



BUILDING PERMIT APPLICATION

Application Date: 11-22-2021

Permit Number: BP-2021-01420

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

Issued: 12-7-2021

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

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

Residential Commercial

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

OWNER INFORMATION

Site Address: 155 GAINS THRIFTY LANE MANAKIN-SABOT VA 23103

Owner: JOHN & JODY LOCKER Phone #: _____

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

APPLICANT INFORMATION

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

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

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: <u>Gaines Thrifty Ln</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>55' from P/R/W</u>	Center Line Setback: _____	Rear Setback: <u>5'</u>	CUP/Variance/COA: _____
Side Setback: <u>5'</u>	Side Setback: <u>5'</u>	Flood Zone: _____	

APPROVED REJECTED COMMENTS: _____

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

CONTRACTOR INFORMATION

Contractor: NATE SEABORN CONSTRUCTION Phone: 804 614 5510

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

Contractor License Number: 2705154355 Type: CLASS A BRC Expiration: 8-31-2022

DESCRIPTION OF WORK

Scope of Work: revised 3-2-22 Add 108 sq ft unfinished storage BLDG 30x22 POOLHOUSE WITH BATHROOM AND KITCHENETTE

Proposed Use: _____	Current Use: _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>NONE</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>1</u>	# of Bedrooms: <u>5,000 sq ft</u>	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.: <u>660</u>	Unfinished Sq. Ft.: <u>108</u>	Total Sq. Ft.: <u>660 768</u>	

Building Only - Excludes All Trades Permits

Value of Work: <u>\$35,000.00</u> <u>30,200</u> <u>39,270</u>	Application Fee: \$ <u>175.35</u>
	State Levy Fee: \$ <u>3.51</u>
	Zoning Fee: \$ <u>25.00</u>
	RLD: \$ _____
	SWP: \$ _____
Signature of Applicant: <u>[Signature]</u> Date: <u>Rev. fee: 13.63</u>	Total: \$ <u>203.86</u>

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



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 2-9-22

Permit Number: BP-2022-0071

GPIN/Tax Map: 6787-63-5660 / 44-1-0-47-0

Issued: 3-2-22

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 1554 Sheppard Town Rd Crozier VA 23039		Phone # 804-338-4355
	Owner Donnie J Cox Sr		Email Kirllc@comcast.net
	Address "		Phone # "

APPLICANT INFORMATION	Applicant/Contact "		Phone # "
	Address "		Email "

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback 75' from P/L (NW)	Center Line Setback 100'	Rear Setback 35'	CUP/Variance/COA — A2
	Side Setback 20'	Side Setback 20'	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David Floyd Date: 2/10/22			

CONTRACTOR INFORMATION	Contractor Keepn It Rolling LLC		Phone 804-338-4355
	Address P O Box 5155 Glen Allen VA 23039		Email Kirllc@comcast.net
	Contractor License Number 2705099537	Type R13C	Expiration 4-30-23

DESCRIPTION OF WORK	Scope of Work: Addition to house for garage with living space above (office, workout room)				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) none		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 2
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. 689	Unfinished Sq. Ft. 864	Total Sq. Ft. 1,553	

Building Only - Excludes All Trades Permits		Application Fee	\$ 339.89
Value of Work	430,000 72,865.00	State Levy Fee	\$ 4.80
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.		Zoning Fee	\$ 50.00
		RLD	\$
		SWP	\$
		Total	\$ 371.69
Signature of Applicant		Date	2/9/23



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12-15-2021

Permit Number: BP-2021-01519

GPIN/Tax Map: 6779-85-9071 / 32-1-0-10-D

Issued: ~~2022~~ 3-2-22

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 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 <u>2137 Pony Farm Road, Maidens, VA 23102</u>	
	Owner <u>Joanne + Chuck Cottrell</u>	Phone # <u>804-239-5658</u>
	Address <u>11413 Abbots Cross Ln Glen Allen, VA</u>	Email <u>joanne4kids@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Joanne + Chuck Cottrell</u>	
	Address <u>11413 Abbots Cross Ln. Glen Allen, VA</u>	Phone # <u>804-337-3974</u>
		Email <u>joanne4kids@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Heritage H-715</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>75' From P/R Row</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>2/14/22</u>			

CONTRACTOR INFORMATION	Contractor <u>SELF</u>		Phone —
	Address —		
	Contractor License Number —	Type —	Expiration —

DESCRIPTION OF WORK	Scope of Work: <u>Install 18x42 Lazy L In Ground Pool Concrete Fence</u>			
	Proposed Use	Current Use	Existing Buildings on Property	# of Floors
	<input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	—	<u>756</u>	<u>756</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>121.35</u>
Value of Work <u>\$24,300</u>		State Levy Fee \$ <u>2.43</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>148.78</u>
Signature of Applicant <u>[Signature]</u> Date <u>12/15/21</u>		



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: Jan 2, 2022 1-11-22

Permit Number: BP-2022-00037 BY:

GPIN/Tax Map: 62-21-0-7-0/7704-97-8779

Issued: 3-3-22

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>485 Ada Ash Lane</u>	
	Owner <u>485 Ada Ash Lane Series 001</u>	Phone # <u>(804) 921-1169</u>
	Address <u>485 Ad Ash Lane</u>	Email <u>Albertson.2012@aol.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Adam Albertson</u>		Phone # <u>(804) 640-5587</u>
	Address <u>10988 Linderwood Dr Mech. 2316</u>		Email <u>Albertson1011@aol.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Ashwood</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CU/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> A2 Planning & Zoning Officer: <u>David Boyd</u> Date: <u>1/19/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Commonwealth Renovations</u>		Phone <u>(804) 640-5587</u>
	Address <u>5209 Bickings Lane Prince George 23875 Company</u> <u>1817 Point of Rocks Chester Va 23836 Home</u>		Email <u>Albertson1011@aol.com</u>
	Contractor License Number <u>105121571</u>	Type <u>B</u>	Expiration <u>4/30/2022</u>

DESCRIPTION OF WORK	Scope of Work: <u>Remodel kitchen layout. Take wall out between living ra and kitchen. make door case opening bigger. up date bathrooms. Relocate utility room upstairs</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>4</u>	# of Bedrooms <u>4</u>	# of floors <u>3</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>3,400</u>	Unfinished Sq. Ft. <u>600</u>	Total Sq. Ft. <u>4,000.00</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>372.00</u>
Value of Work	<u>80,000.00</u>	State Levy Fee	\$ <u>7.44</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>404.44</u>
Signature of Applicant: <u>J.B. [Signature]</u>		Date: <u>1/5/2022</u>	

Bohall 2/28/2022 R5 VB 2018 VRC



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/13/21
 Permit Number: BP-2021-01242
 GPIN/Tax Map: 715-84-8787 / 58-1-0-45-D
 Issued: ~~10-27-2021~~ 11-5-2021
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION
 Site Address: 1010 Hockett Rd, Manakin-Sabot, VA 23103
 Owner: Louis Proffitt
 Phone #: 804-784-4375
 Address: Same
 Email:

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

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

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Boyd Date: 10/14/21

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

DESCRIPTION OF WORK
 Scope of Work: Metal garage. (31x44 detached garage)
 3/4/22. Revised Garage to 31x48 sq ft

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		1,364		

Building Only - Excludes All Trades Permits
 Value of Work: 22,066.41 + 37,510 + 1,350 = 40,920
 I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: Bowen Date: _____

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



BUILDING PERMIT APPLICATION

Department of Building Inspection
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TDD 711 VA Relay

Application Date: 2/14/22 2-15-22
Permit Number: DP-2022-00221
GPIN/Tax Map: 6832-30-6205/12-18-0-A-0
Issued: 3-4-22

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	<u>4361 Three Chopt Rd, Gum Spring, VA 23065</u>		
	Owner	<u>Robert Crenshaw</u>	Phone #	<u>434-294-2618</u>
APPLICANT INFORMATION	Address	<u>4361 Three Chopt Rd, Gum Spring, VA 23065</u>		
	Applicant/Contact	<u>Robert Crenshaw</u>	Email	<u>Crenshawcontracting01@gmail.com</u>
	Address		Phone #	<u>434-294-2618</u>
			Email	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
				<u>A1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>Denial Permitted</u> Date <u>2/28/22</u>		
	Planning & Zoning Officer			

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

DESCRIPTION OF WORK	Scope of Work: <u>Putting up a metal building on a concrete slab. Building will be 24x40 with a 12' lean-to down the 40' side.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Workshop</u>		<u>None</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
			<u>0</u>	<u>0</u>	<u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>0</u>	<u>960</u>	<u>960</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$19,000 26,400</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 2/14/22

Application Fee	\$ <u>1,308.00</u>
State Levy Fee	\$ <u>2.62</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1,584.22</u>

RECEIVED
2-10-22



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: 12/29/21

Permit Number: BP-2022-00186

GPIN/Tax Map: 7704-85-0142

Issued: 3-4-22

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 <u>Park Dr.</u> 108 Manakin Place Rd	Phone # 804-205-7318
	Owner Karen Treanor	Email
APPLICANT INFORMATION	Address 108 Manakin Place Rd	Phone # 8047441001
	Applicant/Contact Taylor Bergman	Email taylor@thedeck-tech.com
	Address 17801 Hull Street Rd	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Park at Manakin</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone	<u>R PAD</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David Floyd</u> Date <u>2/14/22</u>			

CONTRACTOR INFORMATION	Contractor JB Contracting Inc. DBA The Deck Tech	Phone 804-744-1001
	Address 17801 Hull Street Rd	Email taylor@thedeck-tech.com
	Contractor License Number 2705127080	Type Class A

DESCRIPTION OF WORK	Scope of Work: <u>252 sq ft</u> <u>144 sq ft</u>	
	Remove existing deck, building a 18x14 3 season room with concrete footers with brick pier supports with a 12x12 deck with concrete footers	
	Proposed Use	Current Use
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>252 + 144</u>	Unfinished Sq. Ft. <u>396</u>
		Total Sq. Ft. <u>396</u>

Building Only - Excludes All Trades Permits		Application Fee \$ <u>307.44</u>
Value of Work \$65,653.00		State Levy Fee \$ <u>6.15</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>50.00</u>
Signature of Applicant <u>Taylor Bergman</u>	Date <u>2-10-22</u>	RLD \$ _____
		SWP \$ _____
		Total \$ <u>338.59</u>



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Department of Building Inspection
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 TDD 711 VA Relay

Application Date: 2-15-2022
 Permit Number: BP-2022-00241
 GPIN/Tax Map: 777-23-1640 / 46-37-0-2-0
 Issued: 3-4-22

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	<u>2164 PROFFITT RD, MANAKIN SAROT VA 23103</u>	
	Owner	<u>ROGER MOORE</u>	Phone # <u>804-749-3895</u>
	Address	<u>SAME</u>	Email
APPLICANT INFORMATION	Applicant/Contact	<u>SAME</u>	Phone #
	Address	<u>SAME</u>	Email

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

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: David [Signature] Date: 2/28/22

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

DESCRIPTION OF WORK	Scope of Work: <u>Detached 24' X 24' GARAGE</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			<u>576</u>	<u>576</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$13682.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Roger Moore Date: 2/15/22

Application Fee	\$ <u>83.25</u>
State Levy Fee	\$ <u>1.67</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>109.95</u>



