



BUILDING PERMIT APPLICATION

Application Date: Sept 21 2022

Rec: 9-22-22

Permit Number: *BP-2022-01264*

GPIN/Tax Map: *6779-45-9237 / 32-1-0-59-0*

Issued: *11/21/22*

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 2084 Pony Farm Road Maidens Va. 23102	
	Owner Vernon Fleming	Phone # 513-602-7715
	Address 2084 Pony Farm Rd	Email vcfleming@gmail.com
APPLICANT INFORMATION	Applicant/Contact Millmar Const- John Miller	
	Address P.o. box 313 Manakin sabot 23103	Phone # 804-640-8443
		Email jmiller@millmarconstruction.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>N/A</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>25' from Rykew</i>	Center Line Setback <i>100'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone <i>X</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <i>*Kitchen removed from original plans.</i>		
Planning & Zoning Officer <i>David Long</i>	Date <i>11/2/22</i>			

CONTRACTOR INFORMATION	Contractor Millmar Construction		Phone 804-640-8443
	Address P.o. box 313 Manakin Sabot		Email jmiller@millmarconstruction.com
	Contractor License Number 2705-053462	Type A	Expiration 12-31-2023

DESCRIPTION OF WORK	Scope of Work: <i>24x66</i> Construct detached garage with finished 296 sqft for AND 10' OPEN STORAGE ACROSS THE BACK OFFICE				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms n/a	# of Bedrooms n/a	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. 296	Unfinished Sq. Ft. 1288	Total Sq. Ft. 1584 2263	

1067

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>476.96</i>
Value of Work	\$103,324 <i>\$96,074.00</i>	State Levy Fee	\$ <i>9.24</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>25.00</i>
Signature of Applicant	<i>John Miller</i>	RLD	\$
Date	<i>9/21/22</i>	SWP	\$
		Total	\$ <i>511.50</i>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RE # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD — CODE EDITION 16

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 11-16-22

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

Application Date: 27 Oct 2022 *Rcvd*

Permit Number: BP-2022-01402

GPIN/Tax Map: 6785-09-6869 | 55-10-14-M

Issued: 11/15/22

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.

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 1858 River Road West Crozier Va	
	Owner Jerry & Sandra Nuckols	Phone # 804-370-1223
	Address 1858 River Road West	Email sandranuckols1@gmail.com

APPLICANT INFORMATION	Applicant/Contact John Miller		Phone # 804-640-8443
	Address Po box 313 Manakin Sabot Va 23103		Email jmiller@millmarconstruction.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 front porch/use</u> <i>A2</i>			

Planning & Zoning Officer: [Signature] Date: 11/9/22

CONTRACTOR INFORMATION	Contractor Millmar Homes		Phone 804-640-8443
	Address Po box 313 Manakin Sabot Va		Email jmiller@millmarconstruction.com
	Contractor License Number 2705-053462	Type Class A	Expiration 12-31-2023

DESCRIPTION OF WORK	Scope of Work: Remodel kitchen and 2 baths - WIDEN CASED OPENING				
	Proposed Use Private	Current Use Private	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>n/a</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms 2	# 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. 260	Unfinished Sq. Ft. 260	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	87500
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 10-26-2022

Application Fee	\$ <u>405.15</u>
State Levy Fee	\$ <u>8.12</u>
Zoning Fee	\$ <u>25</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>438.87</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 _____ 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 RB # STORIES — CONSTRUCTION TYPE VB OCCUPANT LOAD — CODE EDITION VB

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 11-10-22

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: 10-31-22

Permit Number: BP-2022-01389

GPIN/Tax Map: 7733-17-20220 / 67-10-0-28-0

Issued: 11-17-22

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>5 LOWER TUCKAHOE RD WEST RICH, VA 23238</u>	
	Owner <u>JAN JOHNSTONE</u>	Phone # <u>804-690-6240</u>
	Address <u>SAME</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>JEFF AUSTIN PREFERRED Chimney SERVICE Inc</u>	Phone # <u>OFFICE-804-994-2189 CELL-804-314-8171</u>
	Address <u>4296 King William Rd Aylett VA 23009</u>	Email <u>1shorerunnerpc@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lower Tuckahoe</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> RI			
	Planning & Zoning Officer <u>David Floyd</u> Date <u>11/9/22</u>			

CONTRACTOR INFORMATION	Contractor <u>PREFERRED Chimney SERVICE Inc/JEFF AUSTIN</u>	Phone <u>804-314-8171 (CELL) 804-994-2189 (OFFICE)</u>
	Address <u>4296 King William Rd Aylett VA 23009</u>	Email <u>1shorerunnerpc@gmail.com</u>
	Contractor License Number <u>2105 082458</u>	Type <u>CLASS B</u>

DESCRIPTION OF WORK	Scope of Work: <u>REline existing chimney with u/l listed cast in place masonry liner</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>8646⁰⁰</u>
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Application Fee	\$ <u>50.91</u>
State Levy Fee	\$ <u>1.02</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>76.93</u>

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

Signature of Applicant Jeff Austin Date 10-17-22

Rec: 10-19-22



BUILDING PERMIT APPLICATION

Application Date: 19 October 2022

Permit Number: BP-2022-01863

GPIN/Tax Map: 7716-61-0184/58-2A-0-3-0

Issued: 11-15-22

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.

