 6/7/2021

Permit Number: 2021-00751

GPIN/Tax Map: 6157-69-3462 / 42-30-A-18-C

Issued: 6-29-21

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: 2403 Bridle Ridge Goochland, VA 23063

Owner: Cassie Strong

Address: 2403 Bridle Ridge

Phone #: 703-895-5503

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

**APPLICANT INFORMATION**

Applicant/Contact: PIA-Mar Construction

Address: P.O. Box 295 Mech. VA 23111

Phone #: 804 781-0442

Email: MaryAnn@pmcfoods.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision: <u>Holland Hills</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>40' from P.U. Row</u>	Center Line Setback: <u>65'</u>	Rear Setback: <u>5'</u>	CUP/Variance/COA: _____
Side Setback: <u>5'</u>	Side Setback: <u>25'</u>	Flood Zone: _____	<u>R1</u>

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: David Lloyd Date: 6/23/21

**CONTRACTOR INFORMATION**

Contractor: PIA-Mar Construction

Address: P.O. Box 295 Mech. VA 23111

Phone: 804 781-0442

Email: MaryAnn@pmcfoods.com

Contractor License Number: 2705091041A Type: A Expiration: 1/31/2023

**DESCRIPTION OF WORK**

Scope of Work: 16' x 40' Fiberglass pool w/ Automatic Cover - meets ASTM 134691

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER: <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>640</u>		

Building Only - Excludes All Trades Permits

Value of Work: 68,130.00

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: J. Clements Date: 6/7/2021

Application Fee	\$ <u>378.59</u>
State Levy Fee	\$ <u>6.37</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>349.96</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: 02/23/2021

Permit Number: BP-2021-00767

GPIN/Tax Map: 1126-05-7484 / 58-55-2-42-0

Issued: 6-29-21

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>12247 BREMNER Ridge Cir, Manakin Sabot VA 23103</u>	Phone # <u>(804) 714 7118</u>
	Owner <u>Huy TRAN &amp; Huu Ken Lu Thai.</u>	Email <u>henry542@aol.com</u>
	Address <u>12247 Bremner ridge Cir Manakin Sabot VA 23103</u>	Phone # <u>804 714 7118</u>
APPLICANT INFORMATION	Applicant/Contact <u>Same above.</u>	Email <u>henry542@aol.com</u>
	Address	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>30' from PU/ROW</u>	Center Line Setback <u>55'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>RPU</u>
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* No change to footprint</u>		
Planning & Zoning Officer <u>David Boyd</u>	Date <u>6/23/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Solid wood pergola and covering by steel panel in Back yard Deck.</u>				
	Proposed Use <u>SEWER Public/Private</u>	Current Use <u>WATER Public/Private</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
				# of Bathrooms	# of Bedrooms

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30.00</u>
Value of Work	<u>\$980.00</u>	State Levy Fee	\$ <u>60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>06/21/2021</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>55.60</u>

RS VB 2015 ~~2021~~ JOKell 6/25/2021



# 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: 6-9-2021

Permit Number: BP-2021-00714

GPIN/Tax Map: 6797-88-8337/45-1-0-95-0

Issued: 6-29-21

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>1031 THREE CHOPT RD. MALAKIN SABOT, VA 23103</u>	Phone # <u>434 589 5466</u>
	Owner <u>CHARLES &amp; ELIZABETH MAURER JR</u>	Email <u>EKMAURER@YAHOO.COM</u>
	Address <u>3 BOLLING CR PALMYRA, VA 22963</u>	Phone #
APPLICANT INFORMATION	Applicant/Contact <u>SAME AS ABOVE</u>	Email
	Address	

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 property</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: Planning & Zoning Officer: <u>David Pugh</u> Date: <u>6/11/21</u>			

CONTRACTOR INFORMATION	Contractor <u>HOME OWNER - SAME AS ABOVE</u>	Phone
		Email
Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>BUILDING ADDITION FOR BATHROOM/Laundry room 12x8.4</u>		
	Proposed Use <u>BATHROOM</u>	Current Use <u>NA</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NONE</u>
	SEWER Public/Private	WATER Public/Private	# of Bathrooms    # of Bedrooms    # of floors <u>1</u> <u>3</u> <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft. <u>1000</u> <u>101</u>	Unfinished Sq. Ft. <u>NONE</u>
	Total Sq. Ft. <u>1000</u> <u>101</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$5,000</u> / <u>\$5,555</u>
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Application Fee	\$ <u>37.00</u>
State Levy Fee	\$ <u>74</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>6274</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: Charles J. Maurer Jr      Date: 6/9/21



