



# 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~~ 11-5-2021  
 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<br>1010 Hockett Rd, Manakin-Sabot, VA 23103 |                         |
|                   | Owner<br>Louis Proffitt                                  | Phone #<br>804-784-4375 |
|                   | Address<br>Same  | Email                   |

|                       |   |                                   |
|-----------------------|---|-----------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br>Betsy Owen                 | Phone #<br>804-874-0641           |
|                       | Address<br>2152 Ashland Rd, Rockville, VA 23146 | Email<br>betsyowen61684@yahoo.com |

|                                      |   |  |                    |                       |
|--------------------------------------|---|--|--------------------|-----------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>N/A  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>—        | Date Paid<br>—        |
|                                      | Front Setback<br>100' from Pylon  | Center Line Setback<br>125'  | Rear Setback<br>5' | CUP/Variance/COA<br>— |
|                                      | Side Setback<br>5'  | Side Setback<br>5'   | Flood Zone<br>—    |                       |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer: <i>David Boyd</i> Date: 10/14/21 |  |                    |                       |

|                        |                           |                       |
|------------------------|---------------------------|-----------------------|
| CONTRACTOR INFORMATION | Contractor<br>owner       | Phone<br>804-784-4375 |
|                        | Address                   | Email                 |
|                        | Contractor License Number | Type                  |

|                     |   |                         |   |               |             |
|---------------------|---|-------------------------|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: Metal garage. (31x44 detached garage)  |                         |   |               |             |
|                     | Proposed Use  | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | SEWER<br>Public/Private   | WATER<br>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  |                                | Application Fee | \$ 180.79 |
| Value of Work  | 22,066.41 37,510 <sup>00</sup> | State Levy Fee  | \$ 3.62   |
| 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  |
|  |                                | RLD             | \$        |
|  |                                | SWP             | \$        |
|  |                                | Total           | \$ 209.41 |
| Signature of Applicant: <i>Bowen</i>   |                                | Date            |           |

10-26-2021



# BUILDING PERMIT APPLICATION

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

Application Date: 10/22/2021

Permit Number: BP-2021-01298

GPIN/Tax Map: 7724-90-7079/64-28-D-3-0

Issued: 11-5-2021

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 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 <b>170 GRAYASH ROAD, RICHMOND 23238</b> |  |
|                       | Owner <b>GARLAND &amp; ANN GRAY</b>                  | Phone # <b>804-731-4306</b>  |
|                       | Address <b>170 GRAYASH ROAD, RICHMOND 23238</b>      | Email  |
| APPLICANT INFORMATION | Applicant/Contact <b>Travis Jowers</b>               |  |
|                       | Address <b>2175 Lanier Lane, Rockville, VA 23146</b> | Phone # <b>804-749-4706</b><br>Email <b>travis@ultimatepools.com</b> |

|                                      |  |   |                        |                  |  |
|--------------------------------------|--|---|------------------------|------------------|--|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision <u>West Oak</u>  | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                 | Date Paid        |  |
|                                      | Front Setback <u>Behind Main Bldg</u>  | Center Line Setback   | Rear Setback <u>5'</u> | CUP/Variance/COA |  |
|                                      | Side Setback <u>5'</u>   | Side Setback <u>5'</u>  | Flood Zone             |                  |  |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: |   | Date <u>11/1/21</u>    |                  |  |
|                                      | Planning & Zoning Officer <u>David Floyd</u>   |   |                        |                  |  |

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

|                     |   |   |                                |               |
|---------------------|---|---|--------------------------------|---------------|
| DESCRIPTION OF WORK | Scope of Work: <b>In-Ground Pool 15' x 36' Rectangle with Auto Cover</b><br><u>Concrete</u> |   |                                |               |
|                     | Proposed Use  | Current Use   | Existing Buildings on Property | # of Floors   |
|                     | <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>                 | <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/> | # of Bathrooms                 | # of Bedrooms |
|                     | Finished Sq. Ft.  | Unfinished Sq. Ft.  | Total Sq. Ft.                  |               |
|                     |   |   | 540                            |               |

**Building Only - Excludes All Trades Permits**

|               |                  |
|---------------|------------------|
| Value of Work | <b>30,000.00</b> |
|---------------|------------------|

|                 |                  |
|-----------------|------------------|
| 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> |

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 10/22/2021



# BUILDING PERMIT APPLICATION

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

Application Date: 1.13.2021

Permit Number: BP-2021-00057

GPIN/Tax Map: 6778-50-0906 / 43-54-2

Issued: 2-23-21

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

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<br><b>1938 HAWK TOWN RD.</b>                  |   |
|                   | Owner<br><b>WJL Properties LLC - Justin Lacy</b>           | Phone #<br><b>8048392385</b>            |
|                   | Address<br>100 Eastshore Dr. Suite 300 Glen Allen VA 23059 | Email<br>jlacy@fsvllc.advisorstream.com |

|                       |  |  |                                    |
|-----------------------|--|--|------------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br><b>Ellie Owen's LLC - DBA My Country Home</b><br><i>LEON WILLIAMS</i> |  | Phone #<br><b>8049291677</b>       |
|                       | Address<br><b>2696 Valley View Ln. Goochland VA 23063</b>                                  |  | Email<br>build@mycountryhomeva.com |

|                                      |  |  |   |                       |
|--------------------------------------|--|--|---|-----------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><i>None</i>   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>—                                       | Date Paid<br>—        |
|                                      | Front Setback<br><i>55' from PL/ROW</i>  | Center Line Setback<br>—   | Rear Setback<br><i>35'</i>                        | CUP/Variance/COA<br>— |
|                                      | Side Setback<br><i>20'</i>   | Side Setback<br><i>20'</i>   | Flood Zone<br><input checked="" type="checkbox"/> |                       |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer <i>David Floyd</i> Date <i>1/20/21</i> |  |   |                       |

|                        |  |                                 |                                    |
|------------------------|--|---------------------------------|------------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><b>Ellie Owen's LLC: dba My Craftsman Home</b> |                                 | Phone<br><b>8049291677</b>         |
|                        | Address<br><b>2696 Valley View Ln. Goochland VA 23063</b>    |                                 | Email<br>build@mycountryhomeva.com |
|                        | Contractor License Number<br><b>2705173762</b>               | Type<br><b>VA Class A - RBC</b> | Expiration<br><b>11-21-2021</b>    |

|                     |   |  |  |                             |                         |
|---------------------|---|--|--|-----------------------------|-------------------------|
| DESCRIPTION OF WORK | Scope of Work: <b>New Construction - Single Family Residential Home / <i>with attached garage Finishing 405 Sq feet <del>upst</del> 2nd floor</i></b> |  |  |                             |                         |
|                     | Proposed Use<br>Residence   | Current Use<br>Land  | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br><i>61,560</i> |                             |                         |
|                     | SEWER<br><input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>  | WATER<br><input type="checkbox"/> Public/Private <input checked="" type="checkbox"/> | # of Bathrooms<br><b>2.5</b>   | # of Bedrooms<br><b>K 5</b> | # of floors<br><b>2</b> |
|                     | Finished Sq. Ft.<br><i>2134 2539</i>  | Unfinished Sq. Ft.<br><i>1232 827</i>  | Total Sq. Ft.<br><b>3366</b>   |                             |                         |

Building Only - Excludes All Trades Permits

|               |                |
|---------------|----------------|
| Value of Work | <b>336,600</b> |
|---------------|----------------|

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

Signature of Applicant *[Signature]* Date **1/13/2021**

|                 |                    |
|-----------------|--------------------|
| Application Fee | \$ <i>1,526.70</i> |
| State Levy Fee  | \$ <i>30.53</i>    |
| Septic/Well Fee | \$ —               |
| Zoning Fee      | \$ <i>50.00</i>    |
| RLD             | \$ <i>100.00</i>   |
| SWP             | \$ <i>200.00</i>   |
| Total           | \$ <i>1,907.23</i> |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 9-17-2021  
 Permit Number: BP-2021-01122  
 GPIN/Tax Map: 7714-91-7218/63-15-A-1-A  
 Issued: 11-17-2021

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<br><u>13009 River Rd.</u>   | Phone #<br><u>804-784-6099</u>           |
|                       | Owner<br><u>Morgan &amp; Brenda Gunn</u> | Email<br><u>Morgan &amp; Brenda Gunn</u> |
| APPLICANT INFORMATION | Address<br><u>13009 River Rd</u>         | Phone #<br><u>804-784-5075</u>           |
|                       | Applicant/Contact                        | Email<br><u>Sam</u>                      |

|                                      |  |  |                            |                                  |
|--------------------------------------|--|--|----------------------------|----------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>N/A</u>  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No             | Amount<br><u>—</u>         | Date Paid<br><u>—</u>            |
|                                      | Front Setback<br><u>100' from P/R</u>  | Center Line Setback<br><u>125'</u>   | Rear Setback<br><u>35'</u> | CUP/Variance/COA<br><u>A2/R1</u> |
|                                      | Side Setback<br><u>15'</u>   | Side Setback<br><u>15'</u>   | Flood Zone<br><u>—</u>     |                                  |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> | COMMENTS:<br><u>Convert existing attached garage TO A Bedroom suite. And covered porch</u> |                            |                                  |

Planning & Zoning Officer: David Floyd Date: 9/24/21

|                           |                            |                     |
|---------------------------|----------------------------|---------------------|
| CONTRACTOR INFORMATION    | Contractor<br><u>Owner</u> | Phone<br><u>Sam</u> |
|                           | Address                    | Email               |
| Contractor License Number | Type                       | Expiration          |

|                     |   |                                |   |                             |             |
|---------------------|---|--------------------------------|---|-----------------------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br><u>Convert existing attached garage TO A Bedroom suite. And covered porch</u>                       |                                |   |                             |             |
|                     | Proposed Use  | Current Use                    | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                             |             |
|                     | SEWER<br>Public/Private   | WATER<br>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.<br><u>458</u> | Unfinished Sq. Ft.<br><u>70</u>                                       | Total Sq. Ft.<br><u>528</u> |             |

Building Only - Excludes All Trades Permits

|   |                |                 |                  |
|---|----------------|-----------------|------------------|
| Value of Work   | <u>25,000.</u> | Application Fee | \$ <u>124.50</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.<br>Signature of Applicant: <u>[Signature]</u> Date: <u>9-17-21</u> |                | State Levy Fee  | \$ <u>249</u>    |
|   |                | Zoning Fee      | \$ <u>25.00</u>  |
|   |                | RLD             | \$ <u>—</u>      |
|   |                | SWP             | \$ <u>—</u>      |
|   |                | Total           | \$ <u>151.99</u> |



# BUILDING PERMIT APPLICATION

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

Application Date: 11-4-21

Permit Number: BP-2021-01357

GPIN/Tax Map: 55-1-0-64-c1 / ~~55-1-0-64-c1~~

Issued: 11-22-2021

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

Residential  Commercial

6786 →  
53-  
5914

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 | 1498 Gardwell Road<br>55-1-0-64-c1<br>CROZIER, VA 23039 |                       |
|                   | Owner        | Bartolini, Maurizio                                     | Phone #<br>8045649005 |
|                   | Address      | 1498 Gardwell Road<br>CROZIER, VA 23039                 | Email                 |

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

|                                      |               |  |                                |                        |
|--------------------------------------|---------------|--|--------------------------------|------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                         | Date Paid              |
|                                      | Front Setback | 100' ROW   | Center Line Setback<br>125' CL | Rear Setback<br>35'    |
|                                      | Side Setback  | 20'  | Side Setback<br>20'            | Flood Zone             |
|                                      |               |  |                                | CUP/Variance/COA<br>A2 |

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer Arlo Barnes Date 11-12-2021

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

|                     |  |  |   |               |             |
|---------------------|--|--|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work: 1249 crawl seal liner, dehumidifier for encapsulation                 |  |   |               |             |
|                     | Proposed Use   | Current Use  | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | SEWER<br><input checked="" type="checkbox"/> Public/Private <input type="checkbox"/> | WATER<br><input checked="" type="checkbox"/> Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.   | Unfinished Sq. Ft.   | Total Sq. Ft.   |               |             |

Building Only - Excludes All Trades Permits

|               |           |
|---------------|-----------|
| Value of Work | 12,258.69 |
|---------------|-----------|

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

Signature of Applicant Jeannie Salvatore Date 11-4-21

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>607.10</u> |
| State Levy Fee  | \$ <u>1.34</u>   |
| Septic/Well Fee | \$ _____         |
| Zoning Fee      | \$ <u>25-</u>    |
| RLD             | \$ _____         |
| SWP             | \$ _____         |
| Total           | \$ <u>93.51</u>  |

11-5-2021



# BUILDING PERMIT APPLICATION

Application Date: 11-4-24

Permit Number: BP-2021-01356

GPIN/Tax Map: 7717-09-3831 / 46-1-0-97-0

Issued: 11-22-2021

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

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

Residential  Commercial

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

|                                      |                   |   |                        |
|--------------------------------------|-------------------|---|------------------------|
| OWNER INFORMATION                    | Site Address      | 2546 Manakin <u>Rd Manakin Sabot, VA 23103</u>                              |                        |
|                                      | Owner             | Haack, Chuck  | Phone # (804) 516-5425 |
| APPLICANT INFORMATION                | Address           | 2546 Manakin Road<br>Manakin-Sabot, VA 23103                                |                        |
|                                      | Applicant/Contact | JEANNIE SALVATORE   | Phone # 804-621-7718   |
| TO BE COMPLETED BY ZONING DEPARTMENT | Address           | 2410 SOUTHLAND DR CHESTER VA 23831  |                        |
|                                      | Subdivision       | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                 |
| TO BE COMPLETED BY ZONING DEPARTMENT | Front Setback     | Center Line Setback   | Rear Setback           |
|                                      | Side Setback      | Side Setback  | Flood Zone             |

APPROVED  REJECTED  COMMENTS:

Planning & Zoning Officer: Anita Barnes Date: 11-29-2021

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

Scope of Work: 1256 crawl space dehumidifier for encapsulation

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

Building Only - Excludes All Trades Permits

Value of Work: 11,249.63

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

Signature of Applicant: Jeannie Salvatore Date: 11-4-21

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ <u>62.63</u> |
| State Levy Fee  | \$ <u>1.25</u>  |
| Septic/Well Fee | \$              |
| Zoning Fee      | \$ <u>25-</u>   |
| RLD             | \$              |
| SWP             | \$              |
| Total           | \$ <u>88.88</u> |

11-5-2021



# BUILDING PERMIT APPLICATION

Application Date: 11-4-21

Permit Number: BP-2021-01358

GPIN/Tax Map: 6795-19-2765 / 56-1-D-11-A

Issued: 11-22-2021

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

Department of Building Inspection  
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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 | 1350 Old Mill Rd Crozier, VA 23039      |                        |
|                   | Owner        | King, William & Gracy                   | Phone # (804) 784-3910 |
|                   | Address      | 1350 Old Mill Road<br>Crozier, VA 23039 | Email                  |

|                       |                   |                                    |                              |
|-----------------------|-------------------|------------------------------------|------------------------------|
| 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 checked="" type="checkbox"/> No | Amount           | Date Paid           |
|                                      | Front Setback 75' ROW | Center Line Setback 100' CL   | Rear Setback 35' | CUP/Variance/COA A2 |
|                                      | Side Setback 20'      | Side Setback 20'  | Flood Zone       |                     |

APPROVED  REJECTED  COMMENTS: Anita Barnes Date 11-12-2012  
 Planning & Zoning Officer

|                        |                           |                                    |                              |
|------------------------|---------------------------|------------------------------------|------------------------------|
| 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   |

Scope of Work: 2 dehumidifier, 1679 crawl seal liner,

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

|  |                          |                 |           |
|--|--------------------------|-----------------|-----------|
| Building Only - Excludes All Trades Permits  |                          | Application Fee | \$ 88.03  |
| Value of Work  | 16,895.26                | State Levy Fee  | \$ 1.76   |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |                          | Septic/Well Fee | \$        |
|  |                          | Zoning Fee      | \$ 25-    |
|  |                          | RLD             | \$        |
|  |                          | SWP             | \$        |
|  |                          | Total           | \$ 114.79 |
| Signature of Applicant   | <u>Jeannie Salvatore</u> | Date            | 11-4-21   |



