



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: 12-13-2021

Permit Number: **BP-2021-01497**

GPIN/Tax Map: **7705-67-3090/57-10-0-31-0**

Issued: **1-31-22**

This 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 1582 Devon Wy	
	Owner Andrew Burguiere	Phone # (917) 864-8967
	Address 1582 Devon Wy Manakin-Sabot, VA 23103	

APPLICANT INFORMATION	Applicant/Contact Kefficient LLC		Phone # (804)318-5002
	Address 13509 E Boundary Rd. Suite G, Midlothian, VA, 23112		Email Info@Kefficient.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Abnarn Church	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: * No change to footprint		Date 1/22/21	

CONTRACTOR INFORMATION	Contractor Kefficient LLC		Phone (804)318-5002
	Address 13509 E Boundary Rd. Suite G, Midlothian, VA, 23112		Email Info@Kefficient.com
	Contractor License Number 2705163415	Type CLASS A	Expiration 02-28-2023

DESCRIPTION OF WORK	Scope of Work: Crawl Space Encapsulation 2018 IRC & Drainage				
	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.	
				616	

Building Only - Excludes All Trades Permits		Application Fee \$ 105.09 State Levy Fee \$ 1.30 Zoning Fee \$ 25- RLD \$ _____ SWP \$ _____ Total \$ 91.39
Value of Work	11,797.80	
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	12-13-2021	



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Residential Commercial

Application Date: 12/17/2021

Permit Number: *BP-2021-01508*

GPIN/Tax Map: 6758-70-7265-9998

Issued: *1-27-22*

This 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 2011 Bulldog Way Goochland, VA 23063	
	Owner National Communications Towers	Phone # 803-466-2135
APPLICANT INFORMATION	Address 8051 Congress Ave. Boca Raton, FL 33487	Email
	Applicant/Contact SBA Communications/Keith McGuinness	Phone # 803-466-2135
	Address 9125-A Southern Pine Blvd. Charlotte, NC 28273	Email kmcguinness@sbsite.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	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	<i>A1</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to for print.</i> Planning & Zoning Officer: <i>[Signature]</i> Date: <i>1/14/22</i>			

CONTRACTOR INFORMATION	Contractor TW Celcom Inc.	Phone 540-307-5276
	Address 5077 State Park Road Dublin, VA 24084	Email info@twcelcom.com
	Contractor License Number 2705155016	Type Contractor

DESCRIPTION OF WORK	Scope of Work: Collocation on existing cell tower. Installing new antennas, cables, and ground equipment.				
	Proposed Use Cell tower	Current Use Cell tower	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 0
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 0	Unfinished Sq. Ft. 0	Total Sq. Ft. 0	

Building Only - Excludes All Trades Permits

Value of Work	\$20,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Keith McGuinness Date 12/17/2021

Application Fee	\$ <i>150.00</i>
State Levy Fee	\$ <i>3.00</i>
Zoning Fee	\$ <i>200.00</i>
RLD	\$
SWP	\$
Total	\$ <i>353.00</i>



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Residential Commercial

Application Date: 12/21/21

Permit Number: BP-2021-01522

GPIN/Tax Map: 6798-36-8741-9999 / 33-7-0-9-A

Issued: 1-27-22

This 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 2570 Oilville Road, Oilville, VA 23146	
	Owner Crown Castle USA Inc	Phone # 678-640-6761
	Address PO Box 203112, Houston, TX 77216	Email lateshia.blakeley.contractor@crowncastle.com
APPLICANT INFORMATION	Applicant/Contact La Teshia Blakeley	
	Address 2000 Corporate Drive, Canonsburg, PA 15317	Phone # 678-640-6761
		Email lateshia.blakeley.contractor@crowncastle.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Oilville Bus. Park</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid	
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA	
	Side Setback	Side Setback	Flood Zone		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint.</u>				
	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>1/14/22</u>				

CONTRACTOR INFORMATION	Contractor Ascendtek LLC		Phone
	Address PO Box 1214, Orange, VA 22960		Email
	Contractor License Number 2705173202	Type A	Expiration 10/31/23

DESCRIPTION OF WORK	Scope of Work: Install 3 antennas with related equipment on existing tower, install equip platform within existing compound.				
	Proposed Use Same	Current Use Telecommunication Facility	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 \$ <u>137.50</u>
Value of Work 25,000		State Levy Fee \$ <u>375</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>200.00</u>
Signature of Applicant <u>La Teshia Blakeley</u>	Date <u>12/21/21</u>	RLD \$
		SWP \$
		Total \$ <u>391.25</u>



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Application Date 1-21-2022Permit Number: BP-2022-00076GPIN/Tax Map: 6727-11-4954/39-1-0-45-AIssued: 1-27-2022

This 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>1650 HASKIN ROAD</u>	Phone # <u>804.387.3226</u>
	Owner <u>HASKIN ROAD LLC</u>	Email <u>nancygleake@gmail.com</u>
	Address <u>P.O. Box 228 Goochland, VA 23063</u>	Phone # <u>u</u>

APPLICANT INFORMATION	Applicant/Contact <u>NAN LEAKE / JON SHEPHERD</u>	Phone # <u>u</u>
	Address <u>1651 HASKIN RD. 23063</u>	Email <u>v</u>

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

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer OWNER (owner) Date _____

CONTRACTOR INFORMATION	Contractor <u>BROWNING CONSTRUCTION CO.</u>	Phone <u>352-2817</u> 804.451.9195
	Address <u>P.O. Box 187 OILVILLE, VA 23129</u>	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Demolish existing house/ uninhabitable</u>				
	Proposed Use <u>Land</u>	Current Use <u>Residential</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms <u>1</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>---</u>	Unfinished Sq. Ft. <u>---</u>	Total Sq. Ft. <u>---</u>	

Building Only - Excludes All Trades Permits

Value of Work \$10,500.-

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 Nancy Gleake Date 1/21/22

Application Fee	\$ <u>57.00</u>
State Levy Fee	\$ <u>1.14</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>58.14</u>



BUILDING PERMIT APPLICATION

Application Date: 1-6-2022

Permit Number: BP-2022-00018

GPIN/Tax Map: 7705-76-9241

Issued: 1-26-2022

This 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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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>1641 Devon Way, Manakin Sabot, Virginia</u>	
	Owner <u>Richard Matthews</u>	Phone # <u>8045921471</u>
APPLICANT INFORMATION	Address <u>1641 Devon Way, Manakin Sabot, Virginia 23103</u>	Email <u>matthews215@gmail.com</u>
	Applicant/Contact <u>Richard Matthews</u>	Phone # <u>8045921471</u>
	Address <u>1641 Devon Way, Manakin Sabot, Virginia 23103</u>	Email <u>matthews215@gmail.co</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Auburn Chase</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* No change to existing footprint</u>			
Planning & Zoning Officer <u>[Signature]</u> Date <u>1/19/22</u>				

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

Scope of Work:
 Reinforcement of existing framing structure, see attached documentation

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>\$4000.</u>	Application Fee	\$ <u>30.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee	\$ <u>60.00</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>55.00</u>

Signature of Applicant [Signature] Date 06 JAN 2022



BUILDING PERMIT APPLICATION

Application Date: 12/21/21Permit Number: BP-2021-01521GPIN/Tax Map: 57-31-0-12-0 / 7705-95-1225Issued: 1-20-2022This 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 <u>1090 Mouskin Rd., Mouskin-Sabot VA 23013</u>		
	Owner <u>Francis Huber</u>	Phone # <u>804-971-1234</u>	
APPLICANT INFORMATION	Address <u>1090 Mouskin Rd., Mouskin-Sabot VA 23013</u>		Email <u>FHUBERS@COMCAST.NET</u>
	Applicant/Contact <u>AltEnergy Inc / Anton Martz</u>		Phone # <u>814-221-8149</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>1132 E. Market St. Charlottesville VA 22902</u>		Email <u>amartz@altenergyinc.com</u>
	Subdivision <u>Rockabean Farm</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Root Mounted.</u>	Front Setback	Center Line Setback	Rear Setback
	Side Setback	Side Setback	Flood Zone
	CUP/Variance/COA _____		
	Date Paid _____		
Planning & Zoning Officer: <u>[Signature]</u> Date: <u>1/11/22</u>			

CONTRACTOR INFORMATION	Contractor <u>AltEnergy Inc.</u>		Phone <u>814-221-8149</u>
	Address <u>1132 E. Market St. Charlottesville VA 22902</u>		Email <u>amartz@altenergyinc.com</u>
	Contractor License Number <u>2705126186</u>	Type <u>RES; ELE.</u>	Expiration <u>12/31/21</u>