# 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: 6-11-2021

 Permit Number: BP-2021-0072

 GPIN/Tax Map: 716-01-3226 / 57-20-B-3-0

 Issued: 6-29-21

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>6-Red Fox Rd, Manakin Sabot, VA. 23103</u>		
	Owner	<u>Pamela + William Seay</u>		Phone # <u>804-363-8936</u>
	Address	<u>6-Red Fox Rd Manakin Sabot</u>		Email <u>PJSeay@comcast.net</u>

APPLICANT INFORMATION	Applicant/Contact	<u>Pamela Seay</u>		
	Address	<u>6-Red Fox Rd Manakin Sabot - 23103</u>		Phone # <u>804-363-8936</u> Email <u>PJSeay@comcast.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>Broad Run</u>			
	Front Setback <u>75' from P4 Row</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>1A2</u>
	Side Setback <u>20'</u>	Side Setback <u>30'</u>	Flood Zone	

APPROVED  REJECTED  COMMENTS: \* All interior work.  
 Planning & Zoning Officer: Dennis Floyd Date: 6/15/21

CONTRACTOR INFORMATION	Contractor	<u>Home owner</u>		
	Address	<u>6-Red Fox Rd Manakin Sabot 23103</u>		Phone <u>804-363-8936</u> Email <u>PJSeay@comcast.net</u>
	Contractor License Number	Type	Expiration	
	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	

DESCRIPTION OF WORK	Scope of Work: <u>Frame finish, existing block walls, Add partition wall, in basement Sewing and rec room</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>sewing / rec. room</u>	<u>Storage</u>	<u>NONE</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
			<u>0</u>	<u>0</u>	<u>0</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
<u>(No)</u>	<u>697</u>	<u>0</u>	<u>697</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>15,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant: Pamela Seay Date: 6-11-21

Application Fee	\$ <u>79.50</u>
State Levy Fee	\$ <u>1.59</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>106.09</u>



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 6/18/21

Permit Number: BP-2021-00768

GPIN/Tax Map: 0850-23-1788/21-11-0-89-0

Issued: 6-29-21

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>3085 Rock Cross LN Sandy Hook, VA 23153</u>			
	Owner <u>Bernie and Laura Hassner</u>	Phone #		
	Address <u>SAME</u>	Email		
APPLICANT INFORMATION	Applicant/Contact <u>Bruno Roy</u>	Phone # <u>804-683-8518</u>		
	Address <u>3100 MILL TRACE LN SANDY HOOK</u>	Email <u>off2hcky@aol.com</u>		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>MILL FOREST II</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from PL/ROW</u>	Center Line Setback <u>80'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>15'/35'</u>	Side Setback <u>15'/35'</u>	Flood Zone	<u>RR</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>*No change to existing Footprints.</u>		
	Planning & Zoning Officer <u>David Floyd</u>	Date <u>6/23/21</u>		
CONTRACTOR INFORMATION	Contractor <u>BGR, LLC</u>	Phone <u>804-683-8518</u>		
	Address <u>3100 MILL TRACE LN</u>	Email <u>off2hcky@aol.com</u>		
	Contractor License Number <u>2705164509</u>	Type <u>RBL-A</u>	Expiration <u>8/31/21</u>	
DESCRIPTION OF WORK	Scope of Work: <u>Add roof plus screening to existing deck</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. <u>308</u>
Building Only - Excludes All Trades Permits			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. Signature of Applicant: <u>[Signature]</u> Date <u>6/22/21</u>			Zoning Fee \$ <u>25.00</u>	
			R/LD \$	
			SWP \$	
			Total \$ <u>129.04</u>	



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 6/21/2021

Permit Number: BP-2021-00772

GPIN/Tax Map: 6767-67-5949/43-11-0-1-0

Issued: 6-30-21

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>2461 Fairground Rd Midens VA 23102</u>	Phone #	<u>315 886 6645</u>
	Owner	<u>Mae DeBruin</u>	Email	<u>mhd6210@gmail.com</u>
APPLICANT INFORMATION	Address	<u>2461 Fairground Rd Midens VA 23102</u>	Phone #	<u>315 886 6644</u>
	Applicant/Contact	<u>Kristopher Taffner Homeowner</u>	Email	<u>Ktaffner@gmail.com</u>

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>100' from PL/ROU</u>	Center Line Setback	<u>125'</u>	Rear Setback	<u>5'</u>	CUP/Variance/COA	
	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: Dennis Floyd Date: 6/23/21

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

Scope of Work: 32' x 20' wood freestanding deck against Above Ground Pool

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. <u>640'</u>	Unfinished Sq. Ft. <u>640'</u>	Total Sq. Ft. <u>640'</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>9000.00</u>	Application Fee	\$ <u>52.50</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee	\$ <u>1.05</u>
		Septic/Well Fee	\$ <u>_____</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>_____</u>
		SWP	\$ <u>_____</u>
Signature of Applicant	<u>Maith B</u>	Date	<u>5/8/21</u>
		Total	\$ <u>78.55</u>



# BUILDING PERMIT APPLICATION

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

Application Date: 6/21/2021

Permit Number: BP-2021-00770

GPIN/Tax Map: 6767-67-5949/43-110-10

Issued: 6-30-21

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.

