



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: 9/01/2021 11-3-2021
 Permit Number: BP-2021-01326
 GPIN/Tax Map: 7704-75-9427 / 62-38-D-26-D
 Issued: 12-2-21
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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	203 Maymont Way Manakin Sabot, VA 23103	
	Owner	Michael Irwin	Phone # 804-337-2644
	Address	203 Maymont Way	Email michaelirwin@yahoo.com
APPLICANT INFORMATION	Applicant/Contact	Taylor Bergman	Phone # 8047441001
	Address	17801 Hull Street Rd	Email Taylor@thedeck-tech.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Park at Manakin Woods	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	_____	Date Paid	_____
	Front Setback	30' from driveway	Center Line Setback	_____	Rear Setback	50' B/S	CUP/Variance/COA	
	Side Setback	20' B/S	Side Setback	20' B/S	Flood Zone	_____	RPUD	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: <u>David Taylor</u> Date: <u>11/5/21</u>							

CONTRACTOR INFORMATION	Contractor	JB Contracting Inc DBA The Deck Tech	Phone	8047441001
	Address	17801 Hull Street Rd	Email	Taylor@thedeck-tech.com
	Contractor License Number	2705127080	Type	Class A
		Expiration	4/23	

Scope of Work:
 Remove existing deck build a 14x12 screen porch with a 6x8 deck and all new footers

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		216	216	

Building Only - Excludes All Trades Permits

Value of Work	35,885.00	Application Fee	\$ 113.48
		State Levy Fee	\$ 3.47
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 201.95

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: [Signature] Date: 9/1/21

Approved - Robby Felts 11/30/21



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/13/2021

Permit Number: BP-2021-01258

GPIN/Tax Map: 7725-05-9797/58-54-4-34-0

Issued: 12-2-21

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

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 12018 Talavera Terrace		Phone # 8044976540
	Owner HHHunt Homes, LLC		Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$4966.00	Date Paid <i>Done</i>
	Front Setback <i>25' from P/R Road</i>	Center Line Setback <i>50'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback <i>10'</i>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer due before issuing C.O. * Survey locate setbacks.</i>			

Planning & Zoning Officer: *[Signature]* Date: *10/20/21*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2022

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2335	Unfinished Sq. Ft. 416	Total Sq. Ft. 2751		

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>2104.52</i>
Value of Work	\$280,602	State Levy Fee	\$ <i>42.09</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <i>100.00</i>
		RLD	\$ <i>100.00</i>
		SWP	\$
		Total	\$ <i>2346.61</i>

Signature of Applicant: *[Signature]* Date: 10/13/2021

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 11/18/2021
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 10/13/2021

Permit Number: BP-2021-01259

GPIN/Tax Map: 7725-05-9793 / 58-54-4-35-0

Issued: 10-2-21

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

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 12016 Talavera Terrace	
	Owner HHHunt Homes, LLC	Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email sbisaacs@hhhunthomes.com

APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>25' from edge of Row</i>	Center Line Setback <i>50'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer due before issuing C.O. *Survey locate shown</i>			

Planning & Zoning Officer: *[Signature]* Date: *10/20/21*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2022

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2310	Unfinished Sq. Ft. 581	Total Sq. Ft. 2891		

Building Only - Excludes All Trades Permits

Value of Work	\$294,780 <i>294,882⁰⁰</i>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *[Signature]* Date: 10/13/2021

Application Fee	\$ 2211.62
State Levy Fee	\$ 44.23
Septic/Well Fee	\$
Zoning Fee	\$ 100.00
RLD	\$ 100.00
SWP	\$
Total	\$ 2455.85

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 11/18/2021
Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/13/2021

Permit Number: BP-2021-01261

GPIN/Tax Map: 7725-05-9790 / 58-54-4-36-0

Issued: 12-2-21

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

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 12014 Talavera Terrace	
	Owner HHHunt Homes, LLC	Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email sbisaacs@hhhunthomes.com

APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Done</u>
	Front Setback <u>25' from P/R</u>	Center Line Setback <u>0.50'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Cash Proffer due before issuing C.O. Survey locate Setbacks</u>			

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2022

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2335		Unfinished Sq. Ft. 416	Total Sq. Ft. 2751	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>2104.52</u>
Value of Work	\$280,602	State Levy Fee	\$ <u>4209</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <u>100.00</u>
		RLD	\$ <u>100.00</u>
		SWP	\$
		Total	\$ <u>2344.61</u>
Signature of Applicant	<u>sbisaacs</u>	Date	<u>10/13/2021</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 11/10/2021
Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/13/2021

Permit Number: BP-2021-01262

GPIN/Tax Map: 7725-05-9697/58-54-4-37-0

Issued: 10-2-21

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

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OWNER INFORMATION	Site Address 12012 Talavera Terrace	
	Owner HHHunt Homes, LLC	Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email sbisaacs@hhhunthomes.com

APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$ 4966.00</u>	Date Paid <u>Done</u>
	Front Setback <u>25' from Pylon</u>	Center Line Setback <u>50'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Cash Proffer due before issuing C.O. # In my location & Thanks.</u>			

Planning & Zoning Officer: Daniel Boyd Date: 10/20/21

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2022

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.					
	Proposed Use Townhomes		Current Use None		Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet	
	<input checked="" type="checkbox"/> Public <input type="checkbox"/> Private		<input checked="" type="checkbox"/> Public <input type="checkbox"/> Private		# of Bathrooms 3	# of Bedrooms 3
	Finished Sq. Ft. 2149		Unfinished Sq. Ft. 559		Total Sq. Ft. 2708	
	SEWER: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private					

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2071.62</u>	
Value of Work \$276,216		State Levy Fee \$ <u>4143</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____	
Signature of Applicant <u>sbisaacs</u> Date <u>10/13/2021</u>		Zoning Fee \$ <u>100.00</u>	
		RLD \$ <u>100.00</u>	
		SWP \$ _____	
		Total \$ <u>2313.05</u>	

LIEN AGENT INFORMATION

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

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OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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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

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RLD \$100.00 for Residential disturbing over 10,000 square feet
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Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 11/18/2021
Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 10/13/2021

Permit Number: BP-2021-01263

GPIN/Tax Map: 7725-05-9693/58-54-4-38-0

Issued: 12-2-21

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

Residential Commercial

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

OWNER INFORMATION	Site Address 12010 Talavera Terrace	
	Owner HHHunt Homes, LLC	Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059	

APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hnhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Done</u>
	Front Setback <u>25' from P/L/ROW</u>	Center Line Setback <u>50'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>Ret. Side 10'</u>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Cash Proffer due before issuing C.O. * Survey locate setbacks.</u>			
	Planning & Zoning Officer <u>Daniel Boyd</u>		Date <u>10/20/21</u>	

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hnhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2022

DESCRIPTION OF WORK	Scope of Work: 5 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2239		Unfinished Sq. Ft. 592	Total Sq. Ft. 2831	
	Building Only -- Excludes All Trades Permits				

Value of Work	\$288,762
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant isaacs Date 10/13/2021

Application Fee	\$ <u>2165.72</u>
State Levy Fee	\$ <u>43.31</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>100.00</u>
RLD	\$ <u>100.00</u>
SWP	\$
Total	\$ <u>2409.03</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 11/10/2021

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/4/2021

11-10-2021

Permit Number: BP-2021-01371

GPIN/Tax Map: 7724-71-9334/ 59-5-0-1-

Issued: 12-2-21

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

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 set back distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 12000 Avery Point Way, Richmond, VA 23233 <i>300</i>	
	Owner Avery Point LLC	Phone # (508) 596-2578
APPLICANT INFORMATION	Address 701 Maiden Choice Lane, Baltimore, MD 21228	Email Andrew.hirschfield@erickson.com
	Applicant/Contact Brinkmann Constructors / Jackson Morrissey	Phone # (618) 980-5652
	Address 4801 Cox Rd. suite 112, Glen Allen, VA 23060	Email jmorrissey@brinkmannconstructors.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Avery Point</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>20' from PL/ROW</i>	Center Line Setback <i>45'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer <i>David Floyd</i> Date <i>11/18/21</i>		

CONTRACTOR INFORMATION	Contractor Brinkmann Constructors		Phone (618) 980-5652
	Address 4801 Cox Rd. suite 112, Glen Allen, VA 23060		Email jmorrissey@brinkmannconstructors.com
	Contractor License Number <i>2705172414</i>	Type <i>Contractor</i>	Expiration <i>7-31-2023</i>

DESCRIPTION OF WORK	Scope of Work: New construction of carports in RB1 parking lot			
	Proposed Use Covered Parking	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. 6,408	Total Sq. Ft.

Building Only - Excludes All Trades Permits

Value of Work	\$ 129,296 <i>224,280.00</i>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant *David Bernier* Date 11/4/2021

Application Fee	\$ <i>1682.10</i>
State Levy Fee	\$ <i>33.64</i>
Zoning Fee	\$ <i>100.00</i>
RLD	\$
SWP	\$
Total	\$ <i>1815.74</i>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/4/2021 **11-10-2021**

Permit Number: **BP-2021-01372**

GPIN/Tax Map: **726-71-9334/59-5-0-1-0**

Issued: **12-2-21**

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

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

OWNER INFORMATION	Site Address 12000 Avery Point Way, Richmond, VA 23233 9000	Phone # (508) 596-2578
	Owner Avery Point LLC	Email Andrew.hirshfield@erickson.com
	Address 701 Maiden Choice Lane, Baltimore, MD 21228	Phone # (618) 980-5652
APPLICANT INFORMATION	Applicant/Contact Brinkmann Constructors / Jackson Morrissey	Email jmorrissey@brinkmannconstructors.com
	Address 4801 Cox Rd. suite 112, Glen Allen, VA 23060	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Avery Point	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 20' from P/Row	Center Line Setback 45'	Rear Setback 5'	CUP/Variance/COA
	Side Setback 5'	Side Setback 5'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____	Date 11/18/21		

CONTRACTOR INFORMATION	Contractor Brinkmann Constructors	Phone (618) 980-5652
	Address 4801 Cox Rd. suite 112, Glen Allen, VA 23060	Email jmorrissey@brinkmannconstructors.com
	Contractor License Number 2705172414	Type Contractor

DESCRIPTION OF WORK	Scope of Work: New construction of carports in RB2 parking lot		
	Proposed Use Covered Parking	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A
	SEWER Public/Private	WATER Public/Private	# of Bathrooms # of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. 1,998

Building Only - Excludes All Trades Permits		Application Fee \$ 524.47
Value of Work \$ 40,214	109,930.00	State Levy Fee \$ 10.49
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ 100.00
Signature of Applicant David Burner	Date 11/4/2021	RLD \$ _____
		SWP \$ _____
		Total \$ 634.96