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 TDD 711 VA Relay

Residential Commercial

Application Date: 2-22-22

Permit Number: BP-2022-00234

GPIN/Tax Map: 6832-56-5394/12-6-D-18-D

Issued: 3-4-22

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 4077 LAKE Killarney RD		Phone # 845-901-0868
	Owner Joseph Brognano		Email JBROGNANO@gmail.com
	Address 4077 LAKE Killarney RD		Phone #
APPLICANT INFORMATION	Applicant/Contact Joe Brognano		Email
	Address 4077 Lake Killarney RD		Phone #

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Lake Killarney	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 55' from PL/PAV	Center Line Setback	Rear Setback 5'	CUP/Variance/COA
	Side Setback 5'	Side Setback 5'	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Boyd</u> Date: <u>2/28/22</u>			

CONTRACTOR INFORMATION	Contractor Timok Construction OWNER		Phone 804-402-2204
	Address 2821 HALEYS Hollow RD, Glen Allen, VA 23060		Email MTIMOK@gmail.com
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Detached Garage 34x28				
	Proposed Use Store Vehicles	Current Use NOT BUILT	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. 952	Unfinished Sq. Ft. 952	Total Sq. Ft. 952	

Building Only - Excludes All Trades Permits

Value of Work	\$48,717
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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: Joseph Brognano Date: _____

Application Fee	\$ 231.23
State Levy Fee	\$ 4.62
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 260.85



BUILDING PERMIT APPLICATION

Application Date: 2-4-2022

Permit Number: BP-2022-00150

GPIN/Tax Map: 6767-87-8326/43-36-0-2-0

Issued: 3-4-22

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	<u>2263 Parker's Hill Dr. maidens, VA 23102</u>	
	Owner	<u>Geeg & Kelly Hammock</u>	Phone # <u>804-502-6144</u>
APPLICANT INFORMATION	Address	<u>2263 Parker's Hill Dr. maidens, VA 23102</u>	Email <u>greghammock@verizon.net</u>
	Applicant/Contact	<u>Greg Hammock</u>	Phone # <u>804-502-6144</u>
	Address	<u>2263 Parker's Hill Dr. maidens, VA 23102</u>	Email <u>greghammock@verizon.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Algernon Woods</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>55' from Pylon</u>	<u>80'</u>	<u>5'</u>	
	Side Setback	Side Setback	Flood Zone	
	<u>5'</u>	<u>5'</u>		<u>RR</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS:		
	Planning & Zoning Officer <u>David Boyd</u>	Date <u>2/25/22</u>		

CONTRACTOR INFORMATION	Contractor	Phone
	<u>Carolina Carpets, Inc. Owner</u>	<u>800-670-4262</u>
	Address	Email
	<u>P.O. Box 1263 Dobson, NC</u>	
	Contractor License Number	Expiration

DESCRIPTION OF WORK	Scope of Work:			
	<u>Build 42x35 metal building for storage</u>			
	Proposed Use	Current Use	Environmental Impacts (stream-crossing, wetlands, amt land disturbed)	
	<u>Storage</u>	<u>N/A</u>	<u>N/A</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
		<u>N/A</u>	<u>N/A</u>	
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)	<u>-</u>	<u>1470</u>	<u>1470</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>193.91</u>
Value of Work	<u>\$31,170 40,425.00</u>	State Levy Fee	\$ <u>3.88</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>222.79</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>David Boyd</u>		Date <u>2/3/22</u>	



BUILDING PERMIT APPLICATION

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

Application Date: 2/8/22

Permit Number: BP-2022-00177

GPIN/Tax Map: 7725-12-2583 / 58-54-2-6-D

Issued: 3-8-2022

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 15682 Mosaic Creek Blvd, Richmond, Va 23238		Phone # 804.627.0000
	Owner StyleCraft Homes		Email permits@stylecrafthomes.com
	Address 6225 Lakeside Ave, Richmond, VA 23228		Phone # 804-627-0000
APPLICANT INFORMATION	Applicant/Contact Jody Godsey		Email permits@stylecrafthomes.com
	Address 6225 Lakeside Ave, Richmond, VA 23228		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>30' from Pylon</i>	Center Line Setback <i>55'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback <i>10'</i>	Side Setback <i>10'</i>	Flood Zone <i>X</i>	<i>RPUD</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>Cash Proffer due before issuing C.O. Survey Location Setbacks.</i> Planning & Zoning Officer: <i>David Boyd</i> Date: <i>2/10/22</i>			

CONTRACTOR INFORMATION	Contractor StyleCraft Homes		Phone 804-627-0000
	Address 6225 Lakeside Ave, Richmond, VA 23228		Email permits@stylecrafthomes.com
	Contractor License Number 2705050569	Type Class A	Expiration 6/30/2023

DESCRIPTION OF WORK	Scope of Work: New Single Family Home				
	Proposed Use New Single Family Home	Current Use Unimproved lot	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 7550 SF Disturbed Area		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 2	# of Bedrooms 3	# of floors 1
	Finished Sq. Ft. 1839	Unfinished Sq. Ft. <i>4204 1488</i>	Total Sq. Ft. <i>3043 3327</i>		
	Building Only - Excludes All Trades Permits				

Value of Work	228225
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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: *Jody Godsey* Date: 2/8/22

Application Fee	\$ 1039.01
State Levy Fee	\$ 20.78
Septic/Well Fee	\$
Zoning Fee	\$ 50.00
RLD	\$ 100.00
SWP	\$ 200.00
Total	\$ 1409.79

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: Parker Pollard Wilton & Peadon Telephone: 804-627-3600

Mailing Address: 6802 Paragon Place, Suite 300, Richmond, VA 23230

OWNER'S STATEMENT

StyleCraft Homes of (address) 6225 Lakeside Ave., RVA 23228 affirm that I am the owner of a certain tract of parcel of land located at 15682 Mosaic Creek Blvd. 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.

Jody Godsey (Agent) 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 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE 3.4.22.

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: Jan 19 2021 1-26-22
Permit Number: BP-2022-00146
GPIN/Tax Map: 6832-91-5911-12-30-0-3-0
Issued: 3-8-22
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: 4146 Brookstreet Road Gum Springs
Owner: Mrs Mayo
Address: 4146 Broad Street Road Gum Springs Va
Phone #: 1-703-434-0649
Email: _____

APPLICANT INFORMATION
Applicant/Contact: Ryan Middleton
Address: PO Box 976 Powhatan Va 23137
Phone #: _____
Email: middltonconstllc@gmail

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____
Front Setback: _____ Center Line Setback: _____ Rear Setback: _____ CUP/Variance/COA: _____
Side Setback: _____ Side Setback: _____ Flood Zone: _____
APPROVED REJECTED COMMENTS: *No change to footprint/use.
Planning & Zoning Officer: Dennis Boyd Date: 3/19/22

CONTRACTOR INFORMATION
Contractor: Middleton Construction LLC Phone: 804-832-8153
Address: _____ Email: _____
Contractor License Number: 2705169208 Type: _____ Expiration: _____

DESCRIPTION OF WORK
Scope of Work: *Changing large open room to divided rooms
Adding 1 bathroom and 2 bedrooms to the open floor

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>Living Space</u>	<u>RESIDENTIAL</u>	# of Bathrooms	# of Bedrooms	# of floors
<u>SEWER</u>	<u>WATER</u>	<u>1</u>	<u>2</u>	<u>1</u>
<u>Public/Private</u>	<u>Public/Private</u>	Unfinished Sq. Ft.	Total Sq. Ft.	
Will a foundation be installed within 20 ft. of any septic system components? Yes/No	<u>1739</u>	<u>0</u>	<u>1739</u>	

Building Only - Excludes All Trades Permits

Value of Work	\$ <u>52000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Ryan Middleton Date: Jan 19 21

Application Fee	\$ <u>246.00</u>
State Levy Fee	\$ <u>4.92</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>275.92</u>



BUILDING PERMIT APPLICATION

Application Date: 2/23/22
 Permit Number: BP-2022-00220

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

GPIN/Tax Map: 6958-52-50210/30-23-G-27-D
 Issued: 3-8-2022

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 2011 Steeplechase Parkway		Phone # 8048397791
	Owner Carolyn Maguire	Email cm61565@yahoo.com	
APPLICANT INFORMATION	Address 2011 Steeplechase Parkway		Phone # 8043339192
	Applicant/Contact Catherine Gallagher	Email catherine@riverpoolsandspas.com	
	Address 196 Selftown Road, Warsaw, VA 22572		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Holland Hills</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40' from P/L RW</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>RI</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer [Signature] Date 2/25/22

CONTRACTOR INFORMATION	Contractor River Pools & Spas		Phone 8043339192
	Address 196 Selftown Road, Warsaw, VA 22572		Email catherine@riverpoolsandspas.com
	Contractor License Number 2705099652	Type A	Expiration 10/31/23

DESCRIPTION OF WORK	Scope of Work: install inground 12'x25' fiberglass pool & barrier				
	Proposed Use residential	Current Use residential	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. 800	Total Sq. Ft. 800	

Building Only - Excludes All Trades Permits

Value of Work	35000
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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 Catherine Gallagher Date 2-17-22

Application Fee	\$ <u>1169.50</u>
State Levy Fee	\$ <u>3.39</u>
Zoning Fee	\$ <u>25.-</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1197.89</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: 2-11-2022
 Permit Number: BP-2022-00191
 GPIN/Tax Map: 7708-01-0458/46-18-0-D-0
 Issued: 3-9-22

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>1002 SEAN RD. MANAKIN SPBOT VA 23103</u>	
	Owner <u>Derek Troupe</u>	Phone # <u>(804) 832-5547</u>
	Address <u>1002 SEAN RD. MANAKIN SPBOT VA 23103</u>	Email <u>derektroupe@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Derek Troupe</u>		Phone # <u>(804) 832-5547</u>
	Address <u>1002 SEAN RD. MANAKIN SPBOT VA 23103</u>		Email <u>derektroupe@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from PL/RAV</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>N</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: <u>Dana Floyd</u> Date: <u>3/7/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>METAL BUILDING WITH CONCRETE AND FOOTER 30'x 40'</u>				
	Proposed Use <u>CHANGE/SHOP</u>	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 <input checked="" type="checkbox"/> No	Finished Sq. Ft. <u>1200</u>	Unfinished Sq. Ft. <u>1200</u>	Total Sq. Ft. <u>1200</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>160.50</u>
Value of Work	<u>25,000</u>	State Levy Fee	\$ <u>3.21</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>188.71</u>
Signature of Applicant: <u>[Signature]</u>		Date: <u>2/11/2022</u>	



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 3-1-22

Permit Number: BP-2022-00277

GPIN/Tax Map: 6797-54-1291 / 45-18-0-33-0

Issued: 3-9-2022

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>same 1747 Fox Downs lane Oilville Va. 23129</u>	
	Owner <u>Julie Johnson</u>	Phone #
APPLICANT INFORMATION	Address <u>1747 Fox Downs lane Oilville, Va. 23129</u>	Email
	Applicant/Contact <u>Claude A Rasnake Jr</u>	Phone # <u>804-426-5177</u>
	Address <u>1713 Old Hundred Middlethian Va 23114</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Fox Downs</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint.</u> Planning & Zoning Officer <u>David Boyd</u> Date <u>3/7/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Claude A Rasnake Jr.</u>		Phone <u>804-426-5177</u>
	Address <u>1713 Old Hundred Rd Middlethian Va 23114</u>		Email <u>allenrasnake@yahoo.com</u>
	Contractor License Number <u>2705138802</u>	Type <u>Class B</u>	Expiration <u>2/28/23</u>

