



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: 9-10-2021

Permit Number: BP-2021-01117

GPIN/Tax Map: 7706-64-11623/57-9-0-6-0

Issued: 10-1-2021

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>1550 MILLERS LN</u>	Phone # <u>646 245 0744</u>
	Owner <u>DAVID BLANKLEY</u>	Email <u>DAVID@BLANKLEY.COM</u>
	Address <u>1515 MILLERS LN</u>	

APPLICANT INFORMATION	Applicant/Contact <u>DAVID CLARK</u>	Phone # <u>804 400 0909</u>
	Address <u>1524 BLOOMFIELD RD</u>	Email <u>DCLARK@RICHMOND REBUILDERS.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	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>No change to existing footprint or use.</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>9/10/21</u>			

CONTRACTOR INFORMATION	Contractor <u>RICHMOND REBUILDERS</u>	Phone <u>804 400 0909</u>
	Address <u>1524 BLOOMFIELD RD N CHESTERFIELD VA 23225</u>	Email <u>DCLARK@RICHMOND REBUILDERS.COM</u>
	Contractor License Number <u>2705 121 798</u>	Type <u>CLASS A BLD</u>

DESCRIPTION OF WORK	Scope of Work: <u>FINISH UNFINISHED BASEMENT WORKOUT ROOM / BATHROOM / CLOSET</u>				
	Proposed Use <u>SINGLE FAMILY</u>	Current Use <u>SAME</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>414</u>	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$18,750.00</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: _____ Date: 9/10/2021

Application Fee	\$ <u>96.37</u>
State Levy Fee	\$ <u>1.93</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>123.30</u>

9-27-2021



BUILDING PERMIT APPLICATION

Application Date: 09/24/2021

Permit Number: BP-2021-0172

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

GPIN/Tax Map: 723-26-0038/66-1-0-2-0

Issued: 10-29-2021

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 12829 River Road	
	Owner Benedictine College Preparatory	Phone # 804-708-9500
	Address 12829 River Road - Storage / Wrestling Practice Area	
APPLICANT INFORMATION	Applicant/Contact Athens Building Corporation	
	Address 1700 Broad Rock Boulevard	
		Phone # 804-687-0462
		Email sjones@athensgc.com

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
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint.</u>			
Planning & Zoning Officer: <u>David [Signature]</u>		Date: <u>9/30/21</u>		

CONTRACTOR INFORMATION	Contractor Athens Building Corporation		Phone 804-687-0462
	Address 1700 Broad Rock Blvd		Email sjones@athensgc.com
	Contractor License Number 270513449	Type Class A CBC RBC	Expiration 04/30/2022

DESCRIPTION OF WORK	Scope of Work: Renovations within existing structure. Wrestling Training area				
	Proposed Use Wrestling Training Room	Current Use Store/Train	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 5100	Unfinished Sq. Ft. 0	Total Sq. Ft. 5100	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>337.50</u>
Value of Work	\$45,000.00_ Volunteer Basis; All Improvements donated to Benedictine.	State Levy Fee \$ <u>6.75</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>100.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>444.25</u>
		Signature of Applicant <u>[Signature]</u>



BUILDING PERMIT APPLICATION

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

Application Date: 10/20/2021

Permit Number: BP-2021-01273

GPIN/Tax Map: 718-00-4480/ 46-1-0-91-0

Issued: 10-29-2021

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

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: **2566 MANAKIN RD, MANAKIN SABOT, VA 23103**

Owner: **BRYCE ROBBINS** Phone #: **951-260-7079**

Address: **2566 MANAKIN RD, MANAKIN SABOT, VA 23103** Email: **BRYCE.A.ROBBINS@GMAIL.COM**

APPLICANT INFORMATION
Applicant/Contact: **OWNER** Phone #:

Address: Email:

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to existing footprint</i> A2			

Planning & Zoning Officer: David Boyd Date: 10/21/21

CONTRACTOR INFORMATION
Contractor: **N/A - OWNER** Phone:

Address: Email:

Contractor License Number: Type: Expiration:

DESCRIPTION OF WORK
Scope of Work: INTERIOR RENOVATION: MASTER BED/BATH EXPANSION, KITCHEN OPEN FLOORPLAN CHANGES, BASEMENT FINISHING WORK, DETACHED GARAGE FINISHING WORK

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
RESIDENTIAL	RESIDENTIAL	N/A - ALL INTERIOR WORK ON EXISTING FOOTPRINT		
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.	
	<u>750 480</u>	<u>N/A</u>	<u>750 480</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$41,250</u> \$26,400
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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: 10/20/2021

Application Fee	\$ <u>130.80</u>
State Levy Fee	\$ <u>2.62</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>158.42</u>



BUILDING PERMIT APPLICATION

Application Date: 7-29-21

Permit Number: *BP-2021-00968*

GPIN/Tax Map: 44-16-0-17-0 / *6787-38-6669*

Issued: *10-22-2021*

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

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TDD 711 VA Relay

Residential Commercial

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OWNER INFORMATION	Site Address 1569 HORSEPEN HILLS ROAD		Phone # (804) 784-3183
	Owner LEEGER DONALD WTRUSTEE LEEGER KATHLEEN KIMMEL TRUSTEE		Email
	Address 1569 Horsepen Hills		
APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE		Phone # 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831		Email JSALVATORE@JESWORK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center-Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to footprint/Use</i> Planning & Zoning Officer: <i>David Boyd</i> Date: <i>8/16/21</i>			

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: 944 crawl seal liner, with dehumidifer for encapsulation				
	Proposed Use res	Current Use res	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>74.53</i>
Value of Work	13,895.45	State Levy Fee	\$ <i>1.49</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <i>Jeannie Salvatore</i> Date: <i>7-29-21</i>		Septic/Well Fee	\$
		Zoning Fee	\$ <i>2500</i>
		RLD	\$
		SWP	\$
		Total	\$ <i>101.02</i>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 08.11.2021

Permit Number: BP-2021-01241

GPIN/Tax Map: 6726-30-1298/50-5-0-18-A

Issued: 10-20-2021

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

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OWNER INFORMATION	Site Address	1164 Lickinghole Rd. Goochland VA 23063	
	Owner	Keith Crawford	Phone # (804) 335-5280
APPLICANT INFORMATION	Address	1164 Lickinghole Rd. Goochland VA 23063	Email jcrowford418@gmail.com
	Applicant/Contact	Aracelli Campos	Phone # 702-601-4665
APPLICANT INFORMATION	Address	11106 Air Park Rd. Ashland, VA 23005	Email mcampos@theprocompanies.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:		Date <u>10/24/21</u>	

CONTRACTOR INFORMATION	Contractor	Marc Jones Construction LLC dba Sunpro Solar	Phone	702-601-4665
	Address	22171 MCH Rd. Mandeville, LA 70471	Email	
	Contractor License Number	2705177478	Type Contractor	Expiration 12/31/2022

Scope of Work: **Installation of 28 LG 365 solar pv panels ground mounted**

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	\$60,578.00	Application Fee	\$ 284.60
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee	\$ 5.69
		Septic/Well Fee	\$
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
Signature of Applicant	Aracelli Campos	Date	08.11.2021
		Total	\$ 315.29



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

Application Date: 9/27/21

Permit Number: BP-2021-01162

GPIN/Tax Map: 7716-95-9562/58-47-0-13-0

Issued: 10-1-2021

Residential Commercial

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OWNER INFORMATION	Site Address <u>1690 CENTERVILLE PARKE LANE, MANASSAS SASOT VA. 23103</u>	
	Owner <u>TED MARSHALL PRICE & KIMBERLEY YELTON PRICE</u>	Phone # <u>ted@brooks-co.com</u>
	Address <u>1690 CENTERVILLE PARKE LANE</u>	Email <u>804-347-6310</u>
APPLICANT INFORMATION	Applicant/Contact <u>SHELLEY NEKOTISTOS</u>	
	Address <u>12147 OAK LAKE COURT, MIDLOTHIAN VA 23112</u>	Phone # <u>804-744-8480</u> Email <u>SHELLEY@PARAGONVA.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>The Parke at Centerville</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' S/S</u>	CUP/Variance/COA <u>RPUD</u>
	Side Setback <u>20' S/S</u>	Side Setback <u>20' S/S</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer <u>David Taylor</u> Date <u>9/27/21</u>		

CONTRACTOR INFORMATION	Contractor <u>PARAGON CONSTRUCTION COMPANY LLC</u>		Phone <u>804-744-8480</u>
	Address <u>12147 OAK LAKE COURT, MIDLOTHIAN VA 23112</u>		Email <u>SHELLEY@PARAGONVA.COM</u>
	Contractor License Number <u>2705 P 79880</u>	Type <u>CLASS A</u>	Expiration <u>4/30/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>ADD A 15'-3" X 12'-0" WOOD FRAMED SCREENED PORCH ON BRICK PIERS WITH COMPOSITE DECKING. REPLACE EXISTING TRIPLE WINDOW WITH A DOUBLE DOOR & SIDELITES IN THE EXISTING OPENING</u>				
	Proposed Use <u>RESIDENTIAL</u>	Current Use <u>RESIDENTIAL</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>183</u>	Total Sq. Ft. <u>183</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 23120.00</u>	Application Fee	\$ <u>116.04</u>
		State Levy Fee	\$ <u>2.32</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>143.26</u>

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

Signature of Applicant: Shelley Nekotistos Date 9/27/21

9-15-2021



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: September 14th, 2021

Permit Number: BP-2021-01120

GPIN/Tax Map: 7726-68-1196/48-2-C-6-0

Issued: 10-01-2021

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 12660 Pamela Lane Henrico, VA 23233	
	Owner Adam McInerney	Phone # (804) 519-4934
APPLICANT INFORMATION	Address 12660 Pamela Lane Henrico, VA 23233	
	Applicant/Contact Henry Keith (Sigora Solar)	Email pgmcinerney@yahoo.com
APPLICANT INFORMATION	Address 490 Westfield Road Suite A Charlottesville, VA 22901	
	Phone # (434) 996-6141	Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Bellview Gardens</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>No change to existing footprints.</u>	

Planning & Zoning Officer: [Signature] Date: 9/15/21

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC		Phone (434) 996-6141
	Address 490 Westfield Road Suite A Charlottesville, VA 22901		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type A	Expiration 7/31/2022

Scope of Work:
Install of a flush roof mounted solar photo-voltaic system. System Capacity: 16.800 kWp DC

Proposed Use Single Family Dwelling	Current Use SFD	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. 836.22 Array Sq Ft	

Building Only - Excludes All Trades Permits

Value of Work: **\$5,444**

I hereby acknowledge that I have read this 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 C Keith Date: 9/14/2021

Application Fee	\$ <u>36.50</u>
State Levy Fee	\$ <u>.73</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>62.23</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 09/02/2021 **9-3-2021**

Permit Number: **BP-2021-01094**

GPIN/Tax Map: **Lot 88-04-1956 / 32-18-0-8-0**

Issued: **10-1-2021**

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.