10-26-2021



BUILDING PERMIT APPLICATION

Application Date: 10-20-2021

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

Permit Number: BP-2021-01297

GPIN/Tax Map: 6777-92-9210 / 44-1-6-19-E

Issued: 12-2-21

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 1866 Sheppard Town Rd. Crozier, VA 23039	
	Owner Bill and Judi Sheppard	Phone # (804) 708-0770
	Address 1866 Sheppard Town Rd. Crozier, VA 23039	Email judiannesheppard@comcast.net

APPLICANT INFORMATION	Applicant/Contact Sam Linton (Nova Solar, Inc.)	Phone # (703) 472-4709
	Address 2735 Maidens Rd. Goochland, VA 23063	Email office@novasolarinc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 75' from P/R/W	Center Line Setback 100'	Rear Setback 5'	CUP/Variance/COA —
	Side Setback 5'	Side Setback 5'	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>David Flegel</i> Date: 11/1/21			

CONTRACTOR INFORMATION	Contractor Nova Solar, Inc.	Phone (703)679-8607
	Address 2735 Maidens Rd. Goochland, VA 23063	Email office@novasolarinc.com
	Contractor License Number 2705160290	Type Class A

DESCRIPTION OF WORK	Scope of Work: Installation of a 25 panel, 10.625kW, ground mounted solar PV system with pile-driven pipe supports.				
	Proposed Use Power generation	Current Use Lawn	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 6 driven piles (3" pipes) and a 120' trench for direct burial cable. No stream crossings or wetland disturbance		
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 562		

Building Only - Excludes All Trades Permits		Application Fee	\$ 132.24
Value of Work	\$26,720.00	State Levy Fee	\$ 2.64
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	\$ 159.88
Signature of Applicant	<i>[Signature]</i>	Date	10-20-2021



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: 11/05/21

Permit Number: BP-2021-01346

GPIN/Tax Map: 6757-93-5975 / 42-16-B-5-0

Issued: 12-3-21

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

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	2963 Pitts DR GOOCHLAND VA. 23063	
	Owner	MARK & Kim TAYLOR	Phone # (804) 306-2948
	Address	2963 Pitts DR GOOCHLAND VA 23063	Email TAYLOR.MARK@GMAIL

APPLICANT INFORMATION	Applicant/Contact	MARK & Kim TAYLOR	Phone # (804) 688-4059
	Address	2963 Pitts DR GOOCHLAND VA 23063	Email TAYLOR.KIM@GMAIL

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>Anita Banner</i> Date: 11/10/2021			

CONTRACTOR INFORMATION	Contractor	MARK & Kim TAYLOR - OWNER	Phone (804) 306 2948 / 688-6059
	Address	2963 Pitts DR. GOOCHLAND VA. 23063	Email TAYLOR.MARK@GMAIL.COM / TAYLOR.KIM@GMAIL.COM
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: RENOVATION & REMODEL OF Kitchen, Bath Room's; expanding staying master bedroom; Construct 4'x15' addition to foyer; remove inside existing fireplace and replace with elevator shaft.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	10,000
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Application Fee	\$ 57.00
State Levy Fee	\$ 1.14
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 83.14

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: 11/05/21

BUT NOT IN BATHROOMS



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-2021-00816

GPIN/Tax Map: 7724-84-1682

Issued: 12-7-21

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 5000 Gather Drive, Richmond VA 23238	
	Owner Bristol Oak Hill Partners, LLC	Phone # 615-812-8420
	Address 381 Mallory Valley Rd, ste 204, Franklin, TN 37067	Email bartosh@bristoldevelopment.com
APPLICANT INFORMATION	Applicant/Contact Fred LeGates - Poole & Poole Architecture	
	Address 3740 Davinci Court, Suite 220 Peachtree Corners, GA 30092	Phone # 240-460-4826 Email flegates@2pa.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision West Creek	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 20' from P.U. Row	Center Line Setback 45'	Rear Setback 5'	CUP/Variance/COA POD-2021-1
	Side Setback Left Side 35'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer Daniel Ford		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 2705180155	Type Class A	Expiration 7/26/2021 7-31-23

DESCRIPTION OF WORK	Scope of Work: Building 5 Detached Garage Building 1 Story, Type Vb unprotected				
	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 0	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1,336	

Building Only - Excludes All Trades Permits		Application Fee	\$ 1,042.48
Value of Work	\$136,272.00	State Levy Fee	\$
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 100 -
		RLD	\$
		SWP	\$
		Total	\$ 1142.48
Signature of Applicant	Glen Bartosh	Date	6.21.2021



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: 5/21/21 *Rec: 7-1-21*
 Permit Number: *BP-2021-00818*

GPIN/Tax Map: 7724-84-1682

Issued: *12-7-21*

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: *5036 Gather Drive, Rich. 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/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	Proffer	Amount	Date Paid
	<i>West Creek</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<i>20' From PH Row</i>	<i>45'</i>	<i>5'</i>	<i>POD-2021-1</i>
Side Setback	Side Setback	Flood Zone		
<i>35' Left Side</i>	<i>5'</i>			
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:		
Planning & Zoning Officer: <i>David Floyd</i>	Date: <i>8/19/21</i>			

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: *2705190155* Type: **Class A** Expiration: *7/25/2021 7-31-23*

Scope of Work: **Building 7 Detached Garage Building 1 Story, Type Vb unprotected**

DESCRIPTION OF WORK	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Multi-family Residential				
	SEWER <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	WATER <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	# of Bathrooms	# of Bedrooms	# of floors
	0	0	1		
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.		
			1,336		

Building Only - Excludes All Trades Permits

Value of Work	\$136,272.00	Application Fee	\$ 1,042.48
		State Levy Fee	\$ _____
		Zoning Fee	\$ 100 -
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ 1,142.48

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



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-2021-00820*

GPIN/Tax Map: 7724-84-1682

Issued: *12-7-21*

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: *5006 Gathur Drive Rich. VA 23238*

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

Address: 381 Mallory Station Road, ste 204, Franklin, TN 37067 Email: bwhitlock@fortune-johnson.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: *West Creek* Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: *30' from P4 Rev* Center Line Setback: *45'* Rear Setback: *5'* CUP/Variance/COA: _____
 Side Setback: *Left Side 35'* Side Setback: *5'* Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: *David Floyd* 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: *2705180154* Type: Class A Expiration: *7/26/2021 7-31-23*

DESCRIPTION OF WORK
 Scope of Work: Building 9 Detached Garage / Dog Wash Building 1 Story, Type Vb unprotected

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Multi-family Residential		# of Bathrooms	# of Bedrooms	# of floors
SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	0	0	1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			1,336	

Building Only - Excludes All Trades Permits

Value of Work	\$136,272.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Glen Bartosh Date: 6.21.2021

Application Fee	\$ 1,042.48
State Levy Fee	\$
Zoning Fee	\$ 100 -
RLD	\$
SWP	\$
Total	\$ 1142.48



BUILDING PERMIT APPLICATION

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

Residential Commercial

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

Permit Number: *BP-2021-00821*

GPIN/Tax Map: 7724-84-1682

Issued: *12-7-21*

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

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

OWNER INFORMATION	Site Address <i>5027 Gathard Drive, Rich. VA 23238</i>	Phone # 615-812-8420
	Owner Bristol Oak Hill Partners, LLC	Email bartosh@bristoldevelopment.com
APPLICANT INFORMATION	Address 381 Mallory Station Rd, ste 204, Franklin, TN 37067	Phone # 240-460-4826
	Applicant/Contact Fred LeGates - Poole & Poole Architecture	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 PLYAW</i>	Center Line Setback <i>45'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>Left Side 35'</i>	Side Setback <i>5'</i>	Flood Zone	

APPROVED REJECTED COMMENTS:

Planning & Zoning Officer: *Dawn Floyd* 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 whitlock@fortune-johnson.com
	Contractor License Number <i>2705180155</i>	Type Class A Expiration <i>7/26/2021 7-31-23</i>

Scope of Work:
 Building 10 Detached Garage Building 1 Story, Type Vb unprotected

Proposed Use Multi-family Residential	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1,612	

Building Only - Excludes All Trades Permits

Value of Work	\$164,424.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Glen Bartosh Date: 6.21.2021

Application Fee	\$ 1,257.84
State Levy Fee	\$
Zoning Fee	\$ 100-
RLD	\$
SWP	\$
Total	\$ 1357.84



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-2021-00824**

GPIN/Tax Map: 7724-84-1682

Issued: **12-7-21**

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 5049 Gather Drive Rich, VA 23238	Phone # 615-812-8420
	Owner Bristol Oak Hill Partners, LLC	Email bartosh@bristoldevelopment.com
APPLICANT INFORMATION	Address 381 Mallory Station Rd, ste 204, Franklin, TN 37067	Phone # 240-460-4826
	Applicant/Contact Fred LeGates - Poole & Poole Architecture	Email flegates@2pa.net
	Address 4240 Park Place Court, Glen Allen, VA 23060	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision West Creek	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 20' from Pylon	Center Line Setback 45'	Rear Setback 5'	CUP/Variance/COA _____
	Side Setback Left Side 35'	Side Setback 5'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer David Floyd 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 whitlock@fortune-johnson.com
	Contractor License Number 2705180125 Type Class A	Expiration 27030013517-31-23

DESCRIPTION OF WORK	Scope of Work: Masonry Trash Enclosure (not a building, it has no roof)				
	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 0	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 400	

Building Only - Excludes All Trades Permits		Application Fee	\$ 312.12
Value of Work	\$40,800.00	State Levy Fee	\$
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ IND -
		RLD	\$
		SWP	\$
		Total	\$ 412.12
Signature of Applicant	Glen Bartosh	Date	6.21.2021



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: 11/17/21

Permit Number: AP-2021-D1431

GPIN/Tax Map: 6788-24-3771/32-18-0-30-0

Issued: 12-07-2021

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: 1709 Bridgewater Bluff, Maidens VA 23102

Owner: Shana & Dana Ferrante Phone #: 804-229-9788

Address: 1709 Bridgewater Bluff, Maidens VA 23102 Email: shana.psu@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: _____ Phone #: _____

Address: _____ Email: _____

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

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

Side Setback: _____ Side Setback: _____ Flood Zone: _____ RR

APPROVED REJECTED COMMENTS: * NOT SUBJECT TO SETBACKS.
 Planning & Zoning Officer: David Floyd Date: 12/2/21

CONTRACTOR INFORMATION
 Contractor: Owner Phone: _____

Address: _____ Email: _____

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: Pool Barrier

Proposed Use <u>Fence around pool</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
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SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
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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.
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Building Only - Excludes All Trades Permits

Value of Work: \$3500

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: Shana Ferrante Date: 11/17/21

Application Fee	\$ <u>30-</u>
State Levy Fee	\$ <u>60</u>
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>30.60</u>