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 269 Lucille Lance	
	Owner Robert and Kathreen Sandford	Phone # 804.502.2155
	Address 269 Lucille Lane Manakin Sabot VA 23103	Email robert.sandford.1@us.af.mil
APPLICANT INFORMATION	Applicant/Contact Robert Sandford	
	Address 269 Lucille Lane Manakin Sabot VA 23103	Phone # 804.512.2155
		Email kathreen@westendtax.com

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

CONTRACTOR INFORMATION	Contractor self		Phone 804.502.2155
	Address _____		Email robert.sandford.1@us.af.mil
	Contractor License Number _____	Type _____	Expiration _____

DESCRIPTION OF WORK	Scope of Work: Barn				
	Proposed Use Store tractor and equipment	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 2
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? <u>Yes</u> / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		2,100	2,100		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$55,000</u> 127,250	Application Fee	\$ <u>319.13</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>6.38</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>350.51</u>

Signature of Applicant: [Signature] Date: 19 Oct 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: 10/31/22

Permit Number: SP-2022-01440

GPIN/Tax Map: 6767-16-3021/A2-24-O-D-0

Issued: 11-15-22

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>3058 River Road West, Goochland, VA 23060</u>	
	Owner Contact: <u>Cheryl Smith</u>	Phone # <u>(804) 556-5423</u>
	Address <u>P.O. Box 189, Goochland, VA 23060</u>	Email <u>csmith@goochlandva.us</u>

APPLICANT INFORMATION	Applicant/Contact <u>Dallas Jones</u>	Phone # <u>(804) 418-5227</u>
	Address <u>10817 West Broad St.</u>	Email <u>13@fastsigns.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/GOA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* Bldg. Moved.</u>		

Planning & Zoning Officer: David Taylor Date: 11/15/22

CONTRACTOR INFORMATION	Contractor <u>Trexlo Enterprises LLC</u>	Phone <u>(804) 418-5227</u>
	Address <u>2361 Greystone Court</u>	Email <u>13@fastsigns.com</u>
	Contractor License Number <u>2705161657</u>	Type <u>Class A</u>

Expiration: 8/2023

Scope of Work:
Attaching 10'x4'x0.125" aluminum composite panel to vinyl siding of building

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

Building Only - Excludes All Trades Permits

Value of Work	<u>\$1200</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: Dallas Jones Date: 10-27-2022

Application Fee	\$ _____
State Levy Fee	\$ _____
Zoning Fee	\$ _____
RUD	\$ _____
SWP	\$ _____
Total	\$ <u>0</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/3/2022
 Permit Number: BP-2022-01425
 GPIN/Tax Map: 7726-96-3119/59-1-0-38-AL
 Issued: 59-1-0-38-AL / 11-15-22
 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>1504 LITTLE TUCKAHOE CT. RICHMOND VA 23233</u>	
	Owner <u>COX PROPERTY LLC</u>	Phone # <u>913-568-6674</u>
APPLICANT INFORMATION	Address <u>GOOCHLAND VA 23063</u>	Email <u>ROBW@TEAMTOMMYS.COM</u>
	Applicant/Contact <u>EMERALD CONSTRUCTION CO. / PARRISH FLOYD</u>	Phone # <u>804-683-3117</u>
	Address <u>2219 DABNEY RD. RICHMOND 23230</u>	Email <u>PFLLOYD@EMERALDCONSTRUCTION.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>MA</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>35' from PLYWOOD</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>11/9/22</u>			

CONTRACTOR INFORMATION	Contractor <u>EMERALD CONSTRUCTION COMPANY</u>		Phone <u>804-747-4854</u>
	Address <u>2219 DABNEY RD. RICHMOND VA 23230</u>		Email <u>SAME</u>
	Contractor License Number <u>2705021196</u>	Type <u>CLASS A GC</u>	Expiration <u>6/30/2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>40' TALL</u> <u>INSTALL 8" FLAG POLE ON CONCRETE BASE</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>65.79</u>
Value of Work	<u>\$8772.00</u>	State Levy Fee	\$ <u>7.32</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>117.11</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>11/3/2022</u>



BUILDING PERMIT APPLICATION

Application Date: 11/14/22

Permit Number: BP-2022-01429

GPIN/Tax Map: MLD-78-5604/47-1-0-35-A

Issued: 11-15-22

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.