<b>OWNER INFORMATION</b>	<b>Site Address</b> <u>2461 Fairground Rd. Maidens VA 23102</u>		<b>Phone #</b> <u>315 886 6645</u>		
	<b>Owner</b> <u>Mae DeBruin</u>		<b>Email</b> <u>mhd626@gmail.com</u>		
	<b>Address</b> <u>2461 Fairground Rd. Maidens VA 23102</u>		<b>Phone #</b> <u>315 886 6644</u>		
<b>APPLICANT INFORMATION</b>	<b>Applicant/Contact</b> <u>Kristopher Taffner Homeowner</u>		<b>Email</b> <u>Ktaffner@gmail.com</u>		
	<b>Address</b> <u>2461 Fairground Rd. Maidens VA 23102</u>				
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	<b>Subdivision</b> <u>N/A</u>	<b>Proffer</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Amount</b> _____	<b>Date Paid</b> _____	
	<b>Front Setback</b> <u>100' from PL ROW</u>	<b>Center Line Setback</b> <u>125'</u>	<b>Rear Setback</b> <u>5'</u>	<b>CUP/Variance/COA</b> _____	
	<b>Side Setback</b> <u>5'</u>	<b>Side Setback</b> <u>5'</u>	<b>Flood Zone</b> _____		
	<b>APPROVED</b> <input checked="" type="checkbox"/> <b>REJECTED</b> <input type="checkbox"/> <b>COMMENTS:</b>				
	<b>Planning &amp; Zoning Officer</b> <u>David Boyd</u>		<b>Date</b> <u>6/23/21</u>		
<b>CONTRACTOR INFORMATION</b>	<b>Contractor</b> <u>Home owner</u>		<b>Phone</b> _____		
	<b>Address</b> _____		<b>Email</b> _____		
	<b>Contractor License Number</b> _____	<b>Type</b> _____	<b>Expiration</b> _____		
<b>DESCRIPTION OF WORK</b>	<b>Scope of Work:</b> <u>24' 5 1/2" High Above Ground Round Pool with foldable lockable ladder.</u>				
	<b>Proposed Use</b>	<b>Current Use</b>	<b>Environmental Impacts (stream crossing, wetlands, amt land disturbed)</b>		
	<b>SEWER</b> Public/Private <u>Private</u>	<b>WATER</b> Public/Private <u>Private</u>	<b># of Bathrooms</b>	<b># of Bedrooms</b>	<b># of floors</b>
	<b>Will a foundation be installed within 20 ft. of any septic system components? Yes / No</b>	<b>Finished Sq. Ft.</b> <u>576'</u>	<b>Unfinished Sq. Ft.</b> <u>576'</u>	<b>Total Sq. Ft.</b> <u>576'</u>	
<b>Building Only - Excludes All Trades Permits</b>			<b>Application Fee</b> \$ <u>3000</u>		
<b>Value of Work</b> <u>1600</u>			<b>State Levy Fee</b> \$ <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.  <b>Signature of Applicant</b> <u>Mae DeBruin</u> <b>Date</b> <u>5/13/21</u>			<b>Septic/Well Fee</b> \$ _____		
			<b>Zoning Fee</b> \$ <u>2500</u>		
			<b>RLD</b> \$ _____		
			<b>SWP</b> \$ _____		
			<b>Total</b> \$ <u>5560</u>		



# TRADE PERMIT APPLICATION

## Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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

*This 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	6-15-21
Permit #	211-2021-00735
GPIN	
Tax Map	

### LOCATION

Street Address	7480 BRANDISTON STREET 23059
----------------	------------------------------

### PROPERTY OWNERSHIP

Name	HARRY FRANCIS	Phone	804-543-2256
Mailing Address	7480 BRANDISTON STREET	Email	HFRANCIS@TODOL.NET