17-21-1



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:

Permit Number: BP-2021-01359

GPIN/Tax Map: 46-27-A-17-0 / 7707-74-5199

Issued: 12-8-2021

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

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

OWNER INFORMATION	Site Address <u>2301 wheatlands Dr. Manakin-Sabot</u>	
	Owner <u>Phillip + Winsor Egolf</u>	Phone #
	Address <u>Same</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Phil cell 804.814.8815</u>	Phone # <u>804.814.8815</u>
	Address <u>Same</u>	Email <u>paege@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Wheatlands</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from P/R/W</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA <u>PR</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: [Signature] Date: 11/17/21

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

DESCRIPTION OF WORK	Scope of Work: <u>Ag. Pole Barn 32' x 40' Carport pole building</u>				
	Proposed Use <u>Storage</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NO</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1280</u>	Total Sq. Ft. <u>1280</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>170.40</u>
Value of Work	<u>\$20,000</u> <u>#35,200.00</u>	State Levy/Fee	\$ <u>25.34</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>198.87</u>

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

Signature of Applicant: [Signature] Date: 11-22-21



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: 11/15/21 11-17-2021
 Permit Number: BP-2021-01401
 GPIN/Tax Map: 42 1 119 B1 / 6766-39-345
 Issued: 12-7-2021

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: 1101 Maidens Rd, Maidens 23102
 Owner: Deana + Ignacio Garzon Phone #: 804-591-9684
 Address: 1101 Maidens Rd Email: dgarzon2081@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: Deana Garzon Phone #: "Same" ↑
 Address: 1101 Maidens Rd. Email: "Same" ↑

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: None Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 75 from P.U. Row Center Line Setback: 100' Rear Setback: 5' CUP/Variance/COA: _____
 Side Setback: 5' Side Setback: 5' Flood Zone: _____ A2
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 11/24/21

CONTRACTOR INFORMATION
 Contractor: Garzons (owners) Phone: 804-591-9684
 Address: 1101 Maidens Rd Email: dgarzon2081@gmail.com
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: Shed for storage 17'x20' detached building.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>340</u>	<u>340</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$3,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Deana Garzon Date: 11/15/21

Application Fee	\$ <u>54.08</u>
State Levy Fee	\$ <u>1.08</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>80.16</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: 11-30-21
Permit Number: BP2021-01424
GPIN/Tax Map: 6786-09-1029 / 44-15-1-21-0
Issued: 12-7-21
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 1761 Wild Turkey Lane, Crozier, VA 23039	
	Owner Steve Becraft	Phone # 804-337-0309
	Address 1761 Wild Turkey Lane, Crozier, VA 23039	Email smbecraft81@gmail.com

APPLICANT INFORMATION	Applicant/Contact Kevin Joyner/Joyner Contracting LLC		Phone # 804-400-3489
	Address 806 Broad Street Road, Manakin Sabot, VA 23103		Email kevinjoyner@comcast.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Covington</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint use</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>12/3/21</u>			

CONTRACTOR INFORMATION	Contractor Joyner Contracting LLC		Phone 804-400-3489
	Address 806 Broad Street Road, Manakin Sabot, VA 23103		Email kevinjoyner@comcast.net
	Contractor License Number 2705159577	Type Class A	Expiration 11/30/2022

DESCRIPTION OF WORK	Scope of Work: Kitchen wall alteration and Finish Space on 2nd floor <i>for storage & office space</i>				
	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. 336	Unfinished Sq. Ft.	Total Sq. Ft. 336	

Building Only - Excludes All Trades Permit		Application Fee	\$ <u>237.00</u>
Value of Work	<u>50,000</u>	State Levy Fee	\$ <u>4.74</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
Signature of Applicant: <u>[Signature]</u> Date: <u>11/29/21</u>		SWP	\$ _____
		Total	\$ <u>266.74</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: 11-19-2021

Permit Number: BP-2021-01409

GPIN/Tax Map: 6729-37-8245/18-9-0-9-0

Issued: 12-7-2021

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

Residential Commercial

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

OWNER INFORMATION	Site Address	<u>2827 George's landing rd Goochland VA 23063</u>		
	Owner	<u>Martha I Correa Correa</u>	Phone #	<u>804 4376421</u>
APPLICANT INFORMATION	Address	<u>2827 George's landing rd</u>		
	Applicant/Contact	<u>Judith Alvarez</u>	Email	<u>Judithalvarez158@gmail</u>
			Phone #	
	Address			
			Email	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Georges Landing</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>55' from P/R/W</u>		<u>35'</u>	
	Side Setback	Side Setback	Flood Zone	
	<u>50'</u>	<u>30'</u>		<u>181</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS:		
	Planning & Zoning Officer <u>Daniel Ford</u>	Date <u>12/1/21</u>		

CONTRACTOR INFORMATION	Contractor	Phone
	<u>A Gonzales Construction Company</u>	<u>804-252 8801</u>
	Address	Email
	<u>1729 First colonial ct henrico VA</u>	<u>Agonzales construccion company@gmail.com</u>
	Contractor License Number <u>2705136516</u>	Type <u>A</u> Expiration <u>09-30-2022</u>

Scope of Work: Room framing 14x24 Bedroom Frame one room

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
		# of Bathrooms	# of Bedrooms	# of floors
SEWER Public/Private	WATER Public/Private			
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? <input checked="" type="checkbox"/> No	Finished Sq. Ft. <u>336</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>336</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>19,000</u>	Application Fee \$ <u>97.50</u>
	State Levy Fee \$ <u>19.5</u>
	Zoning Fee \$ <u>25.00</u>
	RLD \$
	SWP \$
	Total \$ <u>124.45</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 Martha Date 11-19-21



BUILDING PERMIT APPLICATION

Application Date: 11-22-2021

Permit Number: BP-2021-01420

GPIN/Tax Map: 7716-72-9808 / 58-40-0-3-0

Issued: 12-7-2021

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: 155 GAINS THIRIFTY LANE MANAKIN-SABOT VA 23103

Owner: JOHN & JODY LOCKER Phone #: _____

Address: 155 GAINS THIRIFTY LANE MANAKIN SABOT VA 23103 Email: _____

APPLICANT INFORMATION

Applicant/Contact: NATE SEABORN Phone #: 804 614 5510

Address: 23 DEERWOOD DR. GUM SPRING VA 23065 Email: NATESEABORNCONSTRUCTION@GMAIL.COM

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: <u>Gaines Thrifty Ln</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>55' from P/R/W</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 REJECTED COMMENTS: _____

Planning & Zoning Officer: [Signature] Date: 12/3/21

CONTRACTOR INFORMATION

Contractor: NATE SEABORN CONSTRUCTION Phone: 804 614 5510

Address: 23 DEERWOOD DR. GUM SPRING VA 23065 Email: NATESEABORNCONSTRUCTION@GMAIL.COM

Contractor License Number: 2705150355 Type: CLASS A BAC Expiration: 8-31-2022

DESCRIPTION OF WORK

Scope of Work: BUILD 30x22 POOLHOUSE WITH BATHROOM AND KITCHENETTE

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>NONE 5,000 sqft</u>		
SEWER Public/Private: <u>Private</u>	WATER Public/Private: <u>Private</u>	# of Bathrooms: <u>1</u>	# of Bedrooms: _____	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.: <u>660</u>	Unfinished Sq. Ft.: _____	Total Sq. Ft.: <u>660</u>	

Building Only - Excludes All Trades Permits

Value of Work: <u>\$35,000.00 36,300</u>	Application Fee: \$ <u>175.35</u>
	State Levy Fee: \$ <u>3.51</u>
	Zoning Fee: \$ <u>25.00</u>
	RLD: \$ _____
	SWP: \$ _____
	Total: \$ <u>203.86</u>

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

Signature of Applicant: [Signature] Date: _____



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-7-21

Permit Number: BP-2021-01427

GPIN/Tax Map: 7726-74-1879 / 59-3-2-88-A

Issued: 12-7-21

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 2000 Wilkes Ridge Drive Richmond VA, 23223	
	Owner Sheltering Arms Corporation	Phone # 804-342-4324
	Address 140 East Shore Drive Suite 200 Glen Allen VA, 23059	Email hweaver@shelteringarms.com

APPLICANT INFORMATION	Applicant/Contact Sheltering Arms Insitute		Phone # 804-342-4324
	Address 2000 Wilkes Ridge Drive Richmond, VA, 23059		Email hweaver@shelteringarms.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Creek Bus.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to Footprints / use.</u> M1			
	Planning & Zoning Officer: <u>David Boyd</u> Date: <u>12/7/21</u>			

CONTRACTOR INFORMATION	Contractor D & H Construction Services Inc.		Phone 804-771-9660
	Address 711 Hospital Street (Suite 26) Richmond VA, 23219		Email isaaca@dandhconstruction.org
	Contractor License Number 2705120762	Type Class A, CBC, RBC	Expiration 02-28-2022

DESCRIPTION OF WORK	Scope of Work: Tenant Upfit to existing space. Scope of work includes minor demolition, metal stud/drywall partitions, painting, wire mesh partitions, mechanical & electrical				
	Proposed Use Storage room	Current Use Not used	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 4542	Unfinished Sq. Ft. 4542	Total Sq. Ft. 4542	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>442.50</u>
Value of Work	\$ 59,000.00	State Levy Fee \$ <u>2.85</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>12/30/2021</u>		Zoning Fee \$ <u>100.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>551.35</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 5/21/21 *Rec: 7-1-21*
 Permit Number: *BP-2021-00823*

GPIN/Tax Map: 7724-84-1682

Issued: *12-7-21*

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

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

OWNER INFORMATION	Site Address <i>5026 Gather Drive Rich, VA 23238</i>	
	Owner Bristol Oak Hill Partners, LLC	Phone # 615-312-3102
	Address 325 Seaboard Lane, 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 <i>West Creek</i>	Offer Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Amount	Date Paid
	Front Setback <i>20' from PL/Re</i>	Center Line Setback <i>45'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>Lot 526 35'</i>	Side Setback <i>5'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: <i>David Floyd</i> Date: <i>8/19/21</i>			

CONTRACTOR INFORMATION	Contractor Fortune-Johnson LLC		Phone 301-343-0885
	Address 3740 Davinci Court, Suite 220 Peachtree Corners, GA 30092		Email whitlock@fortune-johnson.com
	Contractor License Number 2703001351	Type Class A	Expiration 7/26/2021

DESCRIPTION OF WORK	Scope of Work: Building 12 Pool Pavilion Building 1 Story, Type Vb unprotected				
	Proposed Use Multi-family Residential	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER <input type="checkbox"/> Public <input type="checkbox"/> Private	# of Bathrooms 1	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 938	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>731.92</u>
Value of Work	\$95,676.00	State Levy Fee \$ _____
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Glen Bartosh</u> Date <u>6.21.2021</u>		Zoning Fee \$ <u>100-</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>831.92</u>