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

Residential Commercial

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OWNER INFORMATION	Site Address 1903 Manakin Rd., Suite F, Manakin Sabot, VA 23103	
	Owner Mayland Shannon, LLC	Phone # 804-400-3420
	Address PO Box 29688, Henrico VA 23242	Email johnpatrickgregory@gmail.com
APPLICANT INFORMATION	Applicant/Contact J. Patrick Gregory	Phone # 804-400-3420
	Address PO Box 29688, Henrico VA 23242	Email johnpatrickgregory@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>NA</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. B1</u>			
	Planning & Zoning Officer <u>[Signature]</u>		Date <u>11/9/22</u>	

CONTRACTOR INFORMATION	Contractor Owner	Phone 804-400-3420
	Address PO Box 29688, Henrico VA 23242	Email johnpatrickgregory@gmail.com
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: cover interior stairwell with plywood to render stairwell inaccessible. <u>Turnover improvements made for owner</u>				
	Proposed Use Office	Current Use Office	Environmental Impacts (stream crossing, wetlands, amt land disturbed) none		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms NA	# of Bedrooms NA	# of floors NA
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. NA	Unfinished Sq. Ft. NA	Total Sq. Ft. NA	

Building Only - Excludes All Trades Permits

Value of Work	\$100	Application Fee	\$ <u>30</u>
		State Levy Fee	\$ <u>1.00</u>
		Zoning Fee	\$ <u>60</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>80.00</u>

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

Signature of Applicant [Signature] Date 11/14/2022



BUILDING PERMIT APPLICATION

Application Date: 14 November 2022

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

Permit Number: **BIC-2022-01430**

GPIN/Tax Map: 7726-77-6080 / 59-4-0-5-A

Issued: **11/16/22**

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 1616 Three Chopt Road	
	Owner Abi's Four Rings LLC c/o Jim McVey	Phone # 804-363-7073
APPLICANT INFORMATION	Address 4198 Cox Road, Suite 200, Glen Allen, VA 23060	Email ciii@jonescorporations.com
	Applicant/Contact JRCC / Bingham Jones	Phone # 757-784-0390
TO BE COMPLETED BY ZONING DEPARTMENT	Address 1058 Technology Park Drive, Glen Allen, VA 23059	Email bingham74@icloud.com

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 type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
Planning & Zoning Officer _____		Date _____	

CONTRACTOR INFORMATION	Contractor Jones Realty & Construction Corporation		Phone 804-321-1700
	Address 1058 Technology Park Drive, Glen Allen, VA 23059		Email bingham74@icloud.com
	Contractor License Number 2701003757	Type Class A Comm & Res	Expiration 10-31-2023

DESCRIPTION OF WORK	Scope of Work: gated masonry dumpster pad with enclosure per Partner Vet PoD approved 7 June 2022				
	Proposed Use screening enclosure	Current Use vacant	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 600 SF		
	SEWER Public/Private n/a	WATER Public/Private n/a	# of Bathrooms n/a	# of Bedrooms n/a	# of floors ground level only
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="radio"/> No <input type="radio"/>	Finished Sq. Ft. n/a	Unfinished Sq. Ft. 900	Total Sq. Ft. 900	

Building Only - Excludes All Trades Permits		Application Fee \$ 3000 State Levy Fee \$ 60 Zoning Fee \$ 60 RLD \$ _____ SWP \$ _____ Total \$ 8060
Value of Work	\$3,800.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<i>[Signature]</i>	
Date	11-11-2022	



BUILDING PERMIT APPLICATION

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

Application Date: 10/14/2022

Permit Number: BP-2022-01341

GPIN/Tax Map: 124-90-7109/64-28-D-21

Issued: 11/17/22

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 172 GRAYASH	
	Owner Raymond & Kathy Gutierrez	Phone # 804-767-0775
	Address 172 GRAYASH	Email

APPLICANT INFORMATION	Applicant/Contact Farrar Pace	
	Address 8711 West Broad St.	Phone # 804-767-0775
		Email fpace@jopa.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Oak</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>Behind Main Bldg.</u>	Center Line Setback	Rear Setback <u>5</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Survey Locate Setbacks.</u>	
	Planning & Zoning Officer <u>Daniel Taylor</u>	Date <u>11/9/22</u>		