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Site Address **2425 Gammons Creek Drive, Maidens, VA 23102**

Owner **D. Keith & Dawn Snow** Phone # **804-938-1624**

Address **2425 Gammons Creek Drive, Maidens, VA 23102** Email **dpkdkd3@gmail.com**

Applicant/Contact **D. Keith & Dawn Snow** Phone # **804-938-1624**

Address **2425 Gammons Creek Drive, Maidens, VA 23102** Email **dpkdkd3@gmail.com**

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Bridgewater</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>55' from R/W</i>	Center Line Setback <i>80'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA <i>NR</i>
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Contractor **Self** Phone **804-938-1624**

Address **2425 Gammons Creek Drive, Maiden, VA 23102** Email **dpkdkd3@gmail.com**

Contractor License Number _____ Type _____ Expiration _____

Scope of Work: **24x48**
 Enclosed deck around above ground pool, with 48" high railings & 54" tall self closing, self latching gates at step that open away from the pool. Pool walls are already 62" high.

Proposed Use personal	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <i>n/a</i>		
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft. 1152	Total Sq. Ft. 1152	

Building Only - Excludes All Trades Permits		Application Fee \$ 63.84
Value of Work	\$3,500.00 11,520.00	State Levy Fee \$ 1.28
		Zoning Fee \$ 25.00
		RLD \$ _____
		SWP \$ _____
		Total \$ 90.12

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

Signature of Applicant _____ Date **9/2/2021**



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: 10/06/2021
 Permit Number: BP-2021-01207
 GPIN/Tax Map: 7716-72-9808/58-40-0-3-0
 Issued: 10/14/2021
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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OWNER INFORMATION	Site Address 155 Gaines Thrify Lane	
	Owner John & Jody Locher	Phone # 804-240-3986
	Address 155 Gaines Thrify Lane	Email bernard.wegscheider@douglasaquatics.com

APPLICANT INFORMATION	Applicant/Contact Douglas Aquatics, Inc./Bob Spero		Phone # 804-232-7665
	Address 1900 E. Belt Blvd. Richmond, VA 23224		Email bernard.wegscheider@douglasaquatics.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Gaines Thrify Lane</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from PL/RL</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>5'</u>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Dennis Floyd</u> Date <u>10/18/21</u>			

CONTRACTOR INFORMATION	Contractor Douglas Aquatics, Inc.		Phone 804-232-7665
	Address 1900 E. Belt Blvd. Richmond, VA 23224		bernard.wegscheider@douglasaquatics.com
	Contractor License Number 2701024191	Type VA Class A Contractor	Expiration 11/30/2021

DESCRIPTION OF WORK	Scope of Work: Installation of a 20'X45' inground gunite swimming pool with auto cover				
	Proposed Use		Current Use		Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft. 900 SQ. FT.

Building Only - Excludes All Trades Permits

Value of Work	\$ 85,411.35
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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 10/06/2021

Application Fee	\$ 396.35
State Levy Fee	\$ 7.93
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 429.28



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 2-28-2021

Permit Number: BP2021-01173

GPIN/Tax Map: 7723-46-2817/Lele-3-01-0

Issued: 10-2-2021

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

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

OWNER INFORMATION	Site Address 1 PATRIOTIC HILL RD.		Phone # 804 767 0330
	Owner RICHARD & CONNELIA SAVAGE		Email RICHSAVAGE3@COMCAST-NET
	Address 1 PATRIOTIC HILL RD.		
APPLICANT INFORMATION	Applicant/Contact RICH SAVAGE		Phone # SAME
	Address SAME		Email SAME

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Patriotic Hill	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 40' from P/R/W	Center Line Setback 65'	Rear Setback 5'	CUP/Variance/COA RI
	Side Setback L.T. Side 5'	Side Setback R.T. Side 35'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Dennis Floyd</u> Date <u>9/30/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: BARN Addition - storage				
	Proposed Use STORAGE	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 24 FT X 100 FT		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	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.	
		2400	2400		

Building Only - Excludes All Trades Permits		Application Fee	\$ 374.70
Value of Work	\$47,500 80,600	State Levy Fee	\$ 7.49
I hereby acknowledge that I have read this 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	\$ 25.00
Signature of Applicant	<u>[Signature]</u>	RLD	\$
Date	8/30/21	SWP	\$
		Total	\$ 407.19



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: 9/9/21 9-10-2021
 Permit Numbers: BP-2021-01108
 GPIN/Tax Map: 6823-19-4539/5-3-0-14-0
 Issued: 10-1-2021
 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 4344 Windsor Lake Drive Louisa VA 23093	
	Owner Douglas E Lambert	Phone # 804-241-2413
	Address 4344 Windsor Lake Drive	Email doug.lambert@dominionenergy.com
APPLICANT INFORMATION	Applicant/Contact Douglas E Lambert	Phone # 804-241-2413
	Address 4344 Windsor Lake Drive	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Windsor Park</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from P/L/ROW</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>9/14/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: Install 20x40 standard carport on gravel pad				
	Proposed Use Recreational vehicle cover	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>0</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>800</u>	Total Sq. Ft. <u>800</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>66.00</u>
Value of Work	<u>6000.00 - 12000</u>	State Levy Fee	\$ <u>1.32</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
Signature of Applicant <u>Doug Lambert</u>	Date <u>9/8/2021</u>	RLD	\$
		SWP	\$
		Total	\$ <u>92.32</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: 9/7/2021

Permit Number: *BP-2021-01099*

GPIN/Tax Map: *7733*
~~7733~~ - *85-4836* / *68-4-0-8-0*

Issued: *10-1-21*

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 304 Randolph Square parkway	
	Owner Shane and Sarah Maley	Phone # 804-347-1229
APPLICANT INFORMATION	Address 424 Dellbrooks Place, Richmond VA 23238	Email
	Applicant/Contact John W. Montague Jr. Inc	Phone # 804-690-9230
	Address 310 River Road West, Manakin Sabot Va. 23103	Email jwarrenmontague@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Randolph Square</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>Behind Main Bldg.</i>	Center Line Setback _____	Rear Setback <i>5'</i>	CUP/Variance/COA <i>RPUD</i>
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>David Floyd</i> Date <i>9/14/21</i>			

CONTRACTOR INFORMATION	Contractor John W. Montague Jr. Inc	Phone 804-690-9230
	Address 310 River Road West, Manakin Sabot VA. 23103	Email jwarrenmontague@gmail.com
	Contractor License Number 2701014152	Type A

Scope of Work:
Build detached garage next to current house under construction permit # 2021-00122

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
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.	
		1000	1000	

Building Only - Excludes All Trades Permits

Value of Work	\$27,500 per fee calculator	Application Fee	\$ <i>1357.6</i>
		State Levy Fee	\$ <i>2.71</i>
		Zoning Fee	\$ <i>20.00</i>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <i>163.47</i>

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

Signature of Applicant *[Signature]* Date 9/7/2021

MANAKIN SABOT BUILDING



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 8/17/21 8-27-2021
 Permit Number: BP-2021-01063
 GPIN/Tax Map: 7723-54-8988/ 67-2-D-8-D
 Issued: 10-4-21
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>213 Sweetbriar Dr. / Richmond VA / 23238</u>	
	Owner <u>Jennifer + Scott Ruth.</u>	Phone # <u>804 338 8601</u>
	Address <u>(ABOVE)</u>	Email <u>JJ Ruth 6@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Preston Montague</u>	
	Address <u>499 Bascabel Ferry Rd., Manakin Sabot 23103</u>	Email <u>PrestonMontagueLLC@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Jame Run Est.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>40' from P/L Rev</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA —
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone <u>C</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>9/2/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Preston Montague LLC</u>		Phone <u>804 690-1993</u>
	Address <u>499 Bascabel Ferry Rd. / Manakin Sabot 23103</u>		Email <u>PrestonMontagueLLC@gmail.com</u>
	Contractor License Number <u>2705 109885</u>	Type <u>CLASS A-</u>	Expiration <u>9/30/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>Remove old wood deck + Paveh patio. Build new deck w/ Roof + new patio</u>				
	Proposed Use <u>Exterior Entertainment.</u>	Current Use <u>Same</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms —	# of Bedrooms —	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / <u>No</u>	Finished Sq. Ft. —	Unfinished Sq. Ft. <u>Deck 1000 sq ft. Patio 1250 sq ft.</u>	Total Sq. Ft. <u>2250</u>	
	Building Only - Excludes All Trades Permits				

Value of Work <u>\$140,000</u>

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

Signature of Applicant [Signature] Date 8/16/21

Application Fee	\$ <u>642.00</u>
State Levy Fee	\$ <u>12.84</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>679.84</u>



BUILDING PERMIT APPLICATION

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

Application Date: 9/20/2021

Permit Number: *BP-2021-01144*

GPIN/Tax Map: *7115-42-0905/58-52-3-2-0*

Issued: *10-1-21*

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	977 DOVER BRANCH LANE	
	Owner	BILL JOHNS	Phone # 767-0775
APPLICANT INFORMATION	Address	977 DOVER BRANCH LANE	
	Applicant/Contact	JOPA CO / FARRAR PACE	Email fpace@jopa.com
APPLICANT INFORMATION	Address	8711 WEST BROAD ST.	Phone # SAME
			Email SAME

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>David Boyd</i>			
Planning & Zoning Officer <i>David Boyd</i> Date <i>9/29/21</i>				

CONTRACTOR INFORMATION	Contractor	JOPA COMPANY		Phone
	Address	8711 WEST BROAD ST		Email
	Contractor License Number	2701005553	Type Class A	Expiration 10/31/21

Scope of Work: *Inground Swimming Pool and Spa & 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 including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<i>1000</i>	<i>1000</i>	

Building Only - Excludes All Trades Permits

Value of Work	150,000.00	Application Fee	\$ <i>687.00</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 <i>[Signature]</i> Date 9/20/2021		State Levy Fee	\$ <i>13.74</i>
		Zoning Fee	\$ <i>25.00</i>
		RLD	\$
		SWP	\$
		Total	\$ <i>725.74</i>