BUILDING PERMIT APPLICATION

Application Date: 11-22-2021

Permit Number: **BP-2021-01421**

GPIN/Tax Map: 63-1-0-174, 63-29-0-A-1

Issued: **12-7-21**

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

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

Residential Commercial

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

OWNER INFORMATION	Site Address 12874 12940 Patterson Ave. Henrico, VA 23238	
	Owner Creekmore LLC	Phone # 804-314-6008
	Address 350 Pembroke Ln. Richmond, VA 23238	Email scametas@gmail.com

APPLICANT INFORMATION	Applicant/Contact Stefan Cametas		Phone # 804-314-6008
	Address 350 Pembroke Ln. Richmond, VA 23238		Email scametas@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	RO
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>[Signature]</i> Date 12/1/21			

CONTRACTOR INFORMATION	Contractor New Field Inc.		Phone 804-441-1041
	Address 10451 Dow Gil Rd. Ashland, VA 23005		Email jrevels@newfieldinc.com
	Contractor License Number 2705156540	Type Corporation	Expiration 03-31-2023

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

Building Only - Excludes All Trades Permits		Application Fee	\$ 245-
Value of Work	\$ 26,000.00	State Levy Fee	\$ 3.90
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <i>[Signature]</i> Date 11-23-2021		Zoning Fee	\$ 50-
		RLD	\$
		SWP	\$
		Total	\$ 248.90



BUILDING PERMIT APPLICATION

Application Date: 11-1-2021Permit Number: BP-2021-01325GPIN/Tax Map: M14-89-3646/63-10-149-AIssued: 12-8-2021This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

 Residential Commercial

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

OWNER INFORMATION	Site Address <u>604 ART RD, MANAKIN, VA, 23103</u>	
	Owner <u>JANE WEST</u>	Phone # <u>804-475-3301</u>
	Address <u>604 ART RD, MANAKIN SAZOT, VA. 23103</u>	Email <u>N/A</u>

APPLICANT INFORMATION	Applicant/Contact <u>JOHN BARHAM</u>		Phone # <u>804-200-1279</u>
	Address <u>9362 CENTERWAY DR. GLEN ALLEN 23059</u>		Email <u>johnbarham3@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from P/R/W</u>	Center Line Setback _____	Rear Setback <u>35'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>Dave Floyd</u> Date <u>11/5/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>BUILD A 12X15 DINETTE OFF REAR OF HOME W/ 12X12 DECK</u>					
	Proposed Use <u>Dinning</u>		Current Use <u>N/A</u>		Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NONE</u>	
	SEWER Public/Private		WATER Public/Private		# of Bathrooms	# of Bedrooms
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No <input checked="" type="checkbox"/>		Finished Sq. Ft. <u>180</u>	Unfinished Sq. Ft. <u>144</u>	Total Sq. Ft. <u>324</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>74.34</u>
Value of Work <u>\$3,500.00</u> <u>\$13,860.00</u>		State Levy Fee	\$ <u>1.49</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>100.86</u>

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

Signature of Applicant [Signature] Date 11/1/21



BUILDING PERMIT APPLICATION

Application Date: 11/18/2021

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

Permit Number: BP-2021-01412

GPIN/Tax Map: 7705-45-9803 / 57.35-0-9-0

Issued: 12-8-2021

Residential Commercial

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

This application requires two copies of construction drawings and two copies of the 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 805 Merchant Lee Court, Manakin Sabot 23103	
	Owner Tom & Angela Corbitt	Phone # 434-409-3357
	Address 805 Merchant Lee Court, Manakin Sabot 23103	Email travis@ultimatepools.com

APPLICANT INFORMATION	Applicant/Contact Travis Jowers / Ultimate Pools		Phone # 804-749-4706
	Address 2175 Lanier Lane, Rockville, VA 23146		Email travis@ultimatepools.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>The Meadows at Manakin</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from PUP/W</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>Rt. Side 35'</u>	Side Setback <u>Lt. Side 5'</u>	Flood Zone	<u>RR</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>12/1/21</u>			

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

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

Building Only - Excludes All Trades Permits		Application Fee \$ <u>147.00</u>
Value of Work 30,000.00		State Levy Fee \$ <u>2.94</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
Signature of Applicant <u>[Signature]</u>		Zoning Fee \$ <u>25.00</u>
Date <u>11-18-2021</u>		RLD \$
		SWP \$
		Total \$ <u>174.94</u>



BUILDING PERMIT APPLICATION

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

Application Date: 07/26/2021

Permit Number: BP-2021-00925

GPIN/Tax Map: 6788-24-3771 / 32-18-0-30-0

Issued: 12-8-2021

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

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 1709 Bridgewater Bluff, Maidens VA 23102	
	Owner Shana Ferrante	Phone # 8042299788
	Address 1709 Bridgewater Bluff, Maidens VA 23102	Email shanapsu@gmail.com

APPLICANT INFORMATION	Applicant/Contact Sam Linton		Phone # 7034724709
	Address 2735 Maidens Rd. Goochland, VA 23063		Email office@novasolarinc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint.</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>11/12/21</u>			

CONTRACTOR INFORMATION	Contractor Nova Solar, Inc.		Phone 7036798607
	Address 2735 Maidens Rd. Goochland, VA 23063		office@novasolarinc.com
	Contractor License Number 2705160290	Type Class A	Expiration 11-30-2022

DESCRIPTION OF WORK	Scope of Work: Installation of a 36 panel, 12.96kW, rooftop solar array.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	<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. 677	Total Sq. Ft. 677		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>14952</u>
Value of Work	30,560.00	State Levy Fee	\$ <u>249</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Sam Linton</u> Date: <u>07/26/2021</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>2500</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>17751</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: 10/28/21
 Permit Number: BP-2021-01316
 GPIN/Tax Map: 67109-106-9622/31-12-0-5-A
 Issued: 12-9-21
 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 <u>2832 TURNER RD</u>	
	Owner <u>CHRIS & PAIGE WALSH</u>	Phone # <u>804-304-2035</u>
	Address <u>2832 TURNER RD</u>	Email <u>Walshbuilders@verizon.net</u>

APPLICANT INFORMATION	Applicant/Contact <u>CHRIS WALSH</u>	Phone # <u>804-304-2035</u>
	Address <u>2832 TURNER RD</u>	Email <u>Walshbuilders@verizon.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from PL/ROW</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David Lloyd</u> Date <u>12/7/21</u>			

CONTRACTOR INFORMATION	Contractor <u>WALSH BUILDERS, INC</u>		Phone <u>(804) 641-1591</u>
	Address <u>967 GLEBE LANDING RD</u>		Email <u>Walshbuilders@verizon.net</u>
	Contractor License Number <u>2701034172A</u>	Type <u>A</u>	Expiration <u>4/30/23</u>

DESCRIPTION OF WORK	Scope of Work: <u>24x28' DETACHED GARAGE/STUDIO TO TAKE UP 80 SQ FT, UNFINISHED GARAGE</u>				
	Proposed Use <u>GARAGE/STUDIO</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>80</u>	Unfinished Sq. Ft. <u>592</u>	Total Sq. Ft. <u>672</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>105.06</u>
Value of Work	<u>\$15,000</u> \$20,680.00	State Levy Fee	\$ <u>2.10</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>	RLD	\$ _____
Date	<u>10/28/21</u>	SWP	\$ _____
		Total	\$ <u>132.16</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-3-2021
 Permit Number: BP-2021-01438
 GPIN/Tax Map: 772A-93-9742/6A-1-D-4A-B
 Issued: 12-9-21
 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: CATHOLIC DIOCESE OF RICHMOND
 Owner: 12504 PATTERSON AVE, RICHMOND, VA 23238
 Phone #: _____
 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: TRAC PHAN
 Address: 12721 GLENKIRK RD, RICHMOND, VA 23233
 Phone #: (804) 687-1467
 Email: tracphan@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: <u>None</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>55' from PL Row</u>	Center Line Setback: <u>80'</u>	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
Side Setback: <u>60' Side 35'</u>	Side Setback: <u>60'</u>	Flood Zone: _____	<u>A2</u>

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: [Signature] Date: 12/6/21

CONTRACTOR INFORMATION
 Contractor: owner
 Address: Member of the Parish Church of Vietnamese Marty's
 Phone: _____
 Email: _____
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: SUN DECK - 475 SF DECK

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

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 2,500.00</u>	Application Fee	<u>\$ 33.37</u>
		State Levy Fee	<u>\$ 0.67</u>
		Zoning Fee	<u>\$ 25</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	<u>\$ 59.04</u>

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

Signature of Applicant: [Signature] Date: 12/3/2021

BUILDING PERMIT APPLICATION

of Building Inspection
9
VA 23063
815 Fax (804) 556-5651
VA Relay

Residential Commercial

Application Date: 12-1-21
 Permit Number: BP-2021-01426
 GPIN/Tax Map: 6749-74-4016 / 29-5-0-1-0
 Issued: 12-9-21
 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.

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

OWNER INFORMATION	Site Address 2670 Dogtown Road Goochland, VA, 23063	
	Owner Jordan Lacy	Phone # (804) 549-9260
APPLICANT INFORMATION	Address 2670 Dogtown Road Goochland, VA, 23063	
	Applicant/Contact Daniel Reed / 4697080854	Phone # 4697080854
	Address 1126 South Cedar Ridge Drive Duncanville, TX 75137	
		Email daniel@solarsme.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	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/Use.</u> 141 Planning & Zoning Officer: <u>Daniel Reed</u> Date: <u>12/3/21</u>			

CONTRACTOR INFORMATION	Contractor Solar SME Inc		Phone (469)708-0854
	Address 1126 South Cedar Ridge Drive Duncanville, TX 75137		Email daniel@solarsme.com
	Contractor License Number 2705175870	Type ELE	Expiration 09-30-2022

Scope of Work:
we are going to install roof mount solar system at 2670 Dogtown Road Goochland, VA, 23063

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

building Only - Excludes All Trades Permits

Value of Work	\$ 28980	Application Fee	\$ <u>143.41</u>
		State Levy Fee	\$ <u>2.85</u>
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>145.26</u>