DESCRIPTION OF WORK	Scope of Work: <u>Repair work to floor joist sill plate and band board. Install new footings, piers and support beam</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>10,000.00 15,000.00</u>
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Application Fee	\$ <u>879.50</u>
State Levy Fee	\$ <u>1.59</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>106.09</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 Claude A. Rasnake Jr Date 2/28/22



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

Residential Commercial

Application Date: 2-28-22
 Permit Number: BR 2022-0020
 GPIN/Tax Map: 0778-33-7734/31-1-0-92-0
 Issued: 3-9-22
 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>2212 Camelback Rd, Maidens, Va. 23102</u>	
	Owner	<u>Delores Hawk</u>	Phone # <u>804 347 3923</u>
APPLICANT INFORMATION	Address	<u>2212 Camelback Rd, Maidens, Va 23102</u>	Email <u>deloreshawk5@gmail.com</u>
	Applicant/Contact		Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>N/A</u>			
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>No change to existing footprint</u>	
	Planning & Zoning Officer: <u>David [Signature]</u>	Date: <u>3/4/22</u>		

CONTRACTOR INFORMATION	Contractor	Phone
	<u>Forbes Custom Builders Inc</u>	<u>804 367 8500</u>
	Address	Email
	<u>12830 W Creek Pkwy Ste G, Richmond, Va. 23238</u>	
	Contractor License Number <u>2705172671</u>	Expiration <u>8/31/23</u>
	Type <u>CLASS A Contractor</u>	

DESCRIPTION OF WORK	Scope of Work: <u>Seer Build Porch on Existing Deck 20x20</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
			<u>378</u>	<u>378</u>

Building Only - Excludes All Trades Permits		Application Fee \$ <u>93.00</u>
Value of Work	<u>\$18,000</u>	State Levy Fee \$ <u>1.86</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25.00</u>
Signature of Applicant <u>Delores Hawk</u>	Date <u>2/28/22</u>	RLD \$
		SWP \$
		Total \$ <u>119.86</u>



BUILDING PERMIT APPLICATION

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

Application Date: 2/17/22

Permit Number: BP-2022-00239

GPIN/Tax Map: 7106-72-0509 / 57-22-0-C-0

Issued: 3-9-22

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.

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>1433 Shady Hollow Lane, Manakin Sabot, VA 23103</u>	
	Owner	Phone #	<u>N/A</u>
	Address	Email	<u>N/A</u>
	<u>same</u>		

APPLICANT INFORMATION	Applicant/Contact	Phone #	<u>804 912 3331</u>
	Address	Email	<u>exquisitepoolsinc@gmail.com</u>
	<u>Griffent Yancey</u>		
	<u>17099 Chisholm Trail, Rockville, VA 23146</u>		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>N/A</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>—</u>	<u>—</u>
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>55' From ROW</u>	<u>—</u>	<u>5'</u>	
Side Setback	Side Setback	Flood Zone	<u>A2</u>	
	<u>5'</u>	<u>5'</u>	<u>—</u>	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Boyd Date: 2/28/22

CONTRACTOR INFORMATION	Contractor	Phone	<u>804-912-3331</u>
	Address	Email	<u>exquisitepoolsinc@gmail.com</u>
	Contractor License Number	Type	Expiration
	<u>2705152021</u>	<u>Class A CBC RBC</u>	<u>10-31-2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>13'x10' In-ground Gunite Swimming Pool</u> <u>3'-5' In Depth with Automatic Cover</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>520</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>57,856</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 2/17/22

Application Fee	\$ <u>272.35</u>
State Levy Fee	\$ <u>3.45</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>302.80</u>

received
2-17-22



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: 2-25-22
Permit Number: DP-2022-00257
GPIN/Tax Map: 7705-68-2024 / 57-10-0-35-0
Issued: 3-9-22
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.

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: 1480 Windsor Way Manakin-Sabot, Virginia
Owner: Andrew and Jill White
Address: 1480 Windsor Way Manakin-Sabot Va
Applicant/Contact: Jeff Graeber
Address: 8212 Kingsdown Court Henrico, Va. 23229

APPLICANT INFORMATION
Phone #: 804-484-2731
Email: awwvva@gmail.com
Phone #: 804-350-5830
Email: jgraeber@comcast.net

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: <u>75' from P/RW</u>	Center Line Setback: <u>100'</u>	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	Flood Zone: <u>X</u>	A2

APPROVED REJECTED COMMENTS: _____
Planning & Zoning Officer: David Floyd Date: 3/2/22

CONTRACTOR INFORMATION
Contractor: Graeber Homes, I.L.C.
Address: 8212 Kingsdown Court, Henrico, Va 23229
Contractor License Number: 2705046911 type: A
Phone: 804-350-5830
Email: jgraeber@comcast.net
Expiration: 9-30-2022

DESCRIPTION OF WORK
Scope of Work: Remove existing porch and build a new screen porch.

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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>448</u>		

Building Only - Excludes All Trades Permits
Value of Work: 89,5000

Application Fee	\$ <u>414.76</u>
State Levy Fee	\$ <u>8.29</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>448.05</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: Jeff M. Graeber Date: 2/17/2022



BUILDING PERMIT APPLICATION

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

Application Date: 02/17/2022

Permit Number: BP-2022-0273

GPIN/Tax Map: 7715-69-9885/58-51-0-28-0

Issued: 3-9-22

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	1123 Getaway Lane Manakin-Sabot VA 23103		
	Owner	Rebecca Wetherly	Phone #	
APPLICANT INFORMATION	Address	1123 Getaway Lane Manakin-Sabot, VA 23103	Email	
	Applicant/Contact	Triple T Pools and Masonry, LLC	Phone #	804-337-3868
	Address	18493 Hollowing Creek Rd Beaverdam VA 23015	Email	Tripletpools@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Tuckahoe Creek</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>Behind Main Bldg</u>		<u>5'</u>	
	Side Setback	Side Setback	Flood Zone	
	<u>5'</u>	<u>5'</u>		<u>R.P.U.D</u>

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Lloyd Date: 3/7/22

CONTRACTOR INFORMATION	Contractor	Triple T Pools and Masonry, LLC	Phone	804-337-3868
	Address	18493 Hollowing Creek Rd Beaverdam VA 23015	Email	Tripletpools@gmail.com
	Contractor License Number	2705159715	Type	class B
			Expiration	03/31/2024

DESCRIPTION OF WORK	Scope of Work: Inground 10 x 30 concrete swimming pool with auto cover				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>300</u>	<u>300</u>		

Building Only - Excludes All Trades Permits

Value of Work: \$45,000.00

Application Fee	\$ <u>214.50</u>
State Levy Fee	\$ <u>4.29</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>243.79</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: Angel Mustafa Date: 2/17/22



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

Residential Commercial

Application Date: 2/9/2022

Permit Number: BP-2022-00218

GPIN/Tax Map: 7733-38-4080 / 6A-15-D-7-0

Issued: 3-9-22

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	306 MILL POINT ROAD RICHMOND, VA 23238	
	Owner	Alexander & Debra Simon	Phone #
	Address	SAME AS ABOVE	Email
APPLICANT INFORMATION	Applicant/Contact	LOWAR TUCKAHOE HOA	Phone # 604-337-7840
	Address		Email williamsonws@verizon.net

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: _____ Planning & Zoning Officer: <u>[Signature]</u> Date: <u>2/9/22</u>			

CONTRACTOR INFORMATION	Contractor	CAROUSEL SIGNS & DESIGNS		Phone	604.620.3200
	Address	6501 Dickens Place Richmond, VA 23230		Email	jay@carouselsigns.com
	Contractor License Number	2705115473	Type	CLASS A	Expiration

DESCRIPTION OF WORK	Scope of Work: REMOVE EXISTING IDENTIFICATION FOR LOWER TUCKAHOE NEIGHBORHOOD. FABRICATE/INSTALL NEW IDENTIFICATION SIGN IN SAME LOCATION					
	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	\$4000.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 2/9/2022

Application Fee	\$ 30.00
State Levy Fee	\$.60
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 30.60



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: 2/9/2022

Permit Number: BP-2022-00219

GPIN/Tax Map: 7733-17-8520/6A-14-A-1-0

Issued: 3-9-22

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	<u>38 LOWER TUCKAHOE ROAD E. RICHMOND, VA 23238</u>	
	Owner	<u>PEYTON & SARAH STUDEBAKER</u>	
	Address	<u>SAME AS ABOVE</u>	
APPLICANT INFORMATION	Applicant/Contact	<u>LOWER TUCKAHOE HOA</u>	
	Address	<u>LOWER TUCKAHOE HOA</u>	
	Address	<u>LOWER TUCKAHOE HOA</u>	
	Phone #	<u>804-337-7840</u>	
	Email	<u>Williamsonws@verizon.net</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	<u>COA-2022-2</u>
	<u>10' from PYROW</u>	<u>Rt. Side 5'</u>		

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Boyd Date: 2/25/22

CONTRACTOR INFORMATION	Contractor	<u>CAROUSEL SIGNS & DESIGNS</u>		Phone	<u>804.620.3200</u>
	Address	<u>6501 DUKENS PLACE RICHMOND, VA 23230</u>		Email	<u>Jay@carouselsigns.com</u>
	Contractor License Number	<u>2705115473</u>	Type	<u>CLASS A</u>	Expiration

Scope of Work: REMOVE EXISTING IDENTIFICATION SIGN FOR LOWER TUCKAHOE NEIGHBORHOOD. FABRICATE/INSTALL NEW IDENTIFICATION SIGN IN SAME LOCATION.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>SIGNS</u>	<u>SIGNS</u>	<u>N/A</u>		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	<u>N/A</u>	<u>N/A</u>	<u>SIGN: 7</u>	

Building Only - Excludes All Trades Permits

Value of Work \$4000.00

Application Fee \$ 30.00
 State Levy Fee \$.40
 Zoning Fee \$ _____
 RLD \$ _____
 SWP \$ _____
 Total \$ 30.40

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 Imob... Date 2/9/2022

Rec: 2/18/22



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: February 14, 2022

Permit Number: BP-2022-00207

GPIN/Tax Map: 58-55-2-46-0/7726-05-8104

Issued: 3-9-22

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 12239 Bremner Ridge Circle		Phone # 804-381-1545
	Owner Richard & Carol DeRosier		Email
	Address 12239 Bremner Ridge Circle, Manakin Sabot, VA 23103		
APPLICANT INFORMATION	Applicant/Contact Andrew Campbell		Phone # 804-516-9536
	Address 14807 Colony Forest Place, Midlothian, VA. 23114		Email chi.permits@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Branch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from PL/ROW</u>	Center Line Setback <u>55'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: <u>[Signature]</u> Date: <u>2/22/22</u>			

CONTRACTOR INFORMATION	Contractor Campbell Home Improvements, LLC		Phone 804-516-9536
	Address 14807 Colony Forest Place, Midlothian, VA. 23114		Email chi.permits@gmail.com
	Contractor License Number 2705100592	Type Class B	Expiration 8/23

DESCRIPTION OF WORK	Scope of Work: Build a shed roof over an existing 12x18 deck				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>52.50</u>
Value of Work	9000.00	State Levy Fee	\$ <u>1.05</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>2/14/22</u>		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>78.55</u>