CONTRACTOR INFORMATION	Contractor JoPa Company		Phone 804-747-9700
	Address 8711 West Broad Street		Email fpace@jopa.com
	Contractor License Number 2701005553	Type Class A	Expiration 10/23/23

DESCRIPTION OF WORK	Scope of Work: Inground Pool with automatic cover				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>400</u>	Unfinished Sq. Ft. <u>400</u>	Total Sq. Ft. <u>950 sqft 400</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>312</u>
Value of Work	80,000.00	State Levy Fee	\$ <u>7.00</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.		Zoning Fee	\$ <u>20</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>409.00</u>
Signature of Applicant <u>[Signature]</u>		Date <u>10/14/22</u>	

R5 - VB 2015 Bill 11/15/2022



BUILDING PERMIT APPLICATION

Application Date: September 28, 2022

Permit Number: BP-2022-01220

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:

Issued: 11/17/22

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: **2838 Sandy Hook Road Goochland, VA 23063**

Owner: **Ragland Memorial Baptist Church** Phone #: **804-556-4500**

Address: **2838 Sandy Hook Road Goochland, VA 23063** Email:

Applicant/Contact: **Christopher Robbins** Phone #: **804-314-0206**

Address: **8570 Meadowsweet drive Mechanicsville, VA 23116** Email: **CTRobbins68@gmail.com**

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 Foot print/Use.
 Planning & Zoning Officer: David [Signature] Date: 10/12/22

Contractor: **Ford and Robbins Construction** Phone: **804-314-0206**

Address: **8570 Meadowsweet Drive Mechanicsville, VA 23116** Email: **CTRobbins68@gmail.com**

Contractor License Number: **2705095604** Type: **A** Expiration: **05/2023**

Scope of Work: **Modify existing space creating offices and enlarge bathrooms.**

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. <u>1800</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>1800</u>	

Building Only - Excludes All Trades Permits
Value of Work: **90,000**

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: 9/28/2022

Application Fee	\$ <u>610</u>
State Levy Fee	\$ <u>1350</u>
Zoning Fee	\$ <u>00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1960</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 _____ 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 A-3 # STORIES 2 CONSTRUCTION TYPE TLS OCCUPANT LOAD UNCHG CODE EDITION 18

FIRE SPRINKLER No FIRE ALARM Yes MODIFICATION No

APPROVAL [Signature] DATE 10.13.22
Code Official

Rec: 8-16-22



APPLICATION

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-2022-01069

GPIN/Tax Map:

6128-28-6892/27-16-0-6-0

Issued:

11/7/22

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 4836 River Rd W, Goochland, VA 23063	
	Owner Jorge Osorio	Phone # (804) 774-0688
	Address 4836 River Rd W, Goochland, VA 23063	Email osorioja88@gmail.com
APPLICANT INFORMATION	Applicant/Contact ADT Solar, LLC - Kaitlyn Thomas	
	Address 11106 Air Park Rd. Ashland, VA 23005	Phone # 985-789-8590 Email sprichmond@theprocompanies.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>River Road West</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA A1
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer <i>Daniel Floyd</i>		Date <i>8/24/22</i>	

CONTRACTOR INFORMATION	Contractor ADT Solar, LLC		Phone 985-789-8590
	Address 22171 MCH Rd. Mandeville, LA 70471		Email sprichmond@theprocompanies.com
	Contractor License Number 2705177478	Type CBC,RBC	Expiration 12-31-2022

Scope of Work:
 installation of 24 solar panels on a existing residential roof with coinciding electrical wiring

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	46322
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Application Fee	\$ 220.45
State Levy Fee	\$ 4.41
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWD	\$ 249.86

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

Application Date: 10/20/2022 10/24/22

Permit Number: BP-2022-01367

GPIN/Tax Map: 708-61-4239/4640-0-2-0

Issued: 11/7/22

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 2565 Covey Run Court, Manakin-Sabot, VA	
	Owner Tara Chapman	Phone # (276)620-2961
	Address 2565 Covey Run Court, Manakin-Sabot, VA	Email tdchapman0201@gmail.com

APPLICANT INFORMATION	Applicant/Contact Nicki Bianchini / Convert Solar LLC		Phone # 757-447-6527
	Address 5770 Thurston Ave, Ste 106, VA Beach, VA 23455	Email npi@convert-solar.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Covey Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from p4 road</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA <u>A2</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Boyd</u> Date <u>11/2/22</u>			

CONTRACTOR INFORMATION	Contractor Chad Wilkins / Convert Solar		Phone 757-447-6527
	Address 5770 Thurston Ave, Ste 106, VA Beach, VA 23455		Email npi@convert-solar.com
	Contractor License Number 2705183097	Type AES;ELE	Expiration 08/31/2024