# 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: 11-8-21

Permit Number: BP 2021-01351

GPIN/Tax Map: 672831-8984/27-1-0-82-A

Issued: 11-23-2021

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

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  |               |
| APPLICANT INFORMATION                | Address  | 1987 Haskin Rd. , Goochland, Va 23063  |   |               |
|                                      | Applicant/Contact  | Howard Kallman   | Email HKALLMAN87@GMAIL.COM  |               |
| TO BE COMPLETED BY ZONING DEPARTMENT | Address  | 1987 Haskin Rd. , Goochland, Va 23063  |   |               |
|                                      | Subdivision  | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No          | Amount  |               |
| CONTRACTOR INFORMATION               | Front Setback  | Center Line Setback  | Rear Setback  |               |
|                                      | Side Setback   | Side Setback   | Flood Zone  |               |
|                                      | APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:  |  | Date <u>11-12-2021</u>  |               |
|                                      | Planning & Zoning Officer <u>Andie Barnes</u>  |  |   |               |
| DESCRIPTION OF WORK                  | Contractor   | Owner  |   |               |
|                                      | Address  |  |   |               |
|                                      | Contractor License Number  | Type   | Expiration  |               |
| Scope of Work:                       |  | Garage Extension 15ft x 30-  |   |               |
| DESCRIPTION OF WORK                  | Proposed Use   | Current Use  | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |
|                                      | Vehicle storage  | N/A  | None  |               |
|                                      | SEWER<br>Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>   | WATER<br>Public <input type="checkbox"/> Private <input checked="" type="checkbox"/> | # of Bathrooms  | # of Bedrooms |
|                                      | 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. |

|                 |           |
|-----------------|-----------|
| Application Fee | \$ 124.50 |
| State Levy Fee  | \$ 2.49   |
| Zoning Fee      | \$ 25.00  |
| RLD             | \$        |
| SWP             | \$        |
| Total           | \$ 151.99 |

Building Only - Excludes All Trades Permits

|               |           |
|---------------|-----------|
| Value of Work | \$25,000. |
|---------------|-----------|

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 Howard Kallman Date 11/5/2021



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 11-1-21  
Permit Number: BP-2021-01341  
GPIN/Tax Map: M05-86-5894/57-10-D-27-D  
Issued: 11-23-2021

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

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

|                       |   |   |                        |  |
|-----------------------|---|---|------------------------|--|
| OWNER INFORMATION     | Site Address                                  | <u>1674 Devow way Manakin Sabot, VA 23103</u> |                        |  |
|                       | Owner   | Phone #                                       | <u>804 402-9112</u>    |  |
| APPLICANT INFORMATION | Address                                       | Email   |                        |  |
|                       | Applicant/Contact                             | Phone #                                       | <u>804-814-8735</u>    |  |
|                       | Address                                       | Email   | <u>abetterdeal.com</u> |  |
|                       | <u>19214 Holly Ct. W. Rockville, VA 23146</u> |   |                        |  |

|                                      |                               |   |                             |                            |
|--------------------------------------|-------------------------------|---|-----------------------------|----------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision                   | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                      | Date Paid                  |
|                                      | <u>Subdiv class</u>           |   |                             |                            |
|                                      | Front Setback <u>450' 75'</u> | Center Line Setback   | Rear Setback <u>150' 5'</u> | CUP/Variance/COA <u>A2</u> |
|                                      | Side Setback <u>40' 5'</u>    | Side Setback <u>160' 5'</u>   | Flood Zone                  |                            |

APPROVED  REJECTED  COMMENTS:

Planning & Zoning Officer: Andy Barnes Date: 11-12-2021

|   |                |                  |
|---|----------------|------------------|
| CONTRACTOR INFORMATION                        | Contractor     | Phone            |
|   | Address        | Email            |
| <u>19214 Holly Ct. W. Rockville, VA 23146</u> |                |                  |
| Contractor License Number                     | Type           | Expiration       |
| <u>2705008763</u>                             | <u>CLASS B</u> | <u>7-30-2022</u> |

Scope of Work: Build 12' x 30' lean to on back of detached garage

|   |                                     |   |               |             |
|---|-------------------------------------|---|---------------|-------------|
| Proposed Use  | Current Use                         | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
| <u>Store garden equipment</u>   |                                     | # of Bathrooms  | # of Bedrooms | # of floors |
| SEWER Public/Private <u>Private</u>   | WATER Public/Private <u>Private</u> | Unfinished Sq. Ft.  | Total Sq. Ft. |             |
| Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No | Finished Sq. Ft.                    | <u>1360</u>   | <u>360</u>    |             |

Building Only - Excludes All Trades Permits

|                    |                  |
|--------------------|------------------|
| Value of Work      | Application Fee  |
| <u>\$15,784.00</u> | \$ <u>83.03</u>  |
|                    | State Levy Fee   |
|                    | \$ <u>1.66</u>   |
|                    | Zoning Fee       |
|                    | \$ <u>25.00</u>  |
|                    | RLD              |
|                    | \$ <u>—</u>      |
|                    | SWP              |
|                    | \$ <u>—</u>      |
|                    | Total            |
|                    | \$ <u>109.69</u> |

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

Signature of Applicant: Andy Barnes Date: Nov 1 2021



# BUILDING PERMIT APPLICATION

Application Date: 11-1-21  
 Permit Number: BP-2021-01345  
 GPIN/Tax Map: 6257-59-9908/42-30-A-2-0  
 Issued: 11-23-2021  
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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>2203 Hounds Run Goochland, VA 23063</u> |   |
|                       | Owner             | <u>Lois Green</u>                          | Phone # <u>804-405-3145</u>   |
| APPLICANT INFORMATION | Address           | <u>2203 Hounds Run Rd, Goochland</u>       |   |
|                       | Applicant/Contact | <u>Matt Brookes Apex</u>                   | Email <u>lois.coynes.green@gmail.com</u><br>Phone # <u>804-335-4341</u> |
|                       | Address           | <u>4901 Waller Rd Richmond, VA</u>         | Email <u>m.brookes@apex.construction.solutions.com</u>                  |

|                                      |                                  |   |                         |                  |
|--------------------------------------|----------------------------------|---|-------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision                      | Proffer   | Amount                  | Date Paid        |
|                                      | <u>Holland Hills Sec 2</u>       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                         |                  |
|                                      | Front Setback <u>55' off ROW</u> | Center Line Setback   | Rear Setback <u>35'</u> | CUP/Variance/COA |
|                                      | Side Setback <u>35' off ROW</u>  | Side Setback <u>20'</u>   | Flood Zone              | <u>R2</u>        |

APPROVED  REJECTED  COMMENTS:  
 Planning & Zoning Officer [Signature] Date 11/10/21

|                        |   |  |                            |  |
|------------------------|---|--|----------------------------|--|
| CONTRACTOR INFORMATION | Contractor                                  | <u>Apex Construction Solutions LLC</u> |                            | Phone <u>804-690-1057</u>                              |
|                        | Address                                     | <u>4901 Waller Road Richmond VA</u>    |                            | Email <u>m.brookes@apex.construction.solutions.com</u> |
|                        | Contractor License Number <u>2705171119</u> | Type <u>Class A 2323</u>               | Expiration <u>03-31-23</u> |  |

|   |  |                      |   |               |
|---|--|----------------------|---|---------------|
| DESCRIPTION OF WORK   | Scope of Work: <u>Renovate Bathroom per attached plans.</u><br><u>Master</u> |                      |   |               |
|   | Proposed Use   | Current Use          | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |
|   | <u>Master Bath</u>   | <u>Master Bath</u>   | # of Bathrooms  | # of Bedrooms |
|   | SEWER Public/Private   | WATER Public/Private | # of floors   | Total Sq. Ft. |
| 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.   |   |               |

Building Only - Excludes All Trades Permits

|               |               |
|---------------|---------------|
| Value of Work | <u>10,009</u> |
|---------------|---------------|

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ <u>57-</u>   |
| State Levy Fee  | \$ <u>1.14</u>  |
| Zoning Fee      | \$ <u>25-</u>   |
| RLD             | \$              |
| SWP             | \$              |
| Total           | \$ <u>83.14</u> |

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
 Signature of Applicant [Signature] Date 10-25-21

Approved - Robby Felts 11/22/21

received 10-29-21



**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: 10/27/21  
 Permit Number: BP-2021-01318  
 GPIN/Tax Map: 6767-55-1313 / 13-11-0-3-C  
 Issued: 11-23-2021

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: 2530 Bucknell Lane Maidens, VA 23102  
 Owner: Williamson Stewart Alexander Williamson Christina Morss  
 Phone #: (804) 310-9510  
 Address: 2530 Bucknell Lane Maidens, VA 23102  
 Email: christinawilliamson93@gmail.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Henry Keith  
 Phone #: (434) 996-6141  
 Address: 490 Westfield Road STE A Charlottesville, VA 22901  
 Email: permitting@sigorasolar.com

**TO BE COMPLETED BY ZONING DEPARTMENT**  
 Subdivision: North Clifton 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: No change to Footprint  
 Planning & Zoning Officer: David Floyd Date: 11/4/21

**CONTRACTOR INFORMATION**  
 Contractor: Sigora Solar LLC  
 Phone: (434) 326-0722  
 Address: 490 Westfield Road STE A Charlottesville, VA 22901  
 Email: permitting@sigorasolar.com  
 Contractor License Number: 2705141338 Type: A Expiration: 7/31/22

**DESCRIPTION OF WORK**  
 Scope of Work: Install of a flush roof mounted solar photo-voltaic array.  
 System Capacity: 14.000 kWp DC

|  |                              |   |               |             |
|--|------------------------------|---|---------------|-------------|
| Proposed Use<br>Single Family  | Current Use<br>Single Family | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
| SEWER<br>Public/Private  | WATER<br>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: 5,810

Application Fee \$ 39.15  
 State Levy Fee \$ .76  
 Septic/Well Fee \$ \_\_\_\_\_  
 Zoning Fee \$ 2500  
 RLD \$ \_\_\_\_\_  
 SWP \$ \_\_\_\_\_  
 Total \$ 63.91

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: 10/27/21



# 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: NOVEMBER 9, 2021

Permit Number: DP2021-01380

GPIN/Tax Map: 7737-09-5798 / 48-1-0-55-B

Issued: 11-23-2021

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<br><u>2151 Johnson Road; Rockville, Va. 23146.</u> | Phone #<br><u>804.347.6848.</u>      |
|                       | Owner<br><u>Benjamin J. Johnson</u>                             | Email<br><u>bjohnson@rediete.com</u> |
|                       | Address<br><u>2151 Johnson Rd; Rockville, Va. 23146</u>         | Phone #                              |
| APPLICANT INFORMATION | Applicant/Contact<br><u>owner.</u>                              | Email                                |
|                       | Address   | Phone #                              |

|                                      |   |  |   |  |
|--------------------------------------|---|--|---|--|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>None</u>  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br><u>                    </u>     | Date Paid<br><u>                    </u> |
|                                      | Front Setback<br><u>75' from PUPU</u>   | Center Line Setback<br><u>100'</u>   | Rear Setback<br><u>35'</u>                | CUP/Variance/COA                         |
|                                      | Side Setback<br><u>20'</u>  | Side Setback<br><u>20'</u>   | Flood Zone<br><u>                    </u> | <u>A2</u>                                |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br><u>Daniel Floyd</u> | Date <u>11/22/21</u>   |   |  |

|                        |                             |       |
|------------------------|-----------------------------|-------|
| CONTRACTOR INFORMATION | Contractor<br><u>owner.</u> | Phone |
|                        | Address                     | Email |
|                        | Contractor License Number   | Type  |

|                     |   |                         |   |
|---------------------|---|-------------------------|---|
| DESCRIPTION OF WORK | Scope of Work:<br><u>FRONT PORCH</u>  |                         |   |
|                     | Proposed Use  | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |
|                     | SEWER<br>Public/Private   | WATER<br>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.<br><u>236.</u>                       |

Building Only - Excludes All Trades Permits

|               |                 |
|---------------|-----------------|
| Value of Work | <u>5,000.00</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 Daniel Floyd Date 11.9.21.

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>34.50</u>  |
| State Levy Fee  | \$ <u>69</u>     |
| Zoning Fee      | \$ <u>25.00</u>  |
| RLD             | \$               |
| SWP             | \$               |
| Total           | \$ <u>120.19</u> |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 10/25/2021

Permit Number: BP-2021-01338

GPIN/Tax Map: 55 2 0 10 6785-45-0910

Issued: 11-23-2021

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

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

|  |  |   |   |                                  |
|--|--|---|---|----------------------------------|
| OWNER INFORMATION  | Site Address<br><u>984 LEE ROAD CROZIER VA 23039</u> |   |   | Phone #<br><u>301 509 0395</u>   |
|  | Owner<br><u>RIVER CITY FENCING, LLC</u>              |   | Email<br><u>greg.loomis2@gmail</u>  |                                  |
| APPLICANT INFORMATION  | Address<br><u>3701 REEDS LANDING ROAD VA 23113</u>   |   |   | Phone #<br><u>804 221 0629</u>   |
|  | Applicant/Contact<br><u>Douglas M Stanley</u>        |   | Email<br><u>mstanley46@gmail</u>  |                                  |
| TO BE COMPLETED BY ZONING DEPARTMENT   | Subdivision  | Proffer<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Amount  | Date Paid                        |
|  | Front Setback  | Center Line Setback   | Rear Setback  | CUP/Variance/COA                 |
|  | Side Setback   | Side Setback  | Flood Zone  |                                  |
| APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint, Approval received 11/17/21</u><br>Planning & Zoning Officer: <u>David Floyd</u> Date: <u>11/17/21</u> Ms. Burles |  |   |   |                                  |
| CONTRACTOR INFORMATION   | Contractor<br><u>URBAN LAND SOLUTIONS, LLC</u>       |   |   | Phone<br><u>804 221-0629</u>     |
|  | Address<br><u>1410 WEST MORMON COUNT VA 23238</u>    |   |   | Email<br><u>mstanley46@gmail</u> |
| DESCRIPTION OF WORK  | Contractor License Number<br><u>2705171670</u>       |   | Type<br><u>C</u>  | Expiration<br><u>5/31/2023</u>   |
|  | Scope of Work: <u>UPGRADE WORK SHOP - DETACHED</u>   |   |   |                                  |
|  | <u>ELECTRICAL - PLUMBING + FRAMING, INSULATION</u>   |   |   |                                  |
|  | Proposed Use<br><u>R</u>                             | Current Use<br><u>SHOP</u>  | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br><u>Ø</u> |                                  |
| SEWER<br>Public/Private <u>Private</u>   | WATER<br>Public/Private <u>Private</u>               | # of Bathrooms<br><u>1</u>  | # of Bedrooms<br><u>1</u>   | # of floors<br><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.<br><u>800</u>                       | Unfinished Sq. Ft.<br><u>533</u>                                    | Total Sq. Ft.<br><u>1333</u> <del>1069</del>                                      |                                  |

Building Only - Excludes All Trades Permits

Value of Work 89,999.-

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ <u>59.-</u>  |
| State Levy Fee  | \$ <u>114</u>   |
| Zoning Fee      | \$ <u>25.-</u>  |
| RLD             | \$              |
| SWP             | \$              |
| Total           | \$ <u>83.14</u> |

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

Signature of Applicant: [Signature] Date: 10/15/2021



# 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: 11/1/2021  
Permit Number: BP-2021-01343  
GPIN/Tax Map: M22-21-2491/47-1-D-96-D  
Issued: 11-23-2021  
This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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      | 1785 St. Matthews Lane Rockville VA 23233 |         |                     |
|                       | Owner             | Evan Hegan                                | Phone # | 757-289-2940        |
|                       | Address           | 1785 St. Matthews Lane Rockville VA 23233 | Email   | evanhegan@gmail.com |
| APPLICANT INFORMATION | Applicant/Contact | Evan Hegan                                | Phone # | 757-289-2940        |
|                       | Address           | 1785 St. Matthews Lane Rockville VA 23233 | Email   | evanhegan@gmail.com |

|                                      |  |  |                         |                  |
|--------------------------------------|--|--|-------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision                                  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                  | Date Paid        |
|                                      | Front Setback                                | Center Line Setback  | Rear Setback <u>35'</u> | CUP/Variance/COA |
|                                      | Side Setback                                 | Side Setback <u>20'</u>  | Flood Zone              | <u>A2</u>        |
|                                      | APPROVED <input checked="" type="checkbox"/> | REJECTED <input type="checkbox"/>  | COMMENTS:               |                  |