### APPLICANT

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

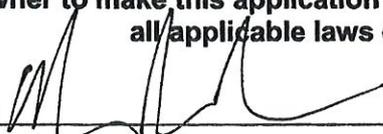
### CONTRACTOR

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

### DESCRIPTION OF WORK

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

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

Signature of Applicant:  Date: 5/20/21

Office Use Only
Approval date: _____
Issued date: _____

\$67.32

(owner's statement on back)



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

RECEIVED

DATE: 6/11/21

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: 6/8/21

Permit #: ELI-2021-00055

GPIN

Tax Map

## LOCATION

Street Address: 1690-BIRNAM WOOD WAY - CRUZIER, VA 23039

## PROPERTY OWNERSHIP

Name: CHRISTIAN & STACEY MARCHETTI

Phone:

Mailing Address: 1188 MILLERS LANE, MANAKID SABOTHVA, 23103

Email:

## APPLICANT

Name: M.E. KEETON ELECTRICAL CONTRACTOR, INC

Phone: 804-798-7356

Address: P.O. Box 1146 Ashland, VA 23005

Email: MEKEETON@electrical.com AOL

## CONTRACTOR

Name: M.E. KEETON ELECTRICAL CONTRACTOR, INC

Phone: 804-798-7356

Mailing Address: P.O. Box 1146 Ashland, VA 23005

Email: MEKEETON@electrical.com AOL

Gas Certification: YES  NO

State License Number: 2705006613

Expiration: 1-31-2022

License Type: Electrical

Class: [Signature]

## DESCRIPTION OF WORK

Wire single family dwelling & install 22KW GENERATOR

# of Bathrooms: \_\_\_\_\_ Service Size: 400 Power Company: Dominion Inquiry #: 10464852

Value of Work (required): \$ 20,400.00

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

Signature of Applicant: Michael Keeton Sr. Date: 6/8/21

Approval: [Signature] Office Use Only Approval date: 6/11/21

Permit Fee: 115-06 Issued date:

(owner's statement on back)

RECEIVED



TRADE PERMIT APPLICATION  
Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

BIS

6/1/21

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

Permit # EH-2021-00666

GPIN

Tax Map

LOCATION

Street Address 2855 Davis Mill Road Goochland, Va 23063

PROPERTY OWNERSHIP

Name Dubb Martin Phone 804.909-0165

Mailing Address 2855 Davis Mill Road Goochland, Va 23063 Email

APPLICANT

Name Lori Medeiros Phone 434-975-3275

Address 2293 Semnole Land Charlottesville 22901 Email Lorineverdarker@gmail.com

CONTRACTOR

Name Never Dark Whole House Generators Phone 434-975-3275

Mailing Address 2293 Semnole Ln Charlottesville, Va 22901 Email Lorineverdarker@gmail.com

Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2705141802</u>	Expiration <u>7-31-2021</u>	License Type <u>Contractors</u>	Class <u>A</u>
-------------------	--	--	-----------------------------	---------------------------------	----------------

DESCRIPTION OF WORK

wiring 22kw automatic generator with automatic Transfer with load share modules

# of Bathrooms	Service Size <u>200</u>	Power Company <u>Dominion</u>	Inquiry #
Value of Work (required) <u>5,500</u>			

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

Signature of Applicant: Lori Medeiros Date: 3-10-21

Approval: Gary Fisher Office Use Only Approval date: 6/1/21

Permit Fee: 46.67 Issued date:

(owner's statement on back)



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

RECEIVED

6/1/21

P. O. Box 119 Goochland, VA 23063

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

Date
Permit # ELI-2021-08665
GPIN
Tax Map

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

## LOCATION

Street Address: 3610 Brandons Bluff Court Sandyhook, Va 23153

## PROPERTY OWNERSHIP

Name: Thomas + Susan Kennedy	Phone: 804-901-2443
Mailing Address: 3610 Brandons Bluff Court	Email:

## APPLICANT

Name: Lori Medeiros	Phone: 434-975-3275
Address: 2293 Seminole Ln Charlottesville, Va 22901	Email: Lorineverdork@gmail.com

## CONTRACTOR

Name: Never Dark Whole House Generators	Phone: 434-975-3275			
Mailing Address: 2293 Seminole Ln. Charlottesville, Va 22901	Email:			
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705141802	Expiration: 7-31-2021	License Type: Contractors	Class: A

## DESCRIPTION OF WORK

Wiring 24kw automatic generator with automatic transfer with load share modules

# of Bathrooms	Service Size	Power Company	Inquiry #
	5,500		

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

Signature of Applicant: Lori Medeiros Date: 3-11-21

Approval: <u>Mary Fisher</u>	Office Use Only	Approval date: <u>6/1/21</u>
Permit Fee: <u>46.67</u>		Issued date: _____