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

Signature of Applicant: daniel reed Date: 11/17/2021



BUILDING PERMIT APPLICATION

Application Date: 12/6/2021

Permit Number: BP-2021-01456

GPIN/Tax Map: 7733-35-5322 / 67-16-0-5-0

Issued: 12-14-21

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

Residential Commercial

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

This application requires two copies of construction drawings and two copies of the 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 1205 Hill Point Way, Richmond, VA 23238	
	Owner Greg & Karen Eddy	Phone # 631-848-2681
	Address 1205 Hill Point Way, Richmond 23238	Email
APPLICANT INFORMATION	Applicant/Contact Travis Jowers	Phone # 804-749-4706
	Address 2175 Lanier Lane, Rockville, VA 23146	Email travis@ultimatepools.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from P/R Row</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>12/10/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: In-Ground Pool 18' x 36' Rectangle with Auto Cover			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			648	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>147.00</u>
Value of Work 30,000.00		State Levy Fee \$ <u>2.94</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
Signature of Applicant <u>TJ</u>	Date <u>12/6/2021</u>	Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>174.94</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9/9/21

Permit Number: BP-2021-01131

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

Issued: 12-15-21

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

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

OWNER INFORMATION	Site Address 1702 Mills Road		Phone # 804-359-3575 Ext 4
	Owner Bellview Gardens Medical LLC	Email jkinter@glcva.com	
	Address 5809 York Rd, Richmond, VA 23226	Phone # 804-366-9338	
APPLICANT INFORMATION	Applicant/Contact Jim Kinter		Email jkinter@glcva.com
	Address 5809 York Rd, Richmond, VA 23226	Phone # 804-366-9338	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>35' from R/W</u>	Center Line Setback _____	Rear Setback <u>30'</u>	CUP/Variance/COA _____ <u>BN</u>
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: Planning & Zoning Officer <u>Dennis Boyd</u> Date <u>9/24/21</u>		

CONTRACTOR INFORMATION	Contractor <u>Commonwealth Construction Management</u>		Phone # <u>804 814-3076</u>
	Address <u>7110 Forest Ave, Suite 102, Richmond VA 23226</u>		Email _____
	Contractor License Number <u>2705146620</u>	Type <u>CBE-RBC</u>	Expiration <u>5-31-22</u>

DESCRIPTION OF WORK	Scope of Work: Construct office building shell <u>Building 1 - Bellview Gardens</u>			
	Proposed Use office	Current Use none	Environmental Impacts (stream crossing, wetlands, amt land disturbed) yes and 2.95 ac	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms none	# of Bedrooms none
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. none	Unfinished Sq. Ft. 11,994	Total Sq. Ft. 11,994

Building Only - Excludes All Trades Permits

Value of Work	362,250.00 <u>\$ 839,580.00</u>	Application Fee	<u>4,296.85</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant _____ Date <u>9/20/21</u>		State Levy Fee	<u>125.94</u>
		Zoning Fee	<u>100.00</u>
		RLD	_____
		SWP	_____
		Total	<u>4,522.79</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 9/9/21

Permit Number: BP-2021-01132

GPIN/Tax Map: 726-57-1317/48-3-14-4-0

Issued: 12-15-21

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

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

OWNER INFORMATION	Site Address 1702 Mills Road	
	Owner Bellview Gardens Medical LLC	Phone # 804-359-3575 Ext 4
	Address 5809 York Rd, Richmond, VA 23226	Email jkinter@glcva.com
APPLICANT INFORMATION	Applicant/Contact Jim Kinter	
	Address 5809 York Rd, Richmond, VA 23226	Phone # 804-366-9338
		Email jkinter@glcva.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>35' from ROW</u>	Center Line Setback	Rear Setback <u>30'</u>	CUP/Variance/COA
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Dawn Floyd</u> Date: <u>9/24/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Common Wealth Construction management</u>		Phone <u>804-814-3076</u>
	Address <u>7110 Forest Ave, Suite 102, Rich. VA. 23226</u>		Email
	Contractor License Number <u>2705746620</u>	Type <u>CBC, RBC</u>	Expiration <u>3-31-22</u>

DESCRIPTION OF WORK	Scope of Work: Construct office building shell <u>Building 2 - Bellview Gardens</u>			
	Proposed Use office	Current Use none	Environmental Impacts (stream crossing, wetlands, amt land disturbed) yes and 2.95 ac	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms none	# of Bedrooms none
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. none	Unfinished Sq. Ft. 7,001	Total Sq. Ft. 7,001

Building Only - Excludes All Trades Permits		Application Fee	<u>3,675.53</u>
Value of Work	<u>212,750.00</u> <u>\$490,070.00</u>	State Levy Fee	<u>73.51</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	<u>100.00</u>
Signature of Applicant	<u>[Signature]</u>	RLD	\$
Date	<u>9-9-21</u>	SWP	\$
		Total	<u>3,849.04</u>



BUILDING PERMIT APPLICATION

Application Date: NOVEMBER 5, 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: **BP-2021-01434**

GPIN/Tax Map: 7724-74-4297 / **64-29-0-5-0**

Issued: **12-15-21**

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

Residential Commercial

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

OWNER INFORMATION	Site Address OAK HILL PARK DRIVE - - ROAD 'A' <i>1001 Collective Way, Rich. VA 23238</i>	
	Owner BRISTOL OAK HILL PARTNERS, LLC	Phone # 804.285.3800, 104
	Address 381 MALLORY STATION RD, SUITE 204, FRANKLIN, TN 37067	Email THOMAS_PRUITT@PRUITTCOMPANIES.COM

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>West Creek Bas.</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA M-1
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>[Signature]</i> Date: 12/6/21			

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - WEST WALL				
	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. 8,097		

Building Only - Excludes All Trades Permits		Application Fee \$ 1218.74 State Levy Fee \$ 24.38 Septic/Well Fee \$ _____ Zoning Fee \$ 50- RLD \$ _____ SWP \$ _____ Total \$ 1293.13
Value of Work	\$162,500.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<i>Vicki Barnett</i>	
Date	Nov 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: NOVEMBER 5, 2021

Permit Number: **BP-2021-01435**

GPIN/Tax Map: 7724-74-4297 / 64-29-0-5-0

Issued: **12-15-21**

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

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

OWNER INFORMATION	Site Address 4000 Collective Circle Rich. VA. 23238	
	Owner BRISTOL OAK HILL PARTNERS, LLC	Phone # 804.285.3800, 104
	Address 381 MALLORY STATION RD, SUITE 204, FRANKLIN, TN 37067	Email THOMAS_PRUITT@PRUITTCOMPANIES.COM
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Phone # 804.396.8775
	Email ADMIN@BRACWALLS.COM	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision West Creek Bus.	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer Dennis Floyd Date 12/6/21			

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - NORTH 2 WALL				
	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. 969		

Building Only - Excludes All Trades Permits		Application Fee \$ 145.87
Value of Work	\$19,450.00	State Levy Fee \$ 2.92
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 Nov 5, 2021		Septic/Well Fee \$
		Zoning Fee \$ 50-
		RLD \$
		SWP \$
		Total \$ 198.79



BUILDING PERMIT APPLICATION

Application Date: NOVEMBER 5, 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: BP-2021-01436

GPIN/Tax Map: 7724-74-4297 | 6A-29-0-5-0

Issued: 12-15-21

Residential Commercial

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

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

OWNER INFORMATION	Site Address <u>4000 Collective Circle, Rich. VA. 23238</u>	
	Owner BRISTOL OAK HILL PARTNERS, LLC	Phone # 804.285.3800, 104
	Address 381 MALLORY STATION RD, SUITE 204, FRANKLIN, TN 37067	Email THOMAS_PRUITT@PRUITTCOMPANIES.COM
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	Phone # 804.396.8775
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Email ADMIN@BRACWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Creek Bas.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>12/6/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - NORTH 1 WALL				
	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. 848		

Building Only - Excludes All Trades Permits

Value of Work	\$17,023.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Vicki Barnett Date NOV 5, 2021

Application Fee	\$ <u>127.48</u>
State Levy Fee	\$ <u>2.55</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>50-</u>
RLD	\$
SWP	\$
Total	\$ <u>180.23</u>



BUILDING PERMIT APPLICATION

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

Application Date: NOVEMBER 5, 2021

Permit Number: BP-2021-01437

GPIN/Tax Map: 7724-74-4297 / 64-29-0-5-0

Issued: 12-15-21

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

Residential Commercial

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

OWNER INFORMATION	Site Address <u>4000 Collective Circle, Rich VA. 23238</u>	
	Owner BRISTOL OAK HILL PARTNERS, LLC	Phone # 804.285.3800, 104
	Address 381 MALLORY STATION RD, SUITE 204, FRANKLIN, TN 37067	Email THOMAS_PRUITT@PRUITTCOMPANIES.COM
APPLICANT INFORMATION	Applicant/Contact VICKI BARNETT	
	Address 10423 DOW GIL ROAD, ASHLAND, VA 23005	Phone # 804.396.8775 Email ADMIN@BRACWALLS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Creek bas.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid	
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA	
	Side Setback	Side Setback	Flood Zone		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	Planning & Zoning Officer <u>David [Signature]</u>		Date <u>12/6/21</u>		

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

DESCRIPTION OF WORK	Scope of Work: INSTALL SEGMENTAL RETAINING WALL - BUILDING 4				
	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. 394		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>59.25</u> State Levy Fee \$ <u>1.19</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>50-</u> RLD \$ _____ SWP \$ _____ Total \$ <u>110.44</u>
Value of Work	\$7,900.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant <u>Vicki Barnett</u>	Date <u>Nov 5, 2021</u>	



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11-22-2021

Permit Number: BP-2021-01451

GPIN/Tax Map: 6757-97-2705/42-1-0-64-A

Issued: 12-15-2021

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

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>3140 River Road W Goochland VA 23063</u>	
	Owner <u>Goochland School Board - Todd Steeley - Contact</u>	Phone # <u>(804) 396-4015</u>
	Address <u>2938 River Rd W. Goochland VA 23063</u>	Email <u>tsteeley@gind.k12.va.us</u>

APPLICANT INFORMATION	Applicant/Contact <u>Tim Greenway</u>	
	Address <u>3140 River Rd W Goochland VA 23063</u>	Phone # <u>(804) 839-2488</u>
		Email <u>tgreenway@gind.k12.va.us</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>---</u>	Date Paid <u>---</u>
	Front Setback <u>100' from P/R</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>COA-2000-21</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>---</u>	<u>R3</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Daniel Floyd</u> Date <u>12/8/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Goochland Co. Schools</u>		Phone <u>(804) 839-2488</u>
	Address <u>2938 River Rd W Goochland VA 23063</u>		Email <u>tgreenway@gind.k12.va.us</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Rebuild existing garage using existing slab</u>				
	Proposed Use <u>Storage</u>	Current Use <u>Storage</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private <u>N/A</u>	WATER Public/Private <u>N/A</u>	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</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>480</u>	Unfinished Sq. Ft. <u>---</u>	Total Sq. Ft. <u>480 sq. ft.</u>	

Building Only - Excludes All Trades Permits

Value of Work \$4,000 ~~or~~ \$31,680

Application Fee	\$ <u>237.60</u>
State Levy Fee	\$ <u>4.75</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$ <u>---</u>
SWP	\$ <u>---</u>
Total	\$ <u>342.35</u>

