



BUILDING PERMIT APPLICATION

Application Date: 7/12/2022

Permit Number: BP-2022-00928

GPIN/Tax Map: 7707-64-9965 / 4627-A-210

Issued: 7/19/22

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

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 2287 Wheatlands Dr Manakin Sabot, VA 23103	
	Owner Darrel Mason	Phone # 8043508313
	Address 2287 Wheatlands Dr Manakin Sabot, VA 23103	Email damedarrel@aol.com
APPLICANT INFORMATION	Applicant/Contact Shavonda Greene	
	Address 10510 Northlake Park Dr Ashland, VA 23005	Phone # 9842246343
		Email sgreene@championwindow.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Wheatlands	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 55' from PLY/RW	Center Line Setback 80'	Rear Setback 35'	CUP/Variance/COA
	Side Setback 15' / 35'	Side Setback 15' / 35'	Flood Zone	RR
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
Planning & Zoning Officer David Floyd		Date 7/19/22		

CONTRACTOR INFORMATION	Contractor Champion Window Company of Richmond, LLC		Phone 9842246343
	Address 10510 Northlake Park Dr Ashland, VA 23005		Email sgreene@championwindow.com
	Contractor License Number 2705132917	Type Class A	Expiration 1/31/24

DESCRIPTION OF WORK	Scope of Work:				
	Building an addition of a studio style patio room on a new deck. Room to be approx. 13X14. R & R 1 existing entry door, no structural change.				
	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. 182 sq ft	

Building Only - Excludes All Trades Permits		Application Fee \$ 331.90	
Value of Work	72,435	State Levy Fee	\$ 6.10
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	\$ 20
		RLD	\$
		SWP	\$
		Total	\$ 369.72
		Signature of Applicant	Shavonda Greene

Received 7-11-22



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: 5/9/22
 Permit Number: BP-2022-00925
 GPIN/Tax Map: 5892-71-4352/9-1-0-69-B1
 Issued: 7-28-22
 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 6196 County House Rd Columbia Va. 23039	Phone # Home, 804, 457-4076 Cell - 434-270-1355
	Owner Jerry Pannell Rhond Randolph	Email
	Address	
APPLICANT INFORMATION	Applicant/Contact	Phone # 434-270-1355
	Address 6196 County House Rd Columbia Va. 23039	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 PL/ROW	Center Line Setback 100'	Rear Setback 35'	CUP/Variance/COA A1
	Side Setback 20'	Side Setback 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer David Floyd Date 7/18/22		

CONTRACTOR INFORMATION	Contractor Home owners	Phone 434-270-1355
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: Replace old Deck add New Deck 20x8 21x8 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? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. 168	Total Sq. Ft. 168	
	Building Only - Excludes All Trades Permits				

Value of Work \$3500.00	Application Fee \$ 30.00
	State Levy Fee \$.60
	Septic/Well Fee \$
	Zoning Fee \$ 25.00
	RLD \$
	SWP \$
Signature of Applicant Jerry Pannell Date 7-11-22	Total \$ 55.60

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



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: 06/17/2022

Permit Number: BP-2022-00847

GPIN/Tax Map: 7727-47-3959/47-33-0-16-0

Issued: 7-28-22

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.

Site Address **2350 Greystone Court, Rockville, VA, 23146**

OWNER INFORMATION
Owner: Richmond Machinery 2350 Greystone, LLC
Address: 10614 Courtney Rd., Glen Allen, VA 23060
Phone #: [Blank]
Email: [Blank]

APPLICANT INFORMATION
Applicant/Contact: Southwood Building Systems, Inc.
Address: P.O. Box 1016, Ashland, VA 23005
Phone #: 804-363-8564
Email: tevans@southwoodbuilders.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: *Rockville Commons Park*
Proffer: Yes No
Amount: [Blank] Date Paid: [Blank]
Front Setback: *20' from PL/RW* Center Line Setback: *45'* Rear Setback: *30'* CUP/Variance/GOA: [Blank]
Side Setback: *10'* Side Setback: *10'* Flood Zone: [Blank] *M2*
APPROVED REJECTED COMMENTS: *In accordance w/ Sec. 15-286.8.*
Planning & Zoning Officer: *Daniel Floyd* Date: *7/28/22*

CONTRACTOR INFORMATION
Contractor: Southwood Building Systems, Inc.
Address: P.O. Box 1016, Ashland, VA 23005
Phone: 804-798-9225
Email: [Blank]
Contractor License Number: 2701025755 Type: CBC, H/H, RBC Expiration: 2/28/2022

DESCRIPTION OF WORK
Scope of Work: Shop Building for sales and service of construction equipment for Richmond Machinery
Proposed Use: Sales and Service Equipment
Current Use: [Blank]
Environmental Impacts (stream crossing, wetlands, amt land disturbed): *N/A*
SEWER: Public/Private
WATER: Public/Private
of Bathrooms: [Blank] # of Bedrooms: [Blank] # of floors: [Blank]
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes No
Finished Sq. Ft.: [Blank] Unfinished Sq. Ft.: [Blank] Total Sq. Ft.: *8,736 sq. ft.*

Building Only - Excludes All Trades Permits
Value of Work: \$925,000.00
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: *Tom Evans* Date: 6/17/2022
Application Fee: [Blank]
State Land Fee: [Blank]
Zoning Fee: [Blank]
RLD: [Blank]
SWP: [Blank]
Total: [Blank]
See taken in 2022



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6-21-2022

Permit Number: BP-2022-00836

GPIN/Tax Map: 7724-03-8498 / 63-1-0-174-0

Issued: 7-29-22

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>12866 Patterson Ave, Richmond, VA 23238</u>		Phone # <u>804-314-6008</u>
	Owner <u>Creekmore LLC</u>		Email <u>scametas@gmail.com</u>
	Address <u>350 Pembroke Ln, Richmond, VA 23238</u>		
APPLICANT INFORMATION	Applicant/Contact <u>Stefan Luctas</u>		Phone # <u>804-314-6008</u>
	Address <u>350 Pembroke Ln, Richmond, VA 23238</u>		Email <u>scametas@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>125' from P/R/W</u>	Center Line Setback <u>150'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>COA 2021-4</u>
	Side Setback <u>15'</u>	Side Setback <u>Rt. Side 35'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Dennis Boyd</u> Date: <u>6/30/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Building shell construction B1/B2</u>		
	Proposed Use <u>office building shell</u>	Current Use _____	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. _____	Unfinished Sq. Ft. <u>6,500</u> Total Sq. Ft. <u>6,500</u>

Building Only - Excludes All Trades Permits

Value of Work <u>\$21,000.00</u>	<u>\$572,000.00</u> <u>\$455,000.00</u>	Application Fee \$ <u>3,412.50</u>
		State Levy Fee \$ <u>68.25</u>
		Zoning Fee \$ <u>100.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>3,580.75</u>

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

Signature of Applicant: [Signature] Date: 6-21-2022



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: 6-21-2022

Permit Number: BP-2022-00837

GPIN/Tax Map: 7724-03-8498 / 63-1-0-174-0

Issued: 7-28-22

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>12806 Patterson Ave., Richmond, VA 23238</u>	
	Owner <u>Creekmore LLC</u>	Phone # <u>804-314-6008</u>
	Address <u>350 Pembroke Ln., Richmond, VA 23238</u>	Email <u>slanetas@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Stefan Llanetas</u>	
	Address <u>350 Pembroke Ln., Richmond, VA 23238</u>	Email <u>slanetas@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>125' from Pylon</u>	Center Line Setback <u>150'</u>	Rear Setback <u>25'</u>	CUP/Variance/COA <u>COA-2021-4</u>
	Side Setback <u>15'</u>	Side Setback <u>RT. Side 35'</u>	Flood Zone _____	<u>RO</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Lloyd</u> Date <u>6/30/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Building shell construction B1/B2</u>				
	Proposed Use <u>office building shell</u>	Current Use _____	Environmental impacts (stream crossing, wetlands, amt land disturbed) _____		
	SEWER Public/Private <u>Public</u>	WATER Public/Private <u>Public</u>	# of Bathrooms _____	# of Bedrooms _____	# of floors _____
	Will a foundation be installed within 20 ft. of any septic system components, including reserve drain fields? Yes (No) <u>No</u>	Finished Sq. Ft. _____	Unfinished Sq. Ft. <u>6,500</u>	Total Sq. Ft. <u>6,500</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>1,211,000.00</u>	<u>8,572,000.00</u>	<u>8,455,000.00</u>	Application Fee	\$ <u>3,412.50</u>
			State Levy Fee	\$ <u>68.25</u>
			Zoning Fee	\$ <u>100.00</u>
			RLD	\$ _____
			SWP	\$ _____
			Total	\$ <u>3,580.75</u>

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

Signature of Applicant [Signature] Date 6-21-2022



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: 6-21-2022
 Permit Number: BP-2022-00833

GPIN/Tax Map: 7724-03-8498 / 63-1-0-174-0
 Issued: 7-28-22

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>12470 Patterson Ave., Richmond, VA 23238</u>	
	Owner	<u>Creekmore LLC</u>	
	Address	<u>350 Pembroke Ln., Richmond, VA 23238</u>	
APPLICANT INFORMATION	Applicant/Contact	<u>Stefan Lanetas</u>	
	Address	<u>350 Pembroke Ln., Richmond, VA 23238</u>	
	Phone #	<u>804-314-6008</u>	

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	

N/A 125' from PLYWOOD 150' 25' COA-2021-4

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer [Signature] Date 6/30/22

CONTRACTOR INFORMATION	Contractor	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Building shell construction B1/B2</u>		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	<u>office Building shell</u>	<u>WATER</u>	# of Bathrooms # of Bedrooms # of floors
	SEWER <u>Public/Private</u>	Public/Private	
	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>\$211,000.00</u>	<u>\$372,000.00</u>	<u>\$455,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 6-21-2022

Application Fee	\$ <u>3412.50</u>
State Levy Fee	\$ <u>68.25</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>3,580.75</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: 6-21-2022
 Permit Number: BP-2022-00839
 GPIN/Tax Map: 7724-03-8498 / 63-1-0-174-0
 Issued: 7-28-22
 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: 12872 Patterson Ave, Richmond, VA 23238
 Owner: Creekmore LLC Phone #: 804-314-6008
 Address: 350 Pembroke Ln, Richmond, VA 23238 Email: Scametas@gmail.com

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

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 125' from P4/Pan Center Line Setback: 150' Rear Setback: 25' CUP/Variance/COA: COA-2021-4
 Side Setback: Lt. Side 15' Side Setback: Rt. Side 35' Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 6/30/22

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

DESCRIPTION OF WORK
 Scope of Work: Building shell construction B1/B2
 Proposed Use: Office Building shell 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.: 6,500 Total Sq. Ft.: 6,500

Building Only - Excludes All Trades Permits
 Value of Work: 4211,000.00 ~~\$ 572,000.00~~ ~~\$ 455,000.00~~
 Application Fee: \$ 3412.50
 State Levy Fee: \$ 68.25
 Zoning Fee: \$ 100.00
 RLD: \$ _____
 SWP: \$ _____
 Total: \$ 3,580.75

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: 6-21-2022



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: 6-21-2022

Permit Number: BP-2022-0084D

GPIN/Tax Map: 7724-03-8498 / 63-1-0-174-0

Issued: 7-28-22

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 12876 Patterson Ave., Richmond, VA 23238		Phone # 804-314-6008
	Owner Creekmore LLC		Email Scanetas@gmail.com
	Address 350 Pembroke Ln, Richmond, VA 23238		Phone # 804-314-6008

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 125' from P/L/ROW	Center Line Setback 150'	Rear Setback 25'	CUP/Variance/COA COW-2021-4
	Side Setback L. Side 15'	Side Setback Rt. Side 35'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Douglas Ford</u> Date: <u>6/30/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: Building shell construction A/B2				
	Proposed Use office building shell	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. 6,500	Unfinished Sq. Ft. _____	Total Sq. Ft. 6,500	

Building Only - Excludes All Trades Permits

Value of Work 1,211,000.00 \$ 572,000.00 \$ 455,000.00	Application Fee \$ 3,412.50
	State Levy Fee \$ 68.25
	Zoning Fee \$ 100.00
	RLD \$ _____
	SWP \$ _____
	Total \$ 3,580.75

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: 6-21-2022



BUILDING PERMIT APPLICATION

Application Date: **Rec. 7-14-22**

Permit Number: **BP-2022-00926**

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

GPIN/Tax Map: 42-40-0-7-0 / 6757-91-9974

Issued: **7-25-22**

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 3017 Swann's Inn Cres. Goochland, VA 23063	
	Owner Andrew Edwards	Phone # 804-380-9555
	Address same	Email drewredwards18@gmail.com

APPLICANT INFORMATION	Applicant/Contact Travis Johnson		Phone # 804-564-9097
	Address 207 Echo Meadows Rd. Rockville, VA 23146		Email legacyhomes09@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Swann's Inn	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 10' from P/R/W	Center Line Setback 65'	Rear Setback 25'	CUP/Variance/COA RS
	Side Setback 10' / 25'	Side Setback 10' / 25'	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date 7/18/22	

Planning & Zoning Officer: *[Signature]*

CONTRACTOR INFORMATION	Contractor Legacy Homes LLC		Phone 804-564-9097
	Address 207 Echo Meadows Rd. Rockville, VA 23146		Email legacyhomes09@aol.com
	Contractor License Number 2705052698	Type Class A	Expiration 10/31/23

DESCRIPTION OF WORK	Scope of Work: 16'x16' deck				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 100 sf.		
	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. 232 sf	Total Sq. Ft. 232 sf	

Building Only - Excludes All Trades Permits		Application Fee	\$ 30.00
Value of Work	\$2,500	State Levy Fee	\$.60
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 55.60
Signature of Applicant <i>[Signature]</i>		Date 6/14/22	