(owner's statement on back)



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

RECEIVED

6/1/21

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

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

Date
Permit # ELI-2021-00667
GPIN
Tax Map

## LOCATION

Street Address: 2693 Parkhouse Court Sandy Hook, VA 23153

## PROPERTY OWNERSHIP

Name: Carl + Christy Claus	Phone: 804-971-1213
Mailing Address: 2693 Parkhouse Court Sandy Hook	Email:

## APPLICANT

Name: Lori Medeiros	Phone: 434-975-3275
Address: 2293 Seminole Lane Charlottesville VA 22901	Email: Lorineverdark@gmail.com

## CONTRACTOR

Name: Never Dark Whole House Generators		Phone: 434-975-3275	
Mailing Address: 2293 Seminde Ln Charlottesville VA 22901		Email: Lorineverdark@gmail.com	
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705141802	Expiration: 7-31-2021	License Type: Contractors Class: A

## DESCRIPTION OF WORK

wiring 24kw automatic Generator with automatic Transfer Switch with Load Share modules

# of Bathrooms	Service Size: 400amp	Power Company: Dominion	Inquiry #
Value of Work (required): 8,318			

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: Lori Medeiros Date: 6-1-21

Approval: <u>Gay Fishes</u>	Office Use Only	Approval date: <u>6/1/21</u>
Permit Fee: <u>59.60</u>		Issued date: _____

(owner's statement on back)



# BUILDING PERMIT APPLICATION

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

Application Date: 5/20/2021

Permit Number:

*BJ-2021-00671*

GPIN/Tax Map:

*6833-25-615A-9998 / 6-1-0-51-1W*

Issued:

*6-10-21*  
 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.

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	4440 OLD FREDERICKSBURG ROAD, HADENSVILLE, VA 23067		
	Owner	SBA <i>Manakin Towers</i>		Phone # 919-868-0426
APPLICANT INFORMATION	Address	5900 Broken Sound Pkwy, Boca Raton FL 17011		
	Applicant/Contact	Angela Jaenke		Phone # 678-500-4554
	Address	10435 Willow Meadow Circle		Email angela.jaenke@gdit.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: <i>Not subject to setbacks</i>			
Planning & Zoning Officer <i>[Signature]</i> Date <i>6/2/21</i>				

CONTRACTOR INFORMATION	Contractor	General Dynamics		Phone 412-651-6758
	Address	101 Station Dr - #d05, Westwood, MA 02090		Email philip.alexander@gdit.com
	Contractor License Number	2705118161	Type Class A <i>CBC EYE</i>	Expiration 10/31/2021

DESCRIPTION OF WORK	Scope of Work: Installation of a 4'x10' concrete slab for the generator and an automatic transfer switch (ATS)				
	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 including septic tanks? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits  
 Value of Work

Application Fee	\$ 75.00
State Levy Fee	\$ 1.50
Zoning Fee	\$ 100.00
RLD	\$
SWP	\$
Total	\$ 176.50

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant *Angela Jaenke* Date 5/20/2021



# TRADE PERMIT APPLICATION

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

RECEIVED

6/11/21 86.45

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date
Permit # <span style="color: blue; font-size: 1.2em;">ELI-2021-00738</span>
GPIN
Tax Map

### LOCATION

Street Address: 3951 County Line Rd. Kents Store, VA 23084

### PROPERTY OWNERSHIP

Name <u>Pamela Thompson</u>	Phone <u>540-223-2999</u>
Mailing Address <u>3951 County Line Road Kents Store, VA 23084</u>	Email

### APPLICANT

Name <u>GAVIN CLARK</u>	Phone <u>540-270-9232</u>
Address <u>14018 Sullyfield Cir Ste-e, Chantilly VA 20151</u>	Email <u>GCLARK@GeneratorSupercenter.co</u>

### CONTRACTOR

Name <u>Clark Home Solutions LLC</u>		Phone <u>540-270-9232</u>	
Mailing Address		Email <u>GCLARK@GeneratorSupercenter.co</u>	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number <u>2705176647</u>	Expiration <u>08.31.22</u>	License Type <u>Masters</u>
		Class <u>A</u>	

### DESCRIPTION OF WORK

Bury 10ft from <sup>22KW</sup> Generator to Meter

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <u>\$14,168.00</u>			

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

Signature of Applicant: Rose-Maria Dytos Date: 6/8/2021

Approval: <u>Gary Fisher</u>	Office Use Only
Permit Fee: <u>86.45</u>	Approval date: <u>6/16/21</u>
	Issued date: _____