MICHAEL - BRON KING

Rec: 9-8-21-Mail



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: 9/1/2021
 Permit Number: BP-2021-01098
 GPIN/Tax Map: 6840-69-3028 / 20-14-0-6-0
 Issued: 10-4-21
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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 3056 Rocky Creek Lane, Gum Springs, VA. 23065	
	Owner SZABO THOMAS A SZABO CHRISTINAM	Phone # 804-852-3001
	Address 3056 Rocky Creek Lane, Gum Springs, VA. 23065	Email
APPLICANT INFORMATION	Applicant/Contact Andrew Campbell	Phone # 804-516-9536
	Address 14807 Colony Forest Place, Midlothian, VA. 23114	Email chi.permits@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Woodlin</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <i>5' from PG Row</i>	Center Line Setback	Rear Setback <i>35'</i>	CUP/Variance/COA
	Side Setback <i>20'</i>	Side Setback <i>20'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>David Floyd</i> Date: <i>9/14/21</i>			

CONTRACTOR INFORMATION	Contractor Campbell Home Improvements, LLC		Phone 804-516-9536
	Address 14807 Colony Forest Place, Midlothian, VA. 23114		Email chi.permits@gmail.com
	Contractor License Number 2705100592	Type Class B	Expiration 8/2023

Scope of Work:
Tear down and rebuild a 580 square foot wood freestanding 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.	
		580	580	

Building Only - Excludes All Trades Permits

Value of Work	8700.00	Application Fee	\$ 51.15
		State Levy Fee	\$ 1.02
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 77.17

I hereby acknowledge that I have read this 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: *Andrew Campbell* Date: 9/1/2021



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: 9/10

Permit Number: **BP-2021-01105**

GPIN/Tax Map: **7707-16-3842 / 46-1-0-8-B**

Issued: **10-4-21**

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

Residential Commercial

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

Site Address
888 Three Chopt Road, Goochland VA 23103

OWNER INFORMATION
Owner: Jody Rotman
Phone #

Address: 888 Three Chopt Road, Goochland VA 23103
Email

APPLICANT INFORMATION
Applicant/Contact: Jocelyn Linder
Phone #: 804-221-5737

Address: 10453 Design Road, Ashland VA 23005
Email: jlinder@58foundations.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: _____ Center Line Setback: _____ Rear Setback: _____ CUP/Variance/COA: _____
Side Setback: _____ Side Setback: _____ Flood Zone: _____ **A2**

APPROVED REJECTED COMMENTS: *All interior work
Planning & Zoning Officer: [Signature] Date: 9/14/21

CONTRACTOR INFORMATION
Contractor: Super Bee Holdings LLC
Phone: 804-221-5737

Address: 10453 Design Road, Ashland VA 23005
Email: jlinder@58foundations.com

Contractor License Number: 2705175920 Type: Class A Contractor Expiration: 5/31/22

DESCRIPTION OF WORK
Scope of Work:
Installation of basement water management system to include a sump pump and 154 ft of a free flow pipe system

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER <u>Public</u> Private	WATER <u>Public</u> Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			924	

Building Only - Excludes All Trades Permits
Value of Work: 19274.36

Application Fee	\$ 98.74
State Levy Fee	\$ 1.97
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 125.71

I hereby acknowledge that I have read this 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: 9/10/21



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: 9/10/2021

Permit Number: BP-2021-01106

GPIN/Tax Map: 6785-10-2874/60-70-B-D

Issued: 10-4-21

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

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

Site Address
740 Lee Road, Crozier VA 23039

OWNER INFORMATION
Owner Jan Lofland **Phone #** 804-337-1477

Address 740 Lee Road, Crozier VA 23039 **Email**

APPLICANT INFORMATION
Applicant/Contact Jocelyn Linder **Phone #** 804-221-5737

Address 10453 Design Road, Ashland VA 23005 **Email** jlinder@58foundations.com

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 <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* All information correct</u>			
	Planning & Zoning Officer <u>[Signature]</u>		Date <u>9/14/21</u>	

CONTRACTOR INFORMATION
Contractor Super Bee Holdings LLC **Phone** 804-221-5737

Address 10453 Design Road, Ashland VA 23005 **Email** jlinder@58foundations.com

Contractor License Number 2705175920 **Type** Class A **Expiration** 5/31/22

DESCRIPTION OF WORK
Scope of Work:
Basement water proofing. Installing 11ft of a free flo pipe system to an existing sump pump in the basement. Installing wall sealer for a total of 44 sq ft.

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 2581.00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant [Signature] **Date** 8/30/21

Application Fee	\$30.00
State Levy Fee	\$.60
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60 55.60</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9/10/2021

Permit Number: BP-2021-01107

GPIN/Tax Map: 6758-70-0120 / 42-32-C-28-1

Issued: 10-4-21-

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

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

OWNER INFORMATION	Site Address <u>2410 Bredle Ridge, Goochland, VA, 23063</u>	
	Owner <u>Wes Royer</u>	Phone # <u>(804) 291-7618</u>
	Address <u>2410 Bredle Ridge, Goochland, VA, 23063</u>	Email <u>Wes.royer@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Charlie Forbes</u>	
	Address <u>12830 West Creek Pkwy Suite G, Richmond, VA 23238</u>	Phone # <u>(804) 514-4728</u>
		Email <u>charlieforbes4@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Holland Hills</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40 from P/R/W</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone _____	RI
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>9/14/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Charlie Forbes</u>		Phone <u>(804) 514-4728</u>
	Address <u>12830 West Creek Pkwy Suite G, Richmond, VA, 23238</u>		Email <u>Charlieforbes4@gmail.com</u>
	Contractor License Number <u>2705172671</u>	Type <u>A</u>	Expiration <u>8/31/23</u>

DESCRIPTION OF WORK	Scope of Work: <u>removing existing deck off the back of the home and adding a new 14' x 16' covered porch.</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. <u>224</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>224</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>57.00</u>
Value of Work	<u>\$ 10,000.00</u>	State Levy Fee	\$ <u>1.14</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
Signature of Applicant	<u>Charlie Forbes</u>	RLD	\$ _____
Date	<u>9/10/21</u>	SWP	\$ _____
		Total	\$ <u>83.14</u>



BUILDING PERMIT APPLICATION

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

Application Date: 9-23-2021
 Permit Number: BP-2021-01151
 GPIN/Tax Map: 7708-72-4383/46-31-0-8-0
 Issued: 10-5-2021
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential Commercial

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

OWNER INFORMATION	Site Address <u>2595 Britland Dr Manakin-Sabot VA 23103</u>	
	Owner <u>William A Matthews</u>	Phone # <u>804-749-8303</u>
	Address <u>Same</u>	Email <u>matthewsb82@comcast.net</u>
APPLICANT INFORMATION	Applicant/Contact <u>William Matthews</u>	
	Address <u>2595 Britland Dr, Manakin-Sabot, 23103</u>	Phone # <u>Same as above</u>
		Email <u>Same as above</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Britland</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 _____	RR _____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint.</u>			
Planning & Zoning Officer: <u>[Signature]</u>		Date: <u>9/22/21</u>		

CONTRACTOR INFORMATION	Contractor <u>Fetty Homes, Inc</u>		Phone <u>804-283-4139</u>
	Address <u>1204 North James Estates Dr Richmond VA 23231</u>		Email _____
	Contractor License Number <u>2705 079277A</u>	Type <u>Class A</u>	Expiration _____

DESCRIPTION OF WORK	Scope of Work: <u>Redo deck & Enclosed Porch over Deck</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 including reserve drain fields? Yes (No) <u>No</u>	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>315</u>	Total Sq. Ft. _____	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$55,000</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: WA Matthews Date: 9/23/21

Application Fee	\$ <u>259.50</u>
State Levy Fee	\$ <u>5.64</u>
Zoning Fee	\$ <u>2500</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>289.69</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: 9/22/2021

Permit Number: BP-2021-01145

GPIN/Tax Map: 6769-52-2352 / 31-5-0-30

Issued: 10-5-2021

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

Residential Commercial

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

OWNER INFORMATION	Site Address 2619 TURNER RD	
	Owner DENISE & RICK TERRELL	Phone # 804-387-4635
	Address 2619 TURNER RD	Email DENISEMTERRELL@GMAIL.COM

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 <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from RR</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 Floyd</u> Date: <u>9/29/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: RESURFACE EXISTING 13'X20' DECK WITH NEW LANDING & STEPS - BUILD AN APPROX 13'X20' SHED ROOF				
	Proposed Use PORCH	Current Use DECK	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	Finished Sq. Ft.		Unfinished Sq. Ft.	Total Sq. Ft.	
			260		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>88.50</u>
Value of Work	\$17,000	State Levy Fee \$ <u>1.77</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>9/22/2021</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>115.27</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-6815 Fax (804) 556-5651
TDD 711 VA Relay

Application Date: September 23rd, 2021 9-27-2021

Permit Number: BP-2021-01167

GPIN/Tax Map: 7726-68-2421 / 48-2-F-5-0

Issued: 10-5-2021

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

Residential Commercial

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

OWNER INFORMATION	Site Address <u>12661 Pamela Lane Richmond, VA 23233</u>		Phone # <u>(804) 381-8773</u>
	Owner <u>KOWALSKI ROBERT T KOWALSKI ELLEN B</u>		Email <u>robertkowalski417@gmail.com</u>
APPLICANT INFORMATION	Address <u>12661 PAMELA LANE Richmond, VA 23233</u>		Phone # <u>(434) 996-6141</u>
	Applicant/Contact <u>Henry Keith (Sigora)</u>		Email <u>permitting@sigorasolar.com</u>
Address <u>490 Westfield Road Suite A Charlottesville, VA 22901</u>			

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Beltwood Gardens</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	<u>R1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint</u> Planning & Zoning Officer: <u>Daniel Lloyd</u> Date: <u>9/29/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Sigora Solar LLC</u>		Phone <u>(434) 996-6141</u>
	Address <u>490 Westfield Road Suite A Charlottesville, VA 22901</u>		Email <u>permitting@sigorasolar.com</u>
	Contractor License Number <u>2705141338</u>	Type <u>A</u>	Expiration <u>7/31/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install of a flush roof mounted Solar photo-voltaic system. System capacity: 1.600 kWp DC. Adding 4 panels to existing array</u>				
	Proposed Use <u>Single Family</u>	Current Use <u>SFD</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>79.4 array Sq. Ft.</u>	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work 1,100.00

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 Henry Keith Date 9/23/21

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>55.60</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9-23-21
 Permit Number: BP-2021-01148-
 GPIN/Tax Map: 7726-15-6562 / 58-5B-2-6-0
 Issued: 10-5-21

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

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

OWNER INFORMATION	Site Address <u>12203 Bremner Ridge Circle Manakin Sabot, VA 23103</u>	
	Owner <u>James L. and Susan S. Mallon</u>	Phone # <u>804 363-8350</u>
	Address <u>12203 Bremner Ridge Circle Manakin Sabot, VA 23103</u>	Email <u>mallonj1313@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>James L. Mallon</u>	
	Address <u>same as above</u>	Phone # <u>same</u>

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	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to basis req footprint</u> Planning & Zoning Officer: <u>David Boyd</u> Date: <u>9/29/21</u> RPUD			

CONTRACTOR INFORMATION	Contractor <u>None, by owner</u>		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Finish half of basement not finished by Eagle Construction: stud walls, plumbing for 1 sink, electrical, drywall, paint, cabinets porcelain tile floor and wood base into greatroom</u>				
	Proposed Use <u>Residential</u>	Current Use <u>Residential</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NA</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>389</u>	Unfinished Sq. Ft. <u>389</u>	Total Sq. Ft. <u>756</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>15.00</u>
Value of Work	<u>\$14,000</u>	State Levy Fee	\$ <u>1.50</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>101.50</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.