BUILDING PERMIT APPLICATION

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

Application Date: 7/13/22Permit Number: BP-2022-00150GPIN/Tax Map: 6777-28-7185Issued: 7/20/22

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

 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>1770 Fisher's Pond Drive</u>	
	Owner	<u>David Thompson</u>	Phone # <u>804 614 5019</u>
	Address	<u>1770 Fisher's Pond Drive</u>	Email

APPLICANT INFORMATION	Applicant/Contact	<u>PLA-Mor Construction</u>	Phone # <u>804 781-0442</u>
	Address	<u>P.O. Box 295 Mech. VA 23111</u>	Email <u>MaryAnn@pncpools.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>Breeze Hill</u>			<u>COM</u>
	Front Setback <u>40' from P/R/W</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>RP</u>

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: [Signature] Date: 7/21/22

CONTRACTOR INFORMATION	Contractor	<u>PLA-Mor Construction</u>	Phone <u>804 781-0442</u>
	Address	<u>P.O. Box 295 Mech. VA 23111</u>	Email <u>MaryAnn@pncpools.com</u>
	Contractor License Number <u>2705 091041A</u>	Type <u>Pol</u>	Expiration <u>1/31/2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>15'5" x 40' fiberglass pool with Automatic cover that meets ASTM 1346-91 code</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms
	Finished Sq. Ft.		Unfinished Sq. Ft.	Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>401.50</u>
Value of Work	<u>10165.00</u>	State Levy Fee	\$ <u>9.33</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>00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>50000</u>

Signature of Applicant: [Signature] Date: 7/13/22



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: 7/13/2022

Permit Number: BP-2022-00950

GPIN/Tax Map: 7707-80-1698 / 46-29-0-10

Issued: 7/15/22

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 520 Three Chopt Road		Phone #
	Owner David & Susan Ley		Email
	Address 520 Three Chopt Road, Manakin-Sabot, VA 23103		

APPLICANT INFORMATION	Applicant/Contact Mario Miranda - One Stop Renovation		Phone # (804) 300-1331
	Address 8723 Pine Top Drive, Henrico, VA 23294		Email mjm954@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Alvis-Keeton	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: *No change to footprint/use. A2			
	Planning & Zoning Officer: Dennis Floyd		Date: 7/21/22	

CONTRACTOR INFORMATION	Contractor One Stop Renovation		Phone (804) 300-1331
	Address 8723 Pine Top Drive, Henrico, VA 23294		Email mjm954@yahoo.com
	Contractor License Number 2705-1435893	Type C Class	Expiration 11/30/2023

DESCRIPTION OF WORK	Scope of Work: 2705143583			
	Remodel Bathroom using existing plumbing. Install Tile floor and new vanity. Build out tile shower. Remove existing window and install new transom window. Paint & finish trim.			
	Proposed Use Bathroom	Current Use Bathroom	Environmental Impacts (stream crossing, wetlands, amt land disturbed) none	
	SEWER Public/Private Private	WATER Public/Private Private	# of Bathrooms 2.5	# of Bedrooms 3
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 2,106	Unfinished Sq. Ft. 0	Total Sq. Ft. 2,106

Building Only - Excludes All Trades Permits		Application Fee	\$ 48.00
Value of Work	8,000	State Levy Fee	\$ 100.00 90
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 0
		RLD	\$
		SWP	\$
		Total	\$ 73.90
Signature of Applicant: Mario Miranda		Date: 7-14-2022	



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 7/11/22

Permit Number: BP-2022-00914

GPIN/Tax Map: 685009-6920/20-10-610

Issued: 7/25/22

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	<u>3531 Broad Street Rd., Gum Spring, VA 23065</u>		
	Owner	Phone #		
	Address	Email		
APPLICANT INFORMATION	Applicant/Contact	Phone #	<u>804 912 3331</u>	
	Address	Email	<u>exquisitepoolsinc@gmail.com</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	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: David [Signature] Date: 7/18/22

CONTRACTOR INFORMATION	Contractor	Phone	<u>804 912 3331</u>	
	Address	Email	<u>exquisitepoolsinc@gmail.com</u>	
	Contractor License Number	Type	Expiration	

Scope of Work: 684 sq ft Inground Concrete Swimming Pool 3'-8" In depth w/ fence barrier

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

Building Only - Excludes All Trades Permits

Value of Work	<u>74,385</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: 7/11/22

Application Fee	\$ <u>311.14</u>
State Levy Fee	\$ <u>6.93</u>
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>318.07</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: 7/14/22

Permit Number: B-2022-00921

GPIN/Tax Map: 6748-32-0078/41-10-1-C

Issued: 7/20/22

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	2362 Rock Castle Rd. Goochland VA. 23063	
	Owner	Douglas Gilbert	Phone # (660) 223-3547
APPLICANT INFORMATION	Address	2362 Rock Castle Rd Goochland VA 23063	
	Applicant/Contact	Scott Enroughty	Phone # (804) 241-3186
	Address	4965 Cox Rd. Glen Allen VA. 23060	Email Scott@PRSVA.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: *No change to foot print/Use A1 Planning & Zoning Officer: <u>David Boyd</u> Date: 7/18/22			

CONTRACTOR INFORMATION	Contractor	Professional Restoration Services Inc.		Phone (804) 527-2095
	Address	4965 COX Rd. Glen Allen VA. 23060		Email Scott@PRSVA.com
	Contractor License Number	Type	Expiration	
	2705 1145 76	Class A Building	4/30/23	

DESCRIPTION OF WORK	Scope of Work: Replace Broken Fly Rafter on Right Elevation of Home Due to Tree Damage. Like for Like			
	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	\$ 24,500
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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: [Date]

Application Fee	STORM
State Levy Fee	DAMAGE
Zoning Fee	DAMAGE
RLD	
SWP	
Total	fees waived



BUILDING PERMIT APPLICATION

Application Date: 6/17/2022

Permit Number: 60-0000-00833

GPIN/Tax Map: 6786-53-5914 | 55-1-0-64-C

Issued: 7/21/22

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	1498 CARDWELL RD	
	Owner	MAURIZIO BARTOLINI	
APPLICANT INFORMATION	Address	1498 CARDWELL RD, CROZIER, VA 23039	
	Applicant/Contact	GERARDO PEREZ	
	Address	1021 SPAIN DR, STAFFORD, VA 23039	
	Phone #	703-944-0530	
	Phone #	804-564-9005	
	Email	zbartolini1@gmail.com	
	Email	gfperez@live.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	---	---
	Front Setback	Center Line Setback	Rear Setback	GUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <i>No change to existing footprint/Use</i>	
Planning & Zoning Officer	<i>David Boyd</i>	Date	<i>6/29/22</i>	

CONTRACTOR INFORMATION	Contractor	GREAT DAY IMPROVEMENTS		Phone	703-944-0530
	Address	8436 KAO CIR, MANASSAS, VA 20110		Email	
	Contractor License Number	2705157137	Type	CBC/RBC	Expiration

DESCRIPTION OF WORK	Scope of Work: CONSTRUCT AN 11'x14' SUNROOM ON AN EX. DECK & EX. ROOF.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SUNROOM ADDITION	PORCH	_		
	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.	
			154		

Building Only - Excludes All Trades Permits		Application Fee	\$ 89.95
Value of Work	17,323	State Levy Fee	\$ 1.80
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	\$ 25
		RLD	\$
		SWP	\$
		Total	\$ 116.75
Signature of Applicant	<i>[Signature]</i>	Date	6/17/23



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

Permit Number: *DP-2022-00882*

GPIN/Tax Map: *6798-26-9229/338-0-1-0*

Issued: *7-20-22*

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

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

OWNER INFORMATION	Site Address <i>2552 TURKEY CREEK ROAD, Oilville, Virginia 23129 Building 2</i>	Phone # <i>804-929-5836</i>
	Owner <i>AV Properties, LLC Abhi Rathi & Vikas Rathi</i>	Email <i>VIKASRATHI@hotmail.com</i>
	Address <i>P.O. Box 4101, GLEN ALLEN, VIRGINIA 23058-4101</i>	Phone # <i>804-909-4779</i>
APPLICANT INFORMATION	Applicant/Contact <i>DAVID OGBURN. OGBURN CONSTRUCTION INC</i>	Email <i>OGBURN.David@gmail.com</i>
	Address <i>32 Cobblestone Cir, Henrico, VA 23238</i>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Oilville Bus. Park</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 footprint / use. M1</i>		
Planning & Zoning Officer <i>David Floyd</i>	Date <i>7/11/22</i>			

CONTRACTOR INFORMATION	Contractor <i>OGBURN CONSTRUCTION, INC</i>	Phone <i>804-909-4779</i>
	Address <i>32 Cobblestone Cir Henrico, VA 23238</i>	Email <i>OGBURN.David@gmail.com</i>
	Contractor License Number <i>2705043107 CBC, RBC, BLD</i>	Type <i>BLD, CBC, RBC</i>

DESCRIPTION OF WORK	Scope of Work: <i>CONSTANT INTERIOR DIVIDING WALL, ADD NEW BATHROOM for warehouse storage</i>				
	Proposed Use <i>Warehouse</i>	Current Use <i>Warehouse</i>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <i>1 New</i>	# of Bedrooms <i>0</i>	# of floors <i>1</i>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <i>1440</i>	Unfinished Sq. Ft. <i>-</i>	Total Sq. Ft. <i>1440</i>	

Building Only - Excludes All Trades Permits

Value of Work	<i>21,000.00</i>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Application Fee	\$ <i>127.50</i>
State Levy Fee	\$ <i>3.15</i>
Zoning Fee	\$ <i>100.00</i>
RLD	\$ _____
SWP	\$ _____
Total	\$ <i>260.65</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: **6-7-22**

Permit Number: **BP-2022-00778**

GPIN/Tax Map: **7723-25-6124 / 66-4-011-0**

Issued: **7-20-22**

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.

Site Address 311 Riverside Ct, Goochland VA 23233

OWNER INFORMATION
Owner: **Ting Xu** Phone #: **804-301-3000**

Address: **311 Riverside Ct. Goochland VA 23233** Email: **tingxu65@gmail.com**

APPLICANT INFORMATION
Applicant/Contact: **Affordable Electrical and Control/ Sean Ingles** Phone #: **804-916-0880**

Address: **7301 Iron Bridge Rd, North Chesterfield VA 23234** Email: **threedogfarmllc@gmail.com**

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

APPROVED REJECTED COMMENTS: *** Survey Locate Situations.**
Planning & Zoning Officer: **David / ASD** Date: **7/14/22**

CONTRACTOR INFORMATION
Contractor: **Affordable Electrical and Control** Phone: **804-218-9773**

Address: **7301 Iron Bridge Rd** Email: **affordableelectrical@yahoo.,com**

Contractor License Number: **2705085490** Type: **B- ELE/AES** Expiration: **06-30-2024**

DESCRIPTION OF WORK
Scope of Work: **ground mounted solar array system**
Install Solar panels with Unirac ballasted racking and concrete blocks per manufacturers engineering report on customers prepared gravel bed located on the rear south facing hill of the property.

Proposed Use Solar power production	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <small>No Impact, minimal ground disturbance, Customer using weed barrier under gravel to prevent unnecessary grading e</small>		
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 type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	\$27,500
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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: **F. H. Miller Jr** Date: **06/22/20**

Application Fee	\$ 135.76
State Levy Fee	\$ 2.71
Zoning Fee	\$ 25.00
RLD	\$ _____
SWP	\$ _____
Total	\$ 163.47

BUILDING PERMIT APPLICATION

Application Date: 5-26-2022 Rev 5.31.22

Permit Number: BP-2022-00700

GPIN/Tax Map: 6820-63-3518/18-1-0-65-B

Issued: 7-20-22

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

Department of Building Inspection
119
Land, VA 23063
556-5815 Fax (804) 556-5651
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.

Site Address: 3495 Davis Mill Rd Goochland VA 23063

Owner: James and Lindsay Waldrop
Phone #: 804-513-1399 3573

Address: Same
Email: JDWaldrop@live.com

Applicant/Contact: Same
Phone #: Same

Address: Same
Email: Same

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	55' from P/R/W		5'	
Side Setback	Side Setback	Flood Zone		
5'	5'	C	A1	

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: David Boyd Date: 7/15/22

Contractor: Self
Phone: 804-513-1399

Address: Same
Email: JDWaldrop@live.com

Contractor License Number: N/A Type: N/A Expiration: N/A

Scope of Work: Metal Building / Garage with concrete floor 30x41, Floor to be poured after building is up.