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

Signature of Applicant [Signature] Date 11/16/21



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: 12-8-2021
 Permit Number: BP-2021-01463
 GPIN/Tax Map: 6737-63-1759/40-4-0-E-3
 Issued: 12-15-2021
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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: 3906 Terry LN Goochland VA. 23063
 Owner: Wendell A. Holmes Phone #: (804) 385-7275
 Address: 3906 Terry LN. Goochland VA. 23063 Email: WendellAlfonzo@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: 3906 Terry LN. Goochland VA. 23063 Phone #: (804) 385-7275
 Address: 3906 Terry LN. Goochland VA. 23063 Email: WendellAlfonzo@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 55' from P/R/O/W Center Line Setback: _____ Rear Setback: 5' CUP/Variance/COA: _____
 Side Setback: 5' Side Setback: 5' Flood Zone: C A-1
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 12/14/21

CONTRACTOR INFORMATION
 Contractor: OWNER Phone: _____
 Address: _____ Email: _____
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: 24x24 metal Detached GARAGE

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, ant 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 <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>576</u>	<u>576</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>10,080.60</u> <u>15,840.00</u>	Application Fee	\$ <u>83.28</u>
		State Levy Fee	\$ <u>1.67</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>109.95</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: Wendell A. Holmes Date: 12-8-21



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-8-2021

Permit Number: BP-2021-01464

GPIN/Tax Map: 7704-68-0687/62-31-D-11-0

Issued: 12-21-2021

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 605 Joe Brooks Lane, Manakin Sabot, VA 23103	
	Owner Doug and Jane Dufrane	Phone # 804-514-0600
	Address 605 Joe Brooks Lane	Email janedufrane@gmail.com

APPLICANT INFORMATION	Applicant/Contact Chase Loomer	Phone # 804-814-4115
	Address 702 S. Nansemond St. Richmond, VA 23221	Email chase@cardiffconstruction.com

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

Planning & Zoning Officer: David Floyd Date: 12/14/21

CONTRACTOR INFORMATION	Contractor Chase Loomer Cardiff Renovations LLC	Phone 804-814-4115
	Address 702 S. Nansemond St. Richmond, VA 23221	Email chase@cardiffconstruction.com
	Contractor License Number 2705167913	Type Class A

DESCRIPTION OF WORK	Scope of Work: First floor primary bathroom renovation				
	Proposed Use Bathroom	Current Use Bathroom	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# 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. 181	Unfinished Sq. Ft. 0	Total Sq. Ft. 181	

Building Only - Excludes All Trades Permits

Value of Work	\$9,955
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 12/3/2021

Application Fee	\$ 350.00	<u>56.99</u>
State Levy Fee	\$ 1.14	<u>1.14</u>
Zoning Fee	\$ 25.00	<u>25.00</u>
RLD	\$	
SWP	\$	
Total	\$ 367.93	<u>83.13</u>

* CharliAnn is the main Permit contact.

 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: <u>9-28-2021</u> Permit Number: <u>BP-2021-01178</u> GPIN/Tax Map: <u>7716-89-2045/47-1-0-42-C</u> Issued: <u>12-22-2021</u> 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.	
<input type="checkbox"/> Residential <input checked="" type="checkbox"/> 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>100 Broad St. Rd.</u>		Phone # <u>614.828.8215</u>
	Owner <u>Community Bankers Trust / Essex Bank</u>		Email
	Address <u>9954 Mayland Dr Ste 2100</u> <u>Richmond, VA 23233</u>		
APPLICANT INFORMATION	Applicant/Contact <u>CharliAnn Schoonover</u>		Phone # <u>804.859.0141</u>
	Address <u>6487 Hilliard Drive</u> <u>Canal Winchester, OH 43110</u>		Email <u>Charlieetd.website</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____
	Front Setback <u>5' from P/Rows</u>	Center Line Setback _____	Rear Setback _____
	Side Setback _____	Side Setback _____	Flood Zone _____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12/3/21</u>
CONTRACTOR INFORMATION	Contractor <u>Talley signs</u>		Phone _____
	Address <u>PO Box 27386</u>		Email _____
	Contractor License Number <u>2701025262</u>	Type <u>Class A</u>	Expiration <u>9-30-2022</u>
DESCRIPTION OF WORK	Scope of Work: <u>New monument sign, and temporary monument sign, New wall sign and temporary wall sign, Directional signs, Clearance signs and window vinyls, New ATM wrap for existing ATM.</u>		
	Proposed Use <u>Signs</u>	Current Use <u>Signs</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private	WATER Public/Private	# of Bathrooms # of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.
Building Only - Excludes All Trades Permits Value of Work: <u>\$9,000</u>		Application Fee \$ <u>67.50</u> State Levy Fee \$ <u>1.35</u> Zoning Fee \$ <u>50.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>118.85</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>CharliAnn Schoonover</u> Date <u>9-28-2021</u>			



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-10-21

Permit Number: BP-2021-01469

GPIN/Tax Map: 7707-56-3462 / 46-26-0-9-A

Issued: 12-27-21

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

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

OWNER INFORMATION	Site Address <u>2354 Windy Turn Alanakin Sabot, Va. 23103</u>		
	Owner <u>Jonathan & Frankie Baker</u>		Phone #
	Address <u>2354 Windy Turn</u>		Email
APPLICANT INFORMATION	Applicant/Contact <u>Marian Smith & Mike Smith, Inc.</u>		Phone # <u>(804) 790-2660</u>
	Address <u>11060 Woodpecker Rd Chesterfield, Va</u>		Email <u>toasmiths@gmail.com</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Windy Turn</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount
	Front Setback	Center Line Setback	Rear Setback
	Side Setback	Side Setback	Flood Zone
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to front porch</u>		
Planning & Zoning Officer: <u>[Signature]</u>			Date: <u>12/16/21</u>
CONTRACTOR INFORMATION	Contractor <u>Mike Smith Inc.</u>		Phone <u>(804) 790-2660</u>
	Address <u>11060 Woodpecker Rd Chesterfield, Va 23838</u>		Email <u>toasmiths@gmail.com</u>
	Contractor License Number <u>2701023063</u>	Type <u>Commercial</u>	Expiration <u>1/31/22</u>
DESCRIPTION OF WORK	Scope of Work: <u>FINISHING GAME ROOM - BATH ROOM</u> <u>finish off existing 3rd floor BATH ROOM</u>		
	Proposed Use <u>play room</u>	Current Use <u>SE</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>
	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>1200</u>	Unfinished Sq. Ft. <u>84</u>
			Total Sq. Ft. <u>1284</u>

Building Only - Excludes All Trades Permits

Value of Work <u>80,000.00</u>	Application Fee <u>\$ 372.00</u>
	State Levy Fee <u>\$ 7.44</u>
	Zoning Fee <u>\$ 25.00</u>
	RLD <u>\$</u>
	SWP <u>\$</u>
	Total <u>\$ 404.44</u>

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

Signature of Applicant: [Signature] Date: 12-2-21

BHall 12/27/2021
RS VB 2018

10-28-2021



BUILDING PERMIT APPLICATION

Application Date: 10/25/2021

Permit Number: BP-2021-01315

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

GPIN/Tax Map: 7727-47-5784-9998 / 48-1-0-12-TV

Issued: 12-29-21

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 2040 Ashland Road	
	Owner PI Tower Development LLC C/O Jennifer Payne Tax	Phone # 813-431-8183
	Address 2320 Cascade Pointe Blvd, Charlotte, NC 28208	Email Dee.Gore@PITowers.com

APPLICANT INFORMATION	Applicant/Contact Matt Winstead		Phone # 804-306-0275
	Address 2385 Lanier Road, Rockville, VA 23146		Email MWinstead@FCITowers.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Varlance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to Foot Print</i> Planning & Zoning Officer: <i>David Floyd</i> Date: <i>11/5/21</i>			

CONTRACTOR INFORMATION	Contractor FCI Towers Inc		Phone 757-490-2535
	Address 2528 Horse Pasture Road, Suite 100		Email AWallace@FCITowers.com
	Contractor License Number 2705048431	Type Class A	Expiration 02/28/2022

DESCRIPTION OF WORK	Scope of Work: Adding an antenna array at the top position for T-Mobile.				
	Proposed Use Telecom Tower	Current Use Same	Environmental Impacts (stream crossing, wetlands, amt land disturbed) All work is within the existing compound		
	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. 0	Unfinished Sq. Ft. 0	Total Sq. Ft. 0	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>315</u> State Levy Fee \$ <u>1.50</u> Zoning Fee \$ <u>200.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>432.50</u> <u>582.50</u>
Value of Work	\$50,000	
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 <i>[Signature]</i>		Date 10/25/2021



BUILDING PERMIT APPLICATION

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

Application Date: 12-10-21

Permit Number: BP-2021-01468

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

Issued: 12-29-21



Residential



Commercial

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

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

OWNER INFORMATION	Site Address <u>103 LINDBERGH LN, MANAKIN SABOT VA 23103</u>	
	Owner <u>RICHARD BOEHLING</u>	Phone # <u>804-305-4535</u>
	Address <u>103 LINDBERGH LN, MANAKIN SABOT, VA</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>VMAX LLC</u>		Phone # <u>804-426-1030</u>
	Address <u>22238 11175 Ridgefield Pkwy Suite 105 Richmond VA</u>		Email <u>info@vmaxhomes.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Ben Dover</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from PL/PBW</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>12/15/21</u>			

CONTRACTOR INFORMATION	Contractor <u>VMAX LLC</u>		Phone <u>804-426-1030</u>
	Address <u>22238 11175 Ridgefield Pkwy Suite 105, RICHMOND, VA</u>		Email <u>info@vmaxhomes.com</u>
	Contractor License Number <u>2705101121</u>	Type <u>CLASS "A" CONTRACTOR</u>	Expiration <u>11-30-2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>119 587 80 sq ft POOL HOUSE 37 122</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	1/# of Bathrooms <u>1/2</u>	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft. <u>389 sq ft</u>	Unfinished Sq. Ft. <u>200 sq ft</u>	Total Sq. Ft. <u>589 sq. ft.</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>552.00</u>
Value of Work <u>120,000</u>	<u>309 389 / 330</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>12/3/21</u>	RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>588.04</u>