James L. Mallon



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: 9/23/2021

Permit Number: ESP-2021-01180

GPIN/Tax Map: 5789-78-7920/15-5-0-29-0

Issued: 10-5-21

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

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

OWNER INFORMATION
 Site Address: 2715 Ravenwood Road, Columbia 23038

Owner: Eric Horner Jesse Phone # _____

Address: 2715 Ravenwood Road, Columbia 23038 Email _____

APPLICANT INFORMATION
 Applicant/Contact: Shanna Miotke Phone # 804-359-2997

Address: 17387 Echo Meadows Rd, Rockville, VA 23146 Email shanna@smallwoodrenovations.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer _____ Date _____

CONTRACTOR INFORMATION
 Contractor: Smallwood Renovations LLC Phone 804-359-2997

Address: 17387 Echo Meadows Rd, Rockville, VA 23146 Email shanna@smallwoodrenovations.com

Contractor License Number 2705152796 Type Class A Expiration 07-31-27

DESCRIPTION OF WORK
 Scope of Work:
Build a 26x17 pressure treated lumber 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. <u>442</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$6,557.40

Application Fee	\$ <u>41.51</u>
State Levy Fee	\$ <u>83</u>
Zoning Fee	\$ <u>2500</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>67.34</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: Shanna Miotke Date: 9-23-21



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: 9-30-2021
 Permit Number: BP-2021-01187

GPIN/Tax Map: 6823-42-2572 / 5-15-0-4-D

Issued: 10-5-2021

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

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

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

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

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

DESCRIPTION OF WORK	Scope of Work: <u>Demolition of existing Two trailers due their damaged condition. Two structures had to be demolished in their entirety.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, and 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>\$4,000.00</u>	Application Fee	\$ <u>30.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>B. Barrera</u> Date <u>9/30/21</u>		State Levy Fee	\$ <u>1.60</u>
		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>30.60</u>



BUILDING PERMIT APPLICATION

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

Application Date: 9-2-2021

Permit Number: BP-2021-01080

GPIN/Tax Map: 7723-07-0331/63-1-0-84-0

Issued: 10-6-2021

Residential Commercial

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

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

OWNER INFORMATION	Site Address <u>310 Rye Field Road</u>	Phone # <u>804-651-6892</u>
	Owner <u>Gale Paulson</u>	Email <u>GPaulson@aol.com</u>
APPLICANT INFORMATION	Address <u>310 Rye Field Rd</u>	Phone # <u>804-641-9141</u>
	Applicant/Contact <u>Michael Darcetto Gale Paulson</u>	Email <u>Mapleleafsinc@aol.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>5' from PL/Row</u>	Center Line Setback —	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Lloyd</u> Date <u>9/8/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Add putting steel, Aux structure to existing house detached Finished, Foundation already there</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <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. <u>336</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>336</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>95.11p</u>
Value of Work	<u>\$18,480</u>	State Levy Fee \$ <u>1.90</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>122.06</u>
Signature of Applicant	<u>Gale Paulson</u>	Date <u>9/2/21</u>



BUILDING PERMIT APPLICATION

Application Date: 9-3-2021

Permit Number: BP-2021-01081

GPIN/Tax Map: 6757-97-8457 / 42-1-0-640

Issued:

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

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

Residential Commercial

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

OWNER INFORMATION

Site Address: 1800 Sandy Hook Rd Suite # 332

Owner: Goochland County Phone #: 804-556-5802

Address: P.O. Box 10, Goochland, VA 23063 Email:

APPLICANT INFORMATION

Applicant/Contact: Sermet Construction Phone #: 804-264-4800

Address: 2419 Westwood Ave Richmond VA 23230 Email: RHASKELL@SERMAT.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: _____ Center Line Setback: _____ Rear Setback: _____ CUP/Variance/COA: _____

Side Setback: _____ Side Setback: _____ Flood Zone: _____ R3

APPROVED REJECTED COMMENTS: All interior work.

Planning & Zoning Officer: David Floyd Date: 9/8/21

CONTRACTOR INFORMATION

Contractor: Sermet Construction Phone: 804-264-4800

Address: 2419 Westwood Ave Richmond VA 23230 Email: RHASKELL@SERMAT.COM

Contractor License Number: 2701025440 CRL-RBC Type: A Expiration: 10-31-21

DESCRIPTION OF WORK

Scope of Work: Build New Partition Wall In "IT" Room to separate Main Server - wall will be approx 22 Ft long with 1-Door

Proposed Use: <u>Commercial</u>	Current Use: <u>Commercial</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <input checked="" type="checkbox"/>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>existing</u>	# of Bedrooms: <u>N/A</u>	# of floors: <u>N/A</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work: \$8,000

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

Signature of Applicant: [Signature] Date: 9/1/21

Application Fee	\$
State Levy Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$

County Project



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: *Corrected application*
~~July 28, 2021~~ *Revised 8/4/2021*
 Permit Number: *BP-2021-00963*
 GPIN/Tax Map: *6798-33-6225 / 33-6-0-7-0*
 Issued: *10-6-21*
 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 <i>2450 Hillstream Dr Rockville, VA 23146</i>	Phone # <i>804 931 7675</i>
	Owner NICOLE GRACE BLAIR	Email
	Address	
APPLICANT INFORMATION	Applicant/Contact <i>Teimon Phillips</i>	Phone # <i>804 924 0454</i>
	Address <i>3823 Gaskins Rd Richmond, VA 23233</i>	Email <i>teimon@fablingbuilt.com</i>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Beacon H-11</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>55' from PL Rev</i>	Center Line Setback <i>80'</i>	Rear Setback <i>35'</i>	CUP/Variance/COA
	Side Setback <i>15'/35'</i>	Side Setback <i>15'/35'</i>	Flood Zone	<i>RR</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Survey County Setbacks.</i>	Planning & Zoning Officer <i>David Floyd</i>	Date <i>9/9/21</i>	

CONTRACTOR INFORMATION	Contractor <i>Fabling Built</i>	Phone <i>804 924 0454</i>
	Address <i>3823 Gaskins Rd Richmond, VA 23233</i>	Email <i>getpaid@fablingbuilt.com</i>
	Contractor License Number <i>2705160552</i>	Type <i>Class A</i>

DESCRIPTION OF WORK	Scope of Work <i>Attached Add a garage to the existing home..</i>			
	Proposed Use <i>Garage</i>	Current Use <i>N/A</i>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <i>N/A</i>	
	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. <i>528</i>	Unfinished Sq. Ft. <i>828</i>	Total Sq. Ft. <i>828 - 828</i>

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>138.00</i>
Value of Work <i>20,000</i>		State Levy Fee	\$ <i>2.76</i>
		Zoning Fee	\$ <i>25.00</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.		RLD	\$ _____
Signature of Applicant <i>[Signature]</i>	Date <i>7/28/2021</i>	SWP	\$ _____
		Total	\$ <i>165.76</i>



BUILDING PERMIT APPLICATION

Application Date: 8-25-21

Permit Number: BP-2021-01033

GPIN/Tax Map: 7707-61-951A / 46-2-0-3-0

Issued: 10-6-21

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

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

Residential Commercial

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

OWNER INFORMATION	Site Address <u>591 BROAD STREET, MANAKIN-SABOT VA 23103</u>	
	Owner <u>TRUSTEES OF THE WEST END COMMUNITY NAZARENS CHURCH</u>	Phone # <u>727 9861 CELL # 804 784 4537</u>
	Address <u>SAME</u>	Email <u>GREENCONNECTINGPOINTS.ORG</u>

APPLICANT INFORMATION	Applicant/Contact <u>WAYNE DELL</u>	Phone # <u>804 690 3503</u>
	Address <u>2239 WALTONS STORE ROAD LOUISA, VA 23093</u>	Email <u>WRSUPHM@aol.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>100' from PL/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	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>*In Interior work.</u>		

Planning & Zoning Officer: [Signature] Date: 8/27/21

CONTRACTOR INFORMATION	Contractor <u>W. T. DELL CONSTRUCTION</u>	Phone <u>804 690 3503</u>
	Address <u>2239 WALTONS STORE ROAD LOUISA, VA 23093</u>	Email <u>WRSUPHM@aol.com</u>
	Contractor License Number <u>2705-012618</u>	Type <u>CONTRACTOR</u>

Scope of Work: INSTALL ADA RAMP PER PLANS

Proposed Use <u>CHURCH</u>	Current Use <u>CHURCH</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>	WATER Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>	# of Bathrooms <u>4</u>	# of Bedrooms <u>N/A</u>	# of floors <u>ONE</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>87.5</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>87.5</u>	

Building Only - Excludes All Trades Permits

Value of Work
3000.00

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

Signature of Applicant: [Signature] Date: 8/17/21

Application Fee	\$ <u>60.00</u>
State Levy Fee	\$ <u>1.20</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$
SWP	\$
Total	\$ <u>161.20</u>



BUILDING PERMIT APPLICATION

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

Application Date: 2-28-2021

Permit Number: BP2021-01173

GPIN/Tax Map: 7723-46-2817 / L66-3-010

Issued: 10-2-2021

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

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

OWNER INFORMATION	Site Address <u>1 PATRIOTIC HILL RD.</u>	
	Owner <u>RICHARD & CONNELIA SAVAGE</u>	Phone # <u>804 767 0330</u>
	Address <u>1 PATRIOTIC HILL RD.</u>	

APPLICANT INFORMATION	Applicant/Contact <u>RICH SAVAGE</u>	Phone # <u>SAME</u>
	Address <u>SAME</u>	Email <u>SAME</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Partridge Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40' from P/R/W</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>R1</u>
	Side Setback <u>L.T. Side 5'</u>	Side Setback <u>R.T. Side 35'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer Daniel Floyd Date 9/30/21

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

DESCRIPTION OF WORK	Scope of Work: <u>BARN Addition - storage</u>				
	Proposed Use <u>STORAGE</u>	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>24 FT X 100 FT</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Public</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>2400</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>2400</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>374.70</u>
Value of Work	<u>\$47,500 - 80,600</u>	State Levy Fee	\$ <u>7.49</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>407.19</u>
Signature of Applicant <u>[Signature]</u>		Date	<u>8/30/21</u>