DESCRIPTION OF WORK	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Storage	Parking	None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
			0	0	1
Will a foundation be installed within 20 ft. of any septic system components, including reserve drain fields? Yes (No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
		1230	1230		

Building Only - Excludes All Trades Permits

Value of Work: 43,000

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant: [Signature] Date: 5-26-22

Application Fee	\$ 205.50
State Levy Fee	\$ 4.11
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 234.61

Rec: 7-7-22



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: 7/11/22
 Permit Number: 02-0022-00900
 GPIN/Tax Map: 0108-01-4869/262-0-2-E
 Issued: 7/19/22
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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 5401 RIVER RD. WEST, GOOCHLAND, VA, 23063	
	Owner ROBERT L. SUMMERS JR.	Phone # 804-314-9270
	Address 5401 RIVER RD. WEST, GOOCHLAND, VA, 23063	Email jeesummersjr@gmail.com
APPLICANT INFORMATION	Applicant/Contact LEE SUMMERS JR.	
	Address 5401 RIVER RD. WEST, GOOCHLAND, VA, 23063	Phone # SAME Email SAME

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' from P.U./ROW	Center Line Setback 125'	Rear Setback 5'	CUP/Variance/COA A1
	Side Setback 5'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>7/12/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>ERECTING GARAGE ON CONCRETE PAD. (3 CAR GARAGE)</u> <u>detached garage</u> <u>26' x 41' x 12' CEILING / BOX EAVES</u>				
	Proposed Use Personal GARAGE	Current Use STORAGE	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private N/A	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors GROUND LEVEL
	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. 1066	Unfinished Sq. Ft. 1066	Total Sq. Ft. 1066	

Building Only - Excludes All Trades Permits	Value of Work \$20,500.00	Application Fee \$ 143.92
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee \$ 2.88
Signature of Applicant <u>[Signature]</u>	Date <u>6/13/2022</u>	Zoning Fee \$ 25.00
		RLD \$
		SWP \$
		Total \$ 171.80



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: **Rec: 7-11-22**

Permit Number: **62-00022-00808**

GPIN/Tax Map: **6788-10-6949/44-260-30C**

Issued: **7/19/22**

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

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

OWNER INFORMATION	Site Address	SAME	
	Owner	Brad Berrier	Phone # 804.627.1924
APPLICANT INFORMATION	Address	1013 The Preserve Dr., Maidens, VA 23102	
	Applicant/Contact	SAME	Email Brad.berrier@ic Yahoo
	Address	SAME	Phone # SAME
			Email SAME

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	The Preserve @ Deerfield	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback	40' from P/U ROW	Center Line Setback 65'	Rear Setback	5'	CUP/Variance/COA	
	Side Setback	5'	Side Setback 5'	Flood Zone		RP	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: **David Boyd** Date: **7/12/22**

CONTRACTOR INFORMATION	Contractor	Hern Wood Works LLC	Phone	804.814.0436
	Address	1877 Nichols Rd, Powhatan, VA 23139	Email	@gmail hernwoodworks
	Contractor License Number	2705118947	Type	CBC, HIC, RBC
			Expiration	10.31.2023

DESCRIPTION OF WORK	Scope of Work: 26x44 Garage - detached			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	PARK CARS		# of Bathrooms	# of Bedrooms # of floors
	SEWER Public/Private	WATER Public/Private		
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / <input checked="" type="checkbox"/> No	Finished Sq. Ft. 1,144	Unfinished Sq. Ft. 1,144	Total Sq. Ft. 1,144

Building Only - Excludes All Trades Permits		Application Fee	\$ 372.00
Value of Work	80K	State Levy Fee	\$ 7.44
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	Brad Berrier	RLD	\$ _____
Date	7.8.2022	SWP	\$ _____
		Total	\$ 404.44

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, Brad Bernier of (address) 10137th Preserve Dr. affirm that I am the owner of a certain tract of parcel of land located at 10137th Preserve Dr. 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 Brad Bernier

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 _____ CONSTRUCTION TYPE VB OCCUPANT LOAD _____ CODE EDITION 2018

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL BH Bell DATE 7/15/2022

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6-22-22

Permit Number: 62-0002-00842

GPIN/Tax Map: 6810-45-3332/17-1-0-101A

Issued: 7/19/22

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

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

OWNER INFORMATION	Site Address <u>2977 Hadensville-Fife Rd Goochland VA</u>	
	Owner <u>Michael Healy</u>	Phone # <u>804 543-7733</u>
	Address <u>2977 Hadensville-Fife Rd Goochland VA</u>	Email <u>mhealy@vcu.edu</u>
APPLICANT INFORMATION	Applicant/Contact <u>804 543-7733</u>	
	Address <u>Above Address</u>	Phone # <u></u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>---</u>	Date Paid <u>---</u>
	Front Setback <u>75' from P4 ROW</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>---</u>
	Side Setback <u>20'</u>	Side Setback <u>30'</u>	Flood Zone <u>---</u>	

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: David Floyd Date: 7/7/22

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

DESCRIPTION OF WORK	Scope of Work: <u>Addition of 5ft x 2ft porch (covered), Expanded 2 window openings back & side</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>30.00</u>
Value of Work	<u>\$450.00</u>	State Levy Fee	\$ <u>60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ <u>---</u>
Signature of Applicant: <u>Michael Healy</u> Date: <u>6-22-22</u>		SWP	\$ <u>---</u>
		Total	\$ <u>55.00</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, Michael Healy of (address) 2977 Hadensville Fife Rd affirm that I am the owner of a certain tract of parcel of land located at 2977 Hadensville Fife Rd 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.

Michael Healy 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 1 CONSTRUCTION TYPE VB OCCUPANT LOAD --- CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROCKING DATE 7-15-22

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

Application Date: 06/24/22

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

Permit Number: BP-2022-00022

GPIN/Tax Map: 51-2-0-1-A | 673641-3102

Issued: 7/15/22

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.

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 1050 Grace Lane, Goochland, VA 23063		Phone # 804-457-4604
	Owner Evelyn Clay		Email roflynscorner@yahoo.com
	Address 1050 Grace Lane, Goochland, VA 23063		

APPLICANT INFORMATION	Applicant/Contact Angela Martin-Whatley		Phone # 804-621-7004
	Address 2410 Southland Drive, Chester, VA 23831		Email angela.martinwhatley@jeswork.com

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

Planning & Zoning Officer: [Signature] Date: 7/15/22

CONTRACTOR INFORMATION	Contractor JES Construction LLC		Phone 804-495-4646
	Address 2410 Southland Drive, Chester, VA 23831		Email chesterpermits@jeswork.com
	Contractor License Number 2705068655	Type A	Expiration 04/30/24

DESCRIPTION OF WORK	Scope of Work: Installing 7 push piers to existing foundation for stabilization				
	Proposed Use Dwekkubg	Current Use Dwekkubg	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER <input type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 77		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>75.00</u>
Value of Work <u>\$11,000</u>		State Levy Fee \$ <u>1.52</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$ _____
Signature of Applicant <u>[Signature]</u>	Date <u>7-14-22</u>	Zoning Fee \$ <u>00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>102.52</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: 7-5-22

Permit Number: BP-2022-00902

GPIN/Tax Map: 0117-17-4578/43-39-0-19-0

Issued: 7/15/22

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 2318 Lanes End Place Maidens, VA 23102		Phone # 804-385-9670
	Owner Mary Ann Morton		Email Maryann.Morton@capitalone.com
	Address 2318 Lanes End Pl. Maidens, VA 23102		Phone # 804-240-1413
APPLICANT INFORMATION	Applicant/Contact Alianza Construction Inc / Servando Casas		Email alianzaconstinc@gmail.com
	Address 2420 Old Brick Rd apt 1316 Glenn Allen, VA 23060		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Lanes End	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 40' from P/R/W	Center Line Setback 65'	Rear Setback 5'	CUP/Variance/COA RP
	Side Setback 5'	Side Setback 5'	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Boyd Date: 7/12/22

CONTRACTOR INFORMATION	Contractor Alianza Construction Inc		Phone 804-240-1413
	Address 2420 Old Brick Rd Apt 1316 Glen Allen, VA 23060		Email alianzaconstinc@gmail.com
	Contractor License Number 2705142532	Type A	Expiration 8/31/2023

DESCRIPTION OF WORK	Scope of Work: Installation of 18x36 Inground Swimming Pool (vinyl) w/ fence barrier				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 648	Unfinished Sq. Ft. 648	Total Sq. Ft. 648	

Building Only - Excludes All Trades Permits
 Value of Work: \$10,000 ~~\$17,820.00~~ \$17,820.00

Application Fee	\$ 02.19
State Levy Fee	\$ 18.21
Zoning Fee	\$ 00
RLD	\$
SWP	\$
Total	\$ 119.03

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: 7/15/22



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: 06/23/2022

Permit Number: 2022-00876

GPIN/Tax Map: 7726-06-1088 / 58-420-16-0

Issued: 7/15/22

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.

Site Address: **1604 Centerville Parke Ln., Manakin-Sabot, VA, 23103**

Owner: **Michael Crone** Phone #: **804-708-0654**

Address: **1604 Centerville Parke Ln., Manakin-Sabot, VA, 23103** Email: **N/A**

Applicant/Contact: **Mark Keffer/Jodi Irwin** Phone #: **8043185002**

Address: **13509 E Boundary Rd. Suite G, Midlothian, VA, 23112** Email: **Info@Kefficient.com**

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

Planning & Zoning Officer: David Boyd Date: 7/11/22

Contractor: **Kefficient LLC** Phone: **8043185002**

Address: **13509 E Boundary Rd. Suite G, Midlothian, VA, 23112** Email: **Info@Kefficient.com**

Contractor License Number: **2705163415** Type: **HIC/Class A** Expiration: **02/28/2023**

Scope of Work: **Crawl Space Encapsulation 2018 2015 IRC/VRC**

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.	
			2003	

Building Only - Excludes All Trades Permits

Value of Work	18225.91	Application Fee	\$ <u>20.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee	\$ <u>1.88</u>
		Zoning Fee	\$ <u>20</u>
		RLD	\$ _____
		SWP	\$ _____
Signature of Applicant: <u>Mark Keffer</u> Date: <u>06/28/2022</u>		Total	\$ <u>120.98</u>

RS VB 2018 2018 7/13/2022



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: 6/3/22

Permit Number: BP-2022-00843

GPIN Tax Map: 6798-35-8397 | 33-10-9-F

Issued: 7/15/22

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>2535 Oilville rd. Rockville, VA 23146</u>	
	Owner	<u>Hope Dandridge</u>	Phone # <u>(804) 248-1939</u>
APPLICANT INFORMATION	Address	<u>2535 Oilville rd. Rockville, VA 23146</u>	
	Applicant/Contact	<u>Jose Vargas</u>	Phone # <u>(540) 603-8045</u>
	Address	<u>1832 Factory mill rd. Bumpass VA 23024</u>	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>William Vick</u>			
	Front Setback <u>75</u>	Center Line Setback	Rear Setback	CUP/Variance/COA <u>A2</u>
	Side Setback	Side Setback	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* No change to footprint/use.</u>				
Planning & Zoning Officer: <u>[Signature]</u> Date: <u>6/30/22</u>				

CONTRACTOR INFORMATION	Contractor	<u>Jose Vargas J&J General Construction LLC</u>		Phone <u>(540) 603-8045</u>
	Address	<u>1832 Factory mill rd. Bumpass VA 23024</u>		Email <u>J.J.Gen Construction@gmail.com</u>
	Contractor License Number	<u>2705174324</u>	Type <u>RBC Class B</u>	Expiration <u>12-31-2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Frame off of existing Deck for a roof attached to The house</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$9,700</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: 6-23-2022

Application Fee	\$ <u>85.00</u>
State Levy Fee	\$ <u>1.11</u>
Zoning Fee	\$ <u>25</u>
RLD	\$
SWP	\$
Total	\$ <u>81.10</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: 6/16/22

Permit Number: BP-2022-00823

GPIN/Tax Map: 6761-11-6375-9999/42-10-112-0

Issued: 7/15/22

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 2004-2900 River Road, Goochland VA 23603	Phone # 908-458-2509
	Owner Hunter Communications	Email mhunter@huntercomms.com
	Address 4400 Costello Way, Haymarket VA 20169	

APPLICANT INFORMATION	Applicant/Contact T-Mobile Northeast LLC	Phone # 804-548-4079
	Address 200 Westgate Parkway, Richmond VA 23233	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	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: No change to footprint/use. B1/A2			
	Planning & Zoning Officer: David Amory Date: 7/1/22			

CONTRACTOR INFORMATION	Contractor NB&C Technical Services LLC	Phone 704-517-1980
	Address 6095 Marshalee Drive, Suite 300, Elkridge MD 21075	Email damory@nbcllc.com
	Contractor License Number 2705152498	Type Class A

DESCRIPTION OF WORK	Scope of Work: Add 6 antennas to existing 170-foot rad center, move 3 existing antennas from 170-feet to 190-foot rad center, move 3 existing RRUs to 190-foot rad center, add 3 RRUs to 190-foot rad center, add 3 hybrid				
	Proposed Use wireless communications	Current Use wireless communications	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	\$ 262.50
Value of Work	\$35,000	State Levy Fee	\$ 5.00
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.		Zoning Fee	\$ 50
		RLD	\$
		SWP	\$
		Total	\$ 317.50
		Signature of Applicant	David Amory



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: 6/8/21

Permit Number: BP-2021-00705

GPIN/Tax Map: 58-2-0-3-0 (TM)
7726-26-8604 (BPIW)

Issued: 6/17/2021

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

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

OWNER INFORMATION	Site Address	<u>1584.00 Whipoorwill rd.</u>	
	Owner	<u>William Landis</u>	Phone # <u>804 869 7474</u>
APPLICANT INFORMATION	Address	<u>1586 Whipoorwill Rd</u>	Email <u>wsjmgmt@yahoo.com</u>
	Applicant/Contact		Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>Samary Forest</u>	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Varlance/COA
	<u>40' from Pk Row</u>	<u>65'</u>	<u>25'</u>	
Side Setback	Side Setback	Flood Zone	<u>RN</u>	
	<u>10'/25'</u>	<u>10'/25'</u>		
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer: <u>David Boyd</u>			Date: <u>6/10/21</u>	

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

DESCRIPTION OF WORK	Scope of Work: <u>detached GARAGE 36x28</u>				
	<u>REMOVED 7.13.22 - SCREEN PORCH & FRONT ROOF 870 sq. ft.</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>SEWER Public/Private</u>	<u>WATER Public/Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	<u>1</u>	<u>0</u>	<u>2</u>		
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>1008</u>	<u>1008</u>	<u>1878</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>40,000</u>	<u>61,035.00</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: [Signature] Date: 6/8/21

Application Fee	\$ <u>192.00</u>
State Levy Fee	\$ <u>3.84</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>2500</u>
RLD	\$
SWP	\$
Total	\$ <u>22084</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10-1-2021

Permit Number: BP-2021-01208

GPIN/Tax Map: 7707-90-7617 / 46-32-0-3-0

Issued: 7-14-22

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 <u>465 Broad Street Rd Manakin-Sabot, VA 23103</u>	
	Owner <u>Salem Baptist Church</u>	Phone # <u>804-784-1919</u>
	Address <u>465 Broad St Rd</u>	Email <u>Kim@salembaptistchurch.info</u>