Planning & Zoning Office: Amia Barnes Date: 11/12/2021

|                        |                           |   |            |                     |
|------------------------|---------------------------|---|------------|---------------------|
| CONTRACTOR INFORMATION | Contractor                | Evan Hegan                                | Phone      | 757-289-2940        |
|                        | Address                   | 1785 St. Matthews Lane Rockville VA 23233 | Email      | evanhegan@gmail.com |
|                        | Contractor License Number | Type                                      | Expiration |                     |

**Scope of Work:** Not changing the number of Bedrooms -  
Turning a bedroom into an office and creating a new bedroom. Removing an interior wall. Relocating the washer and drier. Removing half bath and building a full bath.

|   |                         |  |               |             |
|---|-------------------------|--|---------------|-------------|
| Proposed Use  | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) None |               |             |
| Personal  | Personal                | # of Bathrooms   | # of Bedrooms | # of floors |
| SEWER<br>Public/Private   | WATER<br>Public/Private | 2  | 3             | 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. |             |
|   | 1,686                   | 0  | 1,686         |             |

**Building Only - Excludes All Trades Permits**

|  |          |                 |                 |
|--|----------|-----------------|-----------------|
| Value of Work  | \$10,000 | Application Fee | \$ <u>57.00</u> |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |          | State Levy Fee  | \$ <u>1.14</u>  |
|  |          | Zoning Fee      | \$ <u>25.00</u> |
|  |          | RLD             | \$ _____        |
|  |          | SWP             | \$ _____        |
|  |          | Total           | \$ <u>83.14</u> |

Signature of Applicant: [Signature] Date: 11/12/21



# 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: 9-1-21

Permit Number: BP-2021-01077

GPIN/Tax Map: 6700-29-9667/37-1-0-7-0

Issued: 11-23-2021

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>1320 Carversville Rd Goochland</u>  |              |
|                                      | Owner                     | <u>Rene Mena</u>   |              |
| APPLICANT INFORMATION                | Address                   | <u>6104 Barrister Rd Chesterfield, VA 23832</u>                                |              |
|                                      | Applicant/Contact         | <u>SAME</u>  |              |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision               | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount       |
|                                      | Front Setback             | Center Line Setback  | Rear Setback |
| CONTRACTOR INFORMATION               | Address                   | Side Setback   | Flood Zone   |
|                                      | Contractor License Number | Type   | Expiration   |

|                  |                             |
|------------------|-----------------------------|
| Phone #          | <u>804-248-9061</u>         |
| Email            | <u>rehemena72@gmail.com</u> |
| Phone #          |                             |
| Email            |                             |
| CUP/Variance/COA | <u>MA</u>                   |

APPROVED  REJECTED  COMMENTS: No change to footprint  
 Planning & Zoning Officer: David Ford Date: 9/8/21

|                           |                  |            |  |
|---------------------------|------------------|------------|--|
| Contractor                | <u>N/A OWNER</u> | Phone      |  |
| Address                   | <u>N/A</u>       | Email      |  |
| Contractor License Number | Type             | Expiration |  |

Scope of Work: I'm adding one full bath on the second floor hall and a half bath on the ~~the~~ first floor hall. All interior remodel

|   |                         |   |               |             |
|---|-------------------------|---|---------------|-------------|
| Proposed Use  | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
| SEWER<br>Public/Private   | WATER<br>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: \$18,000 (Plumbing \$700, Electrical \$800, materials \$6,500)

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

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

Signature of Applicant: [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: 11-15-2021  
 Permit Number: BP-2021-01396  
 GPIN/Tax Map: 6728-97-0434 / 28-1-0-18-A  
 Issued: 11-30-2021

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>4520 River Road West Goochland VA 23063</u> |                             |
|                       | Owner             | <u>Maurice Tinsley</u>                         |                             |
| APPLICANT INFORMATION | Address           | Phone #  | <u>(804) 247-3722</u>       |
|                       | Applicant/Contact | Email  | <u>matinsley2@gmail.com</u> |
|                       | Address           | Phone #  |                             |
|                       | Address           | Email  |                             |

|                                      |   |   |              |                  |
|--------------------------------------|---|---|--------------|------------------|
| 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   | <u>A1</u>        |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Date <u>11/23/21</u> |   |              |                  |

|                        |                           |       |                             |
|------------------------|---------------------------|-------|-----------------------------|
| CONTRACTOR INFORMATION | Contractor                | Phone | <u>(804) 247-3722</u>       |
|                        | Address                   | Email | <u>matinsley2@gmail.com</u> |
|                        | Contractor License Number | Type  | Expiration                  |

|                     |   |                            |   |
|---------------------|---|----------------------------|---|
| DESCRIPTION OF WORK | Scope of Work: <u>7x14</u><br><u>Adding bathroom in the basement</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>98</u> | Unfinished Sq. Ft. Total Sq. Ft. <u>98</u>                            |

|  |                    |                 |                   |
|--|--------------------|-----------------|-------------------|
| Building Only - Excludes All Trades Permits  |                    | Application Fee | \$ <u>30.00</u>   |
| Value of Work  | \$ <u>4,000.00</u> | State Levy Fee  | \$ <u>.60</u>     |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |                    | Zoning Fee      | \$ <u>25.00</u>   |
|  |                    | RLD             | \$ _____          |
|  |                    | SWP             | \$ _____          |
|  |                    | Total           | \$ <u>55.60</u>   |
| Signature of Applicant <u>Maurice Tinsley</u>  |                    | Date            | <u>11/15/2021</u> |

# BUILDING PERMIT APPLICATION

Application Date: **11-08-2021**

Permit Number: **BP-2021-01360**

GPIN/Tax Map: **7726-57-1317/48-3-H-4-0**

Issued: **11-30-2021**

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.

City of Building Inspection  
119  
Richmond, VA 23063  
Phone: (804) 556-5651  
11 VA Relay

Residential  Commercial

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

|  |  |   |   |                            |                      |
|--|--|---|---|----------------------------|----------------------|
| OWNER INFORMATION  | Site Address <b>1702 Mills Rd Richmond, VA 23233</b> Tax Parcel <b>48-3-H-4-0</b>        |   | Broad Mills Office Park - 1702 Mills Road                             |                            |                      |
|  | Owner <b>General Land Company</b>  | Phone # <b>804-275-6926</b>   |   |                            |                      |
| APPLICANT INFORMATION  | Address <b>5809 York Road, Richmond, VA 23226</b>  |   | Email <b>Southers Concrete Inc @ Comcast.net</b>                      |                            |                      |
|  | Applicant/Contact <b>Melissa Southers</b>  |   | Phone # <b>804-275-6926</b>   |                            |                      |
| TO BE COMPLETED BY ZONING DEPARTMENT   | Address <b>1401 Willis Road N. Chesterfield, VA 23237</b>                                |   | Email <b>Southers Concrete Inc @ Comcast.net</b>                      |                            |                      |
|  | Subdivision <b>Bellview Gardens</b>  | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount  | Date Paid                  |                      |
|  | Front Setback <b>55' ROW</b>   | Center Line Setback   | Rear Setback <b>5'</b>  | CUP/Variance/COA <b>BN</b> |                      |
|  | Side Setback <b>20' 20'</b>  | Side Setback <b>5'</b>  | Flood Zone <b>yes</b>   |                            |                      |
|  | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: |   |   |                            |                      |
| Planning & Zoning Officer <b>Amala Baurer</b>  |  | Date <b>11-12-2021</b>  |   |                            |                      |
| CONTRACTOR INFORMATION   | Contractor <b>Southers Concrete Inc.</b>   |   | Phone <b>804-275-6926</b>   |                            |                      |
|  | Address <b>1401 Willis Road, N. Chesterfield, VA 23237</b>                               |   | Email <b>Southers Concrete Inc @ Comcast.net</b>                      |                            |                      |
|  | Contractor License Number <b>2705051957</b>  | Type <b>CLASS A</b>   | Expiration <b>09-30-2023</b>  |                            |                      |
| Scope of Work: <b>Retaining wall Broad Mills Office Park</b>   |  |   |   |                            |                      |
| Proposed Use   |  | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                            |                      |
| SEWER Public/Private   |  | WATER Public/Private  | # of Bathrooms <b>0</b>   | # of Bedrooms <b>0</b>     | # of floors <b>0</b> |
| 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  | <b>\$ 7500.00</b>  |   | Application Fee \$ <b>56.25</b>                                       |                            |                      |
|  |  |   | State Levy Fee \$ <b>300.13</b>                                       |                            |                      |
|  |  |   | Zoning Fee \$ <b>50.00</b>  |                            |                      |
|  |  |   | RLD \$  |                            |                      |
|  |  |   | SWP \$  |                            |                      |
|  |  |   | Total \$ <b>107.38</b>  |                            |                      |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |  |   |   |                            |                      |
| Signature of Applicant <b>Melissa Southers</b>   |  | Date <b>11-08-2021</b>  |   |                            |                      |



# BUILDING PERMIT APPLICATION

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

Application Date: 9-3-2021Permit Number: BP-2021-01082GPIN/Tax Map: 6767-12-T23/42-1-0-103-AIssued: 11-19-2021

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

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

|                       |                   |   |                                     |
|-----------------------|-------------------|---|-------------------------------------|
| OWNER INFORMATION     | Site Address      | <u>2958 River Road West. Building "G" Commonwealth Attorney</u> |                                     |
|                       | Owner             | <u>Goochland County</u>   | Phone #<br><u>804-556-5802</u>      |
|                       | Address           | <u>P.O. Box 10 Goochland, VA 23063.</u>                         | Email                               |
| APPLICANT INFORMATION | Applicant/Contact | <u>Sermat Construction Services</u>                             | Phone #<br><u>804-264-4800</u>      |
|                       | Address           | <u>2419 West Wood Ave Richmond VA 23230</u>                     | Email<br><u>RHASKELLOSERMAT.COM</u> |

|  |               |  |              |                               |
|--|---------------|--|--------------|-------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT   | Subdivision   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount       | Date Paid                     |
|  | <u>N/A</u>    |  |              |                               |
|  | Front Setback | Center Line Setback  | Rear Setback | CUP/Variance/COA<br><u>BI</u> |
|  | Side Setback  | Side Setback   | Flood Zone   |                               |
| APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>All interior work.</u> |               |  |              |                               |
| Planning & Zoning Officer: <u>David Boyd</u> Date: <u>9/19/21</u>  |               |  |              |                               |

|                        |   |                            |
|------------------------|---|----------------------------|
| CONTRACTOR INFORMATION | Contractor                                  | Phone                      |
|                        | <u>Sermat Construction Services</u>         | <u>804-264-4800</u>        |
|                        | Address                                     | Email                      |
|                        | <u>2419 West Wood Ave Richmond VA 23230</u> | <u>RHASKELLOSERMAT.COM</u> |
|                        | Contractor License Number                   | Type                       |
|                        |   | Expiration                 |

|   |  |                                |   |                             |                           |
|---|--|--------------------------------|---|-----------------------------|---------------------------|
| DESCRIPTION OF WORK   | Scope of Work:<br><u>Build 2 - small - 4' to 5' Ft Partition walls in old Rec Room</u> |                                |   |                             |                           |
|   | Proposed Use   | Current Use                    | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                             |                           |
|   | <u>Commercial</u>  | <u>Commercial</u>              | <u>0</u>  |                             |                           |
|   | SEWER<br><u>Public/Private</u>   | WATER<br><u>Public/Private</u> | # of Bathrooms<br><u>existing</u>                                     | # of Bedrooms<br><u>N/A</u> | # of floors<br><u>N/A</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.   |                             |                           |

**Building Only - Excludes All Trades Permits**

|                 |  |
|-----------------|--|
| Value of Work   |  |
| <u>\$4,000.</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: 9/3/21

|                 |    |               |
|-----------------|----|---------------|
| Application Fee | \$ |               |
| State Levy Fee  | \$ |               |
| Zoning Fee      | \$ |               |
| RLD             | \$ |               |
| SWP             | \$ |               |
| Total           | \$ | <u>625.00</u> |

*County Project*

# BUILDING PERMIT APPLICATION

Application Date: November 1, 2021

Permit Number: BP-2021-01323

GPIN/Tax Map: 6999-48-5157/43-38-A-5-D

Issued: 11-19-2021

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.

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<br><b>1668 Indys Run, Maidens, VA 23102</b> |                                    | Phone #<br><b>8043176100</b> |
|                                     | Owner<br><b>Todd F. Miller</b>                           | Email<br><b>tmilbmil@gmail.com</b> |                              |
| APPLICANT INFORMATION               | Address<br><b>1668 Indys Run, Maidens, VA</b>            |                                    | Phone #<br><b>8043176100</b> |
|                                     | Applicant/Contact<br><b>Owner - see above</b>            |                                    | Email                        |
| Address<br><b>Owner - see above</b> |  |                                    |                              |

|                                      |  |  |                           |                  |
|--------------------------------------|--|--|---------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>Breeze Hill</u>  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                    | Date Paid        |
|                                      | Front Setback<br><u>40' from Pk Road</u>   | Center Line Setback<br><u>65'</u>  | Rear Setback<br><u>5'</u> | CUP/Variance/COA |
|                                      | Side Setback<br><u>Rt. Side 35'</u>  | Side Setback<br><u>Lt. Side 5'</u>   | Flood Zone<br><u>X</u>    | <u>RP</u>        |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer <u>[Signature]</u> Date <u>11/5/21</u> |  |                           |                  |

|                        |  |      |            |
|------------------------|--|------|------------|
| CONTRACTOR INFORMATION | Contractor<br><b>Owner - see above</b> |      | Phone      |
|                        | Address                                |      | Email      |
|                        | Contractor License Number              | Type | Expiration |

|                     |  |                                    |   |
|---------------------|--|------------------------------------|---|
| DESCRIPTION OF WORK | Scope of Work:<br><b>Detached 2-car garage with unfinished attic space</b> <span style="float: right;"><u>24x30</u></span> |                                    |   |
|                     | Proposed Use<br><b>Automobiles</b>   | Current Use<br><b>N/A</b>          | Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>None</b> |
|                     | SEWER<br>Public/Private  | WATER<br>Public/Private            | # of Bathrooms: <b>0</b> # of Bedrooms: <b>0</b> # of floors: <b>2</b>            |
|                     | Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No      | Finished Sq. Ft.<br><del>720</del> | Unfinished Sq. Ft.<br><del>720</del> <b>1440</b> Total Sq. Ft. <b>1440</b>        |

|   |               |                 |                  |
|---|---------------|-----------------|------------------|
| <b>Building Only - Excludes All Trades Permits</b>  |               | Application Fee | \$ <u>279.30</u> |
| Value of Work   | <b>59,400</b> | State Levy Fee  | \$ <u>5.59</u>   |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.<br>Signature of Applicant <u>[Signature]</u> Date <u>11-1-2021</u> |               | Zoning Fee      | \$ <u>25-</u>    |
|   |               | RLD             | \$               |
|   |               | SWP             | \$               |
|   |               | Total           | \$ <u>309.89</u> |

10-7-2021



# BUILDING PERMIT APPLICATION

Application Date: 10-4-2021

Permit Number: BP-2021-01218

GPIN/Tax Map: 7723-25-5723/664-0-3-0

Issued: 11-19-2021

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.