BUILDING PERMIT APPLICATION

Application Date: 9-20-2021Permit Number: BP-2021-0126GPIN/Tax Map: 6728-31-8984 / 27-1-0-82-AIssued: 10-14-2021

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

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 1987 Haskin Rd., Goochland, VA 23063	
	Owner Howard Kallman	Phone # 804-356-6195
	Address 1987 Haskin Rd., Goochland VA 23063	Email HKALLMAN87@gmail.com

APPLICANT INFORMATION	Applicant/Contact Howard Kallman	
	Address 1987 Haskin Rd., Goochland VA 23063	Phone # 804-356-6195

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 75' from P/R/W	Center Line Setback 100'	Rear Setback 5'	CUP/Variance/COA —
	Side Setback 5'	Side Setback 5'	Flood Zone —	A1
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>9/24/21</u>			

CONTRACTOR INFORMATION	Contractor OWNER		Phone —
	Address —		Email —
	Contractor License Number —	Type —	Expiration —

DESCRIPTION OF WORK	Scope of Work: 3 -car Garage 30x30 Detached				
	Proposed Use Car storage	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 900 SF		
	SEWER Public/Private Private	WATER Public/Private —	# of Bathrooms N/A	# of Bedrooms N/A	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft. 0	Unfinished Sq. Ft. 900	Total Sq. Ft. 900	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>214.50</u>
Value of Work 45,000		State Levy Fee \$ <u>4.29</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25.00</u>
Signature of Applicant <u>Howard Kallman</u>	Date <u>9/20/2021</u>	RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>243.79</u>

10-1-2021



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: 28 Sept 2021

Permit Number: BP-2021-01195

GPIN/Tax Map: 6798-64-4058 / 33-9-0-4-0

Issued: 10-8-2021

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 2321 Temple Ln. Rockville VA 23146	
	Owner Larry & Sarah Collawn	Phone # 804-878-8927
	Address 2321 Temple Ln. Rockville Va 23146	Email collawns@gmail.com

APPLICANT INFORMATION	Applicant/Contact Larry Collawn		Phone # 804-878-8927
	Address 2321 Temple LN. Rockville Va 23146		Email collawns@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Temple Heights</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from Pylon</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>RR</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>[Signature]</u> Date: <u>10/17/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: Build new garage				
	Proposed Use Garage	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 816	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>112.98</u>
Value of Work <u>20,000 22,440.00</u>		State Levy Fee	\$ <u>2.26</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>140.24</u>

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

Signature of Applicant: [Signature] Date: 10/1/2021



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: 8.20.2021
 Permit Number: BP-2021-01021
 GPIN/Tax Map: 6708-81-9253 / 4315-0-10-0
 Issued: 10-8-2021

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>2368 Twin Creeks Ln. Maidens Va. 23102</u>	
	Owner <u>Catherine J. Kelley</u>	Phone # <u>(804) 938-8059</u>
APPLICANT INFORMATION	Address <u>2368 Twin Creeks Ln. Maidens VA 23102</u>	
	Applicant/Contact <u>Same as owner</u>	Phone # <u>(804) 317-1998</u>
	Address <u>SAME AS OWNER</u>	
	Email <u>CONTRAGUY1@GMAIL.COM</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Chelsea</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from P.U. REV</u>	Center Line Setback _____	Rear Setback <u>5' 55'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>8/25/21</u>			

CONTRACTOR INFORMATION	Contractor <u>OWNER</u>	Phone <u>(804) 938-8059</u> <u>(804) 317-1998</u>
	Address <u>SAME AS OWNER</u>	Email <u>Catherine Kelley@icloud.com</u> <u>CONTRAGUY1@GMAIL.COM</u>
	Contractor License Number	Type _____
		Expiration _____

DESCRIPTION OF WORK	Scope of Work: <u>30x45 detached garage w/ unfinished storage above</u>				
	Proposed Use <u>Residential</u>	Current Use <u>Res.</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>1350</u>	Unfinished Sq. Ft. <u>1000</u>	Total Sq. Ft. <u>2350</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>1002.00</u>
Value of Work	<u>\$219,270.00</u>	State Levy Fee	\$ <u>20.70</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.-</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>1043.69</u>
Signature of Applicant	<u>Catherine J. Kelley</u>	Date	<u>8/20/2021</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9-16-21
 Permit Number: BP-2021-01115
 GPIN/Tax Map: 7715-23-9825 / 58-1-0-31-0
 Issued: 10-8-21
 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: 966 HERMITAGE RD. MANANKIN SABOT, VA 23103 ^{SITE #R1851}
 Owner: BERNARD MANATU JR
 Address: 966 HERMITAGE RD. MANANKIN SABOT
 Phone #: 276-431-3469
 Email: UNKNOWN

APPLICANT INFORMATION
 Applicant/Contact: JENNIFER STURGEON ^{VA 23103}
 Address: 2310 VAULETTA LN. LOUISVILLE, KY 40205
 Phone #: 502-817-1964
 Email: jennifer.sturgeon@jacobs.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 75' from R/L ROW Center Line Setback: 100' Rear Setback: 5' CUP/Variance/COA: CU-2019-18
 Side Setback: 5' Side Setback: 5' Flood Zone: _____
 APPROVED REJECTED COMMENTS: * No change to existing footprint.
 Planning & Zoning Officer: [Signature] Date: 9/24/21

CONTRACTOR INFORMATION
 Contractor: JACOBS TELECOMMUNICATIONS, INC. Phone: 502-817-1964
 Address: 4801 COX ROAD, SUITE 302 Email: jennifer.sturgeon@jacobs.com
GLEN ALLEN, VA 23060
 Contractor License Number: 2705066988 Type: CLASS A CONT Expiration: 3-31-2022
H/H

DESCRIPTION OF WORK
 Scope of Work: AT&T TO INSTALL 6 ANTENNAS ON EXISTING TOWER AND PLACE A WALK-IN CABINET AND GENERATOR IN EXISTING COMPOUND ON CONCRETE PIERS
 Proposed Use: CELL TOWER COLD Current Use: CELL TOWER Environmental Impacts (stream crossing, wetlands, amt land disturbed): N/A
 SEWER: Public/Private: _____ WATER: Public/Private: _____ # of Bathrooms: _____ # of Bedrooms: _____ # of floors: _____
 Finished Sq. Ft.: _____ Unfinished Sq. Ft.: _____ Total Sq. Ft.: _____

Building Only - Excludes All Trades Permits
 Value of Work: \$ 40,000.00
 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: Jennifer Sturgeon Date: 9-16-21
 Application Fee: \$ 300.00
 State Levy Fee: \$ 6.00
 Septic/Well Fee: \$ _____
 Zoning Fee: \$ 100.00
 RLD: \$ _____
 SWP: \$ _____
 Total: \$ 40600

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Telephone:

Mailing Address:

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE u # STORIES NA CONSTRUCTION TYPE TB OCCUPANT LOAD NA CODE EDITION 18

FIRE SPRINKLER NA FIRE ALARM NA MODIFICATION No

APPROVAL DATE 10-08-21

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

Application Date: 9-1-21

Permit Number: BP-2021-01069

GPIN/Tax Map: 7728-51-2025 / 48-10-0-B-0

Issued: 10-12-21

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

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

Residential Commercial

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

OWNER INFORMATION	Site Address <u>2200 Lanier Ln Rockville, VA 23146</u>		Phone # <u>804-664-4117</u>
	Owner <u>Rocstone Warehouse 17, LLC</u>		Email <u>cirby@manatincos.com</u>
	Address <u>P.O. Box 202 Manakin Sabot, VA 23103</u>		Phone # <u>804-664-4117</u>
APPLICANT INFORMATION	Applicant/Contact <u>Chris Irby</u>		Email <u>cirby@manatincos.com</u>
	Address <u>P.O. Box 202 Manakin Sabot, VA 23103</u>		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lanier</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>No change to front porch, office use permitted.</u>		
Planning & Zoning Officer <u>[Signature]</u>	Date <u>9/12/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Manakin Companies Construction LLC</u>		Phone <u>804-664-4117</u>
	Address <u>123 Libbie Avenue Richmond, VA 23226</u>		Email <u>cirby@manatincos.com</u>
	Contractor License Number <u>2705112472</u>	Type <u>A</u>	Expiration <u>2-26-23</u>

Scope of Work: Build offices in a new warehouse structure. - Metal Prefab

Proposed Use <u>Offices</u>	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>4</u>	# of Bedrooms <u>0</u>	# of floors <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. <u>807</u>	Unfinished Sq. Ft. <u>7,693</u>	Total Sq. Ft. <u>8,500</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>35,960 / \$561,000</u>
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Application Fee	\$ <u>4,207.50</u>
State Levy Fee	\$ <u>84.15</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>4,391.65</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 9/30/21



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: 28 september 2021

Permit Number: BP-2021-01200

GPIN/Tax Map: 0737-63-1362/40-40-B-3

Issued: 10-14-21

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.

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	3903 Terry Lane Goochland, Va 23063	
	Owner	Ronnie M. Davis	Phone # 717-576-2494
APPLICANT INFORMATION	Address	3903 Terry Lane Goochland Va	Email rmalcomdavis@gmail.com
	Applicant/Contact	same as above	Phone # same as above
TO BE COMPLETED BY ZONING DEPARTMENT	Address	same as above	Email same as above

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
CONTRACTOR INFORMATION	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Date <u>10/7/21</u>		

CONTRACTOR INFORMATION	Contractor	Phone	
	Address	Email	
DESCRIPTION OF WORK	Contractor License Number	Type	Expiration
	Scope of Work: <u>carport</u>		

DESCRIPTION OF WORK	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Car/boat shed	n/a	n/a		
DESCRIPTION OF WORK	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
			n/a	n/a	1
DESCRIPTION OF WORK	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.	Unfinished Sq. Ft.	Total Sq. Ft.	
		n/a	448	448	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>42.24</u>
Value of Work	\$4,165.00 <u>\$6,720.00</u>	State Levy Fee	\$ <u>.84</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
Signature of Applicant <u>[Signature]</u> Date <u>29 Sep 21</u>		SWP	\$
		Total	\$ <u>68.08</u>



BUILDING PERMIT APPLICATION

Application Date: 9-3-2021

Permit Number: BP-2021-01081

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

Issued: 10-13-2021

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

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

Residential Commercial

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

OWNER INFORMATION	Site Address	1800 Sandy Hook Rd Suite # 332
	Owner	Goochland County
APPLICANT INFORMATION	Address	P.O. Box 10, Goochland, VA 23063
	Applicant/Contact	Sermet Construction