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

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>59.25</u>
Value of Work	<u>\$10,500</u>	State Levy Fee	\$ <u>1.19</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> Anton Martz	RLD	\$ _____
Date	<u>12/21/21</u>	SWP	\$ _____
		Total	\$ <u>85.44</u>



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Residential Commercial

Application Date: 1-21-2022
 Permit Number: BP-2022-00075
 GPIN/Tax Map: 6727-12-3158 / 39-1-0-45-0
 Issued: 1-26-2022
 This 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>1651 HASKIN RD.</u>		Phone # <u>804.387.3226</u>
	Owner <u>HASKIN ROAD LLC</u>		Email <u>nancygleak@gmail.com</u>
	Address <u>P.O. Box 228 23063</u>		Phone # <u>u</u>
APPLICANT INFORMATION	Applicant/Contact <u>NAN LEAKE / JON STEPHANZO</u>		Email <u>u</u>
	Address <u>1651 Haslin Road</u>		Phone # <u>u</u>

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

CONTRACTOR INFORMATION	Contractor <u>Brown Hill Construction Co. (OWNER)</u>		Phone <u>506.356.2817</u>
	Address <u>P.O. Box 187 Dittie, VA 23129</u>		Email <u>u</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Demolition existing house / abandoned / uninhabitable</u>				
	Proposed Use <u>Land</u>	Current Use <u>residential</u>	Environmental impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms <u>2</u>	# of floors <u>4</u> <u>basement</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>u</u>	Unfinished Sq. Ft. <u>u</u>	Total Sq. Ft. <u>u</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>66.00</u>
Value of Work <u>\$12,000.</u>		State Levy Fee	\$ <u>1.32</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Nan Leake</u> Date <u>1/21/22</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>67.32</u>



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Residential Commercial

Application Date: 1/12/22

Permit Number: 78P-2022-00038

GPIN/Tax Map: 6767-53-8807 / 43-37-B-2-0

Issued: 1-25-2022

This 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>1705 Cahill Terrace, Maidens, 23102</u>	
	Owner <u>Joshua Condon</u>	Phone # <u>443-205-2685</u>
	Address <u>same</u>	Email <u>jecondon93@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Daniel Gordon</u>	
	Address <u>2945 River Road West, Goochland, VA 23063</u>	Email <u>gordonbrothersconstruction@yahoo.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Clifton</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint</u> Planning & Zoning Officer: <u>Daniel Gordon</u> Date: <u>1/19/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Gordon Brothers Construction</u>		Phone <u>804-556-8180</u>
	Address <u>2945 River Road West, Goochland, VA 23063</u>		Email <u>gordonbrothersconstruction@yahoo.com</u>
	Contractor License Number <u>2705144137</u>	Type <u>Class A</u>	Expiration <u>12/31/2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Finish upstairs bonus room - 240 sq. ft. laundry</u>				
	Proposed Use <u>Finished bonus room</u>	Current Use <u>Unfinished bonus room</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>No</u>	Finished Sq. Ft. <u>224</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>224</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>57.00</u>
Value of Work <u>\$10,000</u>		State Levy Fee \$ <u>21.14</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
Signature of Applicant <u>[Signature]</u>	Date <u>1/12/22</u>	Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>83.14</u>



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Application Date: 12-26-21

Permit Number: BP-2021-01511

GPIN/Tax Map: 6820-00-8480/18-A-0-3-B

Issued: 1-25-2022

Residential Commercial

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OWNER INFORMATION	Site Address <u>3046 Davis Mill rd</u>	
	Owner <u>Travis Perkins</u>	Phone # <u>804 338 7582</u>
	Address <u>3046 Davis mill rd</u>	Email <u>Tperkz97@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Travis Perkins</u>	
	Address	Phone # <u>Tperkz97@gmail.com</u>
		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75ft</u>	Center Line Setback	Rear Setback <u>35ft</u>	CUP/Variance/COA <u>A-1</u>
	Side Setback <u>20ft</u>	Side Setback <u>20ft</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Amela Barnes</u> Date <u>12-30-21</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>addition of room for master closet and expansion of master bath</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# 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>4800 48</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>48</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>79.50</u> State Levy Fee \$ <u>1.59</u> Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>106.09</u>
Value of Work	<u>15,000</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant <u>[Signature]</u>	Date _____	

Received 1-5-22



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: 12/29/2021 1-7-22
 Permit Number: BP-2022-0012
 GPIN/Tax Map: 7716-15-8442/57-36-0-16-0
 Issued: 1-25-2022

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 429 SHADOW CREEK LN	
	Owner MIKE WELDON	Phone # 804-855-4645
	Address 429 SHADOW CREEK LN	Email

APPLICANT INFORMATION	Applicant/Contact JUDAH MURPHY	Phone # 804-285-4239
	Address 6408 MALLORY DR.	Email JUDAHMURPHY326@GMAIL.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>The Preserve</i> <i>W Manakit</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>75' from P/R/W</i>	Center Line Setback <i>100'</i>	Rear Setback <i>35'</i>	CUP/Variance/COA <i>RP</i>
	Side Setback <i>20'</i>	Side Setback <i>20'</i>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <i>Dana Floyd</i> Date <i>1/18/22</i>			

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

DESCRIPTION OF WORK	Scope of Work: BUILD AN APPROX 12'8"X10' SCREENED PORCH				
	Proposed Use PORCH	Current Use N/A	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
	Finished Sq. Ft.	Unfinished Sq. Ft. <i>126.66</i>	Total Sq. Ft. <i>126.66</i>		

Building Only - Excludes All Trades Permits		Application Fee \$ <i>100.00</i>
Value of Work	20000	State Levy Fee \$ <i>2.04</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <i>Judah Murphy</i> Date 12/29/2021		Septic/Well Fee \$
		Zoning Fee \$ <i>50.00</i>
		RLD \$
		SWP \$
		Total \$ <i>129.04</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: 12-30-2021
 Permit Number: BP-2022-00017

GPIN/Tax Map: 6780-53-5914/55-1-0644
 Issued: 1-25-2022

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

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

OWNER INFORMATION	Site Address <u>1498 Cardwell Rd</u>	Phone #
	Owner <u>Tuki Barbolini</u>	
	Address <u>1498 Cardwell Rd.</u>	Email

APPLICANT INFORMATION	Applicant/Contact	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Not Subject to Setbacks.</u> <u>1A2</u>			
	Planning & Zoning Officer: <u>[Signature]</u> Date: <u>1/19/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Soul Farms</u>	Phone <u>804-514-6090</u>
	Address <u>2443 Green Level Rd King William Va 23086</u>	Email <u>geoff@soulfarms.com</u>
	Contractor License Number <u>2705164638</u>	Type <u>RBC Class A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Retaining wall installation on left side of house to transition grade from hillside to flatter grade around house.</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>42' x 3'</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>39.00</u>
Value of Work	<u>6,000</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.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>64.78</u>
Signature of Applicant: <u>[Signature]</u> Date: <u>12-30-21</u>			



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 1/20/21
 Permit Number: BP-2021-00083

GPIN/Tax Map: 8844
 6759-72-9823 / 30-8-0-0-0
 Issued: 4-28-2021

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

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

OWNER INFORMATION	Site Address: 2576 Sandy Hook Rd Goochland, VA 23063	
	Owner: Kerry Crowley	Phone #: 276-233-2469
	Address: 2491 Turner Rd, Goochland, VA 23063	Email: keryr1@hotmail.com
APPLICANT INFORMATION	Applicant/Contact: Daniel Gordon	
	Address: 2945 River Road West, Goochland, VA 23063	Email: gordonbrothersconstruction@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: Cheney's Creek	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: 100' from PL/ROW	Center Line Setback: 125'	Rear Setback: 35'	CUP/Variance/COA: A2
	Side Setback: 20'	Side Setback: 25'	Flood Zone: _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: _____		
Planning & Zoning Officer: David [Signature] Date: 4/28/21				

CONTRACTOR INFORMATION	Contractor: Gordon Brothers Construction		Phone: 804-556-8180
	Address: 2945 River Road West, Goochland, VA 23063		Email: gordonbrothersconstruction@yahoo.com
	Contractor License Number: 2705144137	Type: Class A	Expiration: 12/31/2021