BUILDING PERMIT APPLICATION

Application Date: 02/10/2022

Permit Number: *BP-2022-00258*

GPIN/Tax Map: *7114-04-6089/02-3-D-5-0*

Issued: *3-9-22*

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 106 Hickory Drive	Phone # (302)354-1988
	Owner Mario Lombardo	Email marioglombardo@yahoo.com
	Address 106 Hickory Drive, Manakin Sabot, VA 23103	

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>Manakin Farms</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>R1</i> <i>RP45</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to footprint</i>			
	Planning & Zoning Officer: <i>David Floyd</i> Date: <i>3/2/22</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

DESCRIPTION OF WORK	Scope of Work: roof-mounted, grid-tied, 12.40kW 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. 617			
	Building Only - Excludes All Trades Permits					

Value of Work	17850.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *[Signature]* Date: 02/10/2022

Application Fee	\$ <i>92.32</i>
State Levy Fee	\$ <i>1.85</i>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <i>25.00</i>
RLD	\$ _____
SWP	\$ _____
Total	\$ <i>119.17</i>



BUILDING PERMIT APPLICATION

Application Date: 2-2-22

Permit Number: DP-2022-00128

GPIN/Tax Map: 0841-89-6266 / 13-12-0-C-0

Issued: 3-9-22

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	4596 Newline Rd	
	Owner	Roy A. Akric III / Currie A. Akric	
APPLICANT INFORMATION	Address	4596 Newline Rd Gum Springs VA 23065	
	Applicant/Contact	Roy A. Akric III	
	Address	4596 Newline Rd Gum Springs VA 23065	
	Phone #	804-815-4513	
	Phone #	804-815-4513	
	Email	Snoak804@cox.net	
	Email	Snoak804@cox.net	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>N/A</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>350' from PL/ROW</u>	<u>375'</u>	<u>5'</u>	
Side Setback	Side Setback	Flood Zone		
<u>5'</u>	<u>5'</u>	<u>X</u>	<u>RR</u>	
APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:		
Planning & Zoning Officer	<u>David Boyd</u>	Date <u>2/28/22</u>		

CONTRACTOR INFORMATION	Contractor	Phone
	<u>Steel Buildings and Structures</u>	<u>1-877-272-8276</u>
	Address	Email
<u>820 Reeves Dr. Mount Airy, NC 27030</u>	<u>SuccessTeam@bigbuildingsdirect.com</u>	
Contractor License Number	Type	Expiration
<u>2705159377</u>	<u>Class A</u>	<u>2/28/24</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install 30x60 steel building on concrete detached garage</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<u>Personal garage storage</u>	<u>WATER</u>	# of Bathrooms	# of Bedrooms
	<u>SEWER</u>	<u>Public/Private</u>	<u>0</u>	<u>0</u>
	<u>Public/Private</u>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
Will a foundation be installed within 20 ft. of any septic system components, including reserve drain fields? Yes / (No)		<u>1800</u>	<u>1800</u>	

Building Only - Excludes All Trades Permits	
Value of Work	<u>\$29,000</u> <u>\$58,500</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 _____

Application Fee	\$ <u>275.26</u>
State Levy Fee	\$ <u>5.50</u>
Zoning Fee	\$ <u>2500</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>305.76</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: 02/23/2022

Permit Number: BP-2022-002165

GPIN/Tax Map: 6728-38-17A2 / 27-10-0-9-0

Issued: 3-9-22

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 4814 River Road West		Phone # (804) 615-2667
	Owner Shirley Jackson		Email rodney.jackson94@yahoo.com
	Address 4814 River Road West Goochland VA 23063		Phone # 919-300-7976

APPLICANT INFORMATION	Applicant/Contact Power Home Solar/ Bryan D. Law		Email permitva@powerhome.com
	Address 919 N Main St Mooresville, NC 28115		Phone # 919-300-7976

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 REJECTED COMMENTS: No change to existing footprint
 Planning & Zoning Officer: David [Signature] Date: 3/3/22

CONTRACTOR INFORMATION	Contractor Power Home Solar LLC / Bryan D. Law		Phone 919-300-7976
	Address 919 N Main St Mooresville, NC 28115		Email permitva@powerhome.com
	Contractor License Number 2705165346	Type Contractor	Expiration 08/31/2023

DESCRIPTION OF WORK	Scope of Work: 14 Roof mounted solar modules, grid tied 5.60 kW, installed on existing residence				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft.

Building Only -- Excludes All Trades Permits

Value of Work	\$1,000
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Application Fee	\$ <u>20.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>55.60</u>

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

Signature of Applicant: [Signature] Date: 02/23/2022



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 2-23-2022

Permit Number: BP-2022-00262

GPIN/Tax Map: 7108-81-1008 / 46-16-0-D-0

Issued: 3-10-22

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>528 Three Chopt Rd Manakin Sabot VA 23103</u>	
	Owner	<u>Tose G Gomez</u>	
APPLICANT INFORMATION	Address	<u>528 Three Chopt Rd Manakin Sabot VA 23103</u>	
	Applicant/Contact	<u>lupcgame21279@gmail.com</u>	
	Phone #	<u>434-960-5765</u>	
	Email	<u>lupcgame21279@gmail.com</u>	
	Address		
	Phone #		
	Email		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Date <u>3/13/22</u>		
	Planning & Zoning Officer	<u>David Floyd</u>		

CONTRACTOR INFORMATION	Contractor	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work:			
	<u>30 x 41 detached prefab garage</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	<u>Garage</u>			
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>1230</u>	<u>1230</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>164.22</u>
Value of Work	<u>\$20,000</u>	State Levy Fee	\$ <u>3.28</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>Tose G Gomez</u>	RLD	\$
Date	<u>2-16-2022</u>	SWP	\$
		Total	\$ <u>192.50</u>

received
2-17-22



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: 2-28-22

Permit Number: BP-2022 00260

GPIN/Tax Map: 7123-40-2817 & 66-3-0-1-0

Issued: 3-14-22

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.

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>1 PARTRIDGE HILL ROAD</u>	
	Owner	<u>RICHARD SAVAGE</u>	Phone # <u>804 7670330</u>
APPLICANT INFORMATION	Address	<u>1 PARTRIDGE HILL RD</u>	Email <u>RICHSAVAGE3@COMCAST.NET</u>
	Applicant/Contact	<u>SAFE</u>	Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Date <u>3/2/22</u>		

Planning & Zoning Officer: David Flynn

CONTRACTOR INFORMATION	Contractor	Phone
	Address	Email
Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>18x24 house</u> <u>Construct new pool shed on slab</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>23,760</u>
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Application Fee	\$ <u>118.92</u>
State Levy Fee	\$ <u>2.38</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>146.30</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: 2/16/22



BUILDING PERMIT APPLICATION

Application Date: 2/17/22

Permit Number: BP-2022-00259

GPIN/Tax Map: 7726-24-3424 / 58-53-D-38-D

Issued: 3-14-2022

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 12109 Ebb Pointe Circle	Phone # (804) 380-0563
	Owner Brian Simonson	Email bsimonson40@gmail.com
APPLICANT INFORMATION	Address 12109 Ebb Pointe Circle, Manakin Sabot, VA 23103	Phone # 757-447-6527
	Applicant/Contact Emily Sizemore/ Convert Solar	Email npi@convert-solar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Reader's Branch</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>RPUD</i>	

APPROVED REJECTED COMMENTS: *No change to footprint.*
 Planning & Zoning Officer: *Dennis Floyd* Date: *3/2/22*

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

Scope of Work: Roof-mounted Grid-tied, 8.40kW 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. 418		

Building Only - Excludes All Trades Permits

Value of Work	\$11,850
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *[Signature]* Date: 2/17/22

Application Fee	\$ 65.32
State Levy Fee	\$ 1.31
Septic/Well Fee	\$
Zoning Fee	\$ 25-
RLD	\$
SWP	\$
Total	\$ 91.63



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: 1/18/22
 Permit Number: BP-2022-00078
 GPIN/Tax Map: 7726-57-1317 / 48-3-H-40
 Issued: 3-14-22
 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: 1702 MILLS ROAD, RICHMOND, VA 23233
 Owner: BELLVIEW GARDENS MEDICAL LLC
 Address: RICHMOND, VA, 23229
 Phone #: _____
 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: GORDON MCCORMICK
 Address: 7110 FOREST AVENUE SUITE 102, RICHMOND, VA 23226
 Phone #: (804) 814-3076
 Email: gmccormick@cumllc.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED COMMENTS: * No change to existing Footprint
 Planning & Zoning Officer: [Signature] Date: 3/10/22

CONTRACTOR INFORMATION
 Contractor: COMMONWEALTH CONSTRUCTION MANAGEMENT
 Address: 7110 FOREST AVE. SUITE 102, RICHMOND, VA 23226
 Contractor License Number: 270514620 Type: CLASS A CBL RBL Expiration: 5-31-22

DESCRIPTION OF WORK
 Scope of Work: TENANT UPFIT - NEW CONSTRUCTION Building A 1st Blvd. Office of VA Urology

Proposed Use: <u>MEDICAL OFFICE</u>	Current Use: <u>NEW</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): _____		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: _____	# of Bedrooms: _____	# of floors: _____
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.: <u>10,000</u>	Unfinished Sq. Ft.: _____	Total Sq. Ft.: _____	

Building Only - Excludes All Trades Permits

Value of Work: <u>790,000</u>	Application Fee: \$ <u>5925.00</u>
	State Levy Fee: \$ <u>118.50</u>
	Zoning Fee: \$ <u>100.00</u>
	RLD: \$ _____
	SWP: \$ _____
	Total: \$ <u>6143.50</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: [Signature] Date: 1/18/22

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, GORDON MULLER of (address) 1762 MILLS ROAD 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 B # STORIES 1 CONSTRUCTION TYPE IVB OCCUPANT LOAD 66 CODE EDITION 18

FIRE SPRINKLER Yes FIRE ALARM No MODIFICATION No

APPROVAL _____ DATE 3-09-22

[Signature]
Code Official

Rec: 3/3/22

 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: 2/18/22
	Permit Number: BP-2022-00286
	GPIN/Tax Map: 7707-72-0762 / 46-33-D-1-0
	Issued: 3-14-2022

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 1800 Rabbit Warren Rd. Manakin Sabot, VA 23103	Phone # 804-337-2095
	Owner Jeanette Endicott	Email jeanetteendicott@yahoo.com
	Address	
APPLICANT INFORMATION	Applicant/Contact Dylan Jacobs	Phone # 434-465-6788
	Address 490 Westfield Rd. Charlottesville, VA 22901	Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Rabbit Glen	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 25' from Pylon	Center Line Setback 100'	Rear Setback 5'	CUP/Variance/COA A2/RR
	Side Setback 5'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u><i>Daniel Floyd</i></u> Date 3/8/22			

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC	Phone 434-465-6788
	Address 490 Westfield Suite A Charlottesville, VA 22901	Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type A

DESCRIPTION OF WORK	Scope of Work: Installation of a ground mounted solar photo voltaic system. System size 11.400 kW DC					
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors	
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ 39-
Value of Work	\$5,999	State Levy Fee	\$.08
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><i>Dylan Jacobs</i></u> Date 2/18/22		Septic/Well Fee	\$
		Zoning Fee	\$ 25-
		RLD	\$
		SWP	\$
		Total	\$ 64.08

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE R5 # STORIES _____ CONSTRUCTION TYPE VB OCCUPANT LOAD _____ CODE EDITION 2010

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 3/11/24
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: 1-31-2022

Permit Number: **BP-2022-00138**

GPIN/Tax Map: **7025-12-9107/58-54-0-2-0**

Issued: **3-15-2022**

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.