APPLICANT INFORMATION	Applicant/Contact <u>Kim Bunge</u>		Phone # <u>804-399-9772</u>
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>100' from P/R/W</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>10/8/21</u>			

CONTRACTOR INFORMATION	Contractor <u>Salem Baptist Church</u>		Phone
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>20 x 30 storage addition to the pavilion</u>				
	Proposed Use <u>Storage</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>600</u>	Total Sq. Ft. <u>600</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>20,500</u>	Application Fee \$ <u>153.74</u>
	State Levy Fee \$ <u>308</u>
	Zoning Fee \$ <u>100.00</u>
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>256.82</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 Kim Bunge Date 8/6/21



BUILDING PERMIT APPLICATION

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

Application Date: 6/29/22

Permit Number: 67-0000-0000

GPIN/Tax Map: 6767-01-3267 / 42-40-0-29-0

Issued: 7/13/22

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

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	2884 Swann's Peak Cove, Goochland, VA 23063	
	Owner	Swann's Inn LLC/Travis W Johnson	Phone # 804-564-9097
	Address	207 Echo Meadows Rd. Rockville, VA 23146	Email legacyhomes09@aol.com

APPLICANT INFORMATION	Applicant/Contact	Travis W Johnson	Phone # 804-564-9097
	Address	207 Echo Meadows Rd. Rockville, VA 23146	Email legacyhomes09@aol.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>Survey Location</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>6/29/22</u>			

CONTRACTOR INFORMATION	Contractor	Legacy Homes LLC	Phone 804-564-9097
	Address	207 Echo Meadows Rd. Rockville, VA 23146	Email legacyhomes09@aol.com
	Contractor License Number	2705052698	Type Class A Expiration 10/31/2023

DESCRIPTION OF WORK	Scope of Work: New construction - 22'x22' detached garage				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Garage		1,000		
	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.	Unfinished Sq. Ft.	Total Sq. Ft.		
	0	484	484		

Building Only - Excludes All Trades Permits

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

Signature of Applicant: [Signature] Date: 6/29/2022

Application Fee	\$ <u>100</u>
State Levy Fee	\$ <u>200</u>
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>100.00</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Johnson & Johnson Attorneys at Law, P.C. Telephone: 804-556-4012

Mailing Address: PO Drawer 100, Rockville, VA 23146

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

ACCESSORY

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL B Hall DATE 7.12.22

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6-10-22

Permit Number: BP-2022-00780

GPIN/Tax Map:

6NS8-61-2825/42-33-E-11-0

Issued: 7-13-22

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

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

OWNER INFORMATION	Site Address	<u>2501 Crest Hollow Cir Goochland VA 23063</u>	
	Owner	<u>Rodney C. Baker</u>	Phone # <u>813.525.0963</u>
	Address	<u>2501 Crest Hollow Cir Goochland 23063</u>	Email <u>baker.rodney@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact	<u>Rodney Baker</u>	Phone # <u>813.525.0963</u>
	Address	<u>2501 Crest Hollow Cir Goochland 23063</u>	Email <u>baker.rodney@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	<u>Holland Hills</u>	<u>65'</u>	<u>5'</u>	<u>101</u>

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer [Signature] Date 6/24/22

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

DESCRIPTION OF WORK	Scope of Work: <u>Detached Garage 42' x 26'</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.	# of floors	Total Sq. Ft.
		<u>1,092</u>	<u>1,092</u>	<u>2</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>75K</u>
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Application Fee	\$ <u>349.50</u>
State Levy Fee	\$ <u>6.99</u>
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 [Signature] Date 6/10/22



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

Residential Commercial

Application Date: 6/22/22
 Permit Number: BP-2022-00809

GPIN/Tax Map: 6108-19-0092 / 26-2-0-2-C

Issued: 7-13-22

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

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

OWNER INFORMATION	Site Address	2211 Elk Hill Rd	
	Owner	Allison Tolson	Phone #
	Address	2211 Elk Hill Rd	Email

APPLICANT INFORMATION	Applicant/Contact	Paul Davis Restoration West Richmond	Phone #	804 330 9500
	Address	2119 Dabney Rd Richmond VA 23230	Email	Karen.stephens@pauldavis.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	N/A	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback		Center Line Setback		Rear Setback		CUP/Variance/COA	
	Side Setback		Side Setback		Flood Zone		A1	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: No change to Footprint / Use.			Date: 6/27/22		

Planning & Zoning Officer: *[Signature]*

CONTRACTOR INFORMATION	Contractor	Paul Davis Restoration West Richmond		Phone	804 330 9500
	Address	2119 Dabney Rd Richmond VA 23230		Email	Karen.stephens@pauldavis.com
	Contractor License Number	2705172676	Type	CLASS A RBC	Expiration

DESCRIPTION OF WORK	Scope of Work: Repair Roof Framing damaged by Tree					
	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	\$	<i>fees</i>
Value of Work	54,000.00	State Levy Fee	\$	<i>waived</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$	<i>waived</i>
		RLD	\$	<i>waived</i>
		SWP	\$	<i>waived</i>
		Total	\$	<i>storm damage</i>
Signature of Applicant: <i>[Signature]</i>		Date: _____		



BUILDING PERMIT APPLICATION

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

Application Date: 6-13-2022

Permit Number: BP-2022-00800

GPIN/Tax Map: 7124-74-4097/04-29-0-5

Issued: 7/13/22

Residential Commercial

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

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

Site Address: 5026 GATHER ROAD

Owner: Bristol Oak Hill Partners LLC Phone #

Address: 381 Mallory Station Road, Franklin, TN Email

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	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> </u>			

Planning & Zoning Officer: Daniel Pugh Date: 6/27/22

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

Scope of Work: In Ground Pool

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>SEWER</u> Public/Private	<u>WATER</u> 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 type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			<u>1082</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$186,157.00

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

Signature of Applicant: [Signature] Date: 6-14-22

Application Fee	\$ <u>1396.18</u>
State Levy Fee	\$ <u>2702</u>
Zoning Fee	\$ <u>100</u>
RLD	\$
SWP	\$
Total	\$ <u>1524.18</u>



BUILDING PERMIT APPLICATION

Application Date: 06/27/2022

Permit Number: BR-2022-00857

GPIN/Tax Map: T126-51-UP160/48-30-3-0

Issued: 7/12/22

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	12689 PAMELA LANE	
	Owner	CHERIE BULLINGTON	Phone # 8043179032
	Address		Email
APPLICANT INFORMATION	Applicant/Contact	RIVERS SPENCE	
	Address		Phone # 4349819618 Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>Bellview Meadows</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 footprint/use. RI</u>				
Planning & Zoning Officer: <u>Daniel Long</u> Date: <u>7/5/22</u>				

CONTRACTOR INFORMATION	Contractor	R G ROBERTS CONSTRUCTION LLC	Phone 8048882575
	Address	3770 TILMANS FARM DRIVE POWHATAN, VA 23139	
	Contractor License Number	<u>2705166360</u>	Type <u>A</u> Expiration <u>2024-05-31</u>

DESCRIPTION OF WORK	Scope of Work: HOME RENOVATION FOR HANDICAP PERSON.			
	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>\$30,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Rivers Spence Date 06/28/2022

Application Fee	\$ <u>100</u>
State Levy Fee	\$ <u>200</u>
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>300</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: 6-30-22

Permit Number: BP 2022-00861

GPIN/Tax Map: 4823-71-9411/6-1-0-20-0

Issued: 7-12-22

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 Broad St. Louisa, VA 23093			
	Owner Country Corner Stores / A. Ali		Phone # 804-503-6164	
	Address 11708 Norwich Ct. Glen Allen, VA 23059		Email Cooper@cstores.net	
APPLICANT INFORMATION	Applicant/Contact Jessica Marion / K & D Signs Llc		Phone # 336-789-4074 Ext. 106	
	Address PO Box 1546 Mount Airy, NC 27030		Email jessica@kdsignllc.com	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>No change in Footprints / use. B1</u>		
	Planning & Zoning Officer <u>David Floyd</u>	Date <u>7/5/22</u>		
CONTRACTOR INFORMATION	Contractor K & D Signs LLC		Phone 336-789-4074 Ext. 106	
	Address PO Box 1546 Mount Airy, NC 27030		Email jessica@kdsignllc.com	
	Contractor License Number 2705162507	Type Class C / Classifications BSC	Expiration 07/31/2023	
DESCRIPTION OF WORK	Scope of Work: Citgo Conversion: Adding 4 sq ft. wordmark to existing canopy, Installing 4x8 single pole sign system on existing foundation			
	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.

Building Only - Excludes All Trades Permits

Value of Work: 1100.00

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>80.60</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: Jessica Marion Date: 06/20/2022



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: 5.16.22
 Permit Number: BP-2022-00639
 GPIN/Tax Map: 0725-33-0619-9999/58-32-3-A-D
 Issued: 7.12.22
 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>15000 Capital One Drive, West Creek Campus, Richmond, VA 23238</u>	
	Owner <u>Capital One Services</u>	Phone # <u>540-872-8325</u>
	Address <u>15000 Capital One Dr., Richmond, VA 23238</u>	Email <u>richard.bergey@capitalone.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Mark Turner Construction / Ashley Arrowood</u>	
	Address <u>10474 Cobbs Rd., Glen Allen, VA 23059</u>	Phone # <u>804-499-9549</u> Email <u>aarrowood@markturnerconstruction.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	mi _____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to floor plans / use.</u> Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>5/19/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Mark Turner Construction</u>		Phone <u>804-998-0068</u>
	Address <u>10474 Cobbs Rd., Glen Allen, VA 23059</u>		Email <u>aarrowood@markturnerconstruction.com</u>
	Contractor License Number <u>2705164039</u>	Type <u>Class A, Commerical</u>	Expiration <u>6/30/23</u>

DESCRIPTION OF WORK	Scope of Work: <u>Interior Renovations. install walls for warehouse at cap on.</u>				
	Proposed Use <u>Office Space</u>	Current Use <u>Office Space</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>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.	Unfinished Sq. Ft.	Total Sq. Ft. <u>1,335 SF</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ ²⁵⁵⁰ <u>2,550.00</u>
Value of Work	\$ <u>340,000.00</u>	State Levy Fee	\$ ⁵¹ <u>51.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>[Signature]</u> Date <u>5/19/22</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ ¹⁰⁰ <u>100.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ ^{2401.00} <u>2,701.00</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: 6/24/22
 Permit Number: BP-2022-00862
 GPIN/Tax Map: 6757-95-5175 42-2-02-A
 Issued: 7-11-22

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>3043 River Road West, Goochland</u>	
	Owner <u>Keith & Nancy Russell</u>	Phone # <u>804-556-3435</u>
	Address <u>3043 River Road West, Goochland</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Daniel Gordon</u>	Phone # <u>804-437-4231</u>
	Address <u>2945 River Road West, Goochland, VA 23063</u>	Email <u>gordonbrothersconstruction@yahoo.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint/use</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>7/5/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>Rebuild Gorge roof, dormer, siding, misc From Storm Damage</u>		
	Proposed Use <u>SFD</u>	Current Use <u>SFD</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>3</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	# of Bedrooms <u>3</u>

Building Only - Excludes All Trades Permits

Value of Work <u>50,000</u>	Application Fee \$
	State Levy Fee \$
	Septic/Well Fee \$
	Zoning Fee \$
	RLD \$
	SWP \$
	Total \$ <u>-0-</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: 6/24/22



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: June 21, 2022

Permit Number: BP-2022-00826

GPIN/Tax Map: 7123-44-2530/66-10-10-0

Issued: 7/11/22

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>1 Partridge Hill Farm, ^{Road} Goochland, Va.</u>	Phone # <u>804) 683-3366</u>
	Owner <u>Caroline Thompson</u>	Email <u>carolinemcthompson@gmail.com</u>
APPLICANT INFORMATION	Address <u>1 Partridge Hill Farm</u>	Phone # <u>804) 467-7991</u>
	Applicant/Contact <u>John Cronly, Hampden Hill Custom Bldg</u>	Email <u>johnhampdenhillcb.com</u>
	Address <u>1706 Roseneath Rd., Richmond, Va. 23230</u>	

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

CONTRACTOR INFORMATION	Contractor <u>Hampden Hill Custom Building, LLC</u>	Phone <u>804) 355-1484</u>
	Address <u>1706 Roseneath Road, Richmond, Va 23230</u>	Email <u>johnhampdenhillcb.com</u>
	Contractor License Number <u>2705129852</u>	Type <u>Class A Contractor</u>

DESCRIPTION OF WORK	Scope of Work: <u>Demolition of old house. We will start with tearing off the slate roof, then pulling all the cobblestones and then tearing down the house.</u>				
	Proposed Use <u>SFD</u>	Current Use <u>SFD</u>	Environmental Impacts (stream crossing, wetlands, and land disturbed) <u>none</u>		
	SEWER <u>Public</u> <input checked="" type="checkbox"/> <u>Private</u> <input type="checkbox"/>	WATER <u>Public</u> <input checked="" type="checkbox"/> <u>Private</u> <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors <u>Debris will be taken by trailer to Ashlake</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 14,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 6/21/2022

Application Fee	\$ _____
State Levy Fee	\$ <u>1.50</u>
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>76.50</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: 6-14-22

Permit Number: BP-2022-00819

GPIN/Tax Map: 6860-01-2018/21-3-0-2-A

Issued: 7/11/22

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>3041 Three Chopt Rd.</u>		Phone # <u>804-641-4067</u>
	Owner <u>TRAVIS BROOKS</u>		Email <u>travisbrooks14@hotmail.com</u>
	Address <u>3041 Three Chopt Rd.</u>		Phone # <u>804-994-3429</u>
APPLICANT INFORMATION	Applicant/Contact <u>DAN SWOODE (BNW BUILDERS)</u>		Email <u>DAN@bnwbuilders.com</u>
	Address <u>8601 Staples Mill Rd.</u>		Phone # <u>804-994-3429</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	_____
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint/use.</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>6/28/22</u>			