DESCRIPTION OF WORK	Scope of Work: ground-mounted, grid-tied, 24.00kW solar pv system on existing residence				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work	35250.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 10/20/2022
RS JB 2018 Ball 4 Nov 2022

Application Fee	\$ <u>110.03</u>
State Levy Fee	\$ <u>3.41</u>
Septic/Well Fee	\$ _____
Zoning Fee	\$ <u>25</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>148.04</u>



BUILDING PERMIT APPLICATION

Application Date: 9/23/2022Permit Number: BP 2022-01259GPIN/Tax Map: 116-67-2925/47-1-0-29-0Issued: 11-15-22This 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>1842 Manakin Rd. Manakin Sabot, VA 23103</u>	
	Owner <u>Scott & Laurie Pettit</u>	Phone # <u>804.833.2346</u>
	Address <u>1842 Manakin Rd. Manakin Sabot, VA 23103</u>	

APPLICANT INFORMATION	Applicant/Contact	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>100' from P/U/KW</u>	Center Line Setback <u>125'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA —
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Floyd</u> Date: <u>10/4/22</u>			

CONTRACTOR INFORMATION	Contractor <u>J Flippin Weans</u>		Phone <u>804.484.4951</u>
	Address <u>815 Manakin Rd., Manakin Sabot, VA 23103</u>		Email <u>NHVAC21@AOL.COM</u>
	Contractor License Number <u>2705165985</u>	Type	Expiration <u>02/29/2024</u>

DESCRIPTION OF WORK	Scope of Work: <u>- Deming existing deck. Build new deck w/ roof and screening.</u>				
	Proposed Use <u>Covered Deck</u>	Current Use <u>open Deck</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NA</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>NA</u>	# of Bedrooms <u>NA</u>	# of floors <u>NA</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. —	Unfinished Sq. Ft. <u>256</u>	Total Sq. Ft. <u>256</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 15,000</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: 9/22/2022

Application Fee	\$ <u>1950</u>
State Levy Fee	\$ <u>159</u>
Zoning Fee	\$ <u>2500</u>
RLD	\$
SWP	\$
Total	\$ <u>70609</u>

Double wide



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: 4-16-2022

Permit Number: BP-2022-00498

GPIN/Tax Map: 7716-80-2094 / 58-8-0-2-C

Issued: 11-4-22

Residential Commercial

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

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

OWNER INFORMATION	Site Address Rogel Venson 375 Songbird lane	
	Owner Rogel Venson	Phone # 804-517-5310
APPLICANT INFORMATION	Address 375 Songbird lane	Email rogelvenson@gmail.com
	Applicant/Contact Rogel Venson	Phone # 804-517-5310
	Address 375 Songbird lane	Email rogelvenson@gmail.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 55' from Pylon	Center Line Setback —	Rear Setback 35'	CUP/Variance/COA —
	Side Setback 20'	Side Setback 20'	Flood Zone —	

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David Floyd Date: 7/20/22

CONTRACTOR INFORMATION	Contractor Rogel Venson Sean Redmond (SEMI NOTES)	Phone 804-517-5310 804-586-3993
	Address 371 Songbird lane	Email rogelvenson@gmail.com
	Contractor License Number	Type Expiration

Scope of Work: Accessory Family housing unit Attached. in accordance with Sec. 15285.A
SETTING A MANUFACTURED HOME, 2021
Attaching double wide to existi.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 3	# of floors
Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. 1924	Unfinished Sq. Ft. 6504 80 sq	Total Sq. Ft. 2404.00 2874 20 sq ft	

Building Only - Excludes All Trades Permits

Value of Work	\$ 90,000.00	Application Fee	\$ 442.00
		State Levy Fee	\$ 8.34
		Septic/Well Fee	\$
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 450.34

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: Rogel Venson Date: 2-24-2020

 <p style="text-align: center;">BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date:
	Permit Number: <u>BP-2022-00897</u>
	GPIN/Tax Map: <u>7716-80-2094/58-8-0-2-C</u>
	Issued: <u>11-4-22</u>

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

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

OWNER INFORMATION	Site Address	<u>375 Songbird lane</u>	
	Owner	<u>Rogel Venson</u>	Phone # <u>804-517-5310</u>
	Address	<u>371 songbird lane</u>	Email <u>rogelvenson@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact	<u>Rogel Venson</u>	
	Address	<u>371 Songbird lane</u>	Phone # <u>804-517-5310</u>
			Email <u>rogelvenson@gmail.com</u>

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

APPROVED REJECTED COMMENTS:

Planning & Zoning Officer: David Foyt Date: 7/20/22

CONTRACTOR INFORMATION	Contractor	<u>Rogel Venson</u>	
	Address	<u>371 Songbird lane</u>	Phone <u>804-517-5310</u>
			Email <u>rogelvenson@gmail.com</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Setting year 2010 A office trailer - Serial#</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>\$3,000.00</u>	Application Fee \$ <u>30.00</u>
<p>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.</p> <p>Signature of Applicant: <u>Rogel Venson</u> Date: <u>03-31-2021</u></p>		State Levy Fee \$ <u>.60</u>
		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>55.60</u>

55.60

Pnc: 10-20-22



BUILDING PERMIT APPLICATION

Application Date: 10/20/2022

Permit Number: *BP-2022-0397*

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: 16-10-0-5-0/5891-70-4176

Issued: *11-4-22*

Residential Commercial

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

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

OWNER INFORMATION	Site Address 3151 Lowry Rd, Columbia, VA 23038	
	Owner Christopher Taylor	Phone # 808-357-3207
	Address 3151 Lowry Rd, Columbia, VA 23038	Email ctayinet@gmail.cc

APPLICANT INFORMATION	Applicant/Contact Home Owner Listed Above		Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Whitlers Branch</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <i>75' from P/R/W</i>	Center Line Setback <i>100'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA <i>A1</i>
	Side Setback <i>5'</i>	Side Setback <i>5'</i>	Flood Zone	

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: *David Floyd* Date: *11/3/22*

CONTRACTOR INFORMATION	Contractor Home Owner / owner		Phone 808-357-3207
	Address		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <i>metal 60x30 detached garage</i> Clearing, Prep and pour of monolithic slab. Building Installed.				
	Proposed Use Metal Building Structure	Current Use Land	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None on property		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 0
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 0	Unfinished Sq. Ft. 1800	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	\$28,560 <i>58,500</i>
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Application Fee	\$ <i>275.26</i>
State Levy Fee	\$ <i>5.50</i>
Zoning Fee	\$ <i>25.00</i>
RLD	\$
SWP	\$
Total	\$ <i>305.76</i>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: *Chris Taylor* Date: *10/20/22*



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: 10/13/2022 10/14/22

Permit Number: BP-2022-01326

GPIN/Tax Map: 7714-92-7383/08-1-0-187

Issued: 11/7/22

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: 13056 River Road, Henrico, VA 23238
 Owner: Eric Robinson Sr. Phone #: 804-356-8959
 Address: 13056 River Road, Henrico, VA 23238 Email: ayr321@gmail.com

APPLICANT INFORMATION

Applicant/Contact: Jenny
The Drying Company, LLC Hammond Phone #: 757-243-6098 (c)
 Address: PO Box 637 Toccoa, VA 23168 Email: jenny@thedryingco.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 footprint/use. R1
 Planning & Zoning Officer: David Floyd Date: 10/21/22

CONTRACTOR INFORMATION

Contractor: The Drying Company, LLC Phone: 757-566-8622 (c)
 Address: PO Box 637 Toccoa, VA 23168 Email: jenny@thedryingco.com
 Contractor License Number: 2705085853 Type: Class A Expiration: 8/31/2024

DESCRIPTION OF WORK

Scope of Work: Install 4" steel I beam to support floors above 1-8' 2-12'
Install smart jack supplemental system w/ large steel base plate to support sagging floor joists. (I am also including a scope of work + material schedule [work order])

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		<u>2</u>	<u>4</u>	<u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
<u>Yes</u>	<u>4716</u>	<u>1710</u>	<u>1710</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$9504.64

Application Fee	\$ <u>80.87</u>
State Levy Fee	\$ <u>1.10</u>
Zoning Fee	\$ <u>20</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>80.87</u>

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

Signature of Applicant: [Signature] Date: 10/13/2022

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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS # STORIES — CONSTRUCTION TYPE VB OCCUPANT LOAD — CODE EDITION 18

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 11-4-22

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

Application Date: 10/21/22

Permit Number: BP-2022-0305

GPIN/Tax Map: 0111-45-4460/43-42-0-160

Issued: 11/7/22

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 1742 FISHERS POND DR, MAIDENS, VA, 23102	
	Owner SEAN MLODZINSKI	Phone # (540) 541-8700
	Address 1742 FISHERS POND DR, MAIDENS, VA, 23102	Email mlodzinski743@gmail.com
APPLICANT INFORMATION	Applicant/Contact Smit Shah	
	Address 13655 Dulles Technology Drive Herndon VA 20171.	Phone # 8136071710 Email smit@greenbrilliance.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Use change to farm print / use</u> RP Planning & Zoning Officer <u>[Signature]</u> Date <u>11/2/22</u>			