DESCRIPTION OF WORK	Scope of Work: Construct single family home with attached garage (approx. 576 sqft) above driveway. Revised 1-20-22 - 366 sq ft unfinished space is being added. W/ unfinished space					
	Proposed Use: Residential	Current Use: _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed): N/A - 15000 sq ft 20,000			
	SEWER: Public/Private	WATER: Public/Private	# of Bathrooms: 2.5	# of Bedrooms: 3	# of floors: 1.5	
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft.: 1,720 + 366	Unfinished Sq. Ft.: 1,239 - 366	Total Sq. Ft.: 2,959		

Building Only - Excludes All Trades Permits		Application Fee: \$ 957.00
Value of Work: 210,000.00	(2,076) (873)	State Levy Fee: \$ 19.14
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.		Septic/Well Fee: \$ _____
Signature of Applicant: [Signature]	Date: 1/11/2020	Zoning Fee: \$ 50.00
		RLD: \$ 100.00
		SWP: \$ _____
		Total: \$ 1,226.14

FINISHED FOR OFFICE



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: 12/16/2021

Permit Number: BP-2021-01485

GPIN/Tax Map: 6788-20-6159/44-16-02-0

Issued: 1-27-22

This 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 1651 Horsepen Hills Road	
	Owner Karen Branham	Phone # (804) 683-1982
	Address 1651 Horsepen Hills Road	Email

APPLICANT INFORMATION	Applicant/Contact Witte Home Solutions	Phone # (804) 447-4545
	Address 7609 Staples Mill Rd	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Horsepen Hills	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' from PL / ROW	Center Line Setback 125'	Rear Setback 35'	CUP/Variance/COA
	Side Setback Lt. Side 35'	Side Setback Rt. 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer: David Flegel Date: 12/17/21

CONTRACTOR INFORMATION	Contractor Witte Home Solutions	Phone (804) 447-4545
	Address 7609 Staples Mill Road	Email cathy@wittehomesolutions.com
	Contractor License Number 2705131564	Type Class B Contractor

DESCRIPTION OF WORK	Scope of Work: Building a new 29' by 9' screened in porch 2 entry doors. Create 3 door/case opening. Remove removal of non load bearing wall in laundry room				
	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.	
			261	261	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>174.00</u> State Levy Fee \$ <u>3.48</u> Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>202.48</u>
Value of Work	<u>36,000</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<u>[Signature]</u> Date <u>12/16/21</u>	

12-8-2021



BUILDING PERMIT APPLICATION

Application Date: 12/1/2021

Permit Number: BP-2021-01459

GPIN/Tax Map: 6786-27-5444 / 44-15-1-4-0

Issued: 1-20-2022

This 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 1841 Covington Rd, Crozier, VA 23039		Phone # (732) 429-3455
	Owner Andrew Orr		Email andrewphilliporr@gmail.com
	Address 1841 Covington Rd, Crozier, VA 23039		
APPLICANT INFORMATION	Applicant/Contact Autumn Tedesco / Convert Solar		Phone # 757-447-6527
	Address 5770 Thurston Ave, Ste 106, VA Beach, VA 23455		Email npi@convert-solar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Covington</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to footprints.</i>			
Planning & Zoning Officer <i>David Lloyd</i>		Date <i>12/14/21</i>		

CONTRACTOR INFORMATION	Contractor Chad Wilkins / Convert Solar		Phone 757-447-6527
	Address 5770 Thurston Ave, Ste 106, VA Beach, VA 23455		Email npi@convert-solar.com
	Contractor License Number 2705151260	Type AES;ELE	Expiration 3/31/2023

DESCRIPTION OF WORK	Scope of Work: roof-mounted, grid-tied, 7.48kW solar pv system on existing residence				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 425		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>59.12</u>
Value of Work	<u>10,470</u>	State Levy Fee \$ <u>1.18</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>85.30</u>
Signature of Applicant <i>[Signature]</i>	Date <u>12/1/2021</u>	

12-8-2021



BUILDING PERMIT APPLICATION

Application Date: 12/1/2021

Permit Number: BP. 2021-01458

GPIN/Tax Map: 7726-15-7414 / 58-55-2-5-8

Issued: 1.20.22

This 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 12205 Bremner Ridge Circle	Phone # (804) 822-9170
	Owner Timothy Yoder	Email fifi_tim@yahoo.com
APPLICANT INFORMATION	Address 12205 Bremner Ridge Cir, Manakin Sabot, VA 23103	Applicant/Contact Autumn Tedesco / Convert Solar
	Address 5770 Thurston Ave, Ste 106, VA Beach, VA 23455	Phone # 757-447-6527
		Email npi@convert-solar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	_____ RPOD
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint.</u>	Planning & Zoning Officer: <u>[Signature]</u>	Date: <u>12/14/21</u>	

CONTRACTOR INFORMATION	Contractor Chad Wilkins / Convert Solar	Phone 757-447-6527
	Address 5770 Thurston Ave, Ste 106, VA Beach, VA 23455	Email npi@convert-solar.com
	Contractor License Number 2705151260	Type AES;ELE

DESCRIPTION OF WORK	Scope of Work: roof-mounted, grid-tied, 12.96kW solar pv system on existing residence				
	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. 752.4		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>96.11</u>
Value of Work	18,690	State Levy Fee \$ <u>1.92</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>123.03</u>
Signature of Applicant	<u>[Signature]</u>	Date 12/1/2021



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/8/21 11-9-2021
 Permit Number: BP-2021-01301 01301

GPIN/Tax Map: 715-67-7650/58-39-4-2-0

Issued: 1-18-2022

This 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 313 BROADFIELD LANE MANAKIN SABOT, VA 23103	
	Owner DANNY + LYNN HOLLY	Phone #
APPLICANT INFORMATION	Address 313 BROADFIELD LANE	Email
	Applicant/Contact LANCASTER CUSTOM BUILDER	Phone # 804-784-9898
	Address PO Box 18372 RICHMOND, VA 23226	Email OFFICE@LANCASTERCUSTOMBUILDER.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Kinloch - 4 B	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 30' off pavement	Center Line Setback	Rear Setback	CUP/Variance/COA RPUD
	Side Setback 20' B/S Structure	Side Setback 50' B/S Structure	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer: <i>[Signature]</i> Date: 11/9/2021		

CONTRACTOR INFORMATION	Contractor LANCASTER CUSTOM BUILDER	Phone 804-784-9898
	Address P.O. Box 18372	Email office@lanastercustombuilder.com
	Contractor License Number 2705155799	Type Class A

DESCRIPTION OF WORK	Scope of Work: ADD SUNROOM, RENOVATE KITCHEN & LAUNDRY ROOM				
	Proposed Use SINGLE FAMILY	Current Use SINGLE FAMILY	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	# of Bedrooms	# 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. 542	Unfinished Sq. Ft.	Total Sq. Ft. 542	

Building Only - Excludes All Trades Permits

Value of Work	\$ 400,000
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Application Fee	\$ 1837.00
State Levy Fee	\$ 36.24
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 1898.24

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: 11/8/21

Rec: 10-18-21

 <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 type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial</p>	Application Date: 10/13/21
	Permit Number: <u>BP-2021-01267</u>
	GPIN/Tax Map: <u>7704-91-8292 9998 / 62-1-0-10</u>
	Issued: <u>1-19-22</u>

This 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>499 Bosobel Ferry Road, Manakin Sabot, VA 23103</u>	Phone #
	Owner <u>Manakin Towers LLC / SBA</u>	
APPLICANT INFORMATION	Address <u>8051 Congress Ave, Boca Raton, FL 33487</u>	Email
	Applicant/Contact <u>Verizon Wireless (agent - Jeff Holland, NB+C, LLC)</u>	Phone # <u>(757) 817-6628</u>
	Address <u>NB+C, LLC, 120 Eastshore Dr, Ste 300, Glen Allen, VA 23059</u>	Email <u>jholland@nbcllc.com</u>

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

Planning & Zoning Officer: [Signature] Date: 10/13/21

CONTRACTOR INFORMATION	Contractor <u>Jacobs Telecommunications, Inc.</u>	Phone <u>(804) 615-5174</u>
	Address <u>5449 Bells Ferry Road, Acworth, GA 30102</u>	Email <u>Nathan.Via@Jacobs.com</u>
	Contractor License Number <u>2705066988</u>	Type <u>Class A - H/H</u>