CONTRACTOR INFORMATION	Contractor <u>BNW BUILDERS</u>		Phone <u>804-994-3429</u>
	Address <u>8601 Staples Mill Rd.</u>		Email <u>DAN@bnwbuilders.com</u>
	Contractor License Number <u>2106108050</u>	Type <u>CLASS A</u>	Expiration <u>6/30/24</u>

DESCRIPTION OF WORK	Scope of Work: <u>To Remove old PATIO Door (5'6") and open up opening and install header and engineered Ratchet Plate for 10' Patio door.</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 / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>15,000</u>
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Application Fee	\$ <u>79.50</u>
State Levy Fee	\$ <u>1.59</u>
Septic/Well Fee	\$ _____
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: [Signature] Date: 6-13-22



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: 6/23/22
Permit Number: 60-2022-00818

GPIN/Tax Map: 6002-84-5701/13-24-0-15-0

Issued: 7/11/22

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 A951 AUSTIN LANE		Phone #
	Owner SCOTT PASCHALL		Email
	Address SAME		
APPLICANT INFORMATION	Applicant/Contact JIM DAVIDSON		Phone # 804-307-6168
	Address		Email JBDAYIDSON@AOL.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Boundary Run	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 35' from PAVEN	Center Line Setback 80'	Rear Setback 35'	CUP/Variance/COA
	Side Setback Left Side 35' Rt. Side 30'	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date 6/28/22	

Planning & Zoning Officer: David [Signature]

CONTRACTOR INFORMATION	Contractor SUNDZUKS OF RICHMOND		Phone 804-307-6168
	Address 607 FORDS ROAD		Email JBDAYIDSON@AOL.COM
	Contractor License Number 2703010218	Type B	Expiration 04/2024

Scope of Work: CONVERT DECK TO SUN ROOM

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		204	204	

Building Only - Excludes All Trades Permits

Value of Work 16,300	Application Fee \$ 86.04
	State Levy Fee \$ 1.13
	Zoning Fee \$ 20
	RLD \$
	SWP \$
	Total \$ 112.97

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: 6.23.22

6-16-22



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: 6/15/2022

Permit Number: 62-0062-00834

GPIN/Tax Map: 6716-07-2948/43-230-9-0

Issued: 7/11/22

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 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.

Site Address **2021 Covington Road, Crozier, VA 23039**

Owner **Pete & Pam Korpady** Phone # **703-980-5051**

Address **2021 Covington Road, Crozier, VA 23039** Email

Applicant/Contact **Travis Jowers / Ultimate Pools** Phone # **804-749-4706**

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

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

Planning & Zoning Officer David Floyd Date 6/29/22

Contractor **Ultimate Pools** Phone **804-749-4706**

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

Contractor License Number **2705026339** Type **CBC RBC RFC** Expiration **2/28/2023**

Scope of Work: **20' x 50' In-Ground Gunite Pool with Auto Cover**

Proposed Use	Current Use	Existing Buildings on Property	# of Floors
SEWER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	WATER <input type="checkbox"/> Public/Private <input checked="" type="checkbox"/>	# of Bathrooms	# of Bedrooms
Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1000	

Building Only - Excludes All Trades Permits
Value of Work **30,000**

Application Fee	\$ <u>147</u>
State Levy Fee	\$ <u>2.00</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>149</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 6/15/2022



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: 6/21/22

Permit Number: BP-2022-0028

GRIN/Tax Map: 0032-03-7189 | 12-130-1-0

Issued: 7/8/22

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	<u>4315 Broad Street Rd, Gum Spring VA 23065</u>	
	Owner	<u>Ronnie L. Benjamin + Charlene Benjamin</u>	Phone # <u>804-513-3319</u>
	Address	<u>SAME AS ABOVE</u>	Email <u>CLPB47@GMail.com</u>
APPLICANT INFORMATION	Applicant/Contact	<u>Ronnie L. Benjamin</u>	Phone # <u>SAME</u>
	Address	<u>SAME AS ABOVE</u>	Email <u>SAME</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<u>Ham-Lin Oaks</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 footprint/use.</u>		
Planning & Zoning Officer: <u>Daniel [Signature]</u>		Date: <u>6/30/22</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>REMODEL BATHROOM, ENLARGE SHOWER, MOVE LAUNDRY WASHER + DYER UPstairs</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>\$5000.</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: 06/21/2022

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.69</u>
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>35.19</u>

60.19



BUILDING PERMIT APPLICATION

Application Date: **6-21-22**Permit Number: **BP-2002-00822**GPIN/Tax Map: **T38-20-0783/48-7-0-7-0**Issued: **7/8/22**

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.

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	7033 Benhall Circle	Phone #	804-380-3573
	Owner	Veronica Fleming (Baptiste)	Email	vbaptiste@me.com
	Address	7033 Benhall Circle	Phone #	804-994-3429
APPLICANT INFORMATION	Applicant/Contact	DAN Swords II	Email	DAN@bnwbuilders.com
	Address	8601 Staples Mill Rd.		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Parkside Village	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback	30' from Pavement	Center Line Setback		Rear Setback	50' B/S	CUP/Variance/COA	
	Side Setback	20' B/S	Side Setback	20' B/S	Flood Zone		RPUB	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:	Planning & Zoning Officer: <u>Daniel Fey</u>			Date	6/30/22

CONTRACTOR INFORMATION	Contractor	BNW Builders	Phone	804-994-3429
	Address	8601 Staples Mill Rd.	Email	DAN@bnwbuilders.com
	Contractor License Number	2705108250	Type	CLASS A

Scope of Work: To build a new 26' wide x 12' out deck with a 16' x 12' screen porch. 20" x 20" brick piers for support. PVC decking and Aluminum powder coated handrails.

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.	
	312		312	

Building Only - Excludes All Trades Permits

Value of Work	56,670.00
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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: Dan Swords Date: 4-13-22

Application Fee	\$ 861.00
State Levy Fee	\$ 6.34
Zoning Fee	\$ 25
RLD	\$
SWP	\$
Total	\$ 912.34

6-16-22



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: 6/10/22

Permit Number: BP-2022-00821

GPIN/Tax Map: 7120-23-5898/58-55-3-32-0

Issued: 7/8/22

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.

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: 12311 Beech Hall Cir, Manakin-Sabot, Virginia, 23103

Owner: **Gail Wright** Phone #: (617) 596-6178

Address: 12311 Beech Hall Cir, Manakin-Sabot, Virginia, 23103 Email: gwright43@gmail.com

APPLICANT INFORMATION

Applicant/Contact: **Tegan Barrow** Phone #: 888-781-7074

Address: 4081 N University Ave, Ste 900, Provo, UT 84604 Email: permits@ionsolar.com

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED COMMENTS: No change to footprints/use. RPUH

Planning & Zoning Officer: David Boyd Date: 6/29/22

CONTRACTOR INFORMATION

Contractor: **ION DEVELOPER LLC** Phone: 888-781-7074

Address: 4081 N University Ave, Ste 900, Provo, UT 84604 Email: permits@ionsolar.com

Contractor License Number: 2705169798 Type: Class A Expiration: 8/31/2023

DESCRIPTION OF WORK

Scope of Work: Installation of solar panels on existing residential roof. 4.94 kW. Addition of [1] 0-30A circuits.

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

Building Only - Excludes All Trades Permits

Value of Work	\$5,928.00
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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: Tegan Barrow Date: 6/10/22

Application Fee	\$ <u>38.68</u>
State Levy Fee	\$ <u>7.11</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>64.45</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: **6-23-22**
Permit Number: **BP-2022-00858**
GPIN/Tax Map: **6700-63-0093 | 09-20-0-3-0**
Issued: **7/8/22**
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	3775 Bell Rd Goochland VA 23063	
	Owner	Len R Griffie	Phone # 804-337-1188
APPLICANT INFORMATION	Address	3775 Bell Rd Goochland VA 23063	
	Applicant/Contact	Same	Email Nealiericky@aim.com
	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 6/28/22
	Planning & Zoning Officer	David Perry		

CONTRACTOR INFORMATION	Contractor	Phone
	Address	Email
	Contractor License Number	Type
		Expiration

DESCRIPTION OF WORK	Scope of Work: 20x30 Pre fab Building Electrical for garage		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private	WATER Public/Private	# of Bathrooms # of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.

Building Only - Excludes All Trades Permits

Value of Work	\$3,000 16,500
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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 **Len R Griffie** Date **5-6-22**

Application Fee	\$ 80.24
State Levy Fee	\$
Septic/Well Fee	\$
Zoning Fee	\$ 20
RLD	\$
SWP	\$
Total	\$ 112.97



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: 6/15/22

Permit Number: BP-2022-00820

GPIN/Tax Map: 6798-35-9132/331-0-9-0

Issued: 7/8/22

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 <u>2547 Oilville Rd</u>		Phone #
	Owner <u>Michael Leabaugh</u>		Email
	Address <u>2547 Oilville Rd</u>		Phone # <u>804 914 5977</u>
APPLICANT INFORMATION	Applicant/Contact <u>VICTOR MORRISON</u>		Email <u>VICMORRISON@MSN.COM</u>
	Address <u>14241 Mclothian Trpk</u>		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>William D. Vick Jr.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* No change to footprints/use.</u> A2			
Planning & Zoning Officer <u>David Floyd</u>		Date <u>6/28/22</u>		

CONTRACTOR INFORMATION	Contractor <u>Unlimited Builders LLC</u>		Phone <u>804 914 5977</u>
	Address <u>14241 Mclothian Trpk</u>		Email <u>VICMORRISON@MSN.COM</u>
	Contractor License Number <u>2705172896</u>	Type <u>BLD</u>	Expiration <u>8-31-23</u>

DESCRIPTION OF WORK	Scope of Work: <u>1 Remove two walls to open floor plan by using a LVL beam. 2 Replace damaged floor joist. 3 Build a new treated wood front porch 6x6 over existing concrete porch. Not adding any additional sq footage.</u>				
	Proposed Use <u>SFH</u>	Current Use <u>SFH</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>150</u>	Unfinished Sq. Ft. <u>N/A 150</u>	Total Sq. Ft. <u>150</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>39.00</u>
Value of Work	<u>\$ 6,000</u>	State Levy Fee	\$ <u>78</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
Signature of Applicant <u>[Signature]</u> Date <u>6/15/22</u>		SWP	\$
		Total	\$ <u>64.78</u>

Email Receipt



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: 6/27/22

Permit Number: B-2022-00830

GPIN/Tax Map: 715-50-4500 / 0310-02-0

Issued: 7/8/22

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	700 SWEAD RD MANAKIN SABOT	Phone #	804 819 9638
	Owner	NICOLE TYRELL	Email	nicoletyrell3152@gmail.com
	Address	700 SWEAD RD MANAKIN-SABOT	Phone #	

APPLICANT INFORMATION	Applicant/Contact	SAME	Email	
	Address		Phone #	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	N/A	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback	15' from P/W	Center Line Setback	100'	Rear Setback	5'	CUP/Variance/COA	
	Side Setback	5'	Side Setback	5'	Flood Zone		A2	
	APPROVED	<input checked="" type="checkbox"/>	REJECTED	<input type="checkbox"/>	COMMENTS:			

Planning & Zoning Officer: David Floyd Date: 6/29/22

CONTRACTOR INFORMATION	Contractor	OWNER	Phone	434-770-3455
	Address	2112 HALIFAX RD DANVILLE, VA 24040	Email	homesteadshedsusa.com
	Contractor License Number		Type	Expiration

Scope of Work: 14x24 DEWUXE A-FRAME TOOL SHED

DESCRIPTION OF WORK	Proposed Use	STORAGE SHED	Current Use	STORAGE SHED	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.	14x24	Unfinished Sq. Ft.	336	Total Sq. Ft.	336 / 14x24

Building Only - Excludes All Trades Permits

Value of Work	12321.44
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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: Nicole Tyrell Date: _____

Application Fee	\$ 61.40
State Levy Fee	\$ 1.00
Zoning Fee	\$ 20.00
RLD	\$
SWP	\$
Total	\$ 93.80



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: 6/21/2022Permit Number: 60-2022-00224GPIN/Tax Map: 7716-95-7795 / 58-450-160Issued: 7/7/22

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 1509 CENTERVILLE PARKE DR	
	Owner ALBERT SILVA	Phone # 804-305-1943
	Address 1509 CENTERVILLE PARKE DR	Email asilva7784@comcast.net

APPLICANT INFORMATION	Applicant/Contact JUDAH MURPHY		Phone # 804-971-0326
	Address 6408 MALLORY DR.		Email JMURPHY@ADDADECK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parke at Centerville</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone	<u>RPUD</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Legg</u> Date <u>6/28/22</u>			

CONTRACTOR INFORMATION	Contractor ADD A DECK, INC.		Phone 804-971-0326
	Address 6408 MALLORY DR.		Email JMURPHY@ADDADECK.COM
	Contractor License Number 2701-033201A	Type CLASS A	Expiration 11-30-2022

DESCRIPTION OF WORK	Scope of Work: BUILD AN APPROXIMATLY 12'X16' OPEN PORCH ON EXISTING DECK.				
	Proposed Use OPEN PORCH	Current Use OPEN DECK	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.		
		<u>182</u>	<u>192</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>93.00</u>
Value of Work	<u>18000.00</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. Signature of Applicant <u>[Signature]</u> Date <u>6/21/2022</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>119.86</u>