Phone # 804-556-5802
 Email
 Phone # 804-264-4800
 Email RHASKELL@SERMAT.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	N/A	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		R3	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: All interior work.		Planning & Zoning Officer	Date		9/8/21

CONTRACTOR INFORMATION	Contractor	Sermet Construction	Phone	804-264-4800
	Address	2419 Westwood Ave Richmond VA 23230	Email	RHASKELL@SERMAT.COM
	Contractor License Number	2701025440 CBL-RBC	Type	A

DESCRIPTION OF WORK	Scope of Work: Build New Partition Wall In "IT" Room to separate Main Server - wall will be approx 22 Ft long with 1-Door			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	Commercial	Commercial	# of Bathrooms existing	# of Bedrooms N/A
	SEWER Public/Private	WATER Public/Private	# of floors N/A	Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$
Value of Work	\$8,000	State Levy 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.		Zoning Fee	\$
		RLD	\$
		SWP	\$
		Total	\$
Signature of Applicant	[Signature]	Date	9/1/21



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: 9/21/21

Permit Number: BP-2021-01138

GPIN/Tax Map: 6749-86-2147/29-1-0-86-07

Issued: 10-14-2021

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

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

9-22

OWNER INFORMATION	Site Address	2748 Dogtown Road Goochland, VA 23063		
	Owner	Goochland County		Phone #
APPLICANT INFORMATION	Address	2748 Dogtown Road		Email
	Applicant/Contact	Jessica Kronberg		Phone #
	Address	2748 Dogtown Road		Email
				804-314-5014
				jkronberg@goochlandva.us

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: * No change to existing footprint		
	Planning & Zoning Officer	Date		9/27/21

CONTRACTOR INFORMATION	Contractor	County Staff		Phone
	Address	1400 Sandy Hook Road Goochland VA		Email
	Contractor License Number	Type	Expiration	
				804 556-5854
				jkronberg@goochlandva.us

DESCRIPTION OF WORK	Scope of Work:			
	Demolition of non-load bearing walls and drop ceiling to restore old shop. Build one wall back with door to create a small office.			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	Shop	storage	none	
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		0	0	
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	\$ 10,000
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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: Date: 9/20/21

Application Fee	\$
State Levy Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$

County Project See Survey



BUILDING PERMIT APPLICATION

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

Application Date: 8-25-21

Permit Number: BP-2021-01040

GPIN/Tax Map: 7724-23-1627

Issued: 10-15-21

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: 291,293,295 Creekmore Place Goochland, VA 23238

Owner: LeGault Homes LLC Phone #: 804-747-1943

Address: 11520 Nuckols Rd Ste 110 Glen Allen, VA 23059 Email: Kevin@LeGaultHomes.com

APPLICANT INFORMATION
Applicant/Contact: Kevin Young Phone #: 804-747-1943

Address: 11520 Nuckols Rd Ste 110 Glen Allen, VA 23059 Email: Kevin@LeGaultHomes.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: Creekmore Place Proffer: Yes No Amount: Date Paid:
Front Setback: 40 from P/L/P/W Center Line Setback: 65' Rear Setback: 25' CUP/Variance/COA:
Side Setback: Left Side 35' Side Setback: 10/25' Flood Zone: R3
APPROVED REJECTED COMMENTS: Survey Locate Setbacks.
Planning & Zoning Officer: David Perry Date: 8/27/21

CONTRACTOR INFORMATION
Contractor: LeGault Homes LLC Phone: 804-747-1943

Address: 11520 Nuckols Rd Ste 110 Glen Allen, VA 23059 Email: Kevin@LeGaultHomes.com

Contractor License Number: 2705133306 Type: A Expiration: 2/28/2022

DESCRIPTION OF WORK
Scope of Work: New construction multi family home

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NO / 11,350</u>		
SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>9</u>	# of Bedrooms <u>8</u>	# of floors <u>2</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No <u>No</u>	Finished Sq. Ft. <u>6,397</u>	Unfinished Sq. Ft. <u>2,139</u>	Total Sq. Ft. <u>8,536</u>	

Building Only - Excludes All Trades Permits
Value of Work: ~~\$810,820~~ \$634,652.50 \$870,672.00

Application Fee	\$ <u>6,530.04</u>
State Levy Fee	\$ <u>130.60</u>
Zoning Fee	\$ <u>100</u>
RLD	\$ <u>100</u>
SWP	\$ <u>200</u>
Total	\$ <u>7,060.64</u>

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

Signature of Applicant: [Signature] Date: 8/23/21

LIEN AGENT INFORMATION

Please check one of the following:

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

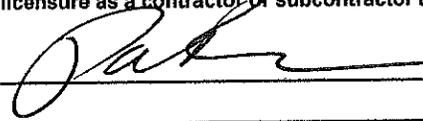
I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: Bankers Title LLC Telephone: (800) 830-1414

Mailing Address: 9011 Arboretum Pkwy #110 Richmond, VA 23236

OWNER'S STATEMENT

I Pat LeGault of (address) 11520 Nuckols Rd Ste 110 Glen Allen, VA 23059 affirm that I am the owner of a certain tract of parcel of land located at 291 Creekmore Place Goochland, VA 23238 and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

 Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

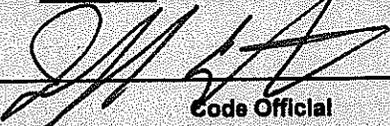
Commercial fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

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

OFFICE USE ONLY

USE 5B # STORIES 2 CONSTRUCTION TYPE V/B OCCUPANT LOAD 3 per unit CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL  DATE 9/29/2021
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 9/30/2021

Permit Number: BP-2021-01213

GPIN/Tax Map: 7716-60-9516/58-51-0-14-0

Issued: 10-19-21

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

Residential Commercial

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

OWNER INFORMATION	Site Address	1276 Hammock Circle (lot14) Manakin Sabot 23238			
	Owner	Mike & Alyssa Chalifoux	Phone #	804-240-4388	
APPLICANT INFORMATION	Address	1276 Hammock Circle, Manakin Sabot 23238			
	Applicant/Contact	Travis Jowers	Phone #	804-749-4706	
	Address	2175 Lanier Lane, Rockville, VA 23146		Email	travis@ultimatepools.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Tuckahoe Creek</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>Behind Main Bldg</u>		<u>5'</u>	
Side Setback	Side Setback	Flood Zone		
	<u>5'</u>	<u>5'</u>		<u>R PD</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* Approves For Pool only.</u>		
	Planning & Zoning Officer <u>David Floyd</u>	Date	<u>10/13/21</u>	

CONTRACTOR INFORMATION	Contractor	Ultimate Pools	Phone	804-749-4706
	Address	2175 Lanier Lane, Rockville, VA 23146		
	Contractor License Number	2705026339	Type	Class A, CBC,RBC,RFC
			Expiration	02/28/2023

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

Building Only - Excludes All Trades Permits

Value of Work	30,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 9/30/2021

Application Fee	\$ 147.00
State Levy Fee	\$ 2.94
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 174.94



BUILDING PERMIT APPLICATION

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

Application Date: 10/1/2021

Permit Number: BP-2021-01215

GPIN/Tax Map: 7733-85-4836 / 68-4-0-8-0

Issued: 10-19-21

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

Residential Commercial

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

OWNER INFORMATION
 Site Address: **304 Randolph Square Parkway, Richmond 23238**

Owner: **Shane & Sarah Maley** Phone #: **804-347-1229**

Address: **304 Randolph Square Parkway Richmond 23238** Email: _____

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

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

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Randolph Square Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: Behind Main Bldg. Center Line Setback: _____ Rear Setback: 5' CUP/Variance/COA: _____

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

APPROVED REJECTED COMMENTS: * Approval for Pool only. RPad
 Planning & Zoning Officer: Daniel Floyd Date: 10/13/21

CONTRACTOR INFORMATION
 Contractor: **Ultimate Pools** Phone: **804-749-4706**

Address: **2175 Lanier Lane, Rockville, VA 23146**

Contractor License Number: **2705026339** Type: **Class A, CBC, RBC, RFC** Expiration: **02/28/2023**

DESCRIPTION OF WORK
 Scope of Work: **In-Ground Pool 18' x 40' Rectangle with Auto Cover**

Proposed Use	Current Use	Existing Buildings on Property	# of Floors
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SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
--------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------	----------------	---------------

Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
		684

Building Only - Excludes All Trades Permits

Value of Work	30,000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 10/1/2021

Application Fee	\$ <u>147.00</u>
State Levy Fee	\$ <u>2.94</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>174.94</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

 Residential

 Commercial

 Application Date: 3-12-21

 Permit Number: BP-2021-00298

 GPIN/Tax Map: 5789-97-8134 / 15-1-0-7-A

 Issued: 5-17-2021

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 6276 River Road West Columbia, VA 23038		Phone # 804-690-1155
	Owner Rassawek Farm LLC	Email joefields@rassawek.com	
	Address 6276 River Road West Columbia, VA 23038		

APPLICANT INFORMATION	Applicant/Contact Jessica Jessee		Phone # 804-380-5303
	Address 6276 River Road West Columbia, VA 23038		Email jessica@rassawek.com

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>110' from P/L Row</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>POD-2021-6</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	<u>AI</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Per J. Sherry, POD has been approved</u> Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>3/22/21</u>			

CONTRACTOR INFORMATION	Contractor Owner		Phone 804-690-1155
	Address 12346 Casco Mill Lane Montpelier, VA		Email joefields@rassawek.com
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>revised 10-15-21 to include pavilion w/ bathroom bathroom & warmer addition</u> <small>Relocated train cars (caboose, boxcar and Pullman car), relocated country store, two relocated cabins, relocated machine shop building, relocated hanger building</small>				
	Proposed Use Private, Short Term Rentals, Events	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms See attached Spreadsheet	# of Bedrooms See attached Spreadsheet	# of floors See attached Spreadsheet
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. See attached Spreadsheet	Unfinished Sq. Ft. See attached Spreadsheet	Total Sq. Ft. See attached Spreadsheet	

Building Only - Excludes All Trades Permits Value of Work <u>\$311,350.00</u>		Application Fee \$ <u>2,335.13</u> State Levy Fee \$ <u>46.70</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>4100.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>2,481.83</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>(see attached copy)</u> 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