DESCRIPTION OF WORK	Scope of Work: Verizon Wireless proposes to swap out/replace existing antennas and equipment at the 190' centerline on an existing 199' self-support tower with new antennas and equipment as well modifications to the tower mounts. No changes are proposed to the height of the tower and the fenced compound will not be enlarged. See attached structural analysis and mount analysis.				
	Proposed Use <u>cell tower</u>	Current Use <u>cell tower</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. <u>0</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>157.50</u>
Value of Work <u>21,000.00</u>		State Levy Fee \$ <u>3.15</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>	Date <u>10/13/21</u>	RLD \$ _____
		SWP \$ _____
		Total \$ <u>260.65</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/1/21
 Permit Number: BP-2021-01311
 GPIN/Tax Map: 6831-06-93512-23-0-D-TW
 Issued: 1-19-22
 This 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: **4040 Cozy Acres Lane, Sandy Hook, VA 23153**
 Owner: **Wanda Payne Trustee (property owner)** Phone #: **(804) 457-4517**
 Address: **PO Box 54, Hadensville, VA** Email:

APPLICANT INFORMATION
 Applicant/Contact: **Verizon Wireless (Jeff Holland, NB+C, LLC - agent)** Phone #: **(757) 817-6628**
 Address: **120 Eastshore Dr, Ste 300, Glen Allen, VA 23059** Email: **jholland@nbcllc.com**

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED COMMENTS: No change to property
 Planning & Zoning Officer: David Payne Date: 11/5/21

CONTRACTOR INFORMATION
 Contractor: **Mountain Valley Tower Service, Inc.** Phone: **(540) 886-6679**
 Address: **2014 N. Augusta Street, Staunton, VA 24401** Email: **towermanbowles@comcast.net**
 Contractor License Number: **2705070588** Type: **Class A** Expiration: **9/30/22**

DESCRIPTION OF WORK
Scope of Work: Verizon Wireless proposes to co-locate their antennas/equipment at the 220' centerline on an existing 229' self-support tower. Verizon Wireless also proposes to install their ground equipment within the existing fenced compound. See attached construction drawings and tower design drawings.

Proposed Use Verizon Wireless co-location	Current Use cell tower	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. 0	Unfinished Sq. Ft. 0	Total Sq. Ft. 0	

Building Only - Excludes All Trades Permits

Value of Work	52,000.00	Application Fee	\$ <u>390.00</u>
		State Levy Fee	\$ <u>7.80</u>
		Zoning Fee	\$ <u>200</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>597.80</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: [Signature] Date: 10/26/21



BUILDING PERMIT APPLICATION

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

Application Date: 12/16/2021Permit Number: BP-2021-01504GPIN/Tax Map: 6019-00-9568/26-1-0-22-0Issued: 1-19-22

This 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>2300 Cartersville Road</u>	
	Owner <u>Daniel Klinefelter</u>	Phone # <u>804 519-6708</u>
	Address <u>2300 Cartersville Road Goochland</u>	Email <u>danielklinefelter@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Shiflett Construction Services Inc</u>	
	Address <u>2645 Judes Ferry Rd Pow. VA 23139</u>	Phone # <u>804 305-7015</u>
		Email <u>roltreshiflett28@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100 ft</u>	Center Line Setback	Rear Setback <u>5ft</u>	CUP/Variance/COA
	Side Setback <u>5ft</u>	Side Setback <u>5ft</u>	Flood Zone	

APPROVED REJECTED COMMENTS: CANNOT be used as separate unit.

Planning & Zoning Officer: Amelia Barber Date: 1-6-2021

CONTRACTOR INFORMATION	Contractor <u>Shiflett Construction Services Inc</u>		Phone <u>305-7015</u>
	Address <u>2645 Judes Ferry Road Powhatan VA 23139</u>		Email <u>roltreshiflett28@gmail.com</u>
	Contractor License Number <u>2765044480</u>	Type <u>CBC RBC</u>	Expiration <u>4/30/22</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build Detached Garage w/ finished living room Recreation + bonus room above</u>			
	Proposed Use <u>Garage</u>	Current Use <u>-</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NA</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u>	# of Bedrooms <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. <u>1320</u> <u>220</u>	Unfinished Sq. Ft. <u>1320</u> <u>1220</u>	Total Sq. Ft. <u>252640</u>

Building Only - Excludes All Trades Permits

Value of Work <u>138,000.-</u>	Application Fee <u>\$ 642.-</u>
	State Levy Fee <u>\$ 12,666</u>
	Zoning Fee <u>25.-</u>
	RLD <u>\$</u>
	SWP <u>\$</u>
	Total <u>\$ 170,666</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: Royce Shiflett Date: 12/16/2021



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: 12/17/21

Permit Number: BP-2021-01510

GPIN/Tax Map: 7107-85-1802/46-27-B-8-0

Issued: 1-13-22

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 2354 Wheatlands Dr. Manakin Sabot 23103	
	Owner Dennis Pack	Phone # 804 304-2261
	Address same as above	Email
APPLICANT INFORMATION	Applicant/Contact James B. Fambolt, owner Custom Pools	
	Address	Email jbf3@cplva.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: Wheatlands	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback: 75ft	Center Line Setback: 100' CL	Rear Setback: 5ft	CUP/Variance/COA: R-R
	Side Setback: 5ft	Side Setback: 5ft	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: Anita Barnes Date: 12-30-21			

CONTRACTOR INFORMATION	Contractor: Custom Pools and Landscapes of Richmond, Inc.		Phone: 804 502 1733
	Address: 3400 Traylor Dr. Richmond Va 23235		Email: jbf3@cplva.com
	Contractor License Number: 2705138294	Type: A	Expiration: 1/31/23

DESCRIPTION OF WORK	Scope of Work: Install fiberglass pool in back yard. Fence by others Pool Model: 'Monaco' by Latham Pools				
	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. 690	

Building Only - Excludes All Trades Permits		Application Fee: \$ 113.25
Value of Work: \$22,500		State Levy Fee: \$ 2.27
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: \$ 2500
Signature of Applicant: <i>J. Fambolt</i>	Date: 12/17/21	RLD: \$
		SWP: \$
		Total: \$ 140.52



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: 12/20/21
 Permit Number: AP-2021-01516
 GPIN/Tax Map: 7707-85-1802/46-27-13-8-0
 Issued: 1-13-22
 This 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: 2354 Wheatlands Dr, Manakin Sabot, VA 23103
 Owner: Dennis Pack Phone #: 804-749-4317
 Address: Same Email: VAPACKMAN@Comcast.net

APPLICANT INFORMATION
 Applicant/Contact: Dennis Pack Phone #: Same
 Address: Same Email: Same

TO BE COMPLETED BY ZONING DEPARTMENT

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

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

CONTRACTOR INFORMATION
 Contractor: ~~The Ferris Company~~ OWNER Phone: 804-749-4317
 Address: 8421 Bellvue Drive, Petersburg VA 23805 Email: VAPACKMAN@Comcast.net
 Contractor License Number _____ Type _____ Expiration _____

DESCRIPTION OF WORK
 Scope of Work: Pool - Barrier Permit

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>\$ 5000</u>	Application Fee	\$ <u>48.00</u>
		State Levy Fee	\$ <u>.96</u>
		Zoning Fee	\$ _____
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>48.96</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: Dennis Pack Date: 12/20/21



BUILDING PERMIT APPLICATION

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

Application Date: 11/10/21
 Permit Number: BP-2021-01375
 GPIN/Tax Map: 7725-05-7901/58-54-4-39-0
 Issued: 1-13-2022
 This 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 12001 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 <u>Mosaic</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$ 4966.00</u>	Date Paid <u>Due</u>
	Front Setback <u>25' from P/R Row</u>	Center Line Setback <u>50'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>Left Side 10'</u>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Cash Author due before issuing C.O. *Survey locate setbacks</u>			
Planning & Zoning Officer: <u>David Floyd</u> Date: <u>11/24/21</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: 3 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. 2239	Unfinished Sq. Ft. 571	Total Sq. Ft. 2810		

Building Only - Excludes All Trades Permits

Value of Work	\$286,620
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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: 11/10/21

Application Fee	\$ <u>2149.65</u>
State Levy Fee	\$ <u>42.99</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>100.00</u>
RLD	\$ <u>100.00</u>
SWP	\$
Total	\$ <u>2392.64</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 1/11/2022

Code Official



BUILDING PERMIT APPLICATION

Application Date: 11/10/21

Permit Number: BP-2021-01374

GPIN/Tax Map: 7725-05-8436/58-54-4-40-D

Issued: 1-13-2022

This 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 12003 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>Mobair</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$4966.00</u>	Date Paid <u>Dec</u>
	Front Setback <u>25' from P/L</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>Survey locate setbacks to each P/L</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>11/24/21</u> <u>date before issuing C.O.</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: 3 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. 2149	Unfinished Sq. Ft. 840	Total Sq. Ft. 2989		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>2286.59</u>	
Value of Work \$304,878		State Levy Fee \$ <u>45.73</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>Stephanie Isaacs</u>	Date <u>11/10/21</u>	Zoning Fee \$ <u>100.00</u>	
		RLD \$ <u>100.00</u>	
		SWP \$	
		Total \$ <u>2532.32</u>	

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL _____ DATE 1/11/2021


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: 11/10/21
 Permit Number: BP-2021-01373
 GPIN/Tax Map: 7725-05-7591/58-54-441-0
 Issued: 1-13-2022
 This 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: 12005 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: Mosaic Proffer: Yes No Amount: \$4900.00 Date Paid: Dec
 Front Setback: 25' from P/R/W Center Line Setback: 50' Rear Setback: 25' CUP/Variance/COA: _____
 Side Setback: Rt. Side 10' Side Setback: _____ Flood Zone: X _____
 APPROVED REJECTED COMMENTS: *Cash Proffer due before issuing C.O. *Survey locate setbacks.
 Planning & Zoning Officer: [Signature] Date: 11/24/21

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: 3 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
2239 Finished Sq. Ft.	571 Unfinished Sq. Ft.	2810 Total Sq. Ft.		