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<br><b>322 Riverside Court</b>              | Phone #<br><b>408-594-5252</b>                 |
|                       | Owner<br><b>Benedictine High School Of Richmond Inc</b> | Email<br><b>jgrapes@benedictineschools.org</b> |
|                       | Address<br><b>12829 River Road, Richmond VA 23238</b>   |  |
| APPLICANT INFORMATION | Applicant/Contact<br><b>Travis Gardner</b>              | Phone #<br><b>804-640-7713</b>                 |
|                       | Address<br><b>PO Box 70579 Henrico VA 23255</b>         | Email<br><b>travis@gardner-co.com</b>          |

|                                      |   |  |                            |                           |
|--------------------------------------|---|--|----------------------------|---------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>Pembroke</u>  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>_____            | Date Paid<br>_____        |
|                                      | Front Setback<br><u>55' from P4 Row</u>   | Center Line Setback<br>_____   | Rear Setback<br><u>35'</u> | CUP/Variance/COA<br>_____ |
|                                      | Side Setback<br><u>20'</u>  | Side Setback<br><u>20'</u>   | Flood Zone<br>_____        |                           |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer <u>David Floyd</u> Date <u>10/13/21</u> |  |                            |                           |

|                        |   |                                       |
|------------------------|---|---------------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><b>Gardner Construction Corp</b>  | Phone<br><b>804-640-7713</b>          |
|                        | Address<br><b>PO Box 70579 Henrico VA 23255</b> | Email<br><b>travis@gardner-co.com</b> |
|                        | Contractor License Number <u>2705149682</u>     | Type <u>Class A</u>                   |

|                     |   |                           |   |               |             |
|---------------------|---|---------------------------|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br><b>Construction of an open air porch and pergola on the rear of the home</b>                        |                           |   |               |             |
|                     | Proposed Use<br><b>SFD</b>  | Current Use<br><b>SFD</b> | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | SEWER<br>Public/Private   | WATER<br>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>1087</u>   | <u>1087</u>   |             |

Building Only - Excludes All Trades Permits

|               |                |
|---------------|----------------|
| Value of Work | <u>235,000</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 10/7/2021

|                 |                   |
|-----------------|-------------------|
| Application Fee | \$ <u>1069.50</u> |
| State Levy Fee  | \$ <u>21.39</u>   |
| Zoning Fee      | \$ <u>25.00</u>   |
| RLD             | \$ _____          |
| SWP             | \$ _____          |
| Total           | \$ <u>1115.89</u> |



# BUILDING PERMIT APPLICATION

Application Date: **November 15, 2021**

Permit Number: **BP-2021-01377**

GPIN/Tax Map: **6787-34-9674 / 44-28-0-3-0**

Issued: **11-23-2021**

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

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

Residential       Commercial

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

|                       |                   |   |  |   |
|-----------------------|-------------------|---|--|---|
| OWNER INFORMATION     | Site Address      | <b>1927 Granite Trace Ln. Crozier, VA 23039</b> |  |   |
|                       | Owner             | <b>James P &amp; Maryann S. Whitaker</b>        |  | Phone # <b>804-304-2838</b>                 |
| APPLICANT INFORMATION | Address           | <b>1927 Granite Trace Ln. Crozier, VA 23039</b> |  |   |
|                       | Applicant/Contact | <b>Owner</b>                                    |  | Email <b>patrick@paradocsproperties.com</b> |
|                       | Address           | <b>as above</b>                                 |  |   |
|                       |                   | Phone #   |  |   |
|                       |                   | Email   |  |   |

|                                      |   |   |                           |                  |
|--------------------------------------|---|---|---------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision                             | Proffer   | Amount                    | Date Paid        |
|                                      | <b>Granite Trace</b>                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | _____                     | _____            |
|                                      | Front Setback<br><b>75' from P4 ROW</b> | Center Line Setback<br><b>100'</b>                                  | Rear Setback<br><b>5'</b> | CUP/Variance/COA |
|                                      | Side Setback<br><b>5'</b>               | Side Setback<br><b>5'</b>   | Flood Zone                | <b>A2</b>        |

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: **David Floyd** Date **11/22/21**

|                        |                           |                  |            |       |
|------------------------|---------------------------|------------------|------------|-------|
| CONTRACTOR INFORMATION | Contractor                | <b>Homeowner</b> |            | Phone |
|                        | Address                   | <b>as above</b>  |            | Email |
|                        | Contractor License Number | Type             | Expiration |       |

|   |  |                         |   |               |             |
|---|--|-------------------------|---|---------------|-------------|
| DESCRIPTION OF WORK   | Scope of Work:<br><b>Place 14' x 40' storage building on home property</b> |                         |   |               |             |
|   | Proposed Use   | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|   | <b>Shop and storage</b>  |                         | <b>none</b>   |               |             |
|   | SEWER<br>Public/Private  | WATER<br>Public/Private | # of Bathrooms  | # of Bedrooms | # of floors |
|   |  | <b>0</b>                | <b>0</b>  | <b>1</b>      |             |
| 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.   |               |             |
| <b>0</b>  | <b>560</b>   | <b>560</b>              | <b>560</b>  |               |             |

**Building Only - Excludes All Trades Permits**

|               |                 |
|---------------|-----------------|
| Value of Work | <b>\$15,400</b> |
|---------------|-----------------|

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

Signature of Applicant: **[Signature]** Date **11/15/2021**

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <b>81.30</b>  |
| State Levy Fee  | \$ <b>1.63</b>   |
| Zoning Fee      | \$ <b>25.00</b>  |
| RLD             | \$ _____         |
| SWP             | \$ _____         |
| Total           | \$ <b>107.93</b> |



# BUILDING PERMIT APPLICATION

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

Application Date: 10-22-21  
Permit Number: BP-2021-01282  
GPIN/Tax Map: 7707-16-3842/46-1-0-8-B  
Issued: 11-19-2021

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      | 888 Three Chop Road Manakin-Sabot VA. 23103 |  |
|                       | Owner             | JODY ROTMAN                                 |  |
| APPLICANT INFORMATION | Address           | 888 - Three Chop Road                       |  |
|                       | Applicant/Contact | Tom Homer                                   |  |
|                       | Address           | MANAKIN-SABOT, VA. 23103                    |  |

|                                      |  |   |              |                  |
|--------------------------------------|--|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision  | Proffer   | Amount       | Date Paid        |
|                                      | N/A  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | —            | —                |
|                                      | Front Setback  | Center Line Setback   | Rear Setback | CUP/Variance/COA |
|                                      | 75' from P4 ROW  | 100'  | 35'          | —                |
|                                      | Side Setback   | Flood Zone  |              |                  |
|                                      | 20'  | 20'   |              | A2               |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> | COMMENTS:   |              |                  |
|                                      | Planning & Zoning Officer  | Date 11/5/21  |              |                  |

|                        |                           |                   |
|------------------------|---------------------------|-------------------|
| CONTRACTOR INFORMATION | Contractor                | Phone             |
|                        | LANE Homes + Remodeling   | 804-784-0012      |
|                        | Address                   | Email             |
|                        | 12536 Patterson Ave.      | TOM@LANEBUILD.COM |
|                        | Contractor License Number | Type              |
|                        | 2701 0291 25A             | A                 |
|                        |                           | Expiration        |
|                        |                           | 2022              |

|   |   |                         |   |               |
|---|---|-------------------------|---|---------------|
| DESCRIPTION OF WORK   | Scope of Work: FINISH A BASEMENT TO LIVING SPACE, DEN, BONUS ROOM, STORAGE ROOM, WORKSHOP, BATHROOM, UTILITY ROOM (EXPOSED) |                         |   |               |
|   | NO STRUCTURAL CHANGES - ALL NON BEARING WALLS   |                         |   |               |
|   | Proposed Use  | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |
|   | LIVING SPACE  | STORAGE                 | NONE  |               |
|   | SEWER<br>Public/Private   | WATER<br>Public/Private | # of Bathrooms  | # of Bedrooms |
|   |   | 1                       | 0   | EXISTING      |
| 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.   |               |
|   | 1288  | —                       | 1288  |               |

|  |               |                        |                 |
|--|---------------|------------------------|-----------------|
| Building Only - Excludes All Trades Permits  |               | Application Fee        | \$ 520.30       |
| Value of Work  | \$ 112,970.00 | State Levy Fee         | \$ 10.41        |
| 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             | \$ 250          |
|  |               | RLD                    | \$              |
|  |               | SWP                    | \$              |
|  |               | Total                  | \$ 555.71       |
|  |               | Signature of Applicant | Thomas G. Homer |



# 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: 10/18/2021

Permit Number: BP-2021-01272

GPIN/Tax Map: 6757-91-9452 / 42-40-0-18-0

Issued: 11-3-2021

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<br>3006 Swanns Inn Crescent Goochland, VA 23063 |  | Phone #<br>434-960-2375            |
|                   | Owner<br>Justin Thurston                                     |  | Email<br>justintthurston@gmail.com |
|                   | Address<br>3006 Swanns Inn Crescent                          |  |                                    |

|                       |  |  |                                     |
|-----------------------|--|--|-------------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br>Michael Graves              |  | Phone #<br>434-465-6788             |
|                       | Address<br>PO Box 7543 Charlottesville, VA 22906 |  | Email<br>permitting@sigorasolar.com |

|                                      |  |  |                  |                  |
|--------------------------------------|--|--|------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>Swann's Inn   | Proffer<br><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: *No change to existing footprint R3 |  |                  |                  |
|                                      | Planning & Zoning Officer<br>David Boyd  |  | Date<br>10/21/21 |                  |

|                        |  |                 |                                     |
|------------------------|--|-----------------|-------------------------------------|
| CONTRACTOR INFORMATION | Contractor<br>Sigora Solar LLC                   |                 | Phone<br>434-465-6788               |
|                        | Address<br>PO Box 7543 Charlottesville, VA 22906 |                 | Email<br>permitting@sigorasolar.com |
|                        | Contractor License Number<br>2705141338          | Type<br>AES/ELE | Expiration<br>7/31/2022             |

|                     |  |                                       |   |               |             |
|---------------------|--|---------------------------------------|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>Install of Flush Roof Mounted Solar PV System. System Size: 12.00 kWp DC |                                       |   |               |             |
|                     | Proposed Use<br>Single Family Dwelling   | Current Use<br>Single Family Dwelling | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | SEWER<br>Public/Private  | WATER<br>Public/Private               | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Will a foundation be installed within 20 ft. of any septic system components? Yes / No     | Finished Sq. Ft.                      | Unfinished Sq. Ft.  | Total Sq. Ft. |             |
|                     |  |                                       |   |               |             |

|  |                |   |          |            |
|--|----------------|---|----------|------------|
| Building Only - Excludes All Trades Permits  |                | Application Fee   | \$ 33.17 |            |
| Value of Work  | \$4,704.00     | State Levy Fee  | \$ .66   |            |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |                | Septic/Well Fee   | \$       |            |
|  |                | Zoning Fee  | \$ 25.00 |            |
|  |                | RLD   | \$       |            |
|  |                | SWP   | \$       |            |
|  |                | Total   | \$ 58.83 |            |
| Signature of Applicant   | Michael Graves | Digitally signed by Michael Graves<br>Date: 2021.10.18 13:48:13 -0400 | Date     | 10/18/2021 |



# BUILDING PERMIT APPLICATION

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

Application Date: 10-21-21  
 Permit Number: BP-2021-01308  
 GPIN/Tax Map: 42-1-0-43-0 / 6767-02-1403  
 Issued: 11-2-2021

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<br>3242 Marsh Dr. Lot 26  |   | Phone #<br>804-556-4568   |                    |
|  | Owner<br>Essie J. Jenkins  |   | Email   |                    |
|  | Address<br>P.O. Box 23 Goochland VA 23063  |   |   |                    |
| APPLICANT INFORMATION  | Applicant/Contact<br>CMH Homes Inc. / Teresa Kite  |   | Phone # 804-798-3206<br>Cell: 540-742-4467  |                    |
|  | Address<br>12244 Washington Hwy. Ashland VA 23005  |   | Email<br>teresakite20@gmail.com   |                    |
| TO BE COMPLETED BY ZONING DEPARTMENT   | Subdivision<br>None  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    | Amount  |                    |
|  | Front Setback<br>50' B/S   | Center Line Setback   | Rear Setback<br>20' from MH   |                    |
|  | Side Setback<br>25' from MH  | Side Setback<br>25' from MH   | Flood Zone  |                    |
|  | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:                       |   | Date 11/1/21  |                    |
| CONTRACTOR INFORMATION   | Contractor<br>CMH Homes Inc.   |   | Phone<br>804-798-3206   |                    |
|  | Address<br>12244 Washington Hwy. Ashland VA 23005  |   | Email<br>r078@claytonhomes.com  |                    |
|  | Contractor License Number<br>21050481235021  | Type<br>A   | Expiration<br>4-30-23   |                    |
| DESCRIPTION OF WORK  | Scope of Work: 16' x 76' singlewide in Jenkins MHP - Lot 26.<br>(1) 5' x 5' Rear Deck / (1) 6' x 8' Front Deck |   |   |                    |
|  | Proposed Use<br>Res.   | Current Use<br>Res.   | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br>under 10,000 sq. ft. |                    |
|  | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>                              | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms<br>2   | # of Bedrooms<br>3 |
|  | Finished Sq. Ft.<br>1190   | Unfinished Sq. Ft.<br>73  | Total Sq. Ft.<br>1263   |                    |
| Building Only - Excludes All Trades Permits  |  |   |   |                    |
| Value of Work  | 97,415.00  |   |   |                    |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |  |   |   |                    |
| Signature of Applicant   | Date 10/21/21<br>CMH Homes   |   |   |                    |
| Application Fee  |  | \$ 450.36   |   |                    |
| State Levy Fee   |  | \$ 9.01   |   |                    |
| Septic/Well Fee  |  | \$  |   |                    |
| Zoning Fee   |  | \$ 50.00  |   |                    |
| RLD  |  | \$  |   |                    |
| SWP  |  | \$  |   |                    |
| Total  |  | \$ 509.37   |   |                    |

**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: Dominion Capital Title Telephone: 888-607-0404  
Mailing Address: 3800 Westerre Pkwy. #301 Henrico VA 23833

**OWNER'S STATEMENT**

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

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

**OFFICE USE ONLY**

USE RS # STORIES 1 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 18

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE NOV 1, 2021  
Code Official



# BUILDING PERMIT APPLICATION

Department of Building Inspection  
 P.O. Box 119  
 Goochland, VA 23063  
 (804) 556-5615 Fax (804) 556-5651  
 TDD 711 VA Relay

Residential  Commercial

Application Date: 10-19-2021  
 Permit Number: BP-2021-01271  
 GPIN/Tax Map: 6812-21-5745/10-1-0-28C  
 Issued: 11-1-2021  
 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 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: 4615 Pink Dogwood Rd. Columbia VA 23038  
 Owner: Richard Wilkinson  
 Address: \_\_\_\_\_  
 Phone #: (804) 457-4243  
 Email: \_\_\_\_\_

**APPLICANT INFORMATION**  
 Applicant/Contact: Lauren W/ SolarTyme  
 Address: 6710 Velfersu Davis Hwy RVA 23237  
 Phone #: (804) 271-2500  
 Email: lauren.solartyme@gmail.com

**TO BE COMPLETED BY ZONING DEPARTMENT**

|               |   |              |                  |
|---------------|---|--------------|------------------|
| Subdivision   | Proffer<br><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: \*No change to existing footprint  
 Planning & Zoning Officer: David Floyd Date: 10/21/21

**CONTRACTOR INFORMATION**  
 Contractor: SolarTyme  
 Address: 6710 Velfersu Davis Hwy Richmond VA 23237  
 Phone: (804) 271-2500  
 Contractor License Number: 2705036452 Type: A Expiration: 12/31/22

**DESCRIPTION OF WORK**  
 Scope of Work: Install 14 roof mounted solar panels

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

**Building Only - Excludes All Trades Permits**

|               |                |
|---------------|----------------|
| Value of Work | <u>\$9,000</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: 10/13/21

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ <u>52.50</u> |
| State Levy Fee  | \$ <u>1.05</u>  |
| Septic/Well Fee | \$ _____        |
| Zoning Fee      | \$ <u>25.00</u> |
| RLD             | \$ _____        |
| SWP             | \$ _____        |
| Total           | \$ <u>78.55</u> |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 10.20.21