CONTRACTOR INFORMATION	Contractor GreenBrilliance LLC.		Phone 7036570090
	Address 13655 Dulles Technology Drive Herndon VA 20171.		Email permit@greenbrilliance.com
	Contractor License Number 2705120410	Type AES	Expiration 12/31/2023

DESCRIPTION OF WORK	Scope of Work: Installation of a grid-tied, roof-mounted solar photovoltaic electric system using 33 Silfab 370W panels to create a system of a total size of 12.21KW				
	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. 650	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>0</u> State Levy Fee \$ <u>1.14</u> Zoning Fee \$ <u>20</u> RLD \$ _____ SWP \$ _____ Total \$ <u>83.14</u>
Value of Work	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	<u>Smit Shah</u>	
Date	<u>10/18/2022</u>	

RS VB 2018 Bill Nov 4, 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: 9/16/22

Permit Number: BP-2022-01254

GPIN/Tax Map: 6768-56-4971/31-1-0-21-A

Issued: 11-4-22

Residential Commercial

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

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

OWNER INFORMATION	Site Address <u>2835 Poorhouse Rd., Goochland</u>	
	Owner <u>Christine & David Kenworthy</u>	Phone # <u>516-279-7928</u>
	Address	Email <u>Christinetkenworthy@gmail.com</u>

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 <u>25' from P/R/W</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 <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Survey locate setbacks etc.</u>		Date <u>10/5/22</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>Remove existing structure - outbuilding/shed & build out building construct a gym + meditation studio in place of shed</u>		
	Proposed Use <u>Gym</u>	Current Use <u>none</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>2,000</u>
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u> # of Bedrooms <u>0</u> # of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No	Finished Sq. Ft. <u>1033</u>	Unfinished Sq. Ft. <u>0</u> Total Sq. Ft. <u>1033</u>

Building Only - Excludes All Trades Permits		Application Fee \$ <u>799.50</u>
Value of Work <u>\$ 175,000</u>		State Levy Fee \$ <u>12.99</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
		Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>840.49</u>
Signature of Applicant <u>[Signature]</u>	Date <u>8/29/22</u>	

Rec: 10-3-22



BUILDING PERMIT APPLICATION

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

Application # 10-12-22
 Permit Number BP-2022-01307
 GPIN/Tax Map: 716-80-2094 / 58-8-0-2-C
 Issued: 11-3-22
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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: Rogel Venson
 Owner: Rogel Venson
 Address: 371 Songbird lane
 Phone #: 804-517-5310
 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: _____
 Address: _____
 Phone #: _____
 Email: rogelvenson@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
Front Setback <u>55' From PLYWOOD</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Boyd Date: 10/21/22

CONTRACTOR INFORMATION
 Contractor: Rogel Venson
 Address: _____
 Phone: 804-517-5310
 Email: rogelvenson@gmail.com
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: Chicken coop + store Food Shed

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>560</u>	<u>560</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 3,000</u>	Application Fee	\$ <u>81.30</u>
		State Levy Fee	\$ <u>1.63</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>107.93</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: Rogel Venson Date: 10-02-2022



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: 9/27/22

Permit Number: BP-2022-01272

GPIN/Tax Map: # 6777-31-5856 | 431-0-750

Issued: 11/12/22

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>2094 Sheppard Town Road Crozier, Va 23039</u>	
	Owner <u>Ellen B Pons</u>	Phone # <u>443-807-6402</u>
	Address <u>P.O. Box 107 Bel Air MD 21014</u>	Email <u>ellen@ellenpons.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>same</u>	Phone # <u>same</u>
	Address <u>same</u>	Email <u>same</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from P/R</u>	Center Line Setback <u>100'</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>10/12/22</u>			

CONTRACTOR INFORMATION	Contractor <u>Owner</u>	Phone _____
	Address _____	Email _____
	Contractor License Number <u>10-20-22</u>	Type _____

DESCRIPTION OF WORK	Scope of Work: <u>new deck to existing Building</u> <u>Revised: Renovate existing doors/windows</u> <u>Structure, insulate, Add Bathroom</u> <u>com ent</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>400</u>	Unfinished Sq. Ft. <u>10</u>	Total Sq. Ft. <u>1003</u>	
	Building Only - Excludes All Trades Permits				

Value of Work	<u>15,000 + 55,000.00 = 70,000</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 Ellen B Pons Date 9/27/22

Application Fee	\$ <u>19.50</u>
State Levy Fee	\$ <u>1.59</u>
Zoning Fee	\$ <u>25</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>106.09</u>