Building Only - Excludes All Trades Permits
 Value of Work: \$286,620

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: 11/10/21

Application Fee	\$ <u>2149.65</u>
State Levy Fee	\$ <u>42.99</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>100.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ _____
Total	\$ <u>2242.64</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 1/11/2022
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: 12/7/21 12-14-2021
 Permit Number: BP-2021-01481
 GPIN/Tax Map: 6719-99-0847/ 18-10-0-3-3
 Issued: 1-6-2022
 This 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: 2971 Davis Mill Rd Goochland VA 23063
 Owner: RICHARD BENJAMIN Phone #: (910) 520-5203
 Address: 2971 DAVIS MILL Rd Goochland, VA 23063 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: MMB Construction LLC / Monica Baber Phone #: (804) 375-9891
 Address: 2742 POORHOUSE RD. Goochland, VA 23063 Email: or 393 6790
 Email: MMBCLLC@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 75' from P.Y. line Center Line Setback: 100' Rear Setback: 5' CUP/Variance/COA: _____
 Side Setback: RT. Side 35' Side Setback: LT. Side 5' Flood Zone: _____ A1
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: [Signature] Date: 12/16/21

CONTRACTOR INFORMATION
 Contractor: MMB Construction, LLC Phone: 804 393-6790
 Address: 2742 POORHOUSE RD Goochland, VA 23063 Email: MMBCLLC@aol.com
 Contractor License Number: ~~272261190~~ 2705138098 Type: CLASS A BLDR RBC Expiration: 01-31-2023

DESCRIPTION OF WORK
 Scope of Work: BUILD 30' x 40' shop (detached) unfinished

Proposed Use <u>Residential</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? Yes <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1200</u>	Total Sq. Ft. <u>1200.</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>60,000</u>	Application Fee \$ <u>282.00</u>
	State Levy Fee \$ <u>5.64</u>
	Septic/Well Fee \$ _____
	Zoning Fee \$ <u>2500</u>
	RLD \$ _____
	SWP \$ _____
Signature of Applicant: <u>[Signature]</u> Date: <u>12/7/21</u>	Total \$ <u>32.64</u>

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

12-8-2021



BUILDING PERMIT APPLICATION

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

Application Date: 12/7/21

Permit Number: BP-2021-01461

GPIN/Tax Map: 6749-52-1395/29-10-0-5-0

Issued: 1-6-2022

This 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 3803 RIDDLES BRIDGE RD. GOOCHLAND, VA 23063	
	Owner KYLE & KRISTEN DUNCAN	Phone # (757) 817-6595
	Address 3803 RIDDLES BRIDGE RD GOOCHLAND VA	Email dontjeke@gmail.com

APPLICANT INFORMATION	Applicant/Contact MMB CONSTRUCTION LLC / MONICA BABER	23063 Phone # (804) 375-9891
	Address 2742 POORHOUSE RD GOOCHLAND VA	23063 Email MMBCLLC@aol.com or 804-393-6791

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision The Woods @ Riddles Bridge	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 75' from PL/ROW	Center Line Setback 100'	Rear Setback 35'	CUP/Variance/COA — A1
	Side Setback 20'	Side Setback 20'	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date 12/16/21		

CONTRACTOR INFORMATION	Contractor MMB Construction, LLC	Phone (804) 375-9891
	Address 2742 POORHOUSE RD GOOCHLAND VA 23063	Email MMBCLLC@aol.com
	Contractor License Number 27-2267790 2705138098	Type CLASS A BLDR RBC

DESCRIPTION OF WORK	Scope of Work: Addition w/walk-out basement (32' x 20') office Playroom				
	Proposed Use Residential	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# of Bedrooms 0	# of floors 2
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft. 640	Unfinished Sq. Ft. 512	Total Sq. Ft. 1152	

Building Only - Excludes All Trades Permits

Value of Work 80,000

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 M. Baber Date 12-7-21

Application Fee	\$ 372.00
State Levy Fee	\$ 7.44
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 404.44



BUILDING PERMIT APPLICATION

Application Date: 12/22/2021

Permit Number: BP-2021-01505

GPIN/Tax Map: MIS-16-2111/58.34.3.6.0

Issued: 1-6-22

This 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 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 204 Kinloch Road, Manakin Sabot, VA 23103	
	Owner Ari & Meg Hirsch	Phone # 804-380-5070
	Address 204 Kinloch Rd, Manakin Sabot, VA 23103	Email abhirsch77@gmail.com
APPLICANT INFORMATION	Applicant/Contact Travis Jowers/Ultimate Pools	
	Address 2175 Lanier Lane, Rockville, VA 23146	Phone # 804-749-4706 Email travis@ultimatepools.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision kinloch	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback Behind main Building	Center Line Setback	Rear Setback 5ft	CUP/Variance/COA RPU D
	Side Setback 5ft	Side Setback 5ft	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Office Amela Barnes Date 12-30-21			

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

Building Only - Excludes All Trades Permits		Application Fee \$ 147- State Levy Fee \$ 2.94 Septic/Well Fee \$ - Zoning Fee \$ 25- RLD \$ - SWP \$ - Total \$ 174.94
Value of Work	30,000.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant [Signature]		Date 12/16/21



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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: 1/26/2022

Permit # 211-2022-00116

GPIN

Tax Map

LOCATION

Street Address 3317 TILLAR LANE

PROPERTY OWNERSHIP

Name SARAH WATERLAND Phone 804-301-3658

Mailing Address 3317 TILLAR LANE GOOCHLAND, VA 23063 Email

APPLICANT

Name KELLY CATMELL Phone 804-266-4704

Address 1575 MOUNTAIN RD GLEN ALLEN, VA 23060 Email KELLYC@TRIBBLE ELECTRIC.COM

CONTRACTOR

Name Tribble Electric Phone (804) 266-4704

Mailing Address 1575 Mountain Road, Glen Allen VA 23060 Email

Gas Certification YES NO

State License Number 2705177312 Expiration 01/31/2023 License Type ELE Class A

DESCRIPTION OF WORK

WIRE FOR 22KW GENERAC GENERATOR

of Bathrooms Service Size Power Company Dominion Inquiry

Value of Work (required) \$ 7,800.00

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: [Signature] Date: 1/26/2022

Approval: [Signature] Office Use Only Approval date: 1-31-22

Permit Fee: \$37.22 Issued date: 1-31-22

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

(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	1-26-2022
Permit #	11 2022-00117
GPIN	
Tax Map	

LOCATION

Street Address 595 COUNTRY CLUB LANE

PROPERTY OWNERSHIP

Name	<u>ERV SPEVAK</u>	Phone	<u>804-357-0076</u>
Mailing Address	<u>595 COUNTRY CLUB LANE</u>	Email	

APPLICANT

Name	<u>KELLY CATHELL</u>	Phone	<u>804-266-4704</u>
Address	<u>1575 MOUNTAIN RD. GLEN ALLEN, VA 23060</u>	Email	<u>KELLY.C@TRIBBLEELECTRIC.COM</u>

CONTRACTOR

Name	<u>Tribble Electric</u>	Phone	<u>(804) 266-4704</u>
Mailing Address	<u>1575 Mountain Road, Glen Allen VA 23060</u>	Email	
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	<u>2705177312</u>
		Expiration	<u>01/31/2023</u>
		License Type	<u>ELE</u>
		Class	<u>A</u>