Permit Number: BP-2021-01275

GPIN/Tax Map: 6757-49-5010 / 42-1-01-0

Issued: 11-1-2021 ~~10-28-2021~~

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>✓ 3350 River Rd West. Goochland VA 23063</u>                                |   |                            |
|  | Owner   | <u>Richard Keith Stagg Jr</u>  | Phone #   | <u>804-332-0058</u>        |
|  | Address   | <u>Same</u>  | Email   | <u>CleanAgain804@gmail</u> |
| APPLICANT INFORMATION  | Applicant/Contact   | <u>Same</u>  | Phone #   | <u>Same</u>                |
|  | Address   | <u>same</u>  | Email   | <u>same.</u>               |
| TO BE COMPLETED BY ZONING DEPARTMENT   | Subdivision   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount  | Date Paid                  |
|  | <u>N/A</u>  |  |   |                            |
|  | Front Setback   | Center Line Setback  | Rear Setback  | CUP/Variance/COA           |
|  | <u>100' from PL/ROW</u>   | <u>125'</u>  | <u>5'</u>   |                            |
|  | Side Setback  | Side Setback   | Flood Zone  | <u>A2</u>                  |
| <u>5'</u>  | <u>5'</u>   |  |   |                            |
| APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>   | COMMENTS:   |  |   |                            |
| Planning & Zoning Officer  | <u>David Boyd</u>   | Date   | <u>10/20/21</u>   |                            |
| CONTRACTOR INFORMATION   | Contractor  | <u>Owner</u>   | Phone   | <u>Same</u>                |
|  | Address   | <u>Same</u>  | Email   | <u>Same.</u>               |
|  | Contractor License Number   | Type   | Expiration  |                            |
| DESCRIPTION OF WORK  | Scope of Work:<br><u>26x30 metal De-datched garage</u>  |  |   |                            |
|  | Proposed Use  | Current Use  | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                            |
|  | SEWER<br>Public/Private   | WATER<br>Public/Private  | # of Bathrooms  | # of Bedrooms              |
|  |   |  |   | <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>780</u>   | <u>780</u>  |                            |
| Building Only - Excludes All Trades Permits  |   | Application Fee \$ <u>108.53</u>   |   |                            |
| Value of Work  | <u>\$13,000.00</u> <u>21,450.00</u>   | State Levy Fee \$ <u>2.17</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>135.70</u>   |   |                            |
| Signature of Applicant <u>[Signature]</u>  |   | Date <u>10.20.21</u>   |   |                            |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date:  
10/22/2021

Permit Number: **BP-2021-01283**

GPIN/Tax Map: **728-71-4841 48-1-0-8-A1**

Issued: **11-1-2021**

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<br>2222 Ashland Road, Rockville, VA 23146   |   | Phone #<br>804-283-0440  |                  |
|   | Owner<br>Paul Nuckols  |   | Email<br>nuckolsp@gmail.com  |                  |
|   | Address<br>2222 Ashland Road, Rockville, VA 23146  |   | Phone #<br>804-339-8449  |                  |
| APPLICANT INFORMATION   | Applicant/Contact<br>Nexus Energy Systems  |   | Email<br>pbreedlove@nexussolar.net   |                  |
|   | Address<br>11044 Richardson Rd. Ste. A29 Ashland, VA 23005   |   |  |                  |
| TO BE COMPLETED BY ZONING DEPARTMENT  | Subdivision  | Proffer<br><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>                        |   |  |                  |
|   | Planning & Zoning Officer: <i>[Signature]</i> Date: <i>11/26/21</i>  |   |  |                  |
| CONTRACTOR INFORMATION  | Contractor<br>Nexus Energy Systems   |   | Phone<br>804-339-8449  |                  |
|   | Address<br>11044 Richardson Rd. Ste. A29 Ashland, VA 23005   |   | Email<br>pbreedlove@nexussolar.net   |                  |
|   | Contractor License Number<br>2705174830  | Type<br>Class A, AES, ELE   | Expiration<br>01/31/2022   |                  |
| DESCRIPTION OF WORK   | Scope of Work:<br>We will be installing 20 solar panels with 20 microinverters atop the clients roof via a mounted racking system and one home battery |   |  |                  |
|   | Proposed Use<br>Solar panels   | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br>N/A |                  |
|   | SEWER<br>Public/Private <input checked="" type="checkbox"/>  | WATER<br>Public/Private <input checked="" type="checkbox"/>         | # of Bathrooms # of Bedrooms # of floors                                     |                  |
|   | Will a foundation be installed within 20 ft. of any septic system components? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>      | Finished Sq. Ft.<br>372   | Unfinished Sq. Ft. Total Sq. Ft.<br>372                                      |                  |
| Building Only - Excludes All Trades Permits   |  |   | Application Fee \$ <b>223.50</b>   |                  |
| Value of Work <b>47,000</b>   |  |   | State Levy Fee \$ <b>4.47</b>  |                  |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.<br>Signature of Applicant <i>Paul Breedlove</i> Date <i>10/21/2021</i> |  |   | Septic/Well Fee \$   |                  |
|   |  |   | Zoning Fee \$ <b>25.00</b>   |                  |
|   |  |   | RLD \$   |                  |
|   |  |   | SWP \$   |                  |
|   |  |   | Total \$ <b>252.97</b>   |                  |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: AUGUST 5, 2021 8-20-2021

Permit Number: BP-2021-01034

GPIN/Tax Map: PART OF 7725-11-0778 7725-15-2275

Issued: 11-2-2021 5854-1-1-M

This 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<br>MOSAIC AT WEST CREEK SECTION 3 -<br>INTERSECTION OF TUCKAHOE CREEK PKWY & HOCKETT ROAD -- 15799 MOSAIC CREEK BLVD, RICH 23238 |  | Phone #<br>804.762.4800          |
|                   | Owner<br>HHHUNT MOSAIC, LLC   |  | Email<br>JONATHAN RIDOUT=CONTACT |
|                   | Address<br>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059   |  | Phone #<br>804.396.8775          |

|                       |  |  |                                |
|-----------------------|--|--|--------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br>VICKI BARNETT               |  | Email<br>ADMIN@BRACKTWALLS.COM |
|                       | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005 |  |                                |

|                                      |               |   |              |                  |
|--------------------------------------|---------------|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision   | Proffer<br><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: \_\_\_\_\_ Date 8/25/21  
 Planning & Zoning Officer: David [Signature]

|                        |   |                 |                          |
|------------------------|---|-----------------|--------------------------|
| CONTRACTOR INFORMATION | Contractor<br>BRACK RETAINING WALLS AND EXCAVATING, LLC |                 | Phone<br>804.798.5097    |
|                        | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005        |                 |                          |
|                        | Contractor License Number<br>2705131869                 | Type<br>CLASS A | Expiration<br>11.30.2021 |

|                     |   |   |   |               |             |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>INSTALL RETAINING WALL AT LOTS 75-78                            |   |   |               |             |
|                     | Proposed Use  | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.  | Unfinished Sq. Ft.  | Total Sq. Ft.<br>1,744  |               |             |

**Building Only - Excludes All Trades Permits**

|               |             |
|---------------|-------------|
| Value of Work | \$36,354.00 |
|---------------|-------------|

|                 |                   |
|-----------------|-------------------|
| Application Fee | \$ <u>272.104</u> |
| State Levy Fee  | \$ <u>5.95</u>    |
| Septic/Well Fee | \$ _____          |
| Zoning Fee      | \$ <u>50.00</u>   |
| RLD             | \$ _____          |
| SWP             | \$ _____          |
| Total           | \$ <u>328.11</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 Vicki Barnett Date Aug 5, 2021



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: AUGUST 5, 2021 8.20.2021

Permit Number: BP-2021-01032

GPIN/Tax Map: PART OF 7725-11-0770 7725-15-2275

Issued: 11-2-2021 58-54-1-1-M

This 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<br>MOSAIC AT WEST CREEK SECTION 3 -<br>INTERSECTION OF TUCKAHOE CREEK PKWY & HOCKETT ROAD -- 15799 MOSAIC CREEK BLVD, RICH 23238 |  | Phone #<br>804.762.4800          |
|                   | Owner<br>HHHUNT MOSAIC, LLC   |  | Email<br>JONATHAN RIDOUT=CONTACT |
|                   | Address<br>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059   |  | Phone #<br>804.396.8775          |

|                       |  |  |                              |
|-----------------------|--|--|------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br>VICKI BARNETT               |  | Email<br>ADMIN@BRACWALLS.COM |
|                       | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005 |  |                              |

|                                      |  |   |              |                  |
|--------------------------------------|--|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision  | Proffer<br><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:<br>Planning & Zoning Officer <u>David [Signature]</u> Date <u>8/25/21</u> |   |              |                  |

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

|                     |   |   |   |               |             |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>INSTALL RETAINING WALL AT LOTS 1-5                              |   |   |               |             |
|                     | Proposed Use  | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.  | Unfinished Sq. Ft.  | Total Sq. Ft.<br>865  |               |             |

Building Only - Excludes All Trades Permits

|               |             |
|---------------|-------------|
| Value of Work | \$18,031.00 |
|---------------|-------------|

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 Vikki Barnett Date Aug 5, 2021

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>185.24</u> |
| State Levy Fee  | \$ <u>2.70</u>   |
| Septic/Well Fee | \$ _____         |
| Zoning Fee      | \$ <u>50.00</u>  |
| RLD             | \$ _____         |
| SWP             | \$ _____         |
| Total           | \$ <u>187.94</u> |



# BUILDING PERMIT APPLICATION

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

Application Date: ~~AUGUST 5, 2021~~ 8.20.2021  
 Permit Number: BP-2021-01031  
 GPIN/Tax Map: ~~PART OF 7725-11-0778~~ 7725-15-2275  
 Issued: 11-2-2021 5851-1-1-M

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<br>MOSAIC AT WEST CREEK SECTION 3 -<br>INTERSECTION OF TUCKAHOE CREEK PKWY & HOCKETT ROAD -- 15799 MOSAIC CREEK BLVD, RICH 23238 |                                  |
|                   | Owner<br>HHHUNT MOSAIC, LLC   | Phone #<br>804.762.4800          |
|                   | Address<br>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059   | Email<br>JONATHAN RIDOUT=CONTACT |

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

|                                      |  |   |              |                  |
|--------------------------------------|--|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision  | Proffer<br><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:<br>Planning & Zoning Officer <u>David Floyd</u> Date <u>8/25/21</u> |   |              |                  |

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

|                     |   |   |   |               |             |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>INSTALL RETAINING WALL AT LOTS <del>51-52</del> <u>LOTS 51-55</u> |   |   |               |             |
|                     | Proposed Use  | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>   | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.  | Unfinished Sq. Ft.  | Total Sq. Ft.<br>1,003  |               |             |

**Building Only - Excludes All Trades Permits**

|               |             |
|---------------|-------------|
| Value of Work | \$20,907.00 |
|---------------|-------------|

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

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>150.80</u> |
| State Levy Fee  | \$ <u>3.14</u>   |
| Septic/Well Fee | \$               |
| Zoning Fee      | \$ <u>50.00</u>  |
| RLD             | \$               |
| SWP             | \$               |
| Total           | \$ <u>209.94</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: AUGUST 5, 2021 8-20-2021  
 Permit Number: BP-2021-01038  
 GPIN/Tax Map: PART OF 7725-11-0778 7725-15-2215  
58-54-1-1-M  
 Issued: 11-2-2021  
 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<br>MOSAIC AT WEST CREEK SECTION 3 -<br>INTERSECTION OF TUCKAHOE CREEK PKWY & HOCKETT ROAD -- 15799 MOSAIC CREEK BLVD, RICH 23238 |  | Phone #<br>804.762.4800          |
|                       | Owner<br>HHHUNT MOSAIC, LLC   |  | Email<br>JONATHAN RIDOUT=CONTACT |
|                       | Address<br>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059   |  | Phone #<br>804.396.8775          |
| APPLICANT INFORMATION | Applicant/Contact<br>VICKI BARNETT  |  | Email<br>ADMIN@BRACWALLS.COM     |
|                       | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005  |  |                                  |

|                                      |  |   |              |                  |
|--------------------------------------|--|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision  | Proffer<br><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:<br>Planning & Zoning Officer <u>[Signature]</u> Date <u>8/25/21</u> |   |              |                  |

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

|                     |   |   |   |               |             |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>INSTALL RETAINING WALL AT LOT 57                                |   |   |               |             |
|                     | Proposed Use  | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.  | Unfinished Sq. Ft.  | 216   | Total Sq. Ft. |             |

|   |            |                 |                 |
|---|------------|-----------------|-----------------|
| Building Only - Excludes All Trades Permits   |            | Application Fee | \$ <u>33.76</u> |
| Value of Work   | \$4,502.00 | State Levy Fee  | \$ <u>.68</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.<br>Signature of Applicant <u>Vicki Barnett</u> Date <u>Aug 5, 2021</u> |            | Septic/Well Fee | \$              |
|   |            | Zoning Fee      | \$ <u>50.00</u> |
|   |            | RLD             | \$              |
|   |            | SWP             | \$              |
|   |            | Total           | \$ <u>84.44</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: AUGUST 5, 2021 8-20-2021  
Permit Number: BP-2021-01029  
GPIN/Tax Map: PART OF 7725-11-0778 7725-15-2225  
Issued: 11-2-2021 58-54-1-1-M

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<br>MOSAIC AT WEST CREEK SECTION 3 -<br>INTERSECTION OF TUCKAHOE CREEK PKWY & HOCKETT ROAD -- 15799 MOSAIC CREEK BLVD, RICH 23238 | Phone #<br>804.762.4800          |
|                   | Owner<br>HHHUNT MOSAIC, LLC   | Email<br>JONATHAN RIDOUT=CONTACT |
|                   | Address<br>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059   | Phone #<br>804.396.8775          |

|                       |  |                               |
|-----------------------|--|-------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br>VICKI BARNETT               | Phone #<br>804.396.8775       |
|                       | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005 | Email<br>ADMIN@BRACKWALLS.COM |

|                                      |  |   |              |                  |
|--------------------------------------|--|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision  | Proffer<br><input type="checkbox"/> Yes <input type="checkbox"/> No     | Amount       | Date Paid        |
|                                      | Front Setback  | Center Line Setback   | Rear Setback | CUP/Variance/COA |
|                                      | Side Setback   | Side Setback  | Flood Zone   |                  |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> | COMMENTS: <u>Zoning Review</u><br><u>David Lepp</u> Date <u>8/25/21</u> |              |                  |

|                        |   |                       |
|------------------------|---|-----------------------|
| CONTRACTOR INFORMATION | Contractor<br>BRACK RETAINING WALLS AND EXCAVATING, LLC | Phone<br>804.798.5097 |
|                        | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005        |                       |
|                        | Contractor License Number<br>2705131869                 | Type<br>CLASS A       |

|                     |  |  |   |               |             |
|---------------------|--|--|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>INSTALL RETAINING WALL AT LOTS 17-22                               |  |   |               |             |
|                     | Proposed Use   | Current Use  | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | <input checked="" type="checkbox"/> SEWER<br>Public/Private <input type="checkbox"/> | <input checked="" type="checkbox"/> WATER<br>Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.   | Unfinished Sq. Ft.   | Total Sq. Ft.<br>511  |               |             |

|   |             |                 |                  |
|---|-------------|-----------------|------------------|
| <b>Building Only - Excludes All Trades Permits</b>  |             | Application Fee | \$ <u>79.89</u>  |
| Value of Work   | \$10,652.00 | State Levy Fee  | \$ <u>1.60</u>   |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.<br>Signature of Applicant <u>Vicki Barnett</u> Date <u>AUG 5, 2021</u> |             | Septic/Well Fee | \$               |
|   |             | Zoning Fee      | \$ <u>50.00</u>  |
|   |             | RLD             | \$               |
|   |             | SWP             | \$               |
|   |             | Total           | \$ <u>131.49</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: AUGUST 5, 2021 8-20-2021