(owner's statement on back)



# TRADE PERMIT APPLICATION

## Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date <i>6-16-2021</i>
Permit# <i>211-2021-0074</i>
GPIN
Tax Map

### LOCATION

Street Address *2118 Jockey Ridge Rd. Martins*

### PROPERTY OWNERSHIP

Name <i>Stuart Norton</i>	Phone
Mailing Address <i>2118 Jockey Ridge Rd</i>	Email

### APPLICANT

Name <i>Jay Cox</i>	Phone <i>804 357 1964</i>
Address <i>13346 Farrington Rd. Ashland</i>	Email

### CONTRACTOR

Name <i>Cox Electric</i>	Phone <i>357 1964</i>
Mailing Address <i>13346 Farrington Rd Ashland</i>	Email <i>coxelectric64@gmail.com</i>
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number <i>2705016800</i>
	Expiration <i>11/30/22</i>
	License Type <i>elec</i>
	Class <i>B</i>

### DESCRIPTION OF WORK

<i>Install 22Kw generator</i>			
# of Bathrooms	Service Size <i>400</i>	Power Company <i>Domination</i>	Inquiry#
Value of Work (required) <del><i>\$48.96</i></del> <i>\$6,000.00</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: *Jay Cox* Date: *6-16-2021*

Approval: <u><i>Fisher</i></u>	Office Use Only
Permit Fee: <u><i>\$48.96</i></u>	Approval date: <u><i>6-16-21</i></u>
	Issued date: _____

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

RECEIVED  
6/23  
6/16/21

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

Date	5.13.2021
Permit #	21-2021-00740
GPIN	
Tax Map	

### LOCATION

Street Address	<b>605 CROSS RIDGE LN</b>	District	
----------------	---------------------------	----------	--

### PROPERTY OWNERSHIP

Name	<b>GREG GUINThER</b>	Phone	<b>804-651-0022</b>
Mailing Address	<b>605 CROSS RIDGE LN</b>		

### APPLICANT

Name	<b>WOODFIN HEATING</b>	Phone	<b>8047644534</b>
E-Mail Address	<b>HTRIPLETT@ASKWOODFIN.COM</b>		

### CONTRACTOR

Name	<b>WOODFIN HEATING</b>	Phone	<b>804-764-4533</b>
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230 HTRIPLETT@ASKWOODFIN.COM		
E-mail address:			
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 22 KW GENERATOR, (2) 200 AMP ATS SURGE PROTECTOR</b>			
# of Baths	Service Size	Power Company	Inquiry #

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

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

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

Signature of Applicant *[Signature]*

Approval *[Signature]* Date *6/16/21*

Value of Work: 11,477.00

Permit fee: 74.10

Issue date: 6/16/21

RECEIVED

6/17/21



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

16142

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date

Permit # ELI-2021-00743

GPIN

Tax Map

## LOCATION

Street Address 721 MANAKIN TOWNE LANE

## PROPERTY OWNERSHIP

Name RHONDA HARMON Phone 804-357-8440

Mailing Address 721 MANAKIN TOWNE LANE, MANAKIN SABOT, VA 23103 Email RHONDA.H.HARMON@COMCAST.NET

## APPLICANT

Name BOB KOLOVICH Phone 434-392-3176

Address 1812 W. THIRD ST. FARMVILLE VA. 23901 Email bjkolovich@gmail.com

## CONTRACTOR

Name HOWARD ELECTRICAL LLC Phone 434-390-1918

Mailing Address

Gas Certification YES  NO

State License Number 2705175430 Expiration ~~3-31-22~~ License Type ELE Class C

## DESCRIPTION OF WORK

INSTALLING 48 KW GENERATOR INCLUDING ELECTRICAL WOOK-UP

600 # of Bathrooms DOMINION Service Size Power Company

Value of Work (required) \$30,500.00 Inquiry #

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

Signature of Applicant: Bob Kolovich Date: 6-9-21

Approval: Gary Fisher Office Use Only Approval date: 6/17/21

Permit Fee: 161.42 Issued date:

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

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

RECEIVED

Date	6/17/21
Permit #	ELI-2021-00744
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	3682 Pryor Rd.	District	
----------------	----------------	----------	--

PROPERTY OWNERSHIP

Name	Derek Price	Phone	540-479-7100
Mailing Address	3682 Pryor Rd.		