DESCRIPTION OF WORK

WIRE FOR 22KW GENERAC GENERATOR & (2)
150 AMP AUTOMATIC TRANSFER SWITCH

# of Bathrooms	Service Size	Power Company Dominion	Inquiry #
Value of Work (required) <u>\$12,426.00</u>			

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

Signature of Applicant: [Signature] Date: 1/26/2022

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	
Permit Fee:	<u>\$ 78.46</u>		Issued date:	<u>1-31-22</u>

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

(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

1-18-22

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: 12/1/21

Permit #: 011-2022-0012

GPIN:

Tax Map:

LOCATION

Street Address: 2278 SANDY HOOK ROAD

PROPERTY OWNERSHIP

Name: LYNN PARRISH Phone: 804-514-1994

Mailing Address: 2278 SANDY HOOK RD Email: MJLEWP@YAHOO.COM

APPLICANT

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

Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: JVS7A115@viriniapowersolutions.com

CONTRACTOR

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

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: JVS7A115@viriniapowersolutions.com

Gas Certification: YES NO

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

DESCRIPTION OF WORK

INSTALL 24KW GENERATOR & 200A SWITCH

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

Value of Work (required): \$ 10,000.00

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

Signature of Applicant:

Date: 12/1/21

Office Use Only

Approval date:

Issued date:

\$67.32 (owner's statement on back)

1-28-22



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

received 1-18-22

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: 12/1/21

Permit #: 211-20220071

GPIN:

Tax Map:

LOCATION

Street Address: 4035 CEDAR PLAINS RD 23153

PROPERTY OWNERSHIP

Name: JOE & EMMA ATHEY Phone: 804-457-3444

Mailing Address: 4035 CEDAR PLAINS RD Email: EATHEY56@GMAIL.COM

APPLICANT

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

Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: INSTALL@virginiapowersolutions.com

CONTRACTOR

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

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: INSTALL@virginiapowersolutions.com

Gas Certification: YES NO

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

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR & 200A SWITCH

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

Value of Work (required): \$10,000.00

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

Signature of Applicant: [Signature] Date: 12/1/21

Office Use Only

Approval date:

Issued date:

\$67.32 (owner's statement on back)

1-20-22



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

RECEIVED 1-18-22

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: 1-20-22

Permit #: 211-2022-00068

GPIN:

Tax Map:

LOCATION

Street Address: 1975 COUINGTON ROAD 23039

PROPERTY OWNERSHIP

Name: JOHN GOODALE Phone: 508-479-1085

Mailing Address: 1975 COUINGTON ROAD Email: JGOODALE63@GMAIL.COM

APPLICANT

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

Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: INSTALL@virginiapowersolutions.com

CONTRACTOR

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

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: INSTALL@virginiapowersolutions.com

Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705123991	8/31/22	ELE, GFC	B

DESCRIPTION OF WORK

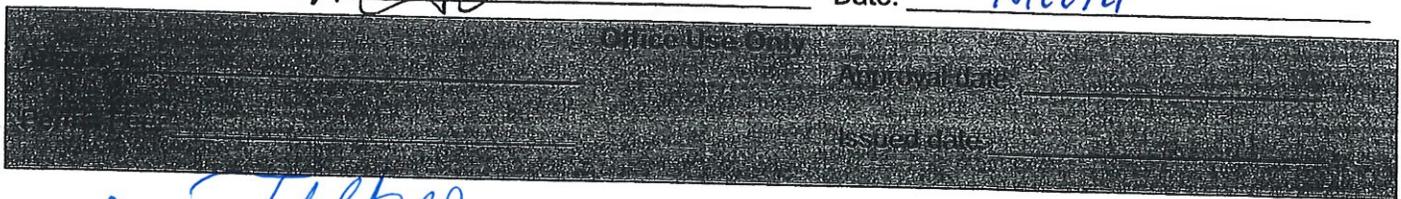
INSTALL 18kW GENERATOR & 2-200A SWITCHES

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

Value of Work (required): \$10,000.00

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

Signature of Applicant: Date: 1/22/21



67.32

(owner's statement on back)

1-20-22



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Received 1-18-22

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 10/22/21

Permit # 211-2022-00064

GPIN 6778-64-1947

Tax Map

LOCATION

Street Address 2351 CAMELBACK ROAD 23102

PROPERTY OWNERSHIP

Name ELIZABETH FOOLE Phone 804-556-3742

Mailing Address 2351 CAMELBACK ROAD 23102 Email ARMS@DONS6TORCHART@GMAIL.COM

APPLICANT

Name Virginia Power Solutions Phone 804-365-0263

Address 10102 Whitesel Road, B, Ashland, VA 23005 Email ENSTALL@virginiapowersolutions.com

CONTRACTOR

Name Virginia Power Solutions Phone 804-365-0263

Mailing Address 10102 Whitesel Road, B, Ashland, VA 23005 Email ENSTALL@virginiapowersolutions.com

Gas Certification YES NO

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

DESCRIPTION OF WORK

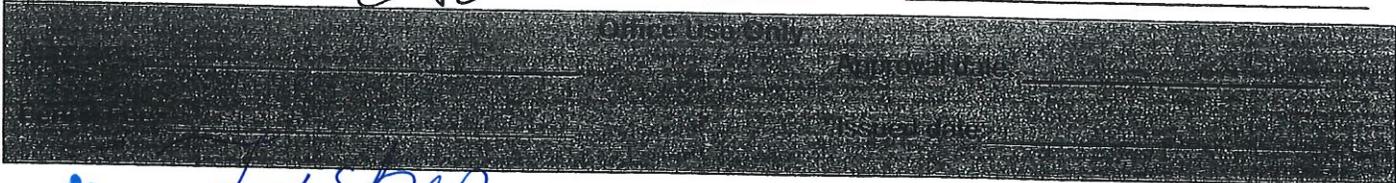
INSTALL 22KW GENERATOR & 2-150A SWITCHES

of Bathrooms Service Size Power Company DOMINION Inquiry

Value of Work (required) \$10,000.00

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

Signature of Applicant: Date: 10/22/21



\$67.32 Fisher

(owner's statement on back)

1-20-22



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/permitcalc

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

Date	01/17/2022
Permit #	211-2022-00056
GPIN	
Tax Map	

LOCATION

Street Address	2618 Chapel Hill Road
----------------	-----------------------

PROPERTY OWNERSHIP

Name	Cynthia Tinsley	Phone	804-457-4846
Mailing Address	2618 Chapel Hill Road Goochland VA 23063	Email	cookslynette83@gmail.com

APPLICANT

Name	MW Butler Electrical	Phone	804-746-2240
Address	8420 Meadowbridge Road Mechanicsville VA 23116	Email	kelsey@mwbutarelectrical.com

CONTRACTOR

Name	MW Butler Electrical	Phone	804-746-2240
Mailing Address	8420 Meadowbridge Rd. Mechanicsville VA 23116	Email	kelsey@mwbutarelectrical.com
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2706110673
		Expiration	01-31-2024
		License Type	contractor
		Class	A

DESCRIPTION OF WORK

Wire 24 KW WI 200A ATS * Gas by others!!			
24KW 200A ATS Dominion Power			
# of Bathrooms	Service Size	Power Company	Inquiry #
\$ 2,450.00			
Value of Work (required)			

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

Signature of Applicant: Kelsey Crow Date: 01/17/2022

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>1-19-22</u>
Permit Fee:	<u>\$ 32.67</u>		Issued date:	

1-13-22 CK# 1207

1.24



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	1-18-22 12.07.2021
Permit #	2022-0048
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	1989 LANES END DR	District	
----------------	-------------------	----------	--

PROPERTY OWNERSHIP

Name	MONTRICE CUNNINGHAM	Phone	804-275-1458
Mailing Address	1989 LANES END DR		

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:	Class: A
		CONTRACTOR	

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, (2) 150 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: 12,634.00

Permit fee: 79.41

Issue date: 1-18-22

Signature of Applicant BS

Approval Fisher Date 1-18-22



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	1/14/2022
Permit #	ELI-2022-00041
GPIN	
Tax Map	

LOCATION

Street Address: 2933 Stone Creek Dr Sandy Hook, VA 23153

PROPERTY OWNERSHIP

Name	Daniel Darby	Phone	804-873-2737
Mailing Address	2933 Stone Creek Dr Sandy Hook, VA 23153	Email	ddarby@gmail.com

APPLICANT

Name	Precious Futrell	Phone	804-355-7018
Address	1407 Cummings Dr Richmond, VA 23220	Email	precious.futrell@son.com