Site Address **15700 Mosaic Creek Blvd Richmond, VA 23238**

OWNER INFORMATION
 Owner **HH Hunt**
 Address _____ Phone # _____
 Email _____

APPLICANT INFORMATION
 Applicant/Contact **B.D. Laderberg** Phone # **757-481-5551**
 Address **2221 Starfish Road, Virginia Beach, VA 23451** Email **dominionpools@cox.net**

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision **Mosaic** Proffer Yes No Amount _____ Date Paid _____
 Front Setback **Behind Main Bldg.** Center Line Setback _____ Rear Setback **5'** CUP/Variance/COA _____
 Side Setback **5'** Side Setback **5'** Flood Zone _____ **RPUD**

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer **David Floyd** Date **2/8/22**

CONTRACTOR INFORMATION
 Contractor **Dominion Pools, Inc.** Phone **757-481-5551**
 Address **2221 Starfish Road, Virginia Beach, VA 23451** Email **dominionpools@cox.net**
 Contractor License Number **2705018612A** Type **RFC** Expiration **1-31-2023**

DESCRIPTION OF WORK
 Scope of Work: **inground pool and spa @ mosaic clubhouse**

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.	
		2679	2,679	2632.12

Building Only - Excludes All Trades Permits
 Value of Work **\$292,158.00 350,949.00**

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 **Benjamin Laderberg** Date **1-31-2021**

Application Fee	\$ 2100.00
State Levy Fee	\$ 1300.00 52.64
Zoning Fee	\$ 100.00
RLD	\$
SWP	\$
Total	\$ 3500.00 2784.70



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: 2-9-22

Permit Number: BP-2022-00195

GPIN/Tax Map: 7105-13-4388 / 57-34-0-AB-0

Issued: 3-15-22

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 <u>921 Barley field Road</u>	Phone # <u>703-624-8437</u>
	Owner <u>Ian Comor</u>	Email <u>irconn03@gmail.com</u>
APPLICANT INFORMATION	Address <u>921 Barley field Road</u>	Phone # <u>804-314-4615</u>
	Applicant/Contact <u>Bernardo Munoz</u>	Email <u>Bernardo@Dunkum.net</u>
	Address <u>1606 Woodgrave Cir</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Dover Lake</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from P/R/W</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA <u>RR</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: _____		
Planning & Zoning Officer <u>[Signature]</u>	Date <u>2/18/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Dunkum, Jim</u>	Phone <u>804-396-0156</u>
	Address <u>1606 Woodgrave Cir</u>	Email <u>Jim@Dunkum.net</u>
	Contractor License Number <u>2705-024554A</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Pool House 402 sq/ft</u> <u>Wood Burning fireplace</u> Pool, Patio, Pavement garage with auto locker				
	Proposed Use <u>Pool House</u>	Current Use <u>Yard</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>402</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>402</u>	

Building Only - Excludes All Trades Permits

Value of Work \$75,000

Application Fee	\$ <u>349.50</u>
State Levy Fee	\$ <u>6.99</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>381.49</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant Bernardo Munoz Date 2/9/22



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

Residential Commercial

Application Date: 2.11.22

Permit Number: BP-2022-0225

GPJN/Tax Map: 7728-11-690 / 48-18-0-5-0

Issued: 3-15-22

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>7100 Yare Street</u>	Phone # <u>(804) 335.7485</u>
	Owner <u>Shelley A. Carter</u>	Email <u>shelley.carter@westrock.com</u>
	Address <u>7100 Yare Street</u>	Phone #
APPLICANT INFORMATION	Applicant/Contact <u>Shelley A. Carter</u>	Email
	Address <u>same as above</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parkside Village</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>Behind Main Bldg</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>X</u>	<u>RPUD</u>

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Boyd Date: 3/7/22 Jim Ford

CONTRACTOR INFORMATION	Contractor <u>Home Turf LLC</u>	Phone <u>(804) 445.4378</u>
	Address <u>P.O. Box 1711 Tappahannock 22560</u>	Email
	Contractor License Number <u>2705082448</u>	Type <u>ISC LSC</u>

Scope of Work: approx. 253 sq ft in ground swimming pool - fiberglass insert POL w/fence barrier

Proposed Use <u>recreation</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER <u>public</u> Public/Private	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>0</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>253</u>	Total Sq. Ft. <u>253</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 65,455.00</u>	Application Fee	\$ <u>306.55</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>Shelley Carter</u> Date: <u>2.11.22</u>		State Levy Fee	\$ <u>6.13</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>337.68</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: 2.11.22

Permit Number: AD-2022-0226

GPIN/Tax Map: 7738-11-6590/48-18-0-50

Issued: 3-15-22

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	7100 Yare Street, Glen Allen, VA 23059	
	Owner	Shelley A. Carter	Phone # (804) 335.7485
APPLICANT INFORMATION	Address	7100 Yare Street, Glen Allen, VA	
	Applicant/Contact	Shelley A. Carter	Email Shelley.carter@westrock.com
APPLICANT INFORMATION	Address	same as above	
			Phone # Westrock.com

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

CONTRACTOR INFORMATION	Contractor	Fence Scapes		Phone (804) 559.8797
	Address	4456 Mechanicsville Tpke, Mechanicsville, VA 23111		
	Contractor License Number	Type	State	Expiration

Scope of Work: 40" in height; will include (2) gates
 Fence barrier for in ground swimming pool

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
recreation		# of Bathrooms	# of Bedrooms	# of floors
SEWER Public/Private	WATER Public/Private	0	0	0
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	\$4,420.00
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Application Fee	\$ 31.89
State Levy Fee	\$.64
Septic/Well Fee	\$
Zoning Fee	\$
RLD	\$
SWP	\$
Total	\$ 32.53

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

Signature of Applicant: Shelley Carter Date: 2.11.22

Rec: 3/3/22



BUILDING PERMIT APPLICATION

Application Date: 02/25/2022

Permit Number: BP-2022-00285

GPIN/Tax Map: 7726-15-7414 / 62-33-0-26-0

Issued: 7704-86-2358 / 5-15-2022

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 429 Elm Creek Dr	Phone # 631-377-1142
	Owner Derek Nielsen	Email derek783@aol.com

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 Cedar Grove	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 existing footprint. R Paid			

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, 9.48kW 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. 506		

Building Only - Excludes All Trades Permits		Application Fee \$72.62
Value of Work	13470.00	State Levy Fee \$1.45
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
		Zoning Fee \$25-
		RLD \$
		SWP \$
		Total \$99.07

Signature of Applicant: *[Signature]* Date: 02/25/2022

Rec: 3/2/22



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: 02/23/2022

Permit Number: BP-2022-00284

GPIN/Tax Map: 7705-27-0571 / 57-29-D-64-D

Issued: 3-15-22

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 1275 Flat Rock Crossing Manakin Sabot, VA 23103	
	Owner Bogese Bryan R Bogese Kendall M	Phone # (804) 986-3688
	Address 1275 Flat Rock Crossing Manakin Sabot, VA 23103	Email bogese712@gmail.com
APPLICANT INFORMATION	Applicant/Contact Henry Keith (Sigora Solar LLC)	
	Address 490 Westfield Road STE A Charlottesville, VA 22901	Phone # (434) 996-6141 Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Logan Woods</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 existing footprint</i> Planning & Zoning Officer: <i>David Boyd</i> Date: <i>3/8/22</i>			

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

DESCRIPTION OF WORK	Scope of Work: <i>Install of a flush roof mounted solar photo-voltaic array. System Capacity: 10.400 KWP DC. We are also installing 2 Tesla powerwall backup batteries</i>				
	Proposed Use SFD with solar	Current Use SFD	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 517.66 SqFt Array	

Building Only - Excludes All Trades Permits

Value of Work	6000
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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: *Henry Keith* Date: *02/23/22*

Application Fee	\$ 39.00
State Levy Fee	\$ 78.00
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 142.00

Rec: 3/2/22



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: 02/23/2022

Permit Number: BP-2022-00283

GPIN/Tax Map: 7705-27-0571 | 59-29-D-64-D

Issued: 3-15-22

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 1271 Flat Rock Crossing Manakin Sabot, VA 23103	
	Owner Bogese Bryan R Bogese Kendall M	Phone # (804) 986-3688
	Address 1271 Flat Rock Crossing Manakin Sabot, VA 23103	Email bogese712@gmail.com

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Logans Woods</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>[Signature]</i>		Date <i>3/7/22</i>	

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

DESCRIPTION OF WORK	Scope of Work: <i>Install of a flush roof mounted solar photo-voltaic array. System Capacity: 27.600 kWp DC. We are also installing 2 Tesla battery backups.</i>				
	Proposed Use SFD with Solar	Current Use SFD	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1373.8 SqFt Solar Array (roof)	

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>62.40</i>
Value of Work	11,200	State Levy Fee	\$ <i>125</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <i>25</i>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <i>88.05</i>
Signature of Applicant <i>Henry Keith</i>		Date	<i>2/23/22</i>



BUILDING PERMIT APPLICATION

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

Application Date: 3-10-22
Permit Number: BP-2022-00309
GPIN/Tax Map: 6840-78-2716 / 20-13-0-4-0
Issued: 3/1-22

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	3057 Rocky Creek Lane, Gum Spring		
	Owner	Garvey Young	Phone #	434-989-4157
APPLICANT INFORMATION	Address	3057 Rocky Creek Lane, Gum Spring		
	Applicant/Contact	Royal Pools	Phone #	804-883-5900
	Address	P.O. Box 324, Montpelier, VA 23192		
			Email	royalpoolsofva@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Woodlin</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	<u>55' from PL/Rev</u>	<u>80'</u>	<u>5'</u>	
Side Setback	Side Setback	Flood Zone	<u>A1</u>	
	<u>5'</u>	<u>5'</u>		

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 3/1/22

CONTRACTOR INFORMATION	Contractor	Royal Pools/Butler Lawn Care Co.	Phone	804-883-5900	
	Address	P.O. Box 324 Montpelier, VA 23192		Email	royalpoolsofva@gmail.com
	Contractor License Number	2705105362	Type	Class A	Expiration

Scope of Work:
Installation of In-ground fiberglass swimming pool; 14'x30' ^{w/} fence barrier

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) total land disturbance 960 sq. ft		
Residential	same	# of Bathrooms	# of Bedrooms	# of floors
SEWER Public/Private	WATER Public/Private	Unfinished Sq. Ft.	Total Sq. Ft.	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	<u>420</u>	<u>420 sq. ft.</u>	

Building Only - Excludes All Trades Permits

Value of Work	62,230
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Application Fee	\$ <u>292.00</u>
State Levy Fee	\$ <u>5.84</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>322.88</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: 3/1/22



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: 2-3-22

Permit Number: BP-2022-00297

GPIN/Tax Map: 7716-57-5012 / 58-1-0-84-0

Issued: 3-18-21

Residential Commercial

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

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

OWNER INFORMATION	Site Address <u>1722 Maple Lane</u> <u>Francesca Huber Manakin-Sabot VA. 23103</u>	Phone # <u>804-350-7019</u>
	Owner <u>1722 Maple Lane Francesca Huber</u>	Email
APPLICANT INFORMATION	Address <u>Manakin-Sabot VA. 23103</u>	Phone # <u>804-426-5177</u>
	Applicant/Contact <u>Claude A Rasnake Sr.</u>	Email
	Address <u>1713 Old Hundred Rd. Midlothian VA. 23114</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Homewood 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>Daniel Lloyd</u>	Date <u>3/10/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Claude A Rasnake Sr.</u>	Phone <u>804-426-5177</u>
	Address <u>1713 Old Hundred Rd. Midlothian VA. 23114</u>	Email <u>allen@rasnake@yahoo.com</u>
	Contractor License Number <u>2705138802</u>	Type <u>Class B</u>

DESCRIPTION OF WORK	Scope of Work: <u>Replace 50' of main beam</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>37.20</u>
Value of Work <u>\$5600.⁰⁰</u>		State Levy Fee \$ <u>.74</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>2500</u>
Signature of Applicant <u>Claude A Rasnake</u>	Date <u>3/03/22</u>	RLD \$ _____
		SWP \$ _____
		Total \$ <u>62.94</u>



BUILDING PERMIT APPLICATION

Application Date: 2/25/2022 3-4-22

Permit Number: BP-2022-00300

GPIN/Tax Map: 6800-30-2442/16-1-0-86-B

Issued: 3-18-2022

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.