[Signature] 7/7/22 RS VB 2018 COOK



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: **6-6-22**

Permit Number: **BP-2022-0813**

GPIN/Tax Map: **6769-25-9527/30-13-B-13-0**

Issued: **7-8-22**

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	2750 Springaire Drive Goochland, VA 23063	
	Owner	Derek L. Stamey	
	Address	2750 Springaire Dr Goochland, VA 23063	
APPLICANT INFORMATION	Applicant/Contact	Derek L. Stamey	
	Address	2750 Springaire Dr Goochland, VA	
	Phone #	(804) 726-0170	
	Email	uncvln6@yahoo.com	
	Phone #	(804) 726-0170	
	Email	uncvln6@yahoo.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	Aldwyck	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	55' from PY wall		5'	
	Side Setback	Side Setback	Flood Zone	
	5'	5'		A2
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS:		
	Planning & Zoning Officer: David Floyd	Date: 6/7/22		

CONTRACTOR INFORMATION	Contractor	Sykes Contracting LLC / OWNER		Phone	(804) 454-6159
	Address	PO BOX 1256 Colonial Heights, VA 23834		Email	masykes@sykespods.com
	Contractor License Number	Type	Class A	Expiration	

DESCRIPTION OF WORK	Scope of Work: Excavation of pool hole, installation of pool walls, install of concrete bottom, liner, plumbing backfill, rough grade, ? concrete decking				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Swimming Pool		N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		512	512		

Building Only - Excludes All Trades Permits		Application Fee	\$ 75.36
Value of Work	\$ 13,000 14,080-	State Levy Fee	\$ 1.51
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 101.87
Signature of Applicant	[Signature]	Date	6/7/22



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: 5/20/2022
 Permit Number: BP-2022-00722

GPIN/Tax Map: 6729-17-7861/21-1-0-27-0
 Issued: 7-7-22

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>2909 Dogtown Rd, Goochland VA</u>	
	Owner <u>Kyle S. Snelcher</u>	Phone # <u>(570) 507 3034</u>
	Address <u>2909 Dogtown Rd, Goochland VA</u>	Email <u>Kylestyle30@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Kyle S. Snelcher</u>	
	Address <u>2909 Dogtown Rd</u>	Phone # <u>570 507 3034</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>75' from P4 Run</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>setbacks must be marked on property</u>
	Side Setback <u>35'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Cannot meet setbacks. new site plan</u>	Planning & Zoning Officer <u>[Signature]</u>	Date <u>6/14/22</u>	<u>7/5/2022 AB</u>

CONTRACTOR INFORMATION	Contractor <u>Owner</u>	Phone <u>336 755-3183</u>
	Address <u>Pg Box 369 Forest, NC 27079</u>	Email <u>metalcarpentry@gmail.com</u>
	Contractor License Number <u>051637KS</u>	Type _____

DESCRIPTION OF WORK	Scope of Work: <u>Metal Frame garage on concrete pad 30x28</u>				
	Proposed Use <u>Storage work space</u>	Current Use <u>Yard</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>NONE</u>	WATER <u>NONE</u> 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 checked="" type="checkbox"/>	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>868</u>	Total Sq. Ft. <u>868</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>11941</u>
Value of Work	<u>15,000</u> 15,000 <u>\$ 23,870.00</u>	State Levy Fee	\$ <u>239</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>14680</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>5/19/22</u>



BUILDING PERMIT APPLICATION

Application Date: **6-22-22**

Permit Number: **BP-2022-00829**

GPIN/Tax Map: **6777-67-8395/4340-C-70**

Issued: **7/7/22**

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	2120 Jockey Ridge Rd.	
	Owner	Michael Hodson/Laura McMichael	
APPLICANT INFORMATION	Address	2120 Jockey Ridge Rd.	
	Applicant/Contact	Five Star Construction LLC / Kelli Macchiaruto	
	Address	13356 Midlothian Tpk, Midlothian, VA 23113	
	Phone #	804-731-2635	
	Email	hodson.michael@yahoo.com	
	Phone #	804-205-0541	
	Email	fivestarconstruction09@yahoo.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Greene Hill			
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	40' from PUP ROW	65'	5'	
Side Setback	Side Setback	Flood Zone	RP	
5'	5'	X		
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer David [Signature] Date 6/29/22				

CONTRACTOR INFORMATION	Contractor	Five Star Construction LLC / Carl Macchiaruto		Phone	804-893-2907
	Address	13356 Midlothian Tpk, Midlothian, VA 23113		Email	fivestarconstruction09@yahoo.com
	Contractor License Number	Type	Expiration		
	2705151142	Class A	6/30/2023		

DESCRIPTION OF WORK	Scope of Work: Construct a pool house				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Private	Private	1		1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		477		477	

Building Only - Excludes All Trades Permits		Application Fee	\$ 552.00
Value of Work	120,000	State Levy Fee	\$ 11.04
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.		Zoning Fee	\$ 25.00
		RLD	\$
Signature of Applicant [Signature] Date 6/16/22		SWP	\$
		Total	\$ 588.04



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: 06/20/22

Permit Number: 02-00552-00830

GPIN/Tax Map: 41-1-0-6-B / 6748-51-1204

Issued: 7/1/22

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: 2107 Dogtown Road, Goochland, VA 23063

Owner: Lorna and Gerald Reese-Mitchell Phone #: 804-556-3286

Address: 2107 Dogtown Road, Goochland, VA 23063 Email: lornareese49@comcast.net

APPLICANT INFORMATION
 Applicant/Contact: Angela Martin-Whatley Phone #: 804-621-7004

Address: 2410 Southland Drive, Chester, VA 23831 Email: angela.martin@jeswork.com

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

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

APPROVED REJECTED COMMENTS: * No change to existing footprint/use. A1
 Planning & Zoning Officer: David [Signature] Date: 6/28/22

CONTRACTOR INFORMATION
 Contractor: JES Construction LLC Phone: 804-495-4646

Address: 2410 Southland Drive, Chester, VA 23831 Email: angela.martin@jeswork.com

Contractor License Number: 2705068655 Type: A Expiration: 04/30/2024

DESCRIPTION OF WORK
 Scope of Work: Installing 50 LnFt of basement gutter, 30 LnFt of buried discharge line, 10 Lnft of Interior PVC discharge and 1 single sump pump for water management

Proposed Use Dwelling	Current Use Dwelling	Environmental impacts (stream crossing, wetlands, amt land disturbed) N/A		
<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. 50		

Building Only - Excludes All Trades Permits
 Value of Work: 8100.00

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: Angela Martin Whatley Date: 06/20/22

Application Fee	\$ <u>48.40</u>
State Levy Fee	\$ _____
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>74.40</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: 4-28-22
 Permit Number: BP-2022-00603
 GPIN/Tax Map: -7727-47-3959 / 4733-0-16-0
 Issued: 7-7-22

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>2352</u> <u>2352 - 0003 Graystone Court Rockville, Va. 23146</u>	
	Owner	<u>Richmond Machinery</u>	
	Address	<u>10614 Country RD, Colon VA, 23060</u>	

APPLICANT INFORMATION	Applicant/Contact	<u>FT. EVANS</u>	Phone #	<u>(804) 363-8564</u>
	Address	<u>Southern Building Systems</u>	Email	<u>tom@southernbldgs.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	<u>Rockville</u>	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	_____	Date Paid	_____
	Front Setback	<u>20' from P/R</u>	Center Line Setback	<u>45'</u>	Rear Setback	<u>30'</u>	CUP/Variance/COA	
	Side Setback	<u>10'</u>	Side Setback	_____	Flood Zone	_____	_____	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>In accordance w/ Section 15-286-E.</u>		_____			

CONTRACTOR INFORMATION	Contractor	<u>Southern Building Systems</u>		Phone	<u>(804) 798-9225</u>
	Address	<u>P.O. Box 1016 Ashland Va 23005</u>		Email	_____
	Contractor License Number	<u>2701025755</u>	Type	<u>CBC, H.I., RC</u>	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>office/parts, shop for sales and service of construction equipment for Richmond machinery</u>					
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)			_____
	<u>Sales and Service Equip</u>	_____	# of Bathrooms	# of Bedrooms	# of floors	_____
	Will a foundation be installed within 20 ft. of any septic system components? <u>Yes/No</u>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits	Value of Work	<u>\$1,575,000.00</u>	Application Fee	\$ <u>18,750.00</u>
			State Levy Fee	\$ <u>375.00</u>
			Septic/Well Fee	\$ _____
			Zoning Fee	\$ <u>100.00</u>
			RLD	\$ _____
			SWP	\$ _____
			Total	\$ <u>19,225.00</u>

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

Signature of Applicant: FT. Evans Date: 4-28-22



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: 6/9/22

Permit Number: BP-2022-00773

GPIN/Tax Map: 6996-57-4948/43-23-D-9-0

Issued: 7-6-22

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

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>2021 Covington Rd Crozier VA 23039</u>	
	Owner <u>Peter Korpady</u>	Phone #
	Address <u>2125 Strawberry Run Crozier VA</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>Steve Graber</u>	Phone # <u>804-937-0446</u>
	Address <u>16001 Elm Cottage Rd Amelia VA 23002</u>	Email <u>Steve@Superiorbuildings.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Covington</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from P/U Row</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer: Danny Boyd Date: 6/23/22

CONTRACTOR INFORMATION	Contractor <u>Superior Buildings LLC</u>	Phone <u>804-937-0446</u>
	Address <u>4998 Shipp Ln Harrisonburg VA 22802</u>	Email <u>Steve@Superiorbuildings.net</u>
	Contractor License Number <u>2705-128439</u>	Type <u>Class A</u>

DESCRIPTION OF WORK	Scope of Work: <u>Horse barn 34x48</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>2</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>1632</u>	Total Sq. Ft. <u>1632</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>80,000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 5-15-22

Application Fee	\$ <u>302-</u>
State Levy Fee	\$ <u>7.44</u>
Zoning Fee	\$ <u>25-</u>
RLD	\$
SWP	\$
Total	\$ <u>404.44</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6-9-22

Permit Number: BP-2022-00782

GPIN/Tax Map: 6831-36-2261/12-5-0-1-0

Issued: 7-5-22

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>4489 BROAD STREET RD GUM SPRING VA 23065</u>	
	Owner <u>CHRISTOPHER & DAWN CARTER</u>	Phone # <u>804-437-1394</u>
	Address <u>4489 BROAD STREET RD GUM SPRING VA 23065</u>	Email <u>DR CARTER@728.COM</u>
APPLICANT INFORMATION	Applicant/Contact <u>OWNER</u>	
	Address	Phone # <u>GMAIL.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Childress</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>100' from P.U. ROW</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>A1</u>
	Side Setback <u>W. Side 35'</u>	Side Setback <u>N. Side 5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>6/24/22</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>12x26 - detached garage</u> <u>INSTALL PREFAB CARPORT ON EXISTING</u> <u>12x25' CONCRETE 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. <u>312</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>3836.14</u>	<u>\$ 8,580.00</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 [Signature] Date 5/27/2022

Application Fee	\$ <u>50.61</u>
State Levy Fee	\$ <u>1.01</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>76.62</u>



BUILDING PERMIT APPLICATION

Application Date: 6-22-22Permit Number: BP-2022-00808GPIN/Tax Map: 705-608-9645/57-10-0-19-0Issued: 7-5-22This 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>1429 Windsor Way Manakin Sabot Va. 23103</u>	
	Owner <u>Ms Chase Wilson</u>	Phone # <u>(415) 377-5308</u>
	Address <u>same as above</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>JB Farnholt III, owner - Custom Ponds and Landscapes</u>	
	Address <u>3400 Taylor Dr Richmond Va 23235</u>	Email <u>jb3@cplva.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: <u>Auburn Chase</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from P/L/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>Daniel Ford</u>	Date <u>6/27/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Custom Ponds and Landscapes of Richmond, inc.</u>		Phone <u>804 502 1733</u>
	Address <u>3400 Taylor Dr. Richmond Va 23235</u>		Email <u>jb3@cplva.com</u>
	Contractor License Number <u>2705138294</u>	Type <u>Class A-Va.</u>	Expiration <u>1/31/23</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install fiberglass pool (model: Claremont by Latham) in backyard with a 'Cover star' auto-cover (in lieu of fence) 14x33</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>462</u>	<u>462</u>		

Building Only - Excludes All Trades Permits		Application Fee	<u>\$75-</u>
Value of Work	<u>\$14,000-</u>	State Levy Fee	<u>\$1.50</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.		Zoning Fee	<u>\$25-</u>
		RLD	\$
		SWP	\$
		Total	<u>\$101.50</u>
		Signature of Applicant	<u>JB Farnholt III</u>



BUILDING PERMIT APPLICATION

Application Date: 04/05/2022 Rec: 6.16.22

Permit Number: BP-2022-00772

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

GPIN/Tax Map: 7717-11-7192/46-12-0-9-A

Issued: ~~04/05/2022~~ 7-1-22

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	
	1817 Roundfield Lane, Manakin-sabot, VA 23103	
	Owner Ardella Peters	Phone # (804) 357-4656
	Address	Email ardellarc@verizon.net
	1817 Roundfield Lane, Manakin-sabot, VA 23103	

APPLICANT INFORMATION	Applicant/Contact	
	Gage Carroll, Marc Jones Construction LLC	Phone # 540-505-7659
	Address	Email gcarroll@theprocompanies.com
	11106 Air Park Road, Ashland, VA 23005	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	N/A			
	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 zoning use	
	Planning & Zoning Officer: David Boyd	Date: 6/22/22		

CONTRACTOR INFORMATION	Contractor		Phone
	ADT Solar		540-505-7659
	Address		Email
	11106 Air Park Road, Ashland, VA 23005		gcarroll@theprocompanies.com
	Contractor License Number	Type	Expiration
	2705177478	A	12/31/2022

DESCRIPTION OF WORK	Scope of Work:			
	Installation of Roof Mounted Solar Photovoltaic			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	Offset Energy Costs	Single Fam Home	# of Bathrooms	# of Bedrooms # of floors
	SEWER Public/Private	WATER Public/Private		
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		741	741	

Building Only - Excludes All Trades Permits		Application Fee	\$102.46
Value of Work	20,102.00	State Levy Fee	\$2.05
		Septic/Well Fee	\$
		Zoning Fee	\$25
		RLD	\$
		SWP	\$
		Total	\$129.51