CONTRACTOR

Name	Michael and Son services	Phone	804-355-7018	
Mailing Address	1407 Cummings Dr Richmond, VA 23220	Email	precious.futrell@son.com	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701039423A	Expiration 12/31/2022	License Type electrical	Class A

DESCRIPTION OF WORK

installing 24kW generator and an automatic transfer switch

# 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: Precious Futrell Date: 1/14/2022

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1-14-2022</u>
Permit Fee: <u>60.44</u>		Issued date: <u>1-14-2022</u>



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

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 1/5/2022
Permit # 22-24
GPIN
Tax Map

LOCATION

Street Address
3100 ROCK CRESS LANE SANDY HOOK VA 23153

PROPERTY OWNERSHIP

Name ALPHA & MARSHALL HANBURY	Phone 8046989598
Mailing Address 3100 ROCK CRESS LANE SANDY HOOK VA 23153	Email RKANDJK@VERIZON.NET

APPLICANT

Name	Phone
Address	Email

CONTRACTOR

Name BRADLEY MECHANICAL CO., LLC		Phone 8047486728	
Mailing Address 7830 COURTHOUSE THREE LANE RICHMOND VA 23237		Email RACHAEL@BRADLEYHVAC.COM	
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705114970	Expiration 4/30/23	License Type CONTRACTORS
		Class A	

DESCRIPTION OF WORK

INSTALL 14 KW WHOLE HOME GENERATOR WITH 200 AMP AUTOMATIC TRANSFER SWITCH			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 9751.49			

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: 1/5/2022

Approval:

Office Use Only

Approval date: 1-11-22

Permit Fee: 66.18

Issued date: 1-11-22

(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

This 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	1/10/2022
Permit #	22-21
GPIN	
Tax Map	

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

LOCATION

Street Address: 2044 RIVER ROAD WEST Goochland, VA 23063

PROPERTY OWNERSHIP

Name	Hays Grottwald	Phone	804-310-2254
Mailing Address	2044 RIVER ROAD WEST Goochland, VA 23063	Email	whg1994@gmail.com

APPLICANT

Name	Precious Futrell	Phone	804-355-7018
Address	1407 CUMMINGS DR RICHMOND, VA 23220	Email	precious.futrell@michaelandson.com

CONTRACTOR

Name	Michael and son services	Phone	804-355-7018
Mailing Address	1407 CUMMINGS DR RICHMOND, VA 23220	Email	precious.futrell@michaelandson.com
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2701038423A
		Expiration	12/31/2021
		License Type	electrical
		Class	A

DESCRIPTION OF WORK

install 24KW generator and replaced 30amp circuit for outdoor unit

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)			
\$15,000 \$15,495			

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: Precious Futrell Date: 1/10/2022

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>1-10-22</u>
Permit Fee:	90.00 <u>92.54</u>		Issued date:	<u>1-10-22</u>



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

1-10-2021

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

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

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

Date 12/29/2021
Permit # <u>ELI-2022-00020</u>
GPIN
Tax Map

LOCATION

Street Address 1721 Sheppard Town Rd., Crozier, Va 23039

PROPERTY OWNERSHIP

Name Valerie Allen	Phone 804-784-4604
Mailing Address 1721 Sheppard Town Rd., Crozier, Va 23039	Email

APPLICANT

Name Michael and Son Services	Phone 434-481-3727
Address 8553 Seminole Trail, Ruckersville, Va 22968	Email lorrie.payne@michaelandson.com

CONTRACTOR

Name Michael and Son Services	Phone 434-481-3727								
Mailing Address 8553 Seminole Trail, Ruckersville, Va 22968	Email lorrie.payne@michaelandson.com								
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">State License Number</td> <td style="width: 25%; padding: 5px;">Expiration</td> <td style="width: 25%; padding: 5px;">License Type</td> <td style="width: 25%; padding: 5px;">Class</td> </tr> <tr> <td style="padding: 5px;">2701038423</td> <td style="padding: 5px;">12-21-2022</td> <td style="padding: 5px;"></td> <td style="padding: 5px; text-align: center; font-size: 2em;">A</td> </tr> </table>	State License Number	Expiration	License Type	Class	2701038423	12-21-2022		A
State License Number	Expiration	License Type	Class						
2701038423	12-21-2022		A						

DESCRIPTION OF WORK

Install Generac Guardian 22kw generator, 200amp transfer switch			
# of Bathrooms	Service Size	Power Company	Inquiry #
		Dominion Power	
Value of Work (required) \$13,987.19 \$13,794.70			

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: *Lorrie Payne* Date: 12/29/2021

Approval: <u><i>Fisher</i></u>	Office Use Only Approval date: <u>1-10-2021</u>
Permit Fee: <u>84.74</u>	Issued date: <u>1-10-2021</u>

(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

1-20-22

Type:	<input type="checkbox"/> Commercial
	<input type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input 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 1/19/22
Permit # EL-2021-01526
GPIN
Tax Map

LOCATION

Street Address 1657 INDY'S RUN MAIDENS, VA 23102

PROPERTY OWNERSHIP

Name DOUG & TERESSA SCOTT	Phone 703-399-5420
Mailing Address 1657 INDY'S RUN MAIDENS, VA 23102	Email

APPLICANT

Name Stacy Oliver	Phone 804.518.3060
Address 23194 Airport St. N. Dinwiddie, VA 23803	Email stacy@haleyegenerators.com

CONTRACTOR

Name Hale's Electrical Service	Phone 804.518.3060
Mailing Address 23194 Airport Street North Dinwiddie, VA 23803	Email info@haleyegenerators.com
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705117246
	Expiration 2/28/22
	License Type AES ELE FAS
	Class A

DESCRIPTION OF WORK

Install 22kW generator unit only; 200A SE ATS installed by others			
# of Bathrooms	Service Size 200A	Power Company DOM	Inquiry #
Value of Work (required) \$4,150			

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: Stacy Oliver Date: 1/19/22

Approval: <u>Fisher</u>	Office Use Only Approval date: <u>1-20-22</u>
Permit Fee: <u>40.47</u>	Issued date: <u>1-20-22</u>



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

This 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

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

Date	1/21/22
Permit #	EU-2022-000B
GPIN	
Tax Map	

LOCATION

Street Address	2817 Poorhouse Rd Goochland VA 23063
----------------	--------------------------------------

PROPERTY OWNERSHIP

Name	Linda Wine	Phone	(804) 253-3212
Mailing Address	2817 Poorhouse Rd Goochland VA 23063	Email	Winejt72@yahoo.com

APPLICANT

Name	Linda Wine Jay Wine (son)	Phone	(804) 253-3212
Address	2817 Poorhouse Rd Goochland VA 23063	Email	Winejt72@yahoo.com

CONTRACTOR

Name		Phone	
Owner			
Mailing Address		Email	
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration
		License Type	Class

DESCRIPTION OF WORK

install electrical service to new Generator 22KW			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)	\$ 500.00		

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

Signature of Applicant: Linda C Wine Date: 1/21/22

Office Use Only	
Approval: <u>Fisher</u>	Approval date: <u>1-21-22</u>
Permit Fee: <u>30.00</u>	Issued date: <u>1-21-22</u>

Owner's Statement Required if Owner is the Applicant

I Linda Wine of (address) 2817 Poorhouse Rd Goochland Va 23063

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

2817 Poorhouse Rd Goochland Va 23063

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

Linda C. Wine (Owner Signature)



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 1-18-22
Permit # 22-00044
GPIN
Tax Map

LOCATION

Street Address 3203 Sorrel Springs, Goochland VA 23063

PROPERTY OWNERSHIP

Name Wanda MCGee	Phone 804 339-4964
Mailing Address 3203 Sorrel Springs, Goochland VA 23063	Email wanda@fourseasonrecycling.com

APPLICANT

Name Woodward, Inc/ Robert S. Hooe, Electrician	Phone 804 339-5480
Address 910 three chopt road, manakin sabot va 23103	Email woodwardinc@earthlink.net

CONTRACTOR

Name Woodward, Inc.	Phone 804 339-5480								
Mailing Address 910 Three Chopt Road, Manakin Sabot VA 23103	Email woodwardinc@earthlink.net								
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">State License Number</td> <td style="width: 25%;">Expiration</td> <td style="width: 25%;">License Type</td> <td style="width: 25%;">Class</td> </tr> <tr> <td>2705040641</td> <td>07/31/23</td> <td>ele h/h</td> <td>B</td> </tr> </table>	State License Number	Expiration	License Type	Class	2705040641	07/31/23	ele h/h	B
State License Number	Expiration	License Type	Class						
2705040641	07/31/23	ele h/h	B						