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 2663 SHIRLEYS COVE GOOCHLAND, VA 23063		Phone # <u>Homeowner</u> 8043975899
	Owner Tim Harris		Email TJHARRISVA@YAHOO.COM
	Address 2663 SHIRLEYS COVE GOOCHLAND, VA 23063		Phone # 7578048517
APPLICANT INFORMATION	Applicant/Contact Chase Brown		Email chase.brown@orkin.com
	Address 10101 Leadbetter Place Ashland Va 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Shirley's Cove</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>All interior work</u>	
Planning & Zoning Officer <u>[Signature]</u>		Date <u>3/11/22</u>		

CONTRACTOR INFORMATION	Contractor <u>Orkin Pest Control</u> <u>Owner</u>		Phone 7576048517
	Address <u>10101 Leadbetter Place Ashland Va 23005</u>		Email chase.brown@orkin.com
	Contractor License Number <u>91000354</u>	Type <u>Business</u>	Expiration <u>3/31/2022</u>

Scope of Work:
Upgrade crawlspace to a conditioned crawl. (Dryzone w/ vents) Install dehumidifer. Treat wood for WDF (wood decay fungus)

Proposed Use Crawlspace upgrade	Current Use Conditioned crawl	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 3	# of floors 1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 1798	Unfinished Sq. Ft. 0	Total Sq. Ft. 1798	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30.00</u>
Value of Work	\$ <u>2,942</u>	State Levy Fee	\$ <u>.60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>55.60</u>
Signature of Applicant <u>[Signature]</u>		Date <u>2/25/2022</u>	



BUILDING PERMIT APPLICATION

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

Application Date: February 14, 2022

Permit Number: BP 2022-00214

GPIN/Tax Map: 7715-69-4306 / 58-51-0-38-0

Issued:

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

Residential Commercial

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

OWNER INFORMATION	Site Address 1163 Cordial Court, Manakin-Sabot, VA 23103 (Pool House)	
	Owner Koebel, George Louis and Linda McCracken	Phone # 804-339-3392
APPLICANT INFORMATION	Address 187 Woodfern, Richmond, VA 23238	Email shorty@havanaconnections.com
	Applicant/Contact Ellington Custom Homes, LLC / Ashley Yavorsky	Phone # 757-570-2076
	Address 2087 Dabney Rd, Richmond, VA 23230	Email ayavorsky@arhomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Tuckahoe Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>Rear Mail Bldg.</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA <u>RPUD</u>
	Side Setback <u>5'</u>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*Survey locate setbacks.</u>	Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>2/23/22</u>		

CONTRACTOR INFORMATION	Contractor Ellington Custom Homes, LLC	Phone 804-378-3710
	Address 2079 Dabney Rd, Richmond, VA 23230	Email mellington@arhomes.com
	Contractor License Number 2705168471	Type LLC - Class A
		Expiration 06/30/2022

DESCRIPTION OF WORK	Scope of Work: Pool House			
	Proposed Use Pool House	Current Use Raw Land	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <small>Land Disturbed - 19,225 sq. ft. (includes clearing for house and pool house)</small>	
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms 1 Full	# of Bedrooms 0
			# of floors 1	
	Finished Sq. Ft. 180	Unfinished Sq. Ft. 220 (Covered Patio and Pool Equipment)	Total Sq. Ft. 400	

Building Only - Excludes All Trades Permits

Value of Work	\$50,000
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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: Matt Ellington Date: 2/7/2022

Application Fee	\$ <u>237.00</u>
State Levy Fee	\$ <u>4.74</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>266.74</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:

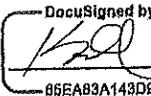
Name: Nancy Ann Rogers Telephone: 804-784-7182

Mailing Address: PO Box 167, Manakin Sabot, VA 23103

OWNER'S STATEMENT

I George Louis Koebel of (address) 187 Woodfern, Richmond, VA 23238 affirm that I am the owner of a certain tract of parcel

of land located at 1163 Cordial Court, Manakin-Sabot, VA 23103 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.

DocuSigned by:

 Owner's Signature

85FA83A149D94A6...

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD — CODE EDITION 15

FIRE SPRINKLER — FIRE ALARM — MODIFICATION —

APPROVAL MICHAEL BROOKINGS DATE 3.17.22

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: 2-24-22

Permit Number: BP-2022-00215

GPIN/Tax Map: 6815-02-1326/1-6-0-5-0

Issued: 3-21-22

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 5608 Whitesell Rd, Louisa, VA 23093		Phone # (804)539-1815
	Owner Richard Phillips		Email Ricky.phillips@bdnreit.com
	Address 5608 Whitesell Rd, Louisa, VA 23093		Phone #
APPLICANT INFORMATION	Applicant/Contact		Email
	Address		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Deer Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' Front Pl/Row</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>RR</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: _____	
Planning & Zoning Officer <u>David Floyd</u>		Date <u>3/7/22</u>		

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

DESCRIPTION OF WORK	Scope of Work: 28x30 Prefabricated metal garage with slab			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
		<u>840</u>	<u>840</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$15,000 23,100</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 Richard E Phillips Date 2-23-22

Application Fee	\$ <u>113.95</u>
State Levy Fee	\$ <u>2.32</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>143.27</u>



BUILDING PERMIT APPLICATION

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

Application Date: ²⁻²⁵⁻²² 2/23/2022

Permit Number: BP-2022-00325

GPIN/Tax Map: 6186-18-8302/44-15-1-260

Issued: 3-22-22

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	1870 Covington Rd, Crozier, VA 23039 ^{Landscaper Contractor Still}	
	Owner	LaFond Residence	Phone # 904 683-1893
	Address	1870 Covington Rd, Crozier, VA 23039	Email
APPLICANT INFORMATION	Applicant/Contact	Efrem Carrillo	Phone # 804-282-5071
	Address	P.O. Box 17273, Richmond, VA 23226	Email Stoneemasonry@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Floyd</u> Date <u>3/16/22</u>			

CONTRACTOR INFORMATION	Contractor	Stonee Masonry INC	Phone	804-282-5071
	Address	P.O. Box 17273, Richmond, VA 23226	Email	Stoneemasonry@gmail.com
	Contractor License Number	2705068658	Type	DPOR

DESCRIPTION OF WORK	Scope of Work: Construction of Diamond Pro retaining wall at rear of property for new pool deck.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ 124.50
Value of Work	25000	State Levy Fee	\$ 2.49
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 25.00
Signature of Applicant	<u>[Signature]</u>	RLD	\$
Date	2/23/2022	SWP	\$
		Total	\$ 151.99



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: March 10, 2022

Permit Number: BP-2022-00332

GPIN/Tax Map: 7726-05-0057 / 58-55-2-47-0

Issued: 3-22-22

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>12237 Bremner Ridge Cir</u>	Phone # <u>804-651-8464</u>
	Owner <u>Steven Allen</u>	
APPLICANT INFORMATION	Address <u>12237 Bremner Ridge Cir</u>	Email <u>allenstevenr@aol.com</u>
	Applicant/Contact <u>self</u>	Phone #
	Address	Email

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

APPROVED REJECTED COMMENTS: No change to footprint / use.
 Planning & Zoning Officer: David Boyd Date: 3/18/22

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

DESCRIPTION OF WORK	Scope of Work: <u>Frame 20"Dx73"Wx9'H enclosure for gas fireplace, install fireplace, finish walls</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work \$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: Steven Allen Date: 3/11/22

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



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 2-24-22

Permit Number: BP-2022-00317

GPIN/Tax Map: 677-36-8081 / 43-42-D-1-0

Issued: 3-22-2022

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.

Site Address: 1754 Fisher Pond Dr. Maidens VA 23102

Owner: Roy Bordner Phone #: 804-401-7243

Address: 1754 Fisher Pond Dr. Maidens VA 23102 Email: _____

Applicant/Contact: Unique Pools and Spas Phone #: 804-567-2753

Address: 6540 Emmaus church rd. Providence Forge VA 23140 Email: uniquepoolsoffice@yahoo.com

Subdivision: Breeze H:11 Proffer Yes No Amount: _____ Date Paid: _____

Front Setback: 40' from P/L/R/W Center Line Setback: 65' Rear Setback: 5' CUP/Variance/COA: _____

Side Setback: 35' Side Setback: 65' Flood Zone: _____ RP

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David Boyd Date: 3/16/22

Contractor: Unique Pools & Spas Phone: 804-567-2753

Address: 6540 Emmaus church rd. Providence Forge VA 23140 Email: uniquepoolsoffice@yahoo.com

Contractor License Number: 2705172451 Type: POL class A Expiration: 3-31-22

Scope of Work: Installation of 14' x 31' fiberglass inground swimming pool and spa. Re existing barrier.

Proposed Use: _____ Current Use: _____ Environmental Impacts (stream crossing, wetlands, amt land disturbed): _____

SEWER: Public/Private WATER: Public/Private # of Bathrooms: _____ # of Bedrooms: _____ # of floors: _____

Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No: _____ Finished Sq. Ft.: _____ Unfinished Sq. Ft.: 434 Total Sq. Ft.: 434

Building Only - Excludes All Trades Permits

Value of Work: \$20,000.00

Application Fee: \$ 102.00
 State Levy Fee: \$ 2.04
 Zoning Fee: \$ 25.00
 RLD: \$ _____
 SWP: \$ _____
 Total: \$ 129.04

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: Demario Burson Date: 2-1-22

3-8-22



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: 3/4/22

Permit Number: BP-2022-00318

GPIN/Tax Map: 6779-51-9703 / 31-8-0-5-0

Issued: 3-22-22

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.