Application Date: 10-7-2021
 Permit Number: BP-2021-01217
 GPIN/Tax Map: 7717-02-2913/46-1-0-118-0
 Issued: 10-19-2021
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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>2352 Manakin Road</u>	
	Owner	<u>David McGeorge</u>	Phone # <u>804-357-8176</u>
APPLICANT INFORMATION	Address	<u>2352 Manakin Rd Manakin Sabot VA 23103</u>	
	Applicant/Contact	<u>Jeremy Hallock</u>	Phone # <u>804-513-6063</u>
	Address	<u>6740 Monahan Road Henrico VA 23231</u>	
			Email <u>hallock24@gmail.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>		<u>—</u>	<u>—</u>
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>55' from P.C. Row</u>		<u>5'</u>	
Side Setback	Side Setback	Flood Zone	<u>A2</u>	
	<u>5'</u>	<u>5'</u>	<u>X/A</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS:		
	Planning & Zoning Officer <u>[Signature]</u>	Date <u>10/13/21</u>		

CONTRACTOR INFORMATION	Contractor	<u>GLH Systems & Controls Inc</u>	Phone	<u>804-513-6063</u>
	Address	<u>4667 Love Mill Road Stanfield NC 28163</u>	Email	<u>hallock24@gmail.com</u>
	Contractor License Number	<u>2705089445</u>	Type	<u>Class B BLD/ELE</u>
			Expiration	<u>11-30-22</u>

DESCRIPTION OF WORK	Scope of Work:	<u>Build detached garage 40'x40' 16x40 above storage</u>		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<u>garage</u>		<u>N/A</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
		<u>0</u>	<u>0</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>(No)</u>		<u>2240</u>	<u>1600</u>	<u>2240</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>65,000.00</u>
---------------	------------------

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

Signature of Applicant [Signature] Date 10-6-21

Application Fee	\$ <u>339.60</u>
State Levy Fee	\$ <u>6.79</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u>—</u>
SWP	\$ <u>—</u>
Total	\$ <u>371.39</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: 10-6-21

Permit Number: BP-2021-01199

GPIN/Tax Map: 6735-39-8366 / 51-8-0-7-0

Issued: 10-21-21

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

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>966 HARD ROCK LA, GOOCHLAND, VA, 23063</u>	Phone # <u>(804) 489-9295</u>
	Owner <u>John H. Ware III</u>	Email <u>Wareuat3@yahoo.com</u>
	Address <u>966 HARD ROCK LA.</u>	Phone # <u>SAME</u>
APPLICANT INFORMATION	Applicant/Contact <u>SAME</u>	Email <u>SAME</u>
	Address <u>SAME</u>	Phone # <u>SAME</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>55' from P4/RW</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>30'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>10/19/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>install 1999 singlewide mobile home - 14x76</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 including reserve drain fields? Yes / No	Finished Sq. Ft. <u>25</u>	# of Bathrooms <u>2</u>	# of Bedrooms <u>2</u>	# of floors <u>1</u>
	Total Sq. Ft. <u>1,064</u>				

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>166.00</u>
Value of Work <u>\$12,000</u>		State Levy Fee	\$ <u>1.32-</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>50.00-</u>
Signature of Applicant <u>J. Ware III</u> Date <u>10-1-21</u>		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>177.32</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: 10-13-21
 Permit Number: BP-2021-01239
 GPIN/Tax Map: 7124-11-4504/VA-22-B-26-0
 Issued: 10-26-21

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>13266 ARBON ST Henning VA 23228</u>		Phone # <u>804-222-9000</u>
	Owner <u>Jory Kaper</u>	Email <u>jkaper@kapert.com</u>	
	Address <u>13266 ARBON ST Henning VA 23228</u>	Phone # <u>804-222-9000</u>	
APPLICANT INFORMATION	Applicant/Contact <u>Walsh Builders Inc</u>		Phone # <u>804-222-9000</u>
	Address <u>977 Glens Landing Rd Centerville VA 23041</u>		Email <u>walshbuilders.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Rivergate</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>---</u>	Date Paid <u>---</u>
	Front Setback <u>40' from P/R/W</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>RI</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>---</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>10/14/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Walsh Builders Inc</u>		Phone <u>804-222-9000</u>
	Address <u>977 Glens Landing Rd Centerville VA 23041</u>		Email <u>walshbuilders.com</u>
	Contractor License Number <u>2701-024134</u>	Type <u>---</u>	Expiration <u>---</u>

DESCRIPTION OF WORK	Scope of Work: <u>Construct 600sq ft gazebo</u>				
	Proposed Use	Current Use <u>None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>SEWER</u> Public/Private	<u>WATER</u> Public/Private	# of Bathrooms	# of Bedrooms	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>600</u>	Total Sq. Ft. <u>600</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>349.00</u>
Value of Work	<u>75000</u>	State Levy Fee	\$ <u>6.99</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ <u>---</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>---</u>
		SWP	\$ <u>---</u>
		Total	\$ <u>381.49</u>
Signature of Applicant: <u>[Signature]</u> Date: <u>---</u>			



BUILDING PERMIT APPLICATION

Application Date: 10/19/2021

Permit Number: BP-2021-01270

GPIN/Tax Map: 6840-49-5461/20-1-0-50-A

Issued: 10-26-21

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 3780 Harris Lane	
	Owner David DeLand	Phone # 18048379549
	Address 3780 Harris Lane Gum Spring Va	
	Email	

APPLICANT INFORMATION	Applicant/Contact Jack Stewart-Jonte	
	Address 7540 Tangle Ridge Dr Mechanicsville Va 23111	Phone # 8043858222
	Email jack@brindletan.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>No changes to existing footprint/use.</i>	
	Planning & Zoning Officer <i>David Lloyd</i>		Date <i>10/21/21</i>	

CONTRACTOR INFORMATION	Contractor Brindle & Tan Construction, LLC		Phone 8043858222
	Address 7540 Tangle Ridge Dr Mechanicsville Va 23111		Email jack@brindletan.com
	Contractor License Number 2705173691	Type HIC	Expiration 3/31/2022

DESCRIPTION OF WORK	Scope of Work: <i>Finish off a ^{basement} workshop + Rec Room + kitchen</i>		
	Installing gypsum drywall board throughout space and finishing ready for paint. Electrical subcontractor, (Ruggeri Electric) will file a trade permit to install duplexes and additional lights throughout.		
	Proposed Use Finishing the space.	Current Use Storage.	Environmental Impacts (stream crossing, wetlands, amt land disturbed) No land disturbance
	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. 1421	Unfinished Sq. Ft. 160	Total Sq. Ft. 1581

Building Only - Excludes All Trades Permits		Application Fee \$ <u>50.47</u>
Value of Work 8550		State Levy Fee \$ <u>1.01</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25.00</u>
Signature of Applicant <i>Jack Stewart-Jonte</i>	Date	RLD \$
		SWP \$
		Total \$ <u>76.48</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: 10/13/21
 Permit Number: BP-2021-01242
 GPIN/Tax Map: 715-84-8787 / 58-1-0-45-D
 Issued: 10-27-2021
 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: 1010 Hockett Rd, Manakin-Sabot, VA 23103
 Owner: Louis Proffitt
 Address: Same
 Phone #: 804-784-4375
 Email:

APPLICANT INFORMATION
 Applicant/Contact: Betsy Owen
 Address: 2152 Ashland Rd, Rockville, VA 23146
 Phone #: 804-874-0641
 Email: betsyowen@1684.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A
 Proffer: Yes No
 Amount: —
 Date Paid: —
 Front Setback: 100' from Pylon
 Center Line Setback: 125'
 Rear Setback: 5'
 Side Setback: 5'
 Side Setback: 5'
 Flood Zone: —
 CUP/Variance/COA: —

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: David [Signature] Date: 10/14/21

CONTRACTOR INFORMATION
 Contractor: Owner
 Address:
 Phone: 804-784-4375
 Email:
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: Metal garage. (31x44 detached garage)

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.	
		1,364		

Building Only - Excludes All Trades Permits
 Value of Work: 22,066.41 - 37,510⁰⁰
 I hereby acknowledge that I have read this 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: Bowen Date: _____

Application Fee	\$ 180.79
State Levy Fee	\$ 3.62
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 209.41



BUILDING PERMIT APPLICATION

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

Application Date: 10-12-21

Permit Number: BP-2021-01257

GPIN/Tax Map: 7706-32-1431/57-3-0-2-0

Issued: 10-28-21

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

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

OWNER INFORMATION	Site Address <u>1409 Millers Lane</u>		Phone # <u>804-928-3470</u>
	Owner <u>Robert + Robin Bamberger</u>		Email <u>bob.bamberger@marshmtn.com</u>
APPLICANT INFORMATION	Address <u>1300 Doner Creek Lane 23103</u> <i>Marakin/Sabot</i>		Phone # <u>804-370-9435</u>
	Applicant/Contact <u>Ray Praught / R A Praught Cons. Inc.</u>		Email <u>ray@rapraught.com</u>
	Address <u>9524 Downing St. Richmond VA 23238</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>75' from P4 Row</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>—</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>5'</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>10/19/21</u>				

CONTRACTOR INFORMATION	Contractor <u>R A Praught Construction, Inc.</u>		Phone <u>804-370-9435</u>
	Address <u>9524 Downing St. Richmond VA 23238</u>		Email <u>ray@rapraught.com</u>
	Contractor License Number <u>2705060599</u>	Type <u>class A</u>	Expiration <u>2-28-23</u>

DESCRIPTION OF WORK	Scope of Work: <u>28x30-Studio</u> <u>Build Studio + Greenhouse</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u>	# of Bedrooms <u>—</u>	# of floors <u>—</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>880</u>	Unfinished Sq. Ft. <u>214</u>	Total Sq. Ft. <u>1094</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>1,127.10</u>
Value of Work <u>\$247,800</u>		State Levy Fee	\$ <u>22.54</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
Signature of Applicant <u>Raymond Praught</u>		RLD	\$ <u>—</u>
Date <u>10-12-21</u>		SWP	\$ <u>—</u>
		Total REVIEW	\$ <u>1,174.64</u>
		BY: <u>MICHAEL BECKING</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

RECEIVED
94.86
10/29

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 10-20-21

Permit #: ELI-2021-01305

GPIN:

Tax Map:

LOCATION

Street Address: 3007 Sandy Hook Rd, Sandy Hook, VA 23153

PROPERTY OWNERSHIP

Name: Steven Wilson Phone: 804 441-4808

Mailing Address: 3007 Sandy Hook Rd, Sandy Hook VA 23153 Email: stwilson@comcast.net

APPLICANT

Name: Scarlett Honsbell/Clark Home Solutions LLC Phone: 804.302.4200

Address: 9830 West Broad St. Richmond VA 23060 Email: SHonsbell@GeneratorSupercenter.com

CONTRACTOR

Name: Clark Home Solutions LLC Phone: 540 270 9232

Mailing Address: 14018 Sullyfield Cir Ste E Email: SHonsbell@generatorsupercenter.com

Gas Certification: YES NO

State License Number: 2705176647 Expiration: 8/31/22 License Type: Masters Class: A