PHall RS VR 2018 12/27/2021



BUILDING PERMIT APPLICATION

Application Date: 12/8/21

Permit Number: BP-2021-01470

GPIN/Tax Map: 7718-81-1561 / 47-35-0-1-0

Issued: 12-29-21

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

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

Residential Commercial

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

OWNER INFORMATION	Site Address <u>199 Echo Meadows Rd Rockville, VA 23146</u>	
	Owner <u>Mari-grace Anderson</u>	Phone # <u>804-814-1247</u>
	Address <u>12301 Bienvenue Rd Rockville, VA 23146</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>RVA'S ALL DECK'D OUT, INC</u>	Phone # <u>804-405-0931</u>
	Address <u>12107 Southbelle of Middlethorpe VA 2312</u>	Email <u>office.alldeckdout@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Legacy Pointe</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from PY Row</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>IA2</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>[Signature]</u> Date <u>12/16/21</u>			

CONTRACTOR INFORMATION	Contractor <u>RVA'S ALL DECK'D OUT, INC</u>	Phone <u>804-405-0931</u>
	Address <u>Same as above</u>	Email <u>office.alldeckdout@gmail.com</u>
	Contractor License Number <u>2705175246</u>	Type <u>A - RBC</u>

DESCRIPTION OF WORK	Scope of Work: <u>New 10x10 freestanding Rear deck</u>				
	Proposed Use <u>Deck</u>	Current Use <u>Deck</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>2</u>	# of Bedrooms <u>3</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>100</u>	Unfinished Sq. Ft. <u>100</u>	Total Sq. Ft. <u>100</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>35.85</u>
Value of Work <u>\$5300.00</u>		State Levy Fee	\$ <u>.72</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>		RLD	\$
Date <u>12/8/21</u>		SWP	\$
		Total	\$ <u>61.57</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: 11-23-2021
 Permit Number: BP-2021-01417
 GPIN/Tax Map: 6777-65-6939 / 43-40-C-18-0
 Issued: 12-20-2021

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

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

OWNER INFORMATION	Site Address <u>2111 JOCKEY RIDGE RD MAIDENS VA 23102</u>	
	Owner <u>NELSON STACY WOOD</u>	Phone # <u>804 840 4689</u>
	Address	Email <u>Nelsonhwood@gmail.com</u>

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*No change to existing footprint or use.</u> Planning & Zoning Officer: <u>David Boyd</u> Date: <u>12/3/21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>FINISH UNFINISHED BASEMENT INTO GREATROOM BATHROOM</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No <u>(No)</u>	Finished Sq. Ft. <u>700</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>700</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>39.00</u>
Value of Work	\$ <u>6000.00</u>	State Levy Fee	\$ <u>.78</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>11/8/21</u>		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>64.78</u>



BUILDING PERMIT APPLICATION

Application Date: 10/15/2021 11-3-2021

Permit Number: BP-2021-01327

GPIN/Tax Map: 6824-32-5055/2-3-0-31-0

Issued: 12-30-21

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

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 5278 Long Lane Louisa, VA 23093	
	Owner Robert Maclay & Brittany Marroquin	Phone # 561-665-0367 561-665-0367
	Address 5278 Long Lane Louisa, VA 23093	Email robertmaclay30@gmail.com

APPLICANT INFORMATION	Applicant/Contact Robert Maclay & Brittany Marroquin		Phone # 703-297-0258
	Address 5278 Long Lane Louisa, VA 23093		Email brittany.marroquin@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Shannon Hills	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 55' from P/RW	Center Line Setback —	Rear Setback 5'	CUP/Variance/COA —
	Side Setback 5'	Side Setback 5'	Flood Zone C	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David [Signature]</u> Date 11/16/21			

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

DESCRIPTION OF WORK	Scope of Work: Detached 2 car garage, 24 x 36			
	Proposed Use Garage	Current Use —	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A	
	SEWER Public/Private Private	WATER Public/Private Private	# of Bathrooms N/A	# of Bedrooms N/A
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No No	Finished Sq. Ft. 0	Unfinished Sq. Ft. 864	Total Sq. Ft. 864

Building Only - Excludes All Trades Permits		Application Fee	\$118.92
Value of Work	\$15,000 \$23,760.00	State Levy Fee	\$2.38
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-
		RLD	\$
		SWP	\$
		Total	\$146.30
Signature of Applicant	[Signature]	Date	10/15/2021

10-1-2021



BUILDING PERMIT APPLICATION

Application Date: 9-29-2021

Permit Number: BP-2021-01205

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

GPIN/Tax Map: 6785-66-2195 / 55-1-0-93-D

Issued: 12-30-2021

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 1537 River Road West	
	Owner Crozier Development, LLC	Phone # 8049093633
APPLICANT INFORMATION	Address 1537 River Road W	Email ADVENGRLLC@GMAIL.COM
	Applicant/Contact Jeff Keith	Phone # 8049093633
	Address 1537 River Road W, Crozier, VA 23039	Email ADVENGRLLC@GMAIL.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>N/A</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <i>55' from P.Y. Row</i>	Center Line Setback <i>80'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA <i>B1*</i>
	Side Setback <i>20'</i>	Side Setback <i>5'</i>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>David [Signature]</i> Date <i>10/20/21</i>			

CONTRACTOR INFORMATION	Contractor OWNER	Phone 8049093633
	Address 1537 RIVER RD W, CROZIER, VA 23039	Email ADVENGRLLC@GMAIL.COM
	Contractor License Number	Type
		Expiration

DESCRIPTION OF WORK	Scope of Work: CONSTRUCTION OF A 24'x36' GARAGE BUILDING			
	Proposed Use Accessory Building	Current Use LAND	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 0	Unfinished Sq. Ft. 864 SF	Total Sq. Ft. 864 SF

Building Only - Excludes All Trades Permits		Application Fee \$ <u>285.00</u>
Value of Work	38,000	State Levy Fee \$ <u>5.70</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>100.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>390.70</u>
Signature of Applicant <i>[Signature]</i>		Date SEPT 29, 2021

 <p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date: <u>12-13-21</u>
	Permit Number: <u>BP-2021-01473</u>
	GPIN/Tax Map: <u>080001-2518/21-3-0-2-A</u>
	Issued: <u>12-30-21</u>
	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	<u>3041 THREE CHOPT RD Gum Spring 23065</u>		
	Owner	<u>TRAVIS BROOKS</u>	Phone #	<u>804-641-4067</u>
	Address	<u>3041 THREE CHOPT RD Gum Spring VA 23065</u>	Email	<u>TRAVISBROOKS14@NOTMAIL.COM</u>

APPLICANT INFORMATION	Applicant/Contact	<u>JOHN W. KERN</u>		
	Address	<u>12940 PLAZA DR RICHMOND VA 23233</u>	Phone #	<u>804-306-7441</u>
			Email	<u>JKERN@PBVA.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>N/A</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*No change to Foot print.</u>			
Planning & Zoning Officer: <u>David Floyd</u> Date: <u>12/16/21</u>				

CONTRACTOR INFORMATION	Contractor	Phone
	<u>PARAMOUNT BUILDERS</u>	<u>804 558 3200</u>
	Address	Email
	<u>501 CENTRAL DRIVE, VIRGINIA BEACH VA 23454</u>	<u>JKERN@PBVA.COM</u>
	Contractor License Number	Type
	<u>2705020722</u>	<u>CLASS A</u>
		Expiration
		<u>5-31-2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install patio door -</u>				
	<u>INSTALL SLIDING PATIO DOOR ENLARGE OPENING</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>77</u>		<u>77</u>		

Building Only - Excludes All Trades Permits			Application Fee \$ <u>30.25</u> State Levy Fee \$ <u>1.01</u> Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>76.26</u>
Value of Work	<u>8500⁰⁰</u>	I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.	
Signature of Applicant: <u>[Signature]</u>		Date: <u>12-13-21</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: 11-23-2021

Permit Number: BP-2021-01439

GPIN/Tax Map: 29-1-0-101-0/6749-84-²³³³~~2598~~

Issued: 12-30-2021

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>2685</u> 135 <u>DOG TOWN Rd. Goochland, VA 23063</u>			
	Owner <u>CMH Homes</u>	Phone # <u>434-315-8956</u>		
APPLICANT INFORMATION	Address <u>2967 West 3rd St. Farmville VA. 23901</u>	Email <u>R749@clayton.net</u>		
	Applicant/Contact <u>Joe Haener</u>	Phone # <u>434-315-8956</u>		
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>2967 West 3rd St. Farmville, VA. 23901</u>	Email <u>R749@clayton.net</u>		
	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Front Setback <u>75' from R/W</u>	Center Line Setback <u>100'</u>	Amount _____	Date Paid _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Floyd</u> Date <u>12/6/21</u>		Flood Zone <u>X</u>	AI
Planning & Zoning Officer				

CONTRACTOR INFORMATION	Contractor <u>Oakwood Homes Farmville (CMH Homes Inc.)</u>		Phone <u>434-315-8956</u>
	Address <u>2967 West 3rd St. Farmville VA 23901</u>		Email <u>R749@clayton.net</u>
	Contractor License Number <u>2705 04 8123</u>	Type <u>A</u>	Expiration <u>4-30-2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Set-up double wide home. Drilled well, Conventional Septic with 4'x6' deck on front & 5'x7' deck on rear.</u>				
	Proposed Use <u>Single family dwelling</u>	Current Use <u>RAW LAND</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>20,000 sq ft</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>2</u>	# of Bedrooms <u>4</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>1790</u>	Unfinished Sq. Ft. <u>112</u>	Total Sq. Ft. <u>1902</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>140,000.00</u>	Application Fee	<u>\$642-</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>\$12.84</u>
		Zoning Fee	<u>\$50-</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	<u>\$804.84</u>

Signature of Applicant Joe Haener Date 11-18-21



TRADE PERMIT APPLICATION
 Goochland County Building Inspection Department

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

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

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

Type: Commercial
 Residential
 Trade: Fire
 Electrical
 Mechanical
 Plumbing
 Gas

LOCATION

Street Address: 3645 Fryer Road
 PROPERTY OWNERSHIP

Name: Johnny White & Robin McCarter Phone: 804 400-7237
 Mailing Address: 3645 Fryer Rd Goochland, VA 23063 Email: JWhite192@gmail.com

APPLICANT
 Name: Scarlett Hanshell/Clark Home Solutions LLC Phone: 804 302 4200
 Address: 9830 West Broad St. Richmond VA 23060 Email: Shanshell@GeneratorSupervisors.com

Name	Clark Home Solutions LLC	Phone	570 270 9232
Mailing Address	14018 Sullyfield Cir Ste E	Email	Shanshell@GeneratorSupervisors.com
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705176647
Expiration	8/31/22	License Type	Masters
DESCRIPTION OF WORK	A		

200 sq ft
 # of Bathrooms: ATS meter Backup to Panel in laundry room
 Service Size: _____ Power Company: _____
 Value of Work (required): 14847.30 Inquiry #: _____

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

Signature of Applicant: [Signature] Date: 9-9-21
 Approval: Fisher Office Use Only: _____
 Permit Fee: 89.57 Approval date: 12-20-21
 Issued date: _____