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: 2224 Henry West Ln. Goochland VA 2302

Owner: Michael Fisher Phone #: 804-824-8546

Address: 2224 Henry West Ln Goochland VA 2302 Email: Mifisher3@gmail.com

APPLICANT INFORMATION

Applicant/Contact: Unique Pools & Spas LLC (Genara Barran) Phone #: 804-557-2753

Address: 6540 Emmaus Church rd. 23140 Email: Uniquepoolsoffice@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Proffer: Yes No Amount: Date Paid:

Front Setback: 55ft off ROW Center Line Setback: Rear Setback: 5ft CUP/Variance/COA: A2

Side Setback: 5ft Side Setback: 3 5ft off ROW Flood Zone:

APPROVED REJECTED COMMENTS:

Planning & Zoning Officer: Chita Barnes Date: 3-14-2022

CONTRACTOR INFORMATION

Contractor: Unique Pools & Spas LLC Phone: 804-557-2753

Address: 6540 Emmaus Church rd. Providence Forge 23140 Email: uniquepoolsoffice@yahoo.com

Contractor License Number: 2705172451 Type: Class A POL Expiration: 3-31-22

DESCRIPTION OF WORK

Scope of Work: Installation of inground swimming pool with automatic pool cover. pre-existing barrier. 16x40

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		<u>NA</u>	<u>NA</u>	<u>NA</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			<u>640'</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$ 20,000.00

Application Fee	\$ <u>102.00</u>
State Levy Fee	\$ <u>25.00</u> <u>2.04</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ <u> </u>
SWP	\$ <u> </u>
Total	\$ <u>129.04</u>

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

Signature of Applicant: Genara Barran Date:



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 01/18/2022

Permit Number: *BP-2022-0094*

GPIN/Tax Map: 59-5-0-1-0

Issued: *3-25-22*

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 12000 Avery Point Way	
	Owner Avery Point LLC; C/O Altus Group	Phone # <i>Jeff 605-1396</i>
	Address P O Box 92129; Southlake, TX 76092	Email
APPLICANT INFORMATION	Applicant/Contact Jeff Lee; Superior Signs	
	Address 2510 Willis Rd., N. Chesterfield, VA 23237	Phone # 804-271-5685 Email <i>jeff.lee@SuperiorSignsRVA.com</i>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Avery Point</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>5' from Pk Row</i>	Center Line Setback <i>30'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone	<i>M1</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: <i>David Boyd</i> Date: <i>3/18/22</i>			

CONTRACTOR INFORMATION	Contractor Superior Signs		Phone 804-271-5685
	Address 2510 Willis Rd., N. Chesterfield, VA 23237		Email <i>jeff.lee@SuperiorSignsRVA.com</i>
	Contractor License Number 2705156399	Type CBC RBC	Expiration 03/23

DESCRIPTION OF WORK	Scope of Work: Install (1) monument sign per attached plans.				
	Proposed Use Senior Living	Current Use Senior Living	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. 39.75	Unfinished Sq. Ft.	Total Sq. Ft. 39.75	

Building Only - Excludes All Trades Permits		Application Fee \$ <i>30.00</i> State Levy Fee \$ <i>60</i> Zoning Fee \$ <i>50.00</i> RLD \$ _____ SWP \$ _____ Total \$ <i>80.60</i>
Value of Work	3950.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<i>[Signature]</i>	
Date	01/18/2022	

received
2-17-22



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: 2-24-22

Permit Number: BP-2022-00236

GPIN/Tax Map: 4109-38-5639/16-1-0-8A-0

Issued: 3-31-22

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.

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: 5497 Old Columbia Rd. Goochland VA 23063

Owner: Larry Roberts Phone #: 804-393-6635

Address: 5497 Old Columbia Rd. Goochland VA 23063 Email: Larry@zenzenityfarms.com

APPLICANT INFORMATION

Applicant/Contact: Larry Roberts Phone #: _____

Address: 5497 Old Columbia Rd Goochland VA 23061 Email: Same

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: <u>N/A</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
Front Setback: <u>5' Empty Row</u>	Center Line Setback: <u>100'</u>	Rear Setback: <u>5'</u>	CUP/Variance/COA: _____
Side Setback: <u>5'</u>	Side Setback: <u>5'</u>	Flood Zone: _____	

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David Floyd Date: 3/24/22

CONTRACTOR INFORMATION

Contractor: Self Phone: _____

Address: _____ Email: _____

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK

Scope of Work: Stage Roof 23' x 30'

Proposed Use: <u>Live Music</u>	Current Use: _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>N/A</u>		
SEWER Public/Private: _____	WATER Public/Private: _____	# of Bathrooms: <u>0</u>	# of Bedrooms: <u>0</u>	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No: <input type="checkbox"/>	Finished Sq. Ft.: _____	Unfinished Sq. Ft.: <u>690</u>	Total Sq. Ft.: <u>690</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$4,000.00

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: _____ Date: 2-17-22

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



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 3-16-22

Permit Number: BP-2022-00345

GPIN/Tax Map: 7117-22-1485 / 46-37-0-6-0

Issued: 3-31-22

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 <u>Susan Creekmore</u>		Phone # <u>804-337-2028</u>
	Owner <u>2128 Proffitt rd</u>		Email <u>Creekmore25@comcast.net</u>
APPLICANT INFORMATION	Applicant/Contact <u>Sergio Chuy</u>		Phone # <u>804-687-4347</u>
	Address <u>4228 Lanver Ln Henrico VA 23294</u>		Email <u>Sergioestimate@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Proffitt Knoll</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from P/R ROW</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* Does not come closer than existing structure</u>		
Planning & Zoning Officer <u>Daniel Floyd</u>		Date <u>3/22/22</u>		

CONTRACTOR INFORMATION	Contractor <u>Carpentry/Painting LLC.</u>		Phone <u>804-687-4347</u>
	Address <u>4228 Lanver Ln Henrico, VA 23294</u>		Email <u>Sergioestimate@gmail.com</u>
	Contractor License Number <u>2705164380</u>	Type <u>HIC</u>	Expiration <u>01-31-2024</u>

DESCRIPTION OF WORK	Scope of Work: <u>Re-Build Deck and Extend 2' on two side = Total 16'x16'</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. <u>256 sq. ft.</u>	Total Sq. Ft. <u>256 sq. ft.</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 9,990.00</u>
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Application Fee	\$ <u>36.95</u>
State Levy Fee	\$ <u>1.14</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>83.09</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 Sergio Chuy Date 03-11-2022



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: 3/1/2022
 Permit Number: BP-2022-00298

GPIN/Tax Map: 0723-55-2109/07-2-C-7-D

Issued: 3-31-22

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 <u>213 W. BROOK RUN DR RICHMOND VA 23238</u>	
	Owner <u>L. FRED ROENSCH ANNE MARIE VAUGHN</u>	Phone # <u>804. 263. 3666</u>
	Address <u>213 W. BROOK RUN DR RICHMOND, VA</u>	Email <u>WATERPHDE@MSN.COM</u>

APPLICANT INFORMATION	Applicant/Contact <u>DEVCON, LLC GARY DEVILBISS</u>	Phone # <u>804. 405. 7676</u>
	Address <u>214 W. BROOK RUN DR RICHMOND, VA 23238</u>	Email <u>GKDWOODWORK@YAHOO.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>James River Est.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>40' from P.Y. Line</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone <u>C</u>	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Planning & Zoning Officer <i>Daniel Lloyd</i> Date <u>3/10/22</u></u>			

CONTRACTOR INFORMATION	Contractor <u>DEVCON, LLC</u>	Phone <u>804. 405. 7876</u>
	Address <u>214 W. BROOK RUN DR RVA 23238</u>	Email <u>GKDWOODWORK@YAHOO.COM</u>
	Contractor License Number <u>2705160113</u>	Type <u>CLASS A CIC RBC</u>

DESCRIPTION OF WORK	Scope of Work: <u>BUILD 2-STORY ADDITION ON REAR OF EXISTING HOUSE ^{1 Bedroom + art studio}</u>				
	Proposed Use <u>SINGLE FAMILY</u>	Current Use <u>SINGLE FAMILY</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>1</u>	# of Bedrooms <u>1</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components? (Yes) / No	Finished Sq. Ft. <u>837</u>	Unfinished Sq. Ft. <u>124</u>	Total Sq. Ft. <u>961</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>780.00</u> State Levy Fee \$ <u>12.61</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>827.61</u>
Value of Work	\$ <u>170,800</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><i>Daniel Lloyd</i></u> Date <u>3/1/2022</u>	

101.75



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: 3.18.22

Permit #: 22-399

GPIN

Tax Map

LOCATION

Street Address: 2125 Jockey Ridge Road, maidens VA 23102

PROPERTY OWNERSHIP

Name: Barbara Trainham Phone: 804.543.0438

Mailing Address: 2125 Jockey Ridge Road, MAIdens VA 23102 Email: btrainham@comcast.net

APPLICANT

Name: Scarlet Honshell/Clark Home Solutions LLC Phone: 804.302.4200

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

CONTRACTOR

Name: Clark Home Solutions LLC Phone: 804.302.4200

Mailing Address: 14018 Sullyfield Cir Ste E Email: Honshell@GeneratorSupercenter.com

Gas Certification: YES NO State License Number: 2705176647 Expiration: 8/31/22 License Type: Masters Class: A

DESCRIPTION OF WORK

24kw Generator Install - 2x200 Amp transfer switches

35ft electric run through crawl space - 500 gal LP tank

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

Value of Work (required): \$17,500

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: Scarlet Honshell

Date: 3.18.22

Approval: Fisher

Office Use Only

Approval date: 3/29/22

Permit Fee: 101.75

Issued date:

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department
P. O. Box 119 Goochland, VA 23063

87.04
Rec: 3/29/22

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

(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	2/9/2022
Permit #	22-402
GPIN	
Tax Map	

LOCATION

Street Address: 2802 Dogtown Road, Goochland VA 23063

PROPERTY OWNERSHIP

Name	Scott Norman	Phone	804.641.5385
Mailing Address	2802 Dogtown Road	Email	

APPLICANT

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

CONTRACTOR

Name	Clark Home Solutions LLC	Phone	804.302.4200
Mailing Address	14018 Sullyfield Cir Ste E	Email	Honsbell@GeneratorSupercenter.com
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705176647
		Expiration	8/31/22
		License Type	Masters
		Class	A

DESCRIPTION OF WORK

24Kw Generator Install - 58ft electric through crawl space from 200 AMP transfer Switch to Generator

# of Bathrooms	Service Size	Power Company	Inquiry #

Value of Work (required)
 \$ 14,300

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: Scarlett Honsbell Date: 2/10/22

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>3/29/22</u>
Permit Fee:	<u>87.04</u>		Issued date:	<u>3/29/22</u>

17534



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	3/23/22
Permit #	22-385
GPIN	
Tax Map	

LOCATION

Street Address
2804 Timber Trail Drive

PROPERTY OWNERSHIP

Name	Ryan Burnette	Phone	804-929-2440	
Mailing Address	2804 Timber Trail Drive, Sandy Hook, VA 23153		Email	ryan.burnette.vt99@gmail.com

APPLICANT

Name	Amber Blough	Phone	Adam Hoggood 804-218-6045	
Address	1735 Arlington Rd, Richmond, VA 23230		Email	ablough@master-electrical.com

CONTRACTOR

Name	Master Electrical Services LLC			Phone	804-231-1973				
Mailing Address	1735 Arlington Rd, Richmond, VA 23230			Email	ablough@master-electrical.com				
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705181240	Expiration	9-30-2023	License Type	Contractors	Class	A

DESCRIPTION OF WORK

Install (1) 24 kw generator w/2(200)amp Transfer switches wired by Romex/AM

# of Bathrooms	Service Size	Power Company	Inquiry #
16,000			
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: Date: 3/23/2022

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>3/25/22</u>
Permit Fee:	<u>48.910</u>		Issued date:	

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This 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 <u>3-24-22</u>
Permit # <u>11-2022-00367</u>
GPIN
Tax Map

LOCATION

Street Address
5443 Community House Rd

PROPERTY OWNERSHIP

Name <u>MARGARET + RICHARD Allison</u>	Phone <u>804 212 9390</u>
Mailing Address <u>5443 Community House Rd</u>	Email <u>RCA MWA@GMAil.com</u>