DESCRIPTION OF WORK

22kW generator installation - Buried electrical 5' to home - Run in open crawlspace 4 partial unfinished basement to meter/ATS

of Bathrooms: Service Size: Power Company: Inquiry #:

Value of Work (required): 16000.00

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: Steve Wilson Date: 10-20-21

Approval: Gary Fisher Office Use Only Approval date: 10/29/21

Permit Fee: 94.86 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

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

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

Date: 10-18-21

Permit #: 211-2021-01256

GPIN:

Tax Map:

LOCATION

Street Address: 3051 ROCKY CREEK LANE 23065

PROPERTY OWNERSHIP

Name: JASON WATSON Phone: 804-570-3763

Mailing Address: 3051 ROCKY CREEK LANE Email: JWATSON5663@GMAIL.COM

APPLICANT

Name: Virginia Power Solutions Phone: 804-365-0263

Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: JENYSTALLS@viriniapowersolutions.com

CONTRACTOR

Name: Virginia Power Solutions Phone: 804-365-0263

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: JENYSTALLS@viriniapowersolutions.com

Gas Certification: YES NO

State License Number: 2705123991 Expiration: 8/31/22 License Type: ELE, GFC Class: B

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR & ZODA 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: 9/28/21



67.32 Fisher

(owner's statement on back)

ISSUED 10-18-21



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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date <i>10-14-21</i>
Permit # <i>11-2021-01249</i>
GPIN
Tax Map

LOCATION

Street Address *1913 HASKIN ROAD 23063*

PROPERTY OWNERSHIP

Name <i>ERIN LONG</i>	Phone <i>804-350-3619</i>
Mailing Address <i>1913 HASKIN ROAD 23063</i>	Email <i>ERINELONG@ME.COM</i>

APPLICANT

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

CONTRACTOR

Name Virgina Power Solutions	Phone 804-365-0263
Mailing Address 10102 Whitesel Road, B, Ashland, VA 23005	Email INSTALS@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 24 KW GENERATOR & 2-200A SWITCHES.

GAS BY OTHERS

# of Bathrooms	Service Size	Power Company <i>DOMERSON</i>	Inquiry #
Value of Work (required) <i>\$ 19,000.00</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: *[Signature]* Date: *9/29/21*

Office Use Only

Approval date: _____

Issue date: _____

B 67.32

(owner's statement on back)

10-14-21



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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 10/13/21

Permit #: 212021-0247

GPIN:

Tax Map:

LOCATION

Street Address: 93 KINLOCH LANE

PROPERTY OWNERSHIP

Name: THOMAS POWERS

Phone: 804-305-2089

Mailing Address: 93 KINLOCH LANE

Email: T.POWERS01@COMCAST.NET

APPLICANT

Name: Virginia Power Solutions

Phone: 804-365-0263

Address: 10102 Whitesel Road, B, Ashland, VA 23005

Email: JVS7ALLS@virginiapowersolutions.com

CONTRACTOR

Name: Virginia Power Solutions

Phone: 804-365-0263

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005

Email: JVS7ALLS@virginiapowersolutions.com

Gas Certification: YES NO

State License Number: 2705123991

Expiration: 8/31/22

License Type: ELE, GFC

Class: B

DESCRIPTION OF WORK

REPLACE EXISTING GENERATOR & SWITCH WITH 24kw & 2-200A SWITCHES

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: 10/13/21

Office Use Only

Approval date: _____

Issued date: _____

67.32

(owner's statement on back)

10-14-21



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

RECEIVED
10/13/21

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date 10-1-21
Permit # ELI-2021-01240
GPIN
Tax Map

LOCATION

Street Address
2975 Willow Trace Lane

PROPERTY OWNERSHIP

Name Urish Jeros	Phone 804 556-2298
Mailing Address 2975 Willow Trace Lane, Sandy Hook VA 23153	Email urharley@aol.com

APPLICANT

Name Scarlett Honshell/Clark Home Solutions LLC	Phone 804.302.4200
Address 9830 West Broad St. Richmond VA 23060	Email Honshell@GeneratorSupercenter.com

CONTRACTOR

Name Clark Home Solutions LLC		Phone 540 270 9232	
Mailing Address 14018 Sullyfield Cir Ste E		Email RMDexter@generatorsupercenter.com	
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705176647	Expiration 8/31/22	License Type Masters
		Class A	

DESCRIPTION OF WORK

200W generator installation - 33 foot electrical run from 200AMP service to generator.

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$ 12320.			

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

Signature of Applicant: R. M. Dent Date: 10-1-21

Approval: Mary Fisher	Office Use Only Approval date: 10/13/21
Permit Fee: 77.97	Issued date: _____

RECEIVED

102.62
10/13/21



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

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

Date: 10-1-2021

Permit #: ELI-2021-01236

GPIN

Tax Map

LOCATION

Street Address: 707 Saw Dust Drive

PROPERTY OWNERSHIP

Name: Bob Northern

Phone: 804 218-9280

Mailing Address: 707 Saw Dust Dr, Manakin-Sabot

Email: bob@bobnorthern.com

APPLICANT

Name: Scarlett Honshell/Clark Home Solutions LLC

Phone: 804.302.4200

Address: 9830 West Broad St. Richmond VA 23060

Email: Honshell@GeneratorSupercenter.com

CONTRACTOR

Name: Clark Home Solutions LLC

Phone: 540 270 9232

Mailing Address: 14018 Sullyfield Cir Ste E

Email: RMDexter@generatorsupercenter.com

State License Number: 2705176647

Expiration: 8/31/22

License Type: Masters

Class: A

Gas Certification: YES NO

DESCRIPTION OF WORK

24kW generator installation - 35ft electrical run from meter through crawl space to generator

of Bathrooms: _____ Service Size: _____ Power Company: _____ Inquiry #: _____

Value of Work (required): \$ 17690.

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: 10-1-21

Approval: Gary Fisher Office Use Only

Permit Fee: 102.62

Approval date: 10/13/21

Issued date: _____

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

74.66 \$ fee
RECEIVED
10/6/21

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date

Permit # ELI-GAS-2-202100868

GPIN

Tax Map

LOCATION

Street Address 3764 Grays Lane, Goochland, VA 23063

PROPERTY OWNERSHIP

Name	<u>Kathy Glover</u>	Phone	<u>(804) 387-5054</u>
Mailing Address	<u>3764 Grays Lane, Goochland VA 23063</u>	Email	<u>kathy.glover@capitalone.com</u>

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.com</u>

CONTRACTOR

Name	<u>Clark Home Solutions LLC</u>			Phone	<u>540-270-9232</u>
Mailing Address				Email	<u>GCLARK@GeneratorSupercenter.com</u>
Gas Certification	YES <input checked="" type="checkbox"/> NO <input 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

Installation of a 24kw Generac Generator to a 200amp panel with a 30ft run electrical to an above ground propane tank with a 100ft gas run.

of Bathrooms _____ Service Size _____ Power Company _____ Inquiry # _____

Value of Work (required) \$ 11,600.00

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: Rose-Mae Dexter Date: 7/1/21

Approval: <u>Pary Fisher</u>	Office Use Only	Approval date: <u>10/6/21</u>
Permit Fee: <u>74.66</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

#87.98
RECEIVED
10/5/21

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

Date 9-15-21
Permit # EL-2021-01197
GPIN
Tax Map

LOCATION

Street Address **740 Lee Road, Crozier VA 23039**

PROPERTY OWNERSHIP

Name Janice Lofland	Phone 804-337-1477
Mailing Address 740 Lee Rd Crozier VA	Email JLofland740@gmail.com

APPLICANT

Name Scarlett Honshell/Clark Home Solutions LLC	Phone 804.302.4200
Address 9830 West Broad St. Richmond VA 23060	Email Honshell@GeneratorSupercenter.com

CONTRACTOR

Name Clark Home Solutions LLC		Phone 540 270 9232
Mailing Address 14018 Sullyfield Cir Ste E		Email
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705176647	Expiration 8/31/22
		License Type Masters Class A

DESCRIPTION OF WORK

24kw generator installation with a 60ft electrical run from 200 amp ATS on Backway to generator

# of Bathrooms	Service Size	Power Company Dominion	Inquiry #
Value of Work (required) \$ 14,500.00			

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 *Don Mander* Date: 9-15-21

Approval: <u><i>Gary Fisher</i></u>	Office Use Only
Permit Fee: <u>87.98</u>	Approval date: <u>10/6/21</u>
	Issued date: _____

(owner's statement on back)

RECEIVED
BY: 17-05
10/6/21



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

Type:
 Commercial
 Residential
 Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date
 Permit # EW-2021-01198
 GPIN
 Tax Map

LOCATION

Street Address
2130 Withers Lane

PROPERTY OWNERSHIP

Name Daniel Phillips Phone 804 512 0613
 Mailing Address 2130 Withers Lane, Maidens, VA 23102 Email danielphillips01@gmail.com

APPLICANT

Name Scarlett Honsbell/Clark Home Solutions LLC Phone 804.302.4200
 Address 9830 West Broad St. Richmond VA 23060 Email shonsbell@GeneratorSupercenters.com

CONTRACTOR

Name Clark Home Solutions LLC Phone 540 270 9232
 Mailing Address 14018 Sullyfield Cir Ste E Email
 Gas Certification YES NO
 State License Number 2705176647 Expiration 8/31/22 License Type Masters Class A

DESCRIPTION OF WORK

24kV generator installation with a 10ft buried elec run to meter and placing another 200 amp panel.
 # of Bathrooms _____ Service Size _____ Power Company _____ Inquiry # _____
 Value of Work (required) \$12,120.00

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: Rosemar Rex Date: 9-24-21

Approval: Mary Fisher Office Use Only Approval date: 10/6/21
 Permit Fee: 77.05 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

~~10-12-2021~~

Date 10.11.2021
Permit # EL-2021-01201
GPIN
Tax Map

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

This 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

LOCATION

Street Address 2160 Fairgrounds Rd.

PROPERTY OWNERSHIP

Name Austin & Kelly Highfill	Phone
Mailing Address 2160 Fairgrounds Rd. Maidens VA 23102	Email

APPLICANT

Name Brian Jones	Phone 8045104517
Address 12404 oakhampton Ter. Henrico VA 23233	Email luckydogelectrical18@yahoo.com

CONTRACTOR

Name Lucky Dog Electrical LLC		Phone 8045104517	
Mailing Address 12404 oakhampton Ter. Henrico VA 23233		Email luckydogelectrical18@yahoo.com	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705166892	Expiration 3/31/2022	License Type Contractors
		Class C	

DESCRIPTION OF WORK

Wire for generator			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$500.00			

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: BJ _____ Date: 10.11.2021

Approval: Fisher	Office Use Only Approval date: 10-12-2021
Permit Fee: 30.00	Issued date: 10-12-2021