(owner's statement on back)

89.57

Permit # EL-2021-0149D
 GFIN

Tax Map



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

RECEIVED

12/8/21

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

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

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

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

Date
Permit # ELI-2021-01476
GPIN
Tax Map

LOCATION

Street Address	12309 Beech Hall Circle
----------------	---

PROPERTY OWNERSHIP

Name Laura Montrose	Phone 804-615-8514
Mailing Address 12309 Beech Hall Circle	Email

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

Wiring 18KW automatic generator to existing T/S			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 8,500			

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

Signature of Applicant: Lori Medeiros Date: 11-4-21

Approval: Gary Fisher	Office Use Only
Permit Fee: 60.44	Approval date: 12/14/21
	Issued date: _____

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	12.08.2021
Permit #	211-2021-01444
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	1276 HAMMOCK CIRCLE	District
----------------	----------------------------	----------

PROPERTY OWNERSHIP

Name	MIKE & ALYSSA CHALIFOUX	Phone	804-240-4439
Mailing Address	1276 HAMMOCK CIRCLE		

APPLICANT

Name	WOODFIN HEATING	Phone	8047644534
E-Mail Address	HTRIPLETT@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-730-5000
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230		HTRIPLETT@ASKWOODFIN.COM
E-mail address:	HTRIPLETT@ASKWOODFIN.COM		
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
Class:	A		

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, (2) 200 AMP ATS. SURGE PROTECTOR.			
# of Baths	Service Size	Power Company	Inquiry #

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

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

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

_____(Signature)

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

_____(Notary)

My commission expires _____

Value of Work: **14,300.00**

Permit fee: **87.06**

Signature of Applicant *BS*

Approval *Fisher* Date *12-9-21*

Issue date: *12-9-21*

1210



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	11.04.2021
Permit #	21-1450
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	100 HICKORY DR	District	
----------------	-----------------------	----------	--

PROPERTY OWNERSHIP

Name	BONNIE NORTHEN	Phone	804-357-2121
Mailing Address	100 HICKORY DR		

APPLICANT

Name	WOODFIN HEATING	Phone	8047644534
E-Mail Address	HTRIPLETT@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-730-5000
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230 HTRIPLETT@ASKWOODFIN.COM		E-mail address:
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
Class:	A		

DESCRIPTION OF WORK

INSTALL 200 AMP PANEL CHANGE.			
# of Baths	Service Size	Power Company	Inquiry #

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 2,286.00

Permit fee: 31.91

Signature of Applicant [Signature]

Approval Fisher Date 11/30/21

Issue date: 12-6-21

12-10



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	11.11.2021
Permit #	21-1449
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	1412 RIVER RD W	District	
----------------	------------------------	----------	--

PROPERTY OWNERSHIP

Name	CHANTEL NEESE&LASHAY JOHNSON	Phone	804-247-3371
Mailing Address	1412 RIVER RD W		

APPLICANT

Name	WOODFIN HEATING	Phone	8047644534
E-Mail Address	HTRIPLATT@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-730-5000
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230 HTRIPLATT@ASKWOODFIN.COM		E-mail address:
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
Class:	A		

DESCRIPTION OF WORK

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

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 11,175.00

Permit fee: 72.71

Signature of Applicant BK [Signature]

Approval Fisher Date 11-19-21

Issue date: 12-6-21



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

12.14

RECEIVED

12/6/21

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

Date	11.04.2021
Permit #	ELI-2021-01442
GPIN	
Tax Map	

LOCATION

Street Address	4936 W GREY FOX RD	District	
----------------	---------------------------	----------	--

PROPERTY OWNERSHIP

Name	DANNY & MARY-ELLEN KENDALL	Phone	804-714-2594
Mailing Address	4936 W GREY FOX RD		

APPLICANT

Name	WOODFIN HEATING	Phone	8047644534
E-Mail Address	HTRIPLETT@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-730-5000
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230		HTRIPLETT@ASKWOODFIN.COM
E-mail address:			
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	Class: A
			CONTRACTOR

DESCRIPTION OF WORK

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

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 12,190.00

Permit fee: 77.37

Issue date: 12/6/21

Signature of Applicant [Signature]

Approval [Signature] Date 11/30/2021
12/6/21

no



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

RECEIVED

12/3/21

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date	10/27/21
Permit #	ELI-2021-01299
GPIN	
Tax Map	

LOCATION

Street Address
4358 Whitehall Road; Sandy Hook VA 23153

PROPERTY OWNERSHIP

Name Jeff & Tonya Goodman	Phone 804. 839.4701
Mailing Address 4358 Whitehall Rd; Sandy Hook VA 23153	Email

APPLICANT

Name Laura Stanley	Phone 804.231.9684
Address PO Box 35418; RVA 23235	Email laura@dgelectrical.com

CONTRACTOR

Name Davis & Green	Phone 804.231.9684			
Mailing Address PO Box 35418; RVA 23235	Email laura@dgelectrical.com			
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2701 026667	Expiration 8/31/23	License Type ELE	Class A

DESCRIPTION OF WORK

Provide & install 24kW generator

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$9,685.00			

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: T. Bartlett Date: 12.2.21

Approval: <u>Mary Fisher</u>	Office Use Only	Approval date: <u>12/6/21</u>
Permit Fee: <u>65.97</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

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

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

Date: 12/31/21

Permit #: 11-2021-01445

GPIN: 7704-63-8604

Tax Map:

LOCATION

Street Address: 470 Dover Knoll Rd.

PROPERTY OWNERSHIP

Name: Kevin Barry Phone: 804-405-3612

Mailing Address: 470 Dover Knoll Rd. Email:

APPLICANT

Name: Chesney Butler Phone: 804-746-2240

Address: 8420 meadowbridge Rd. Email: Chesney@mwbutler.com

CONTRACTOR

Name: MW Butler Electrical Phone: SAME AS

Mailing Address: 8420 meadowbridge Rd. (23116) Email: ABOVE

Gas Certification: YES NO

State License Number: 2705110673 Expiration: 1-31-22 License Type: EIE Class: A

DESCRIPTION OF WORK

wire 24kw w/ 200A ATS generator

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

Value of Work (required): \$ 2,450

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

Signature of Applicant: Chesney Butler Date: 12/31/21

Approval: Fisher Office Use Only Approval date: 12-6-21

Permit Fee: \$ 32.67 Issued date:

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

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

12/2/21

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 12/2/2021

Permit # ELI-BP-2021-01054

GPIN

Tax Map

LOCATION

Street Address: 4085 BEN LOMOND RD. 23063.

PROPERTY OWNERSHIP

Name: SHARON A WOLF Phone:

Mailing Address: 1470 AMBER LAKE ROAD. 23103 Email:

APPLICANT

Name: Kevin HALL Phone:

Address: 300 DEFENSE AVE. 23150. Email:

CONTRACTOR

Name: Superior ELECTRICAL Services LLC Phone: (804) 921-1197.

Mailing Address: Email: Kevin.scotthall@gmail.com

Gas Certification: YES NO

State License Number: 2705170053 Expiration: 10/30/2022. License Type: ELE Class: C

DESCRIPTION OF WORK

wire new dwelling to code with 22KW whole House generator.

of Bathrooms: 2.5 Service Size: 200 Power Company: DOMINION ENERGY Inquiry #: 10496677

Value of Work (required): \$ 8500.00

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 L Hall Date: 12/2/2021.

Approval: Gary Fisher Office Use Only

Permit Fee: 60.44 Approval date: 12/2/21

Issued date:



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date
Permit # 21-1515
GPIN 7733-57-5637
Tax Map

LOCATION

Street Address 84 West Square Dr. Richmond, VA 23238

PROPERTY OWNERSHIP

Name Judy McNeer	Phone 804-784-2293
Mailing Address 84 West Square Dr. Richmond, VA 23238	Email

APPLICANT

Name Marcie Haynie	Phone 804-276-5580
Address 400 Turner Rd. N Chesterfield, VA 23225	Email jmelectrical@comcast.net

CONTRACTOR

Name Haynie Electrical Services, Inc DBA J&M Electrical Services			Phone 804-276-5580	
Mailing Address 400 Turner Rd. N Chesterfield, VA 23225			Email jmelectrical@comcast.net	
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705099807	Expiration 10/31/23	License Type ELE, PLB, GFC	Class A

DESCRIPTION OF WORK

Install (1) 18kw automatic standby generator with (1) 16 circuit transfer switch			
# of Bathrooms	Service Size	Power Company	Inquiry #
# Value of Work (required) \$6800.00 Cost: \$52.63			

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: 12/20/21

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>52.63</u>	Approval date: <u>12.29.21</u>
	Issued date: _____



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 12/14/2021

Permit #: 21-01023

GPIN

Tax Map

LOCATION

Street Address: 900 Millers Lane

PROPERTY OWNERSHIP

Name: AL Rider Phone: (804) 307-1954

Mailing Address: 900 Millers Lane Manakin Sabot Va 23103 Email:

APPLICANT

Name: Adam Hoggood Phone: (804) 218-6045

Address: 1735 Arlington Rd Richmond Va 23230 Email: ablough@master-electrical.com

CONTRACTOR

Name: Master Electrical Services Phone: (804) 231-1973

Mailing Address: 1735 Arlington Rd Richmond Va 23230 Email: ablough@master-electrical.com

Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705181240	9-30-2023		A

DESCRIPTION OF WORK

Install 24kw generator and a 200amp ATS

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

Value of Work (required): 5,000.00

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

Signature of Applicant: *Adam Hoggood* Date: 12-14-2021

Approval: <i>F. B. W. R.</i>	Office Use Only	Approval date: 12.22.21
Permit Fee: 44.37		Issued date:

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date: 12/14/2021

Permit #: 21-1495

GPIN:

Tax Map:

LOCATION

Street Address: 5 Hunting Ridge Rd

PROPERTY OWNERSHIP

Name: Mike Meyer Phone: (804) 218-0126

Mailing Address: 5 Hunting Ridge Rd Manakin Sabot Va 23103 Email:

APPLICANT

Name: Adam Hoggood Phone: (804) 218-6045

Address: 1735 Arlington Rd Richmond Va 23230 Email: ablough@master-electrical.com

CONTRACTOR

Name: Master Electrical Services Phone: (804) 231-1973

Mailing Address: 1735 Arlington Rd Richmond Va 23230 Email: ablough@master-electrical.com

Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705181240	Expiration: 9-30-2023	License Type:	Class: A
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DESCRIPTION OF WORK

Install 24kw generator and a 200amp ATS

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

Value of Work (required): 5,000.00

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

Signature of Applicant: *Adam Hoggood* Date: 12-14-2021

Approval: Fisher	Office Use Only	Approval date: 12.22.21
Permit Fee: 44.37		Issued date:

(owner's statement on back)