Permit Number: BP-2021-01028

GPIN/Tax Map: ~~PART OF 7725-11-0778~~ 7725-15-2275

Issued: 11-2-2021 58-84-1-1-M

This 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<br>MOSAIC AT WEST CREEK SECTION 3 -<br>INTERSECTION OF TUCKAHOE CREEK PKWY & HOCKETT ROAD -- 15799 MOSAIC CREEK BLVD, RICH 23238 |                                  |
|                   | Owner<br>HHHUNT MOSAIC, LLC   | Phone #<br>804.762.4800          |
|                   | Address<br>11237 NUCKOLS ROAD, GLEN ALLEN, VA 23059   | Email<br>JONATHAN RIDOUT=CONTACT |

|                       |  |                                 |
|-----------------------|--|---------------------------------|
| APPLICANT INFORMATION | Applicant/Contact<br>VICKI BARNETT               | Phone #<br>804.396.8775         |
|                       | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005 | Email<br>ADMIN@BRACKT WALLS.COM |

|                                      |   |   |              |                  |
|--------------------------------------|---|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision   | Proffer<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Amount       | Date Paid        |
|                                      | Front Setback   | Center Line Setback   | Rear Setback | CUP/Variance/COA |
|                                      | Side Setback  | Side Setback  | Flood Zone   |                  |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Not reviewed by zoning.</u><br>Planning & Zoning Officer <u>David Floyd</u> Date <u>8/25/21</u> |   |              |                  |

|                        |  |                 |                          |
|------------------------|--|-----------------|--------------------------|
| CONTRACTOR INFORMATION | Contractor<br>BRACKT RETAINING WALLS AND EXCAVATING, LLC |                 | Phone<br>804.798.5097    |
|                        | Address<br>10423 DOW GIL ROAD, ASHLAND, VA 23005         |                 |                          |
|                        | Contractor License Number<br>2705131869                  | Type<br>CLASS A | Expiration<br>11.30.2021 |

|                     |   |   |   |               |             |
|---------------------|---|---|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br>INSTALL RETAINING WALL AT LOT 93                                |   |   |               |             |
|                     | Proposed Use  | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | <input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Finished Sq. Ft.  | Unfinished Sq. Ft.  | Total Sq. Ft.<br>203  |               |             |

**Building Only - Excludes All Trades Permits**

|               |            |
|---------------|------------|
| Value of Work | \$4,231.00 |
|---------------|------------|

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

Signature of Applicant Vicki Barnett Date Aug 5, 2021

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ <u>31.74</u> |
| State Levy Fee  | \$ <u>.63</u>   |
| Septic/Well Fee | \$              |
| Zoning Fee      | \$ <u>50.00</u> |
| RLD             | \$              |
| SWP             | \$              |
| Total           | \$ <u>82.37</u> |



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

Residential  Commercial

Application Date: 10-27-21

Permit Number: BP-2021-01300

GPIN/Tax Map: 0129-06-7779/29-19-0-C-0

Issued: 11-9-21

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

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

|                       |   |                                      |
|-----------------------|---|--------------------------------------|
| OWNER INFORMATION     | Site Address<br><u>2857 Dogtown Rd. Goochland Va. 23063</u> |                                      |
|                       | Owner<br><u>LaAiesha Jackson Jones</u>                      | Phone #<br><u>(804) 212-6447</u>     |
|                       | Address<br><u>2857 Dogtown Rd.</u>                          | Email<br><u>LaA.esha@hotmail.com</u> |
| APPLICANT INFORMATION | Applicant/Contact<br><u>LaAiesha Jackson</u>                |                                      |
|                       | Address<br><u>2857 Dogtown Rd</u>                           | Email                                |

|                                      |  |  |                           |                              |
|--------------------------------------|--|--|---------------------------|------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>None</u>   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>_____           | Date Paid<br>_____           |
|                                      | Front Setback<br><u>75' from PL/ROW</u>  | Center Line Setback<br><u>100'</u>   | Rear Setback<br><u>5'</u> | CUP/Variance/COA<br>_____ #1 |
|                                      | Side Setback<br><u>5'</u>  | Side Setback<br><u>50'</u>   | Flood Zone<br>_____       |                              |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer <u>David Floyd</u> Date <u>11/1/21</u> |  |                           |                              |

|                        |  |      |                                |
|------------------------|--|------|--------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><u>Five Star Metal Buildings Owner</u> |      | Phone<br><u>(336) 673-6299</u> |
|                        | Address<br><u>PO Box 1186 Fast, NC 27049</u>         |      | Email                          |
|                        | Contractor License Number                            | Type | Expiration                     |

|                     |  |                         |   |               |             |
|---------------------|--|-------------------------|---|---------------|-------------|
| DESCRIPTION OF WORK | Scope of Work:<br><u>24x51 Detached Garage</u>   |                         |   |               |             |
|                     | Proposed Use   | Current Use             | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
|                     | SEWER<br>Public/Private  | WATER<br>Public/Private | # of Bathrooms  | # of Bedrooms | # of floors |
|                     | Will a foundation be installed within 20 ft. of any septic system components? Yes / No | Finished Sq. Ft.        | Unfinished Sq. Ft.  | Total Sq. Ft. |             |
|                     |  | <u>1224</u>             | <u>1224 sq ft</u>   |               |             |

**Building Only - Excludes All Trades Permits**

|               |                  |                     |
|---------------|------------------|---------------------|
| Value of Work | <u>16,265.70</u> | <u>\$ 33,660.00</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 10/22/21

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>16247</u>  |
| State Levy Fee  | \$ <u>3.27</u>   |
| Septic/Well Fee | \$ _____         |
| Zoning Fee      | \$ <u>2500</u>   |
| RLD             | \$ _____         |
| SWP             | \$ _____         |
| Total           | \$ <u>191.74</u> |



# BUILDING PERMIT APPLICATION

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

Application Date: 8/12/2021

Permit Number: BP-2021-01042

GPIN/Tax Map: 725-12-9107-1 58-54020

Issued: 11-3-2021

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>15700 Mosaic Creek Blvd, Richmond, VA 23238</u> |  |
|                       | Owner             | <u>HH Hunt Mosaic, LLC</u>                         | Phone # <u>804-305-1855</u>                |
| APPLICANT INFORMATION | Address           | <u>11237 Nuchols Road</u>                          | Email <u>btolland@hhhunt.com</u>           |
|                       | Applicant/Contact | <u>Scott Smith</u>                                 | Phone # <u>804-955-7691</u>                |
|                       | Address           | <u>2801 McRae Road, Richmond VA 23235</u>          | Email <u>scott@porticoclassichomes.com</u> |

|  |                     |   |              |                  |
|--|---------------------|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT   | Subdivision         | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount       | Date Paid        |
|  | <u>Mosaic</u>       |   |              |                  |
|  | Front Setback       | Center Line Setback   | Rear Setback | CUP/Variance/COA |
|  | <u>30' from P/R</u> | <u>65'</u>  | <u>5'</u>    |                  |
| Side Setback   | Side Setback        | Flood Zone  | <u>RPUD</u>  |                  |
| <u>5'</u>  | <u>5'</u>           |   |              |                  |
| APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ |                     |   |              |                  |
| Planning & Zoning Officer <u>David King</u> Date <u>8/30/21</u>                                |                     |   |              |                  |

|                        |                           |   |  |
|------------------------|---------------------------|---|--|
| CONTRACTOR INFORMATION | Contractor                | <u>Portico Classic Homes LLC</u>          | Phone <u>804-955-7691</u>                                |
|                        | Address                   | <u>2801 McRae Road, Richmond VA 23235</u> | Email <u>scott@porticoclassichomes.com</u>               |
|                        | Contractor License Number | <u>2705144011</u>                         | Type <u>Class A CBC, RBC</u> Expiration <u>1-13-2022</u> |

|  |   |                       |   |               |             |  |
|--|---|-----------------------|---|---------------|-------------|--|
| DESCRIPTION OF WORK  | Scope of Work:<br><b>Construct Mosaic community mail kiosk at the Clubhouse</b> |                       |   |               |             |  |
|  | Proposed Use  | Current Use           | Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A |               |             |  |
|  | <u>Mail Delivery/Pick up</u>  | <u>N/A</u>            | # of Bathrooms  | # of Bedrooms | # of floors |  |
|  | <u>Public/Private</u>   | <u>Public/Private</u> | <u>0</u>  | <u>0</u>      | <u>1</u>    |  |
| Will a foundation be installed within 20 ft. of any septic system components? Yes / No | Finished Sq. Ft.  | Unfinished Sq. Ft.    | Total Sq. Ft.   |               |             |  |
| <u>Yes / No</u>  |   | <u>416</u>            | <u>416</u>  |               |             |  |

**Building Only - Excludes All Trades Permits**

|               |                  |
|---------------|------------------|
| Value of Work | <u>25,000.00</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 8/12/2021

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>195.00</u> |
| State Levy Fee  | \$ <u>3.75</u>   |
| Septic/Well Fee | \$ _____         |
| Zoning Fee      | \$ <u>100.00</u> |
| RLD             | \$ _____         |
| SWP             | \$ _____         |
| Total           | \$ <u>298.75</u> |



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

Residential  Commercial

Application Date: 8/12/2021

Permit Number: BP-2021-01043

GPIN/Tax Map: 7725-12-9107/58-54-0-2-0

Issued: 11-3-2021

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 | 15700 Mosaic Creek Boulevard, Richmond, VA 23238 |                           |
|                   | Owner        | HHHunt Mosaic, LLC                               | Phone # 804-305-1855      |
|                   | Address      | 11237 Nuchols Road                               | Email btolland@hhhunt.com |

|                       |                   |                                    |                                     |
|-----------------------|-------------------|------------------------------------|-------------------------------------|
| APPLICANT INFORMATION | Applicant/Contact | Scott Smith                        | Phone # 804-955-7691                |
|                       | Address           | 2801 McRae Road, Richmond VA 23235 | Email scott@porticoclassichomes.com |

|                                      |  |                                   |   |        |              |           |                  |
|--------------------------------------|--|-----------------------------------|---|--------|--------------|-----------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision                                  | Mosaic                            | Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount |              | Date Paid |                  |
|                                      | Front Setback                                | 30' from PL/Row                   | Center Line Setback   | 55'    | Rear Setback | 5'        | CUP/Variance/COA |
|                                      | Side Setback                                 | 5'                                | Side Setback  | 5'     | Flood Zone   |           |                  |
|                                      | APPROVED <input checked="" type="checkbox"/> | REJECTED <input type="checkbox"/> | COMMENTS: * Residential Acc.  |        | Date         | 8/30/21   |                  |

Planning & Zoning Officer: *[Signature]*

|                        |                           |                                    |                                    |
|------------------------|---------------------------|------------------------------------|------------------------------------|
| CONTRACTOR INFORMATION | Contractor                | Portico Classic Homes LLC          | Phone 804-955-7691                 |
|                        | Address                   | 2801 McRae Road, Richmond VA 23235 | Email scott@porticoclassicomes.com |
|                        | Contractor License Number | 2705144011                         | Type Class A CBC, RBC              |

Expiration 1-13-2022

|                     |  |                            |                      |     |   |   |
|---------------------|--|----------------------------|----------------------|-----|---|---|
| DESCRIPTION OF WORK | Scope of Work:<br>Construct Pool Equipment building at Mosaic Clubhouse Pool           |                            |                      |     |   |   |
|                     | Proposed Use   | Pool Equipment and Storage | Current Use          | N/A | Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A |   |
|                     | SEWER Public/Private   |                            | WATER Public/Private |     | # of Bathrooms  | 0 |
|                     | Will a foundation be installed within 20 ft. of any septic system components? Yes / No |                            | Finished Sq. Ft.     | 621 | # of Bedrooms   | 0 |

# of floors: 1  
Unfinished Sq. Ft.: 621  
Total Sq. Ft.: 621

Building Only - Excludes All Trades Permits

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

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

Signature of Applicant: *[Signature]* Date: 8/23/2021

|                 |           |
|-----------------|-----------|
| Application Fee | \$ 195.00 |
| State Levy Fee  | \$ 3.75   |
| Septic/Well Fee | \$        |
| Zoning Fee      | \$ 100.00 |
| RLD             | \$        |
| SWP             | \$        |
| Total           | \$ 298.75 |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 9-10-21

Permit Number: BP2021-0974

GPIN/Tax Map: 7725-37-0185-9999 / 58-1-0-112 A TV

Issued: 11-A-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<br><b>12800 Tuckahoe Creek Parkway</b>                  |  | Phone #<br><b>(804) 747-0422</b>                      |
|                       | Owner<br><b>Carmax Business Services, LLC</b>                        |  | Email   |
|                       | Address<br><b>P.O. Box 29965, Richmond, VA 23242</b>                 |  |   |
| APPLICANT INFORMATION | Applicant/Contact<br><b>Brian Maslyk</b>                             |  | Phone #<br><b>(804) 314-6229</b>                      |
|                       | Address<br><b>1519 Huguenot Road, Suite 202 Midlothian, VA 23113</b> |  | Email<br><b>brian_maslyk@cadence-architecture.com</b> |

|                                      |   |  |                            |                  |
|--------------------------------------|---|--|----------------------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>West Creek</u>  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount                     | Date Paid        |
|                                      | Front Setback<br><u>20' from P/L RW</u>   | Center Line Setback<br><u>45'</u>  | Rear Setback<br><u>10'</u> | CUP/Variance/COA |
|                                      | Side Setback<br><u>Left Side 30'</u>  | Side Setback<br><u>10'</u>   | Flood Zone                 | <u>M1</u>        |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer: <u>Daniel Taylor</u> Date: <u>8/16/21</u> (804) 743-5690 |  |                            |                  |

|                        |   |                     |                                |
|------------------------|---|---------------------|--------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><b>TBA MRT Construction</b>                 |                     | Phone<br><b>(804) 839-7141</b> |
|                        | Address<br><b>7101 Iron Bridge Rd, North Chesterfield</b> |                     | Email                          |
|                        | Contractor License Number<br><u>2101036657</u>            | Type<br><u>CBC-</u> | Expiration<br><u>5-31-22</u>   |

|                     |   |                                 |   |                              |                         |
|---------------------|---|---------------------------------|---|------------------------------|-------------------------|
| DESCRIPTION OF WORK | Scope of Work:<br><b>New 1152sf Picnic Pavilion for Carmax -</b>  |                                 |   |                              |                         |
|                     | Proposed Use<br><b>A-2</b>  | Current Use<br><b>n/a</b>       | Environmental Impacts (stream crossing, wetlands, amt land disturbed) <b>none</b> |                              |                         |
|                     | SEWER<br>Public/Private   | WATER<br>Public/Private         | # of Bathrooms<br><b>0</b>  | # of Bedrooms<br><b>0</b>    | # of floors<br><b>1</b> |
|                     | Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No | Finished Sq. Ft.<br><b>1152</b> | Unfinished Sq. Ft.<br><b>0</b>  | Total Sq. Ft.<br><b>1152</b> |                         |

Building Only - Excludes All Trades Permits

|               |                   |
|---------------|-------------------|
| Value of Work | <b>100,000.00</b> |
|---------------|-------------------|

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.  
Signature of Applicant: Joh A. Saben Date: 7/30/21

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <u>750.00</u> |
| State Levy Fee  | \$ <u>15.00</u>  |
| Zoning Fee      | \$ <u>100.00</u> |
| RLD             | \$               |
| SWP             | \$               |
| Total           | \$ <u>965.00</u> |

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

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

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

**OWNER'S STATEMENT**

I John SABA of (address) 12800 TUCKAHOE CREEK PKWY affirm that I am the owner of a certain tract of parcel of land located at 12800 Tuckahoe Creek Pkwy 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.