DESCRIPTION OF WORK

Install customer supplied 24KW generator with 200Amp transfer switch			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 2,000.00			

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

Signature of Applicant: Date: 01/13/22

Approval: <u></u>	Office Use Only
Permit Fee: <u>30.60</u>	Approval date: <u>1-18-22</u>
	Issued date: <u>1-18-22</u>

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date	1/17/2022
Permit #	22-63
GPIN	
Tax Map	

LOCATION

Street Address 346 Swinburne Rd. Manakin Sabot, VA 23103

PROPERTY OWNERSHIP

Name	Steve Brown	Phone	804-517-2735
Mailing Address	346 Swinburne Rd. Manakin Sabot, VA 23103	Email	ss.fam@netzero.net

APPLICANT

Name	James Guthrie	Phone	804-763-6550
Address	12733 Oak Lake Court Suite D Midlothian, VA 23112	Email	tguthrie@ces-va.com

CONTRACTOR

Name	Commonwealth Electrical Services, Inc			Phone	804-763-6550
Mailing Address	12733 Oak Lake Court Suite D Midlothian, VA 23112			Email	
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2705146410	Expiration	12/31/2022
		License Type	ELE	Class	A

DESCRIPTION OF WORK

Installation of a 22KW generator and 200 amp transfer switch.

# of Bathrooms	Service Size	Power Company	Inquiry #
		Dominion Energy	
Value of Work (required)	11,250.00		

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

Signature of Applicant: Date: 1/17/20.2

Approval:		Office Use Only	Approval date:	1-20-22
Permit Fee:	73.00		Issued date:	

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

(owner's affidavit on back)

73.00



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date: 11/8/22

Permit #: 22-87

GPIN

Tax Map

LOCATION

Street Address: 2019 Steeplechase Pkwy, Goochland, VA 23063

PROPERTY OWNERSHIP

Name: Aaron Kopinski	Phone:
Mailing Address: 2019 Steeplechase Pkwy, Goochland, VA 23063	Email:

APPLICANT

Name: Lipscomb Electric + Contracting LLC	Phone: 804-347-8880
Address: 206 Timber Creek Farm Dr, Farmville, VA 23901	Email: rklipscomb@live.com

CONTRACTOR

Name: Lipscomb Electric + Contracting LLC		Phone: 804-347-8880	
Mailing Address: 206 Timber Creek Farm Dr, Farmville, VA 23901		Email: rklipscomb@live.com	
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705116236	Expiration: 9/30/23	License Type: A

DESCRIPTION OF WORK

install new 24kw generator + transfer switches

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required): \$14,350-			

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

Signature of Applicant: Date: _____

Approval:	Office Use Only	Approval date: 1-25-22
Permit Fee: 87.29		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

This 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	1/25/2022
Permit #	22-89
GPIN	
Tax Map	

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

LOCATION

Street Address: 2639 Hadensville-Fife Rd Goochland, VA 23063

PROPERTY OWNERSHIP

Name	Thomas Daniels	Phone	804-457-2290
Mailing Address	2639 Hadensville-Fife Rd Goochland, VA 23063	Email	graveresponce@gmail.com

APPLICANT

Name	Michael and son services.	Phone	804-355-7018
Address	1407 Cummings Dr Richmond, VA 23220	Email	richmondpermits@michael and son.com

CONTRACTOR

Name	Michael and son services	Phone	804-355-7018		
Mailing Address	1407 Cummings Dr Richmond, VA 23220	Email	richmondpermits@michael and son.com		
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2701038423A	12/31/2021	electrical	A

DESCRIPTION OF WORK

install 22 KW generator and replace 200 amp panel

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)			
\$17,000			

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

Signature of Applicant:  Date: 1/25/2022

Approval: Fisher	Office Use Only	Approval date: 1-25-22
Permit Fee: 99.45		Issued date: 1-25-22



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/permitcalc

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

Date 20.January.22
Permit # BP-2021-00909
GPIN 7707-91-4324
Tax Map 46-43-0-1-0

LOCATION

Street Address 490 East Broad Street Road, Manakin Sabot, VA 23103

PROPERTY OWNERSHIP

Name Shea & Erin Gibbons	Phone
Mailing Address 2604 Caitlyn Court, Richmond, VA 23233	Email

APPLICANT

Name EandJ Construction & Contracting LLC	Phone 804.641.7586
Address 220 Ponderosa Drive, Sandston, VA 23150	Email mrsedej@aol.com

CONTRACTOR

Name EandJ Construction & Contracting LLC	Phone 804.641.7586				
Mailing Address 220 Ponderosa Drive, Sandston, VA 23150	Email mrsedej@aol.com				
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">State License Number 2705171698</td> <td style="width: 25%;">Expiration 04/30/23</td> <td style="width: 25%;">License Type Electrical</td> <td style="width: 25%;">Class A</td> </tr> </table>	State License Number 2705171698	Expiration 04/30/23	License Type Electrical	Class A
State License Number 2705171698	Expiration 04/30/23	License Type Electrical	Class A		

DESCRIPTION OF WORK

wire single family dwelling w/attached garage, 200amp transfer switch			
4	200	Dominion	10501523
# of Bathrooms \$16000.00	Service Size	Power Company	Inquiry #
Value of Work (required)			

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

Signature of Applicant: Conne M Oenkeem Date: 12.Oct.21

Approval: <u>Fisher</u> Permit Fee: <u>94.86</u>	Office Use Only Approval date: <u>1-25-22</u> Issued date: _____
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(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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

Date	01/21/2022
Permit #	22-91
GPIN	
Tax Map	

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

LOCATION

Street Address: 3781 Grays Ln. Goochland VA 23063

PROPERTY OWNERSHIP

Name	Franklin Gray	Phone	804-556-3131
Mailing Address	3781 Grays Ln. Goochland VA 23063	Email	epps3131gray.com@gmail.com

APPLICANT

Name	MW Butler Electrical	Phone	804-746-2240
Address	8420 Meadowbridge Road Mechanicsville VA 23116	Email	kelsey@mwbutlerelectrical.com

CONTRACTOR

Name	MW Butler Electrical	Phone	804-746-2240						
Mailing Address	8420 Meadowbridge Rd Mechanicsville VA 23116	Email	kelsey@mwbutlerelectrical.com						
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2705110673	Expiration	01-31-2024	License Type	Class A Contractor	Class	A

DESCRIPTION OF WORK

Wire a 24KW generator with a 200A ATS - *Gas being done by another company*

24KW w/ 200A ATS Dominion Power

# of Bathrooms	Service Size	Power Company	Inquiry #
	\$2,450.00		

Value of Work (required)

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

Signature of Applicant: Kelsey Crone Date: 01/21/2022

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>1-25-22</u>
Permit Fee:	<u>32.67</u>		Issued date:	<u>1-25-22</u>



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

Date 1/19/2022

Permit # 22-94

GPIN

Tax Map

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

LOCATION

Street Address 4087 Shannon Hill Road

PROPERTY OWNERSHIP

Name Johnny Bratcher

Phone

Mailing Address 4087 Shannon Hill Road

Email

APPLICANT

Name Gabe Sailsbury

Phone 804-739-8362

Address 13507 E Boundary Road Suite A Midlothian VA 23112

Email office@sselecservices.com

CONTRACTOR

Name S & S Electrical Services

Phone 804-739-8362

Mailing Address 13507 E Boundary Road Suite A Midlothian VA 23112

Email office@sselecservices.com

Gas Certification

YES

NO

State License Number

2705142450

Expiration

03/31/2023

License Type

Electrical

Class

A

DESCRIPTION OF WORK

Installing 22 KW generator

of Bathrooms

Service Size

200

Power Company

Inquiry #

Value of Work (required)

3,000

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

Signature of Applicant: Date: 1/19/2022

Approval:

Office Use Only

Approval date: 1-25-22

Permit Fee: 35.19

Issued date: 1-25-22

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

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

1-25-22 CK# 1196

Date	1.25.2022
Permit #	22-95
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	2428 CHAPEL HILL RD	District
----------------	----------------------------	----------

PROPERTY OWNERSHIP

Name	CODY BUTLER	Phone	804-720-3302
Mailing Address	2428 CHAPEL HILL 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 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 _____

Signature of Applicant *[Signature]*

Approval *Fisher* Date *1/25/22*

Value of Work: 12,775.00

Permit fee: 80.06

Issue date: 1-25-22