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: Gage Carroll Date: 04/05/2022



BUILDING PERMIT APPLICATION

Application Date: 4/21/22

Permit Number: BP-2022-00527

GPIN/Tax Map: 7033-38-9193/04-19-E-3-D

Issued: 7-1-22

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	3 Lower Tuckahoe rd. East	
	Owner	Gray Ghilchrist	Phone # 540-293-3975
	Address	3 Lower Tuckahoe rd. East	Email grayghilchrist@gmail.com

APPLICANT INFORMATION	Applicant/Contact	Diversified Building Services Inc.	Phone # 804-513-7165
	Address	2955 Pineview dr. Powhatan VA 23139	Email dbs_inc@verizon.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David Ford Date: 6/03/22			

CONTRACTOR INFORMATION	Contractor	Diversified Building Services Inc.	Phone 804-513-7165
	Address	2955 Pineview dr. Powhatan VA 23139	Email dbs_inc@verizon.net
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Build a 16'-14" two story addition on right side of house				
	1st floor sunroom - 2nd floor storage				
	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 type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. 464 464'	Unfinished Sq. Ft. 0	Total Sq. Ft. 464'	

Building Only - Excludes All Trades Permits

Value of Work	\$189,000
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Application Fee	\$ 412.50
State Levy Fee	\$ 8.25
Zoning Fee	\$ 25
RLD	\$
SWP	\$
Total	\$ 445.75

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: 4/21/22



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: 5/4/2022

Permit Number: BP-2022-00690

GPIN/Tax Map: 6757-90-0726 / 42-1-0-19-0

Issued: 7-1-22

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: 2871 West River Road Goochland, VA 23063

Owner: Goochland County Phone #: 804-556-5839

Address: 1800 Sandy Hooks Road Goochland VA 23063 Email: mlongshore@goochlandva.us

APPLICANT INFORMATION
 Applicant/Contact: Edie Valdez / General Dynamics Phone #: 770-557-5153

Address: 993 Mansell Rd STE D, Roswell GA 30076 Email: edie.valdezkoele@gdit.com

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

Front Setback: 100' from P/R/W Center Line Setback: 125' Rear Setback: 5' CUP/Variance/COA: _____

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

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: *David Boyd* Date: 5/27/22

CONTRACTOR INFORMATION
 Contractor: General Dynamics Phone: 770-557-5153

Address: 101 Station Dr. 3D05 Westwood MA 02090 Email: edie.valdezkoele@gdit.com

Contractor License Number: 2705118161 Type: Commercial Building / Electrical Expiration: 10-31-2023

DESCRIPTION OF WORK
 Scope of Work: Install a 5'x10' Concrete pad for Propane Tank- Add 4'x10' concrete pad for 36KW Generator. This will be inside the existing compound, inside the Water Tanks, location with AT&T antennas, There will be no Tower work (Water Tank), this will only be ground space

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Generator	Water Tank/Cell Antennas	NA		

SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		NA	NA	NA

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.
No		90	90

Building Only - Excludes All Trades Permits

Value of Work: \$20,000 - Gas Value - \$5,000, Electrical Value - \$6,000, Pad Value \$10,000*

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: Edie Valdez Digitally signed by Edie Valdez Date: 2022.05.04 11:17:54 -0400 Date: 5/4/2022

Application Fee	\$ 75 -
State Levy Fee	\$ 1.50
Zoning Fee	\$ 100 -
RLD	\$
SWP	\$
Total	\$ 176.50

6-10-22



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

Residential Commercial

Application Date: 6-10-22

Permit Number: BP-2022-00767

GPIN/Tax Map: 6059-62-9417/30-8-0-38-0

Issued: 7-5-22

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.

Site Address
2454 CHENEY CREEK RD

Owner
JUSTIN & JESSICA DICKERSON Phone # **804-306-4341**

Address
2454 CHENEY CREEK RD Email **DICKERSONJK@VCU.EDU**

Applicant/Contact
JUSTIN DICKERSON Phone # **804-306-4341**

Address
2454 CHENEY CREEK RD Email **DICKERSONJK@VCU.EDU**

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Cheneys Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' From P4/2021</u>	Center Line Setback	Rear Setback <u>5 ft</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>5 ft</u>	Side Setback <u>5 ft</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer Dennis Lloyd Date 6/22/22

Contractor
Owner Phone

Address Email

Contractor License Number Type Expiration

Scope of Work:
NEW CONSTRUCTION - GARAGE *detached*

DESCRIPTION OF WORK	Proposed Use STORAGE	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>2</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>30 1460</u>	Total Sq. Ft. <u>1460</u>	

Building Only - Excludes All Trades Permits

Value of Work \$40,000 **\$40,150.00**

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

Signature of Applicant [Signature] Date 6/10/2022

Application Fee	\$ <u>192.68</u>
State Levy Fee	\$
Zoning Fee	\$ <u>25-</u>
RLD	\$
SWP	\$
Total	\$ <u>221.53</u>

2015 code



BUILDING PERMIT APPLICATION

Application Date: **6-30-22**

Permit Number: **BP-2022-00872**

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

GPIN/Tax Map: 6767-01-1317 / 42-40-0-26-0

Issued: **7/27/22**

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 2883 Swann's Peak Cove, Goochland, VA 23063	
	Owner Swann's Inn LLC	Phone # 804-564-9097
APPLICANT INFORMATION	Address 207 Echo Meadows Rd, Rockville, VA 23146	Email legacyhomes09@aol.com
	Applicant/Contact Travis W Johnson	Phone # same
	Address 207 Echo Meadows Rd, Rockville, VA 23146	Email legacyhomes09@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Swann's Inn	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 40' from P/L Row	Center Line Setback 65'	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: * Survey Location		
Planning & Zoning Officer David Floyd	Date 7/6/22			

CONTRACTOR INFORMATION	Contractor Legacy Homes LLC	Phone 804-564-9097
	Address 207 Echo Meadows Rd, Rockville, VA 23146	Email legacyhomes09@aol.com
	Contractor License Number 2705052698	Type Class A Expiration 10/31/2023

DESCRIPTION OF WORK	Scope of Work: New construction - 22'x22' detached garage				
	Proposed Use Garage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 1,000 sf		
	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.	Unfinished Sq. Ft. 484	Total Sq. Ft. 484	

Building Only - Excludes All Trades Permits		Application Fee \$ 108 State Levy Fee \$ 2.04 Zoning Fee \$ 25.00 RLD \$ _____ SWP \$ _____ Total \$ 129.04
Value of Work	\$20,000	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	[Signature]	
Date	6/30/2022	

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: Johnson & Johnson Attorneys at Law, PC Telephone: 804-784-4012

Mailing Address: PO Drawer 100, Rockville, VA 23146

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 7-26-22

Code Official

Revised: 8/31/2020



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: 7/20/22

Permit # 0112022-0095A

GPIN

Tax Map

LOCATION

Street Address: 1790 HAWK TOWN RD.

PROPERTY OWNERSHIP

Name: HAYDEN MATTER

Phone: 804 306-7232

Mailing Address: 1790 HAWK TOWN RD MADISON VA 23102

Email: HAYDEN.MATTER@HOMELINK.COM

APPLICANT

Name: REC SEARSON

Phone: 804 389-4242

Address: P.O. Box 147 ROCKVILLE VA 23146

Email: RICHARD@MANAKINELECTRIC.NET

CONTRACTOR

Name: MANAKIN ELECTRICAL CONTRACTORS

Phone: SAME

Mailing Address: SAME

Email: SAME

Gas Certification: YES NO

State License Number: 2705018030

Expiration: 12/31/22

License Type: ELE

Class: B

DESCRIPTION OF WORK

INSTALL 20KW GENERATOR + 200 SERVICE RATED AUTOMATIC TRANSFER SWITCH.

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

Value of Work (required): 10,600

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: REC SEARSON Date: 7/20/22

Approval: Fisher Office Use Only

Permit Fee: \$104.75

Approval date: 7-20-22

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

7/19

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: 7/15/22

Permit # EU-2022-00947

GPIN

Tax Map 62-36-C-20-0

LOCATION

Street Address 526 Hickory Drive

PROPERTY OWNERSHIP

Name Beth Stein Phone 804-399-0551

Mailing Address 526 Hickory Dr. Manakin Sabot VA 23103 Email dbestein@aol.com

APPLICANT

Name MW Butler Electrical Phone 804-746-2240

Address 8420 Meadowbridge Road Email kelsey@mwbutlerelectrical.com

CONTRACTOR

Name MW Butler Electrical Phone 804-746-2240

Mailing Address 8420 Meadowbridge Rd Mechanicsville VA 23106 Email kelsey@mwbutlerelectrical.com

Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705110673	Expiration 01-31-24	License Type ELE	Class A
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DESCRIPTION OF WORK

Wire and install a 24kw generator with a 200 AMP transfer switch.

# of Bathrooms	Service Size	Power Company Dominion	Inquiry #
Value of Work (required) \$2,450. 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: Kelsey Crowe Date: 07/15/22

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>7/19/22</u>
Permit Fee: <u>102.⁰⁰</u>		Issued date: <u>7/19/22</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

7/19

- 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	07/14/22
Permit #	EU-2022-00945
GPIN	0758-98-5851
Tax Map	

LOCATION

Street Address 3090 Poorhouse Road

PROPERTY OWNERSHIP

Name	<u>Matthew Hopkins</u>	Phone	<u>804-943-1122</u>
Mailing Address	<u>3090 Poorhouse Rd. Goochland VA 23063</u>	Email	<u>matthew.hopkins@gmail.com</u>

APPLICANT

Name	<u>MW Butler Electrical</u>	Phone	<u>804-746-2240</u>
Address	<u>8420 Meadowbridge Rd. Mechanicsville VA 23116</u>	Email	<u>kelsey@mwbutlerelectrical.com</u>

CONTRACTOR

Name	<u>MW Butler Electrical</u>			Phone	<u>804-746-2240</u>
Mailing Address	<u>8420 Meadowbridge Rd. Mechanicsville VA 23116</u>			Email	<u>kelsey@mwbutlerelectrical.com</u>
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	<u>2705110673</u>	Expiration	<u>01-31-24</u>
		License Type	<u>ELE</u>	Class	<u>A</u>

DESCRIPTION OF WORK

Wire and install a 24KW generator with a 200 AMP transfer switch.

# of Bathrooms	Service Size	Power Company	Inquiry #
		<u>Dominion</u>	
Value of Work (required)	<u>\$2,450.00</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: Kelsey Crone Date: 07/14/22

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>7/19/22</u>
Permit Fee:	<u>102.00</u>		Issued date:	<u>7/19/22</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

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

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

Date <i>JULY 18, 22</i>
Permit # <i>22-00790</i>
GPIN
Tax Map

LOCATION

Street Address *2300 COUNTRY LANE*

PROPERTY OWNERSHIP

Name <i>ANDREW & LISA LAKOFF</i>	Phone
Mailing Address <i>2300 COUNTRY LANE</i>	Email

APPLICANT

Name <i>JOHN T. GATES</i>	Phone <i>804 652 9852</i>
Address <i>7166 COLD HARBOR RD. MECHANICSVILLE, VA 23111</i>	Email <i>GATESELECTRICAL@tcdco.com</i>

CONTRACTOR

Name <i>GATES ELECTRIC</i>		Phone	
Mailing Address <i>7166 COLD HARBOR RD.</i>		Email	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number <i>2705063740</i>	Expiration <i>JULY 23</i>	License Type <i>EVE</i>
		Class <i>B</i>	

DESCRIPTION OF WORK

<i>GENERATOR ELECTRICAL 14 KW</i>			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <i>\$3000.00</i>			

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

Signature of Applicant: *[Signature]* Date: *JULY 18, 22*

Approval: <i>Fisher</i>	Office Use Only
Permit Fee: <i>\$100</i>	Approval date: <i>7/18/22</i>
	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

156.16
7/18

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 7/9/22
Permit # E1-2022-00939
GPIN
Tax Map

LOCATION

Street Address 2952 Preston Park Drive, Sandy Hook VA 23153

PROPERTY OWNERSHIP

Name Robert SuSBilla	Phone 703-909-9347
Mailing Address 2952 Preston Park Drive, Sandy Hook VA 23153	Email r+susc83@gmail

APPLICANT

Name Scarlett Honshell/Clark Home Solutions LLC	Phone 804-302-4200
Address 9830 West Broad St. Richmond VA 23060	Email Honshell@Generator

supercenter.com

CONTRACTOR

Name Clark Home Solutions LLC		Phone 804-302-4200	
Mailing Address 14018 Sullyfield Cir Ste E		Email Honshell@Generator	
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705176647	Expiration 8/31/22	License Type Masters
		Class A	supercenter

DESCRIPTION OF WORK

24KW Generator Install, 200 Amp transfer switch - 60' Abv ground ele run			
# of Bathrooms	Service Size 200	Power Company Dominion	Inquiry #
Value of Work (required) \$21,800			

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 Honshell Date: 7/9/2022

Approval: Fisher	Office Use Only
Permit Fee: 156.16	Approval date: 7/18/22
	Issued date: 7/18/22

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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	7/15/22
Permit #	EU - 2022-00938
GPIN	
Tax Map	

LOCATION

Street Address: 5326 WOODSTONE COURT

PROPERTY OWNERSHIP

Name	Phone
LONDA MEALY	804-763-9393
Mailing Address	Email
5326 WOODSTONE COURT	N/A

APPLICANT

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

CONTRACTOR

Name	Phone			
Virginia Power Solutions	804-365-0263			
Mailing Address	Email			
10102 Whitesel Road, B, Ashland, VA 23005	ENSTALIS@virginiapowersolutions.com			
Gas Certification	State License Number	Expiration	License Type	Class
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	2705123991	8/31/22	ELE, GFC	B