J A S 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 J A S

**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 1 CONSTRUCTION TYPE NB OCCUPANT LOAD 12 CODE EDITION 18

FIRE SPRINKLER No FIRE ALARM No MODIFICATION NA

APPROVAL [Signature] DATE 9-27-21

Code Official

Revised: 8/31/2020



# BUILDING PERMIT APPLICATION

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

Application Date: 10/15/2021 10-18-21

Permit Number: BP-2021-01266

GPIN/Tax Map: 10786-38-9164/44-10-60-C

Issued: 11-5-21

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

Residential  Commercial

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

|                       |  |                                   |
|-----------------------|--|-----------------------------------|
| OWNER INFORMATION     | Site Address<br>1801 Taylor Rd, Crozier, Virginia, 23039 | Phone #<br>(804) 994-4242         |
|                       | Owner<br><b>John Devlin</b>                              | Email<br>dmwilliams80@comcast.net |
| APPLICANT INFORMATION | Applicant/Contact<br><b>Sarah Oliver</b>                 | Phone #<br>888-781-7074           |
|                       | Address<br>4801 N University Ave Ste 900 Provo, UT 84604 | Email<br>permits@ionsolar.com     |

|                                      |               |   |              |                  |
|--------------------------------------|---------------|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision   | Proffer<br><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: No Change to existing Footprints A2  
 Planning & Zoning Officer: David Boyd Date: 10/21/21

|                        |  |                               |
|------------------------|--|-------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><b>Ion Developer LLC</b>                   | Phone<br>888-781-7074         |
|                        | Address<br>4801 N University Ave Ste 900 Provo, UT 84604 | Email<br>permits@ionsolar.com |
|                        | Contractor License Number <u>2705169798</u>              | Type                          |

**Scope of Work:** Installation of solar panels on existing residential roof - 10.36 kW. 28 panels.

|  |  |   |               |             |
|--|--|---|---------------|-------------|
| Proposed Use<br>rooftop solar  | Current Use<br>residential   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |               |             |
| <input type="checkbox"/> SEWER Public/Private <input type="checkbox"/> | <input type="checkbox"/> WATER Public/Private <input type="checkbox"/> | # of Bathrooms  | # of Bedrooms | # of floors |
| Finished Sq. Ft.   | Unfinished Sq. Ft.   | Total Sq. Ft.   |               |             |

**Building Only - Excludes All Trades Permits**

|               |               |
|---------------|---------------|
| Value of Work | <b>12,500</b> |
|---------------|---------------|

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

Signature of Applicant: Sarah Oliver Date: 10/15/2021

|                 |                |
|-----------------|----------------|
| Application Fee | \$ <u>6824</u> |
| State Levy Fee  | \$ <u>137</u>  |
| Septic/Wall Fee | \$             |
| Zoning Fee      | \$ <u>2500</u> |
| RLD             | \$             |
| SWP             | \$             |
| <b>Total</b>    | \$ <u>9461</u> |



# BUILDING PERMIT APPLICATION

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

Application Date: 8/16/21

Permit Number: BP-2021-01055

GP/NTax Map: 7705-28-7475 / 57-4-0-2-B

Issued: 11-9-21

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<br><u>1318 Flat Rock Crossing Manakin Sabot VA 23103</u> |   |
|                   | Owner<br><u>Chuck Coli</u>  | Phone #<br><u>949-697-0985</u>          |
|                   | Address<br><u>1318 Flat Rock Crossing Sabot, VA 23103</u>             | Email<br><u>ccmoney65@Earthlink.net</u> |

|                       |  |   |
|-----------------------|--|---|
| APPLICANT INFORMATION | Applicant/Contact<br><u>Taylor Bergman</u>               | Phone #<br><u>804-744-1001</u>          |
|                       | Address<br><u>17801 Hull Street Rd Moseley, VA 23120</u> | Email<br><u>Taylor@thedeck-Tech.com</u> |

|                                      |  |  |                           |                           |
|--------------------------------------|--|--|---------------------------|---------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>N/A</u>  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>_____           | Date Paid<br>_____        |
|                                      | Front Setback<br><u>55' from PL/ROW</u>  | Center Line Setback<br><u>80'</u>  | Rear Setback<br><u>5'</u> | CUP/Variance/COA<br>_____ |
|                                      | Side Setback<br><u>5'</u>  | Side Setback<br><u>5'</u>  | Flood Zone<br>_____       |                           |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br><u>David Floyd</u> Date <u>8/31/21</u> |  |                           |                           |

|                        |   |                              |
|------------------------|---|------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><u>JB Contracting Inc DBA The Deck Tech</u> | Phone<br><u>804-744-1001</u> |
|                        | Address<br><u>17801 Hull Street Rd Moseley, VA 23120</u>  | Email<br>_____               |
|                        | Contractor License Number<br><u>2705127080</u>            | Type<br><u>CLASS A</u>       |

|                     |  |   |   |                                  |                      |
|---------------------|--|---|---|----------------------------------|----------------------|
| DESCRIPTION OF WORK | Scope of Work:<br><u>W/portal frame build 64x32 Garage - detached</u>  |   |   |                                  |                      |
|                     | Proposed Use<br><u>Residential</u>   | Current Use<br><u>Res.</u>                | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br><u>n/A</u> |                                  |                      |
|                     | SEWER<br>Public/Private<br><u>Private</u>  | WATER<br>Public/Private<br><u>Private</u> | # of Bathrooms<br>_____   | # of Bedrooms<br><u>1</u>        | # of floors<br>_____ |
|                     | Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)<br><u>No</u> | Finished Sq. Ft.<br><u>31328</u>          | Unfinished Sq. Ft.<br><u>31328</u>  | Total Sq. Ft.<br><u>3,328.00</u> |                      |

Building Only - Excludes All Trades Permits

Value of Work \$229,086.00

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 8/25/21

|                 |                    |
|-----------------|--------------------|
| Application Fee | \$ <u>1042.68</u>  |
| State Levy Fee  | \$ <u>20.76</u>    |
| Zoning Fee      | \$ <u>25.00</u>    |
| RLD             | \$ _____           |
| SWP             | \$ _____           |
| Total           | \$ <u>1,088.74</u> |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 11-1-2021  
 Permit Number: BP-2021-01324  
 GPIN/Tax Map: 6749-64-5114/29-1-0-72-0  
 Issued: 11-5-2021  
 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>3750 Bell Road Goochland, VA 23063</u> |                             |
|                       | Owner             | <u>Veronica Woodson</u>                   | Phone # <u>804-347-5046</u> |
| APPLICANT INFORMATION | Address           | <u>3750 Bell Road</u>                     | Email                       |
|                       | Applicant/Contact | <u>SAME</u>                               | Phone #                     |
|                       | Address           | <u>SAME</u>                               | Email                       |

|                                      |   |   |              |                  |
|--------------------------------------|---|---|--------------|------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision                                   | Proffer   | Amount       | Date Paid        |
|                                      | <u>N/A</u>                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <u>---</u>   | <u>---</u>       |
|                                      | Front Setback                                 | Center Line Setback   | Rear Setback | CUP/Variance/COA |
|                                      | <u>75' from RY ROW</u>                        | <u>100'</u>   | <u>35'</u>   | <u>---</u>       |
|                                      | Side Setback                                  | Side Setback  | Flood Zone   |                  |
|                                      | <u>20'</u>                                    | <u>20'</u>  | <u>C</u>     | <u>A1</u>        |
|                                      | APPROVED <input checked="" type="checkbox"/>  | REJECTED <input type="checkbox"/>                                   | COMMENTS:    |                  |
|                                      | Planning & Zoning Officer <u>Dennis Floyd</u> | Date <u>11/5/21</u>   |              |                  |

|                        |   |   |
|------------------------|---|---|
| CONTRACTOR INFORMATION | Contractor                                    | Phone   |
|                        | <u>Prestige Building Services of Virginia</u> | <u>804-291-6115</u>                               |
|                        | Address                                       | Email <u>prestige@building-services-llc.com</u>   |
|                        | <u>P.O. Box 1071 Mechanicsville VA 23111</u>  |   |
|                        | Contractor License Number <u>2705181102</u>   | Type <u>CLASS A RBC</u> Expiration <u>9-30-23</u> |

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| DESCRIPTION OF WORK   | Scope of Work:  |                               |   |   |
|   | <u>18x12 Bedroom Extension with bathroom / closet</u> |                               |   |   |
|   | Proposed Use  | Current Use                   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |   |
|   | <u>SEWER Public/Private</u>                           | <u>WATER Public/Private</u>   | # of Bathrooms <u>1</u>   | # of Bedrooms <u>---</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 <u>No</u> | Finished Sq. Ft. <u>216</u>                           | Unfinished Sq. Ft. <u>---</u> | Total Sq. Ft. <u>216</u>  |   |

|  |                     |                 |                  |
|--|---------------------|-----------------|------------------|
| Building Only - Excludes All Trades Permits  |                     | Application Fee | \$ <u>120.00</u> |
| Value of Work  | <u>24,000.00</u>    | State Levy Fee  | \$ <u>2.40</u>   |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |                     | Zoning Fee      | \$ <u>25.00</u>  |
| Signature of Applicant <u>[Signature]</u>  | Date <u>9-29-21</u> | RLD             | \$               |
|  |                     | SWP             | \$               |
|  |                     | Total           | \$ <u>147.40</u> |

9-24-2021

|   |  |
|---|--|
|  <p><b>BUILDING PERMIT APPLICATION</b></p> <p>Department of Building Inspection<br/>P.O. Box 119<br/>Goochland, VA 23063<br/>(804) 556-5815 Fax (804) 556-5651<br/>TDD 711 VA Relay</p> <p><input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial</p> | Application Date: 9/21/21  |
|   | Permit Number: BP-2021-01156   |
|   | GPIN/Tax Map: 58-1-0-112-AT / 7725-37-775  |
|   | Issued: 11-15-2021   |
|   | This application is <u>not</u> 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<br>12804 Tuckahoe Creek Pkwy                        | Phone #<br>910-894-2898          |
|                       | Owner<br>SBA Communications <i>National Communication Towers</i> | Email<br>lvinciguerra@sbsite.com |
| APPLICANT INFORMATION | Address<br>9125A Southern Pine Blvd. Charlotte NC 28273          | Phone #<br>910-894-2898          |
|                       | Applicant/Contact<br>Luke Vinciguerra                            | Email<br>same                    |
| Address<br>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<br>CU-2001-12 |
|                                      | Side Setback  | Side Setback  | Flood Zone   |                                |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br>Planning & Zoning Officer <i>David Lloyd</i> Date 10/4/21 |   |              |                                |

|                        |  |                                 |
|------------------------|--|---------------------------------|
| CONTRACTOR INFORMATION | Contractor<br>TW Celcom Inc                    | Phone<br>540-616-6431           |
|                        | Address<br>5077 State park Rd. Dublin VA 24084 | Email<br>tim.trail@twcelcom.com |
|                        | Contractor License Number 2705155016           | Type ESC                        |

|                     |   |                           |   |
|---------------------|---|---------------------------|---|
| DESCRIPTION OF WORK | Scope of Work:<br>co locaiton on existing cell tower  |                           |   |
|                     | Proposed Use  | Current Use<br>cell tower | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br>none |
|                     | SEWER<br>Public/Private   | WATER<br>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  |        | Application Fee \$ 190.00 |
| Value of Work  | 24,000 | State Levy Fee \$ 3.60    |
| 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. |        | Zoning Fee \$ 200.00      |
|  |        | RLD \$                    |
|  |        | SWP \$                    |
|  |        | Total \$ 393.60           |
| Signature of Applicant <i>[Signature]</i>  |        | Date 9/21/21              |



# BUILDING PERMIT APPLICATION

Application Date: 9/21/2021

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

Permit Number: *DP-2021-01168*

GPIN/Tax Map: 7724-74-4297 / *6429-0-5-0*

Issued: *11-18-21*

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<br><i>1001 Collective Way Richmond VA 23220</i> |  |
|                       | Owner<br>Bristol Oak Hill Partners, LLC                      | Phone #<br>615-579-7405  |
|                       | Address<br>381 Mallory Station Rd. Franklin, TN 37067        | Email<br>hanchrow@bristoldevelopment.com                       |
| APPLICANT INFORMATION | Applicant/Contact<br>Tyler Allan                             |  |
|                       | Address<br>2400 Old Brick Rd. Glen Allen, VA 23060           | Phone #<br>540.604.6218<br>Email<br>tallan@fortune-johnson.com |

|                                      |  |  |                           |                                     |
|--------------------------------------|--|--|---------------------------|-------------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><i>West Creek</i>   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>_____           | Date Paid<br>_____                  |
|                                      | Front Setback<br><i>20' from P/R</i>   | Center Line Setback<br><i>45'</i>  | Rear Setback<br><i>5'</i> | CUP/Variance/COA<br>_____ <i>mi</i> |
|                                      | Side Setback<br><i>5'</i>  | Side Setback<br><i>5'</i>  | Flood Zone<br>_____       |                                     |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____<br>Planning & Zoning Officer: <i>[Signature]</i> Date: <i>9/29/21</i> |  |                           |                                     |

|                        |  |           |                                     |
|------------------------|--|-----------|-------------------------------------|
| CONTRACTOR INFORMATION | Contractor<br>Fortune-Johnson, LLC                 |           | Phone<br>540.604.6218               |
|                        | Address<br>2400 Old Brick Rd. Glen Allen, VA 23060 |           | Email<br>tallan@fortune-johnson.com |
|                        | Contractor License Number<br>2705180155            | Type<br>A | Expiration<br>7/31/2023             |

|                     |   |                         |  |                              |                  |
|---------------------|---|-------------------------|--|------------------------------|------------------|
| DESCRIPTION OF WORK | Scope of Work:<br>Installation of [2] construction trailers for use by construction personnel to service construction project |                         |  |                              |                  |
|                     | Proposed Use<br>Construction field office   | Current Use<br>N/a      | Environmental Impacts (stream crossing, wetlands, amt land disturbed)<br>N/a |                              |                  |
|                     | SEWER<br>Public/Private   | WATER<br>Public/Private | # of Bathrooms<br>1  | # of Bedrooms<br>0           | # of floors<br>1 |
|                     | Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No           | Finished Sq. Ft.<br>818 | Unfinished Sq. Ft.<br>0  | Total Sq. Ft.<br>658+160=818 |                  |

|  |                   |                                  |
|--|-------------------|----------------------------------|
| Building Only - Excludes All Trades Permits  |                   | Application Fee \$ <i>139.02</i> |
| Value of Work<br>(926+398)x14 months=\$18,536  |                   | State Levy Fee \$ <i>2.78</i>    |
| I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. |                   | Zoning Fee \$ <i>100.00</i>      |
| Signature of Applicant<br>Tyler Allan  | Date<br>9/17/2021 | RLD \$ _____                     |
|  |                   | SWP \$ _____                     |
|  |                   | Total \$ <i>241.80</i>           |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5/21/21 *Rec: 7-1-2021*

Permit Number: *BP-2021-00812*

GPIN/Tax Map: 7724-84-1682

Issued: *11-18-21*

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: *Building 1  
1001 Collective Way Richmond VA 23238*

Owner: **Bristol Oak Hill Partners, LLC** Phone #: **615-912-8420**

Address: **381 Mallory Station Rd, ste 204, Franklin, TN 37067** Email: **bartosh@bristoldevelopment.com**

Applicant/Contact: **Fred LeGates - Poole & Poole Architecture** Phone #: **240-460-4826**

Address: **4240 Park Place Court, Glen Allen, VA 23060** Email: **flegates@2pa.net**

|                                      |  |  |                            |                                       |
|--------------------------------------|--|--|----------------------------|---------------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><i>West Creek</i>   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount<br>_____            | Date Paid<br>_____                    |
|                                      | Front Setback<br><i>20' from R/L ROW</i>   | Center Line Setback<br><i>45'</i>  | Rear Setback<br><i>10'</i> | CUP/Variance/COA<br><i>POB-2021-1</i> |
|                                      | Side Setback<br><i>Left Side 20'</i>   | Side Setback<br><i>10'</i>   | Flood Zone<br>_____        | <i>M1</i>                             |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ |  |                            |                                       |

Planning & Zoning Officer: *David Boyd* Date: *8/19/21*

Contractor: **Fortune-Johnson LLC** Phone: **301-343-0885**

Address: **3740 Davinci Court, Suite 220 Peachtree Corners, GA 30092** Email: **bwhitlock@fortune-johnson.com**

Contractor License Number: *2705180155* Type: **Class A** Expiration: *7/20/2021* **7-31-23**

Scope of Work:  
**Building 1 - 4 Story, Group R2, Type VA Sprinkler 13R, 2 firewall areas**

|                     |   |   |   |                          |                  |
|---------------------|---|---|---|--------------------------|------------------|
| DESCRIPTION OF WORK | Proposed Use<br><b>Multi-family Residential</b>   | Current Use   | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                          |                  |
|                     | SEWER<br><input checked="" type="checkbox"/> Public <input type="checkbox"/> Private  | WATER<br><input type="checkbox"/> Public <input type="checkbox"/> Private | # of Bathrooms<br>150   | # of Bedrooms<br>150     | # of floors<br>4 |
|                     | 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.<br>123,223 |                  |
|                     |   |   |   |                          |                  |