APPLICANT

Name	MW BUTLER ELECTRICAL, LLC.	Phone	804-746-2240
E-Mail Address	Chesney@mwbutterelectrical.com		

CONTRACTOR

Name	MW BUTLER ELECTRICAL, LLC.	Phone	804-746-2240
Mailing Address	8420 MEADOWBRIDGE RD ~ SUITE G MECHANICSVILLE, VA 23116 Chesney@mwbutterelectrical.com		
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2705110673 A
		Expiration	1-31-22
		License Type	ELECTRIC
		Class	A

DESCRIPTION OF WORK

Wire 22kw Generator w/200A ATS			
# of Baths	Service Size	Power Company	Inquiry #

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

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

\_\_\_\_\_(Signature) Signed and acknowledged by \_\_\_\_\_ in the city or county of \_\_\_\_\_, Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of the undersigned notary. \_\_\_\_\_(Notary) My commission expires \_\_\_\_\_

Signature of Applicant Chesney Butt Value of Work: \$ 2,450 Approval Gary Fisher Permit fee: 32.67 Date 6/17/21 Issue date: 6/17/21



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

**RECEIVED**  
6/21/21

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

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

Date

Permit #  
FLI-2021-00750

GPIN

Tax Map

## LOCATION

Street Address  
2391 Maidens Road

## PROPERTY OWNERSHIP

Name: Chris Nielson Phone: 804-556-1331

Mailing Address: 2391 Maidens Road, Maidens, Va Email:

## APPLICANT

Name: Loci Medeiros Phone: 434-975-3275

Address: 2293 Seminole Lane Charlottesville 22901 Email: Loci.neverdark@gmail.com

## CONTRACTOR

Name: Never Dark Whole House Generators Phone: 434-975-3275

Mailing Address: 2293 Seminole Lane Charlottesville VA 22901 Email: Lori.neverdark@gmail.com

Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705141802	7-31-23	Contractors	A

## DESCRIPTION OF WORK

wiring 18KW automatic generator with automatic transfer switch with load share modules

# of Bathrooms	Service Size	Power Company	Inquiry #
	200amp	DOM	

Value of Work (required)  
6800

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: Loci Medeiros Date: 6-14-21

Approval: <u>Gary Fisher</u>	Office Use Only	Approval date: <u>6/21/21</u>
Permit Fee: <u>52.63</u>		Issued date: _____

(owner's statement on back)

RECEIVED

6/21/21



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Date
Permit # LLI-2021-00753
GPIN
Tax Map

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

### LOCATION

Street Address  
1514 Beaver Dam Creek Rd

### PROPERTY OWNERSHIP

Name Ken Kenny	Phone 804-218-6669
Mailing Address 1514 Beaver Dam Creek Road, Crozier, VA 23039	Email

### APPLICANT

Name Lori Medeiros	Phone 434-975-3275
Address 2293 Seminole Lane, Charlottesville, VA 22901	Email lorimedeiros@gmail.com

### CONTRACTOR

Name Never Dark Whole House Generator	Phone 434-975-3275			
Mailing Address 2293 Seminole Lane, Charlottesville, VA 22901	Email Lorimedeiros@gmail.com			
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705141802	Expiration 7-31-23	License Type Contractors	Class A

### DESCRIPTION OF WORK

Wiring 24KW automatic generator with automatic transfer switch with load share modules

# of Bathrooms	Service Size 200amp	Power Company DOM	Inquiry #
Value of Work (required) 6800			

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: Lori Medeiros Date: 6-14-21

Approval: <u>Gary Fisher</u>	Office Use Only	Approval date: <u>6/21/21</u>
Permit Fee: <u>52.63</u>		Issued date: _____

(owner's statement on back)



# TRADE PERMIT APPLICATION

## Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date <span style="font-size: 1.2em; color: blue;">6-22-2021</span>
Permit # <span style="font-size: 1.2em; color: blue;">01211</span>
GPIN
Tax Map

### LOCATION

Street Address 1461 Rock castle Rd Goochland VA 23063

### PROPERTY OWNERSHIP

Name <span style="font-size: 1.2em; color: blue;">Matt Toney</span>	Phone <span style="font-size: 1.2em; color: blue;">804-878-5028</span>
Mailing Address <span style="font-size: 1.2em; color: blue;">3898 Old Stage Rd Goochland VA 23063</span>	Email

### APPLICANT

Name <span style="font-size: 1.2em; color: blue;">SAME</span>	Phone
Address	Email

### CONTRACTOR

Name <span style="font-size: 1.2em; color: blue;">OWNER</span>	Phone
Mailing Address	Email
Gas Certification    YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number    Expiration    License Type    Class

### DESCRIPTION OF WORK

Install 22kw generator			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <span style="font-size: 1.2em; color: blue;">\$1,000.00</span>			