APPLICANT

Name <u>Richard C Allison</u>	Phone <u>804 212 9390</u>
Address <u>5443 Community House Rd</u>	Email <u>RCA MWA@GMAil.com</u>

CONTRACTOR

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

DESCRIPTION OF WORK

<u>Hook up a Backup Generator 15KW to a Garage</u>			
<u>2</u>	<u>200 Amp</u>	<u> Dominion</u>	Inquiry #
# of Bathrooms	Service Size	Power Company	
Value of Work (required) <u>\$5500.00</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: Richard C Allison Date: 3/23/22

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>\$46.66</u>	Approval date: <u>3-24-22</u>
	Issued date: <u>3-24-22</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

3-16-22

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 3/11/22
Permit # ELI-2022-00361
GPIN
Tax Map

LOCATION

Street Address
1681 Old Orchard Lane; Manakin-Sabot VA 23103

PROPERTY OWNERSHIP

Name Todd Willett	Phone 804.640.1801
Mailing Address 1681 Old Orchard Lane; Manakin-Sabot VA 23103	Email

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

Provide & install 18KW generator

# of Bathrooms	Service Size	Power Company	Inquiry #
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Value of Work (required)
\$8,956.00

Fee \$ 62.53

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: 3/11/22

Approval: <u>Fisher</u>	Office Use Only Approval date: <u>3-21-2022</u>
Permit Fee: <u>62.53</u>	Issued date: <u>3-21-2022</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: 3/15/22

Permit #: 22-328

GPIN

Tax Map

LOCATION

Street Address: 3751 Leabough Road

PROPERTY OWNERSHIP

Name: Thomas Leabough	Phone: 804 929 3856
Mailing Address: 3751 Leabough Road	Email:

APPLICANT

Name: REALIOUS Trent	Phone:
Address: 203 YANCEY ST	Email:

CONTRACTOR

Name: Trent Electrical Contracting Co	Phone:			
Mailing Address: 203 YANCEY ST RICH, VA 23222	Email:			
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705844971	Expiration: 6/22	License Type: EIE	Class: B

DESCRIPTION OF WORK

Install 24KW Generator

# of Bathrooms	Service Size: 200 AMPS	Power Company: Dominion	Inquiry #
Value of Work (required): \$9,500	(including Generator)		

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: Realious P. Trent Date: March 15, 2022

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>3/15/22</u>
Permit Fee: <u>65.03</u>		Issued date: _____



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date	3/16/2022
Permit #	2021-00787
GPIN	
Tax Map	

LOCATION

Street Address: 4093 BEN LOMOND RD. 23063.

PROPERTY OWNERSHIP

Name	Phone
<u>DAN MICHAEL</u>	
Mailing Address	Email
<u>1470 AMBER LAKE ROAD. 23103</u>	

APPLICANT

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

CONTRACTOR

Name	Phone			
<u>SUPERIOR ELECTRICAL SERVICES LLC</u>	<u>(804) 921-1197</u>			
Mailing Address	Email			
<u>300 DEFENSE AVE. 23150.</u>	<u>kevin.scotthall@gmail.com</u>			
Gas Certification	State License Number	Expiration	License Type	Class
YES <input type="checkbox"/> NO <input type="checkbox"/>	<u>2705170053.</u>	<u>10/31/2023.</u>	<u>ELE</u>	<u>C</u>

DESCRIPTION OF WORK

<u>wire new dwelling to code WITH 22 KW</u>			
<u>whole house generator.</u>			
# of Bathrooms	Service Size	Power Company	Inquiry #
<u>3.5.</u>	<u>400.</u>	<u>DOMINION ENERGY</u>	<u>10483977</u>
Value of Work (required)			
<u>\$ 7,000.00.</u>			

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

Signature of Applicant: Kevin Hall Date: 3/16/2022

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>53.5</u>	Approval date: <u>3-16-22</u>
	Issued date: <u>3-16-22</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

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 <u>3/16/2022</u>	
Permit # <u>EL-2022-00334</u>	
GPIN	
Tax Map	

LOCATION

Street Address
2312, Hobby Hill Drive 23063

PROPERTY OWNERSHIP

Name <u>Coretta Salver</u>	Phone
Mailing Address <u>2312, Hobby Hill Dr. 23063</u>	Email

APPLICANT

Name <u>Kevin Hall</u>	Phone <u>(804) 921-1197</u>
Address <u>300 Defense Ave 23150</u>	Email <u>KevinScottHall@gmail.com</u>

CONTRACTOR

Name <u>Superior Electrical Services LLC</u>		Phone <u>(804) 921-1197</u>	
Mailing Address <u>300 Defense Ave 23150</u>		Email <u>KevinScottHall@gmail.com</u>	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2705170053</u>	Expiration <u>20/31/2023</u>	License Type <u>ELE</u>
		Class <u>C</u>	

DESCRIPTION OF WORK

<u>INSTALL MANUAL INTER-LOCK KIT WITH</u>			
<u>30 AMP. OUTLET FOR GENERATOR.</u>			
# of Bathrooms	Service Size <u>200</u>	Power Company	Inquiry #
Value of Work (required) <u>\$ 650.00</u>			

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

Signature of Applicant: Kevin Hall Date: 3/16/2022

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>30.60</u>	Approval date: <u>3-16-22</u>
	Issued date: <u>3-16-22</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

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
Permit # 22-280
GPIN
Tax Map

LOCATION

Street Address 410 Wellfield Rd, Manakin Sabot, VA 23103

PROPERTY OWNERSHIP

Name Mike Moorefield	Phone 401-225-1682
Mailing Address 410 Wellfield Rd, Manakin Sabot, VA 23103	Email mikemoorefield4@gmail.com

APPLICANT

Name Amber Blough	Phone Adam Hoggood 804-218-6045
Address 1735 Arlington Rd, Richmond, VA 23230	Email ablowgh@master-electrical.com

CONTRACTOR

Name Master Electrical Services LLC		Phone 804-231-1973	
Mailing Address 1735 Arlington Rd, Richmond, VA 23230		Email ablowgh@master-electrical.com	
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705181240	Expiration 9-30-2023	License Type Contractors
		Class A	

DESCRIPTION OF WORK

Installation of (1) 24kw generator and (2) 200 amp automatic transfer switches wired by #1 THHN in PVC pipe (20 feet).

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$60,000			

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: 2/23/2022

Approval: Fisher	Office Use Only
Permit Fee: 48.96	Approval date: 3/2/22
	Issued date: _____



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date
Permit # 22-279
GPIN
Tax Map

LOCATION

Street Address
2131 Witters Lane

PROPERTY OWNERSHIP

Name Jay Ziehl	Phone 804-310-7307
Mailing Address 2131 Witters Lane, Maidens, VA 23102	Email jziehl3@gmail

APPLICANT

Name Amber Blough	Phone 804-218-6045
Address 1735 Arlington Rd, Richmond, VA 23230	Email ablough@master-electrical.com

CONTRACTOR

Name Master Electrical Services LLC	Phone 804-231-1973
Mailing Address 1735 Arlington Rd, Richmond, VA 23230	Email ablough@master-electrical.com
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705181240
	Expiration 09-30-2023
	License Type Contractor
	Class A

DESCRIPTION OF WORK

Installation of (1) 24KW generator and (2) 200 amp Gensady Panels wired by 20 feet of #1 THHN in PVC pipe			
# of Bathrooms 6,000	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: AK _____ Date: 2/23/2022

Approval: Fisher _____	Office Use Only
Permit Fee: 48.96 _____	Approval date: 3/2/22 _____
	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

3-3-22

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 <p style="text-align: center;">3/2/2022</p>
Permit # <u>EU-2021-01278</u>
GPIN
Tax Map

LOCATION

Street Address 652 SEAY RD. MANAKIN-JABOT 23103.

PROPERTY OWNERSHIP

Name FREK Properties LLC <u>GVA Builders LLC</u>	Phone
Mailing Address <u>1407 RANSCO ROAD. 23235</u>	Email

1151 NUCKOLS Rd. Glen Allen, VA 23059

APPLICANT

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

CONTRACTOR

Name <u>SUPERIOR ELECTRICAL SERVICES LLC</u>		Phone <u>(804) 921-1197</u>	
Mailing Address <u>300 DEFENSE AVE 23150.</u>		Email <u>KEVINSCOTTHALL@gmail.com</u>	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2705190053</u>	Expiration <u>10/31/2022</u>	License Type <u>ELEC.</u> Class <u>C</u>

DESCRIPTION OF WORK

<u>wire new DWELLING TO CODE. WITH</u>			
<u>22 KW Whole House GENERATOR.</u>			
# of Bathrooms <u>2.5</u>	Service Size <u>2400 Amp</u>	Power Company <u>RAPPAMANOCK ELECTRIC</u>	Inquiry # <u>1613165</u>
Value of Work (required) <u>\$ 7500.00.</u>			

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

Signature of Applicant: Kevin Hall Date: 3/2/2022

Approval: <u>Fisher</u>	Office Use Only Approval date: <u>3-3-22</u>
Permit Fee: <u>5585</u>	Issued date: <u>3-3-22</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:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

Date 2-16-22
Permit # EU-2022-00233
GPIN
Tax Map

LOCATION

Street Address
12159 Readers Point Dr

PROPERTY OWNERSHIP

Name David Meadows	Phone
Mailing Address //	Email david@meadowsmail.net

APPLICANT

Name Chris Gravely	Phone 804-598-3720
Address 2150 Carter Gallier Blvd Ste F Powhatan, VA 23139	Email admin@AMPElectricPVA.com

CONTRACTOR

Name AMPElectric		Phone	
Mailing Address //		Email admin@AMPElectricPVA.com	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705151884	Expiration 11/30/23	License Type ELE
		Class A	

DESCRIPTION OF WORK

Setting Homeowner provided generator 22KW			
# 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: [Signature] Date: _____

Approval: Fisher	Office Use Only Approval date: 3-2-22
Permit Fee: 30.00	Issued date: 3-2-22



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/permits/calc

Date: 2/12/22
 Permit #: 22-224
 GPIIN: _____
 Tax Map: _____

LOCATION

Street Address: 958 Hard Rock Lane, Goochland VA 23063

PROPERTY OWNERSHIP

Name: Gordon Dudley Phone: 602-891-3994
 Mailing Address: 958 Hard Rock Lane, Goochland VA 23063 Email: fdgudster@gmail.com

APPLICANT

Name: Scarlett Hansbell/Clark Home Solutions LLC Phone: 804-302-4200
 Address: 9830 West Broad St. Richmond VA 23060 Email: SHansbell@Generatorsupercenter.com

CONTRACTOR

Name: Clark Home Solutions LLC Phone: 804-302-4200
 Mailing Address: 14018 Sullyfield Cir Ste E Email: SHansbell@Generatorsupercenter.com
 State License Number: 2705176647 Expiration: 8/31/22 License Type: Masters Class: A

DESCRIPTION OF WORK

24kw Generator Install - 20' electric run above ground
along home from 200 amp transfer switch to 24kw
 # of Batteries: _____ Service Size: _____ Power Company: _____ Inquiry #: _____
 Generator
 Value of Work (required): 19,050

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: Scarlett Hansbell Date: 2/12/22

Approval: FSNER Office Use Only
 Approval date: 2/12/22
 Permit Fee: 108.80 Issued date: _____

(owner's statement on back)