*Building Only - Excludes All Trades Permits*

Value of Work: **\$12,568,746**

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: **Glen Bartosh** Date: **5.26.2021**

|                 |                     |
|-----------------|---------------------|
| Application Fee | \$ 596,150.91       |
| State Levy Fee  | \$ _____            |
| Zoning Fee      | \$ <b>100-</b>      |
| RLD             | \$ _____            |
| SWP             | \$ _____            |
| Total           | \$ <b>96,250.91</b> |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5/21/21 *Rec: 7-1-21*

Permit Number: *BP-2021-00813*

GPIN/Tax Map: 7724-84-1682

Issued: *11-18-21*

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 *Building 2*  
*2000 Collective Circle Richmond VA 23060*

Owner: Bristol Oak Hill Partners, LLC  
 Phone #: 615-812-8420

Address: 381 Mallory Station Rd. ste 204, Franklin, TN 37067  
 Email: bartosh@bristoldevelopment.com

Applicant/Contact: Fred LeGates - Poole & Poole Architecture  
 Phone #: 240-460-4826

Address: 4240 Park Place Court, Glen Allen, VA 23060  
 Email: flegates@2pa.net

|                                      |  |  |                          |                                     |
|--------------------------------------|--|--|--------------------------|-------------------------------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision: <i>West Creek</i>   | Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: _____            | Date Paid: _____                    |
|                                      | Front Setback: <i>20' from P4 flow</i>   | Center Line Setback: <i>45'</i>  | Rear Setback: <i>10'</i> | CUP/Variance/COA: <i>POD-2021-1</i> |
|                                      | Side Setback: <i>Left Side 90'</i>   | Side Setback: _____  | Flood Zone: _____        | mi: _____                           |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ | Date: <i>8/19/21</i>   |                          |                                     |

Planning & Zoning Officer: *Dawn Floyd*

Contractor: Fortune-Johnson LLC  
 Phone: 301-343-0885

Address: 3740 Davinci Court, Suite 220 Peachtree Corners, GA 30092  
 Email: bwhitlock@fortune-johnson.com

Contractor License Number: *2705180155* Type: Class A Expiration: ~~7/26/2021~~ *7-31-23*

Scope of Work: Building 2 - 4 Story, Group R2, Type VA Sprinkler 13R, 2 firewall areas

|  |   |   |                      |                |
|--|---|---|----------------------|----------------|
| Proposed Use: Multi-family Residential   | Current Use: _____  | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                      |                |
| SEWER: <input type="checkbox"/> Public <input type="checkbox"/> Private  | WATER: <input type="checkbox"/> Public <input type="checkbox"/> Private | # of Bathrooms: 108   | # of Bedrooms: 108   | # of floors: 4 |
| 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. 89,549 |                |

Building Only - Excludes All Trades Permits

Value of Work: \$9,133,998.00

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: Glen Bartosh Date: 6.21.2021

|                 |              |
|-----------------|--------------|
| Application Fee | \$ 69,875.08 |
| State Levy Fee  | \$ _____     |
| Zoning Fee      | \$ 100 -     |
| RLD             | \$ _____     |
| SWP             | \$ _____     |
| Total           | \$ 69,975.08 |



# BUILDING PERMIT APPLICATION

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

Residential  Commercial

Application Date: 5/21/21 Rec: 7-1-21  
 Permit Number: BP-2021-00814

GPIN/Tax Map: 7724-84-1682

Issued: 11-18-21

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: Building 3  
3000 Collective Circle, Richmond VA 23238  
 Owner: Bristol Oak Hill Partners, LLC  
 Phone #: 615-812-8420

Address: 381 Mallory Station Rd, ste 204, Franklin, TN 37067  
 Email: bartosh@bristoldevelopment.com

**APPLICANT INFORMATION**  
 Applicant/Contact: Fred LeGates - Poole & Poole Architecture  
 Phone #: 240-460-4826

Address: 4240 Park Place Court, Glen Allen, VA 23060  
 Email: flegates@2pa.net

**TO BE COMPLETED BY ZONING DEPARTMENT**

|                                       |  |                          |                                     |
|---------------------------------------|--|--------------------------|-------------------------------------|
| Subdivision: <u>West Creek</u>        | Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: _____            | Date Paid: _____                    |
| Front Setback: <u>20' from PL/ROW</u> | Center Line Setback: <u>45'</u>  | Rear Setback: <u>10'</u> | CUP/Variance/COA: <u>POD-2021-1</u> |
| Side Setback: <u>Left: 20'</u>        | Side Setback: <u>10'</u>   | Flood Zone: _____        | <u>M1</u>                           |

APPROVED  REJECTED  COMMENTS: \_\_\_\_\_  
 Planning & Zoning Officer: [Signature] Date: 8/19/21

**CONTRACTOR INFORMATION**  
 Contractor: Fortune-Johnson LLC  
 Phone: 301-343-0885  
 Address: 3740 Davinci Court, Suite 220 Peachtree Corners, GA 30092  
 Email: bwhitlock@fortune-johnson.com

Contractor License Number: 2705180153 Type: Class A Expiration: ~~7/26/2024~~ 7-31-23

**DESCRIPTION OF WORK**  
 Scope of Work: Building 3 - 4 Story, Group R2, Type VA Sprinkler 13R, 2 firewall areas

|  |   |   |                              |                       |
|--|---|---|------------------------------|-----------------------|
| Proposed Use: <u>Multi-family Residential</u>  | Current Use: _____  | Environmental Impacts (stream crossing, wetlands, amt land disturbed) |                              |                       |
| SEWER: <input type="checkbox"/> Public <input type="checkbox"/> Private  | WATER: <input type="checkbox"/> Public <input type="checkbox"/> Private | # of Bathrooms: <u>117</u>  | # of Bedrooms: <u>117</u>    | # of floors: <u>4</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. _____  | Unfinished Sq. Ft. _____  | Total Sq. Ft. <u>100,287</u> |                       |

**Building Only - Excludes All Trades Permits**

|               |                 |                 |              |
|---------------|-----------------|-----------------|--------------|
| Value of Work | \$10,229,274.00 | Application Fee | \$ 78,253.95 |
|               |                 | State Levy Fee  | \$ _____     |
|               |                 | Zoning Fee      | \$ 100 -     |
|               |                 | RLD             | \$ _____     |
|               |                 | SWP             | \$ _____     |
|               |                 | Total           | \$ 78,353.95 |

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: Glen Bartosh Date: 6.21.2021



# TRADE PERMIT APPLICATION

## Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

|          |                      |
|----------|----------------------|
| Date     | 11/19/21             |
| Permit # | ELI - GAS-2021-01100 |
| GPIN     |                      |
| Tax Map  |                      |

### LOCATION

Street Address  
2944 SUMMERCREEK LN, GOOCHLAND VA 23063

### PROPERTY OWNERSHIP

|   |                                   |
|---|-----------------------------------|
| Name<br><u>DUSTIN TAYLOR</u>                                      | Phone<br><u>804-380-8842</u>      |
| Mailing Address<br><u>2944 SUMMERCREEK LN GOOCHLAND, VA 23063</u> | Email<br><u>taylor@ yahoo.com</u> |

### APPLICANT

|   |                                   |
|---|-----------------------------------|
| Name<br><u>DUSTIN TAYLOR</u>                              | Phone<br><u>804-380-8842</u>      |
| Address<br><u>2944 SUMMERCREEK LN GOOCHLAND, VA 23063</u> | Email<br><u>taylor@ yahoo.com</u> |

### CONTRACTOR

|   |                      |            |              |       |
|---|----------------------|------------|--------------|-------|
| Name<br><u>OWNER</u>  | Phone                |            |              |       |
| Mailing Address   | Email                |            |              |       |
| Gas Certification<br>YES <input type="checkbox"/> NO <input type="checkbox"/> | State License Number | Expiration | License Type | Class |

### DESCRIPTION OF WORK

|   |              |               |           |
|---|--------------|---------------|-----------|
| <u>INSTALL 22KW GAS GENERATOR AND TRANSFER SWITCH</u> |              |               |           |
| # of Bathrooms  | Service Size | Power Company | Inquiry # |
| Value of Work (required)<br><u>\$ 3500</u>            |              |               |           |

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

Signature of Applicant:  Date: \_\_\_\_\_

|                          |                        |                                |
|--------------------------|------------------------|--------------------------------|
| Approval: <u></u>        | <b>Office Use Only</b> | Approval date: <u>11/19/21</u> |
| Permit Fee: <u>37.49</u> |                        | Issued date: _____             |

(owner's statement on back)

Owner's Statement Required if Owner is the Applicant

I Dustin Taylor of (address) 2944 Summerchase Ln, Greenland, VA 23063

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

2944 Summerchase Ln, Greenland, VA 23063

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

 (Owner Signature)

61165  
~~51157~~

66



# TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date: 11/17/21

Permit #: 611-2021-01393

GPIN

Tax Map

## LOCATION

Street Address  
7416 Aldeby Street

## PROPERTY OWNERSHIP

|  |                       |
|--|-----------------------|
| Name<br>Clyde Taylor                                   | Phone<br>804.672.6742 |
| Mailing Address<br>7416 Aldeby St; Glen Allen VA 23059 | Email                 |

## APPLICANT

|                                    |                                 |
|------------------------------------|---------------------------------|
| Name<br>Laura Stanley              | Phone<br>804.231.9684           |
| Address<br>PO Box 35418; RVA 23235 | Email<br>laura@dgelectrical.com |

## CONTRACTOR

|  |                                     |                       |                     |            |
|--|-------------------------------------|-----------------------|---------------------|------------|
| Name<br>Davis & Green  | Phone<br>804.231.9684               |                       |                     |            |
| Mailing Address<br>PO Box 35418; RVA 23235   | Email<br>laura@dgelectrical.com     |                       |                     |            |
| Gas Certification<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | State License Number<br>2701 026667 | Expiration<br>8/31/22 | License Type<br>ELE | Class<br>A |

## DESCRIPTION OF WORK

Provide & install 22kW generator

|  |              |               |           |
|--|--------------|---------------|-----------|
| # of Bathrooms                         | Service Size | Power Company | Inquiry # |
| Value of Work (required)<br>\$9,185.00 |              | fee \$63.58   |           |

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: 11/17/21

|                              |                 |                         |
|------------------------------|-----------------|-------------------------|
| Approval: <u>[Signature]</u> | Office Use Only | Approval date: 11-19-21 |
| Permit Fee: \$63.58          |                 | 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

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

Type:  
 Commercial  
 Residential

Trade:  
 Fire  
 Electrical  
 Mechanical  
 Plumbing  
 Gas

Date \_\_\_\_\_

Permit # ELI-2021-01397  
~~ELI-2021-01260~~

GPIN \_\_\_\_\_

Tax Map \_\_\_\_\_

**LOCATION**

Street Address 2151 Dogtown Rd Goochland VA 23063

**PROPERTY OWNERSHIP**

|  |                                     |
|--|-------------------------------------|
| Name <u>John Trice</u>                                     | Phone <u>804-349-2820</u>           |
| Mailing Address <u>2151 Dogtown Rd. Goochland VA 23063</u> | Email <u>JTRICE2151@comcast.net</u> |

**APPLICANT**

|  |   |
|--|---|
| Name <u>Pete Wells</u>                             | Phone <u>757 806 1643</u>                 |
| Address <u>1735 Arlington Rd Richmond VA 23230</u> | Email <u>PWELLS@MASTER-ELECTRICAL.com</u> |

**CONTRACTOR**

|   |  |   |  |
|---|--|---|--|
| Name <u>Master Electrical Services</u>  |  | Phone <u>804-231-1973</u>                 |  |
| Mailing Address <u>1735 Arlington Rd Richmond VA 23230</u>                            |  | Email <u>PWELLS@MASTER-ELECTRICAL.com</u> |  |
| Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | State License Number <u>2705181240</u> | Expiration <u>30 SEP 23</u>               | License Type <u>ELE/GFC</u> Class <u>A</u> |

**DESCRIPTION OF WORK**

Installation of 18 Kw Generator To Existing Transfer Switch

|                                       |              |               |           |
|---------------------------------------|--------------|---------------|-----------|
| # of Bathrooms                        | Service Size | Power Company | Inquiry # |
| Value of Work (required) <u>5,000</u> |              |               |           |

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

Signature of Applicant: [Signature] Date: 16 NOV 21

|                              |                        |                                |
|------------------------------|------------------------|--------------------------------|
| Approval: <u>[Signature]</u> | <b>Office Use Only</b> | Approval date: <u>11/19/21</u> |
| Permit Fee: <u>44.37</u>     |                        | Issued date: _____             |

(owner's statement on back)



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date: 11/17/2021

Permit # ELI-2021-00711

GPIN

Tax Map

## LOCATION

Street Address: 1791 HASKINS RD. 23063

## PROPERTY OWNERSHIP

|   |                          |        |
|---|--------------------------|--------|
| Name: JOHN ALBERT ANDERSON              | cheryl F. STAPPARD       | Phone: |
| Mailing Address: 1795 HASKIN ROAD 23063 | 2043 SANDY HOOK RD 23063 | Email: |

## APPLICANT

|                                |                                 |
|--------------------------------|---------------------------------|
| Name: Kevin HALL               | Phone: (804) 921-1197           |
| Address: 300 DEFENSE AVE 23150 | Email: KEVINSCOTTHALL@gmail.com |

## CONTRACTOR

|   |                                  |                        |                   |          |
|---|----------------------------------|------------------------|-------------------|----------|
| Name: Superior ELECTRICAL SERVICES LLC                                      | Phone: (804) 921-1197            |                        |                   |          |
| Mailing Address: 300 DEFENSE AVE 23150                                      | Email: KEVINSCOTTHALL@gmail.com  |                        |                   |          |
| Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/> | State License Number: 2705170053 | Expiration: 10/30/2022 | License Type: ELE | Class: C |

## DESCRIPTION OF WORK

wire new dwelling to code with 22 Kw whole house generator

|                                       |                   |                                |                     |
|---------------------------------------|-------------------|--------------------------------|---------------------|
| # of Bathrooms: 2                     | Service Size: 200 | Power Company: Dominion Energy | Inquiry #: 10480532 |
| Value of Work (required): \$ 8,500.00 |                   |                                |                     |

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: Kevin Hall Date: 11-17-2021

|                          |                 |                                  |
|--------------------------|-----------------|----------------------------------|
| Approval: <u>Fisher</u>  | Office Use Only | Approval date: <u>11-17-2021</u> |
| Permit Fee: <u>60.44</u> |                 | Issued date: <u>11-17-2021</u>   |

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



## TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

|          |                |
|----------|----------------|
| Date     | 11-30-2021     |
| Permit # | ELI-2021-01425 |
| GPIN     |                |
| Tax Map  |                |

### LOCATION

Street Address  
3855 Sage Road, Sandy Hook, VA 23153

### PROPERTY OWNERSHIP

|   |                                   |
|---|-----------------------------------|
| Name<br>Danny Gibson                                    | Phone<br>757-435-4597             |
| Mailing Address<br>3855 Sage Road, Sandy Hook, VA 23153 | Email<br>danny.gibson@countva.com |

### APPLICANT

|                        |       |
|------------------------|-------|
| Name<br>Tri-Star Const | Phone |
| Address                | Email |

### CONTRACTOR

|   |                                    |
|---|------------------------------------|
| Name<br>Tri-Star Const. LLC   | Phone<br>804-370-1121              |
| Mailing Address<br>8441/2 Twin Cedar Lane Mech VA 23011                       | Email<br>jsharting32@road.com      |
| Gas Certification<br>YES <input type="checkbox"/> NO <input type="checkbox"/> | State License Number<br>2705048912 |
|   | Expiration<br>ELE/BLD              |
|   | License Type<br>04/23              |
|   | Class<br>B                         |

### DESCRIPTION OF WORK

Wire 22kw generator w/ 200amp Transfer Switch  
Set 200 amp disconnect on 2nd panel

|                          |              |               |           |
|--------------------------|--------------|---------------|-----------|
| # of Bathrooms           | Service Size | Power Company | Inquiry # |
| Value of Work (required) | \$9500.00    |               |           |

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: John R. Coaling Date: 11-30-21

|                          |   |
|--------------------------|---|
| Approval: <u>Fisher</u>  | Office Use Only<br>Approval date: <u>11-30-2021</u> |
| Permit Fee: <u>65.03</u> | Issued date: <u>11-30-2021</u>                      |

(owner's statement on back)