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

Signature of Applicant: [Signature]      Date: 6-22-2021

Approval: <span style="font-size: 1.2em; color: blue;">Fisher</span>	<b>Office Use Only</b>
Permit Fee: <span style="font-size: 1.2em; color: blue;">6/22/21</span>	Approval date: <span style="font-size: 1.2em; color: blue;">6/22/21</span>
	Issued date: <span style="font-size: 1.2em; color: blue;">6/22/21</span>

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 6/25/2021

Permit #: 21-237

GPIN

Tax Map

## LOCATION

Street Address: 1301 MARLIN Rd. 23063

## PROPERTY OWNERSHIP

Name: <u>BLUE Ridge Custom Homes LLC</u>	Phone: <u>(804) 614-4556</u>
Mailing Address: <u>7041 LEDD. Rd. 23120</u>	Email:

## APPLICANT

Name: <u>KEVIN HALL</u>	Phone: <u>(804) 921-1197</u>
Address: <u>300 DEFENSE AVE 23150</u>	Email: <u>Kevinscotthall@gmail.com</u>

## CONTRACTOR

Name: <u>Superior Electrical Services LLC</u>	Phone: <u>(804) 921-1197</u>
Mailing Address: <u>300 DEFENSE AVE 23150</u>	Email: <u>Kevinscotthall@gmail.com</u>
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: <u>2705170053</u>
	Expiration: <u>10/31/2021</u>
	License Type: <u>ELE.</u>
	Class: <u>C.</u>

## DESCRIPTION OF WORK

wire new dwelling to code

INSTALLING 22 KW whole house GENERATOR

# of Bathrooms: <u>3</u>	Service Size: <u>200</u>	Power Company: <u>Dominion Energy</u>	Inquiry #: <u>10453443</u>
Value of Work (required): <u>\$ 8,500.00</u>			

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

Signature of Applicant: Kevin Hall Date: 6/25/2021

Approval: <u>[Signature]</u>	Office Use Only	Approval date: <u>6/25/21</u>
Permit Fee: <u>60.44</u>		Issued date: <u>6/25/21</u>

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



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date 6/23/21

Permit # ELI-2021-00801

GPIN

Tax Map

## LOCATION

Street Address 635 Longfield Rd.

## PROPERTY OWNERSHIP

Name Dudley HANSEK Phone 804-708-2120

Mailing Address 635 Longfield Rd. Email

## APPLICANT

Name MW Butler electrical Phone 804-746-2240

Address 8420 meadowbridge Rd. Email Chesney@mwbutterelectrical.com

## CONTRACTOR

Name MW Butler Electrical Phone 804-746-2240

Mailing Address SAME AS ABOVE Email Chesney@mwbutter

Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number <u>2705110673</u>	Expiration <u>1-31-22</u>	License Type <u>A</u>	Class <u>ETCC</u>
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## DESCRIPTION OF WORK

Wire 22kw generator w/ 200A ATS

definition

# of Bathrooms	Service Size	Power Company	Inquiry #
	<u>\$2,450</u>		

Value of Work (required)

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

Signature of Applicant: Chesney Butler Date: 6/29/21

Approval: Gary Fisher Office Use Only Approval date: 6/29/21

Permit Fee: \_\_\_\_\_ Issued date: \_\_\_\_\_

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

(owner's statement on back)



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

**RECEIVED**

6/9/21

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

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

Date

Permit #  
ELI-2021-00700

GPIN  
6831-006549

Tax Map

**LOCATION**

Street Address: 3365 Forest Grove Rd Sandy Hook 23153

**PROPERTY OWNERSHIP**

Name: Lewis Evans	Phone
Mailing Address: 3365 Forest Grove Rd	Email

**APPLICANT**

Name: Les Electric	Phone: 434-962-4179
Address: 357 Rollins Ln LOUISA, VA	Email: CHRISTMASRS@aol.com

**CONTRACTOR**

Name: Les Electric	Phone: 434-962-4179
Mailing Address: 357 Rollins Ln LOUISA, VA	Email
Gas Certification: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number: 2405004612
Expiration: 6/30/21	License Type: B
	Class: CBC, DIB, Elec RBC

**DESCRIPTION OF WORK**

INSTALL Whole House Generator

22K Generator

# of Bathrooms	Service Size: 200	Power Company: Dominion	Inquiry #
Value of Work (required): \$1900.00			

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

Signature of Applicant: Willie Chantano Date: 6/1/21

Approval: <u>Gary Fisher</u>	Office Use Only	Approval date: <u>6/9/21</u>
Permit Fee: <u>30.00</u>		Issued date: _____

(owner's statement on back)