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, 200A SWITCH & 100A SWITCH

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$ 10,000.00			

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

Signature of Applicant: Date: 7/13/22

Office Use Only	
Approval date	7/15/22
Issued date	7/15/22

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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	7/15/22
Permit #	EU-2022-00937
GPIN	
Tax Map	

LOCATION

Street Address
 2852 HADENSVILLE FIFE ROAD

PROPERTY OWNERSHIP

Name	MELISSA SPENCER	Phone	804-647-6262
Mailing Address	2852 HADENSVILLE FIFE ROAD	Email	MSPENCER0920@VAHDO.COM

APPLICANT

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

CONTRACTOR

Name	Virgina Power Solutions	Phone	804-365-0263
Mailing Address	10102 Whitesel Road, B, Ashland, VA 23005	Email	INSTRALS@virginiapowersolutions.com
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705123991
		Expiration	8/31/22
		License Type	ELE, GFC
		Class	B

DESCRIPTION OF WORK

INSTALL 14 KW GENERATOR & 16 CIRCUIT SWITCH

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$10,000.00			

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

Signature of Applicant:

Date: 7/13/22

Approved		Office Use Only
Permit #	102	Approval date
		Issued date
		7/15/22

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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: 7/15/22

Permit # E1-2022-00927

GPIN

Tax Map

LOCATION

Street Address: 832 WOODCOVE COURT

PROPERTY OWNERSHIP

Name: JOHN MILLER Phone: 757-286-8409

Mailing Address: 832 WOODCOVE COURT Email: MILLERSWA@GMAIL.COM

APPLICANT

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

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

CONTRACTOR

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

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

Gas Certification: YES NO

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

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR & 2-200A SWITCHES

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

Value of Work (required): 10,000.00

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

Signature of Applicant:

Date: 7/13/22

Office Use Only

Approval date: 7/15/22

Issued date: 7/15/22



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

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

Date 7/15/22

Permit # ELI-2022-00934

GPIN

Tax Map

LOCATION

Street Address
5337 RIVER ROAD WEST

PROPERTY OWNERSHIP

Name MARCIE ALLEN Phone 804-382-3041

Mailing Address 5337 RIVER ROAD WEST Email MARCIEALLEN@GMAIL.COM

APPLICANT

Name Virginia Power Solutions Phone 804-365-0263

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

CONTRACTOR

Name Virginia Power Solutions Phone 804-365-0263

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

Gas Certification YES NO

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

DESCRIPTION OF WORK

INSTALL 24KW GENERATOR & 200A SWITCH

of Bathrooms Service Size Power Company Inquiry

Value of Work (required) 10,000.00

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

Signature of Applicant: Date: 7/13/22

Office Use Only

Approval date: 7/15/22

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

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

Date <u>7/15/22</u>
Permit # <u>EU-2022-00935</u>
GPIN
Tax Map

LOCATION

Street Address
2020 STEEPLECHASE PKWY

PROPERTY OWNERSHIP

Name <u>ROBERT BUSH</u>	Phone <u>267-625-4626</u>
Mailing Address <u>2020 STEEPLECHASE PKWY</u>	Email <u>HILCHARI 4/17 @GMAIL.COM</u>

APPLICANT

Name <u>Virginia Power Solutions</u>	Phone <u>804-365-0263</u>
Address <u>10102 Whitesel Road, B, Ashland, VA 23005</u>	Email <u>PN37415@virginiapowersolutions.com</u>

CONTRACTOR

Name <u>Virgina Power Solutions</u>	Phone <u>804-365-0263</u>			
Mailing Address <u>10102 Whitesel Road, B, Ashland, VA 23005</u>	Email <u>PN37415@virginiapowersolutions.com</u>			
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2705123991</u>	Expiration <u>8/31/22</u>	License Type <u>ELE, GFC</u>	Class <u>B</u>

DESCRIPTION OF WORK

INSTALL 24KW GENERATOR & 2-200A SWITCHES

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <u>\$10,000.00</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: [Signature]

Date: 7/13/22

Office Use Only	
Approval date: <u>7/15/22</u>	
Issued date: <u>7/15/22</u>	

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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: 7/15/22

Permit # EU-2022-00934

GPIN

Tax Map

LOCATION

Street Address: 5361 RIVER ROAD WEST

PROPERTY OWNERSHIP

Name: ALVA ALLEN Phone: 804-382-3041

Mailing Address: 5361 RIVER ROAD WEST Email: MARCELA.ALLEN@GMAIL.COM

APPLICANT

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

Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: JNS7A115@virginiapowersolutions.com

CONTRACTOR

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

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: JNS7A115@virginiapowersolutions.com

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

DESCRIPTION OF WORK

INSTALL 24KW GENERATOR & 2-200A SWITCHES

# of Bathrooms	Service Size	Power Company	Inquiry #

Value of Work (required): 10,000.00

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

Signature of Applicant: Date: 7/13/22

Office Use Only

Approval date: 7/15/22

Issued date: 7/15/22

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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	7/15/22
Permit #	EU - 2022-00929
GPIN	
Tax Map	

LOCATION

Street Address: 2308 HOBBY HILL DRIVE

PROPERTY OWNERSHIP

Name	DAVID MARSHALL	Phone	804-221-1535
Mailing Address	2308 HOBBY HILL DRIVE	Email	DAVESUDYM@GMAIL.COM

APPLICANT

Name	Virginia Power Solutions	Phone	804-365-0263
Address	10102 Whitesel Road, B, Ashland, VA 23005	Email	EV97A115@viriniapowersolutions.com

CONTRACTOR

Name	Virginia Power Solutions	Phone	804-365-0263
Mailing Address	10102 Whitesel Road, B, Ashland, VA 23005	Email	EV97A115@viriniapowersolutions.com
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705123991
		Expiration	8/31/22
		License Type	ELE, GFC
		Class	B

DESCRIPTION OF WORK

INSTALL 18KW GENERATOR & WIRE TO EXISTING SWITCH
(REPLACEMENT FOR DEAD GENERATOR)

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <u>\$10,000</u>			

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

Signature of Applicant: [Signature]

Date: 7/13/22

Office Use Only	
Approval date	<u>7/15/22</u>
Issued date	<u>7/15/22</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

\$ 115.96

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: 7/14

Permit #: 01-2022-00924

GPIN:

Tax Map:

LOCATION

Street Address: 3417 Herndon Road Goochland VA 23063

PROPERTY OWNERSHIP

Name: Arthur Lane	Phone: 804.205.7053
Mailing Address: 3417 Herndon Road Goochland VA 23063	Email: art73155@gmail.com

APPLICANT

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

CONTRACTOR

Name: Clark Home Solutions LLC	Phone: 804.302.4200
Mailing Address: 14018 Sullyfield Cir Ste E	Email: Honshell@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, 200 Amp transfer switch, 35' ft SE cable run - 30ft Above - 5' Buried

# of Bathrooms:	Service Size: 200	Power Company: Dominion	Inquiry #:
Value of Work (required): 13042			

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 Honshell Date: 7/9/22

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>7/15/22</u>
Permit Fee: <u>115.96</u>		Issued date: <u>7/15/22</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

\$ 119.44

7/15

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date	7/9/22
Permit #	EVI-7022-00923
GPIN	
Tax Map	

LOCATION

Street Address: 7446 Park Village Boulevard, Glen Allen VA 23059

PROPERTY OWNERSHIP

Name	Shamin Eladha	Phone	516-672-0151
Mailing Address	7446 Park Village Boulevard, VA 23059, Glen Allen	Email	

APPLICANT

Name	Scarlett Honshell/Clark Home Solutions LLC	Phone	804-302-4200
Address	9830 West Broad St. Richmond VA 23060	Email	shonshell@generatorsupercenter.com

CONTRACTOR

Name	Clark Home Solutions LLC	Phone	804-302-4200
Mailing Address	14018 Sullyfield Cir Ste E	Email	shonshell@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

18KW Generator Install, 200 amp transfer switch -

20' electric SE cable run through crawlspace

# of Bathrooms	Service Size	Power Company	Inquiry #
	200	Dominion	
Value of Work (required)	13,800		

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 Honshell Date: 7/9/22

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>7/15/22</u>
Permit Fee: <u>119.44</u>		Issued date: <u>7/15/22</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

\$193.98
7/14

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	7.9.22
Permit #	EL-2022-00920
GPIN	
Tax Map	

LOCATION

Street Address
1887 Sheppard town RD, Crozier VA 23039

PROPERTY OWNERSHIP

Name	Kr. F Richardson	Phone	804.822.5687
Mailing Address	1887 Sheppard town RD, Crozier VA 23039	Email	Katrichardson@gmail.com

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

38kW Generator Install - 2 x 200 Amp transfer switch
85' Above ground electric run through basement

# of Bathrooms	Service Size	Power Company	Inquiry #
	400	Dominion	

Value of Work (required)
\$30,639

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 Honshell Date: 7/9/22

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>7/14/22</u>
Permit Fee:	<u>193.98</u>		Issued date:	<u>7/14/22</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

7/14

Date	7/11/22
Permit #	EI-2022-00894
GPIN	
Tax Map	

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

LOCATION

Street Address
982 Manakin Rd, Manakin-Sabot, VA 23103

PROPERTY OWNERSHIP

Name Michael Felix	Phone
Mailing Address 982 Manakin Rd, Manakin-Sabot, VA 23103	Email

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

install new 22kw generator and transfer switch

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$14250.00			

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

Signature of Applicant: Date: 7/11/22

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>7/14/22</u>
Permit Fee: <u>121.51</u>		Issued date: _____



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

61219

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 7/13/22
Permit # 22-00917
GPIN
Tax Map

LOCATION

Street Address
7410 Aldeby Street; Glen Allen VA 23050

PROPERTY OWNERSHIP

Name Doug Bankston	Phone 804.714.7700
Mailing Address 7410 Aldeby Street; Glen Allen VA 23050	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"/>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">State License Number 2701 02667</td> <td style="width: 25%; padding: 5px;">Expiration 8/31/22</td> <td style="width: 25%; padding: 5px;">License Type ELE</td> <td style="width: 25%; padding: 5px;">Class A</td> </tr> </table>	State License Number 2701 02667	Expiration 8/31/22	License Type ELE	Class A
State License Number 2701 02667	Expiration 8/31/22	License Type ELE	Class A		

DESCRIPTION OF WORK

Provide and install generator 22 KW				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"># of Bathrooms</td> <td style="width: 25%;">Service Size</td> <td style="width: 25%;">Power Company</td> <td style="width: 25%;">Inquiry #</td> </tr> </table>	# of Bathrooms	Service Size	Power Company	Inquiry #
# of Bathrooms	Service Size	Power Company	Inquiry #	
Value of Work (required) \$9,696.00 \$102				

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: 07/13/22

Approval: <u>Fisher</u> Permit Fee: <u>\$102</u>	Office Use Only Approval date: <u>7/13/22</u> Issued date: _____
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(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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 6/30/22
Permit # 22-00888
GPIN
Tax Map

LOCATION

Street Address 3267 Bayberry Lane, Goochland Va 23063
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PROPERTY OWNERSHIP

Name Everett Madden	Phone 804 550-2026
Mailing Address same	Email maddene@gmail.com

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

Install customer supplied 24KW Generac Generator withh (2) 200 Amp automatic transfer switches.			
# of Bathrooms	Service Size 400 Amp	Power Company Dominion Energy	Inquiry #
Value of Work (required) 3,695.00			

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

Signature of Applicant: Date: 6/28/22

Approval: <u>Fisher</u>	Office Use Only Approval date: <u>7/8/22</u>
Permit Fee: <u>\$38.38</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 7-7-22
Permit # ELI-2022-00492
GPIN
Tax Map

LOCATION

Street Address 1788 Stage Coach LN

PROPERTY OWNERSHIP

Name Kuy Joe Wadle	Phone
Mailing Address 1788 Stage Coach LN 23103	Email

APPLICANT

Name Joseph S. Schiess	Phone 804 784 6774
Address P.O. Box 231 Manakin Sabot, VA	Email selec21@aol.com

CONTRACTOR

Name J. S. Schiess Electrical	Phone 804 784 6774
Mailing Address PO Box 231 manakin Sabot VA	Email selec21@aol.com
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number Expiration License Type Class 2705046710 10/31/22 EIEC B

DESCRIPTION OF WORK

24 KW Generator			
and 200 Amp Transfer Switch			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$ 11,000			

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: [Signature] Date: 7/7/22

Approval: Fisher	Office Use Only
Permit Fee: 106.59	Approval date: 7/7/22
	Issued date: 7/7/22



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

7/5
 Date: 6/30/22
 Permit #: EL-2022-00881
 GPIN:
 Tax Map:

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

LOCATION

Street Address
 1510 Beaver Dam Creek Road, Crozier VA 23039

PROPERTY OWNERSHIP

Name Jenny and Jason Hull	Phone 804-651-3684
Mailing Address 1510 Beaver Dam Creek Road, Crozier VA 23039	Email none on file

APPLICANT

Name Never Dark Whole House Generators	Phone 434-975-3275
Address 2293 Seminole Lane, Charlottesville, VA 22901	Email lorineverdark@gmail.com

CONTRACTOR

Name Never Dark Whole House Generators	Phone 434-975-3275			
Mailing Address 2293 Seminole Lane, Charlottesville, VA 22901	Email lorineverdark@gmail.com			
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705141802 * <u>2705121802</u>	Expiration <u>07/31/2023</u>	License Type contractor	Class a

DESCRIPTION OF WORK

wiring a 24 kw automatic generator with automatic transfer switch with load share modules

# of Bathrooms	Service Size <u>400 AMP</u>	Power Company <u>Dominion</u>	Inquiry #
Value of Work (required) 6000			

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

Signature of Applicant: Lori Medina Date: 06/20/2022

Office Use Only

Approval: Fisher Approval date: 7/6/22
 Permit Fee: 48.94 Issued date: 7/6/22