252 AS

Rec: 10-25-22

 <p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date: <u>10-31-22</u>
	Permit Number: <u>BP-2022-01399</u>
	GPIN/Tax Map: <u>7725-07-1979/58-50-10-1-0-</u>
	Issued: <u>11-2-22</u>
	This application is <u>not</u> authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>317 Piping Rock Rd MANASSAS SAOON VA 23103</u>
	Owner <u>MARK KENNY</u>
	Phone # <u>804-833-1766</u>
	Address <u>317 Piping Rock Rd MANASSAS SAOON VA 23103</u>
	Email

APPLICANT INFORMATION	Applicant/Contact <u>Walsh Builders Inc / Ronnie Walsh</u>
	Address <u>967 Globe Landing Rd Center Cross VA 22437</u>
	Phone # <u>804-641-1591</u>
	Email <u>Walshbuilders@verizon.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>No change to footprint/use</u>		
	Planning & Zoning Officer: <u>David Boyd</u>	Date: <u>11/2/22</u>		

CONTRACTOR INFORMATION	Contractor <u>Walsh Builders Inc</u>	Phone <u>804-641-1591</u>
	Address <u>967 Globe Landing Rd Center Cross VA 22437</u>	Email <u>Walshbuilders@verizon.net</u>
	Contractor License Number <u>2701034172</u>	Type <u>A</u>
		Expiration <u>4-30-2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Finishing UNFINISHED Room App 14x16 (Office)</u>			
	Proposed Use <u>Dwelling</u>	Current Use <u>Dwelling</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>No</u>	Finished Sq. Ft. <u>222</u>	Unfinished Sq. Ft. <u>—</u>	Total Sq. Ft. <u>222</u>

Building Only - Excludes All Trades Permits		Application Fee \$ <u>68.24</u>
Value of Work \$ <u>12500</u>		State Levy Fee \$ <u>1.37</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 \$ <u>—</u>
Signature of Applicant: <u>[Signature]</u>	Date: <u>08/25/2022</u>	Zoning Fee \$ <u>25.00</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>94.61</u>



BUILDING PERMIT APPLICATION

Application Date: 09/02/2022

Permit Number: BP-2022-01173

GPIN/Tax Map: 6841-6A-7516/13-9-0-7-0

Issued: 11-2-22

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

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 3767 Broad Street Road, Gum Spring VA 23065	
	Owner John and Rebecca Babilon	Phone # 8043015310
	Address 5411 Bayswater Terrace, Glen Allen VA 23059	Email john.babilon@verizon.net
APPLICANT INFORMATION	Applicant/Contact John Babilon	
	Address 5411 Bayswater Terrace, Glen Allen VA 23059	Phone # 8043015310
		Email john.babilon@verizon.net

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/R/W</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA A1
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>*Survey locate Setbacks.</u>	
Planning & Zoning Officer <u>David Floyd</u>	Date <u>10/26/22</u>			

CONTRACTOR INFORMATION	Contractor John Babilon Owner		Phone 8043015310
	Address 5411 Bayswater Terrace, Glen Allen VA 23059		Email john.babilon@verizon.net
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: New 24'x25' Steel building to be used as a garage. <u>1 detached</u>				
	Proposed Use Garage	Current Use n/a	Environmental Impacts (stream crossing, wetlands, amt land disturbed) none		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. <u>600</u>	Total Sq. Ft. <u>600</u>	

Building Only - Excludes All Trades Permits

Value of Work	19821
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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 9/2/2022

Application Fee	\$ <u>101.20</u>
State Levy Fee	\$ <u>2.02</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>128.22</u>



BUILDING PERMIT APPLICATION

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

Application Date: ~~8/4/22~~ 9/2/22

Permit Number: 60-2022-01169

GPIN/Tax Map: 7715-62-3600 | 58-1-0-50-A

Issued: 11/4/22

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

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

OWNER INFORMATION
Site Address: 434 Woods Acres Rd

Owner: Frederick M. Pryor, Jr. Phone #: 804-640-8020

Address: 14105 Waltons Tavern rd Email: pryorshauling@aol.com

APPLICANT INFORMATION
Applicant/Contact: Fred Pryor Phone #: 804-640-8020

Address: 14105 Waltons Tavern Rd Montpelier VA 23192 Email: pryorshauling@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: <u>Woods Acres</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: <u>5' from P/R Row</u>	Center Line Setback: _____	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
	Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	Flood Zone: _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Change of use needed before C.O.</u>			

Planning & Zoning Officer: Dawn Floyd Date: 10/27/22

CONTRACTOR INFORMATION
Contractor: Pryor Hauling Inc Phone: 804-360-2120

Address: 2220 Formex St Richmond, VA 23224 Email: pryorshauling@aol.com

Contractor License Number: 2705027980 Type: Class A Expiration: 3/31/23

DESCRIPTION OF WORK
Scope of Work: relocate
Move existing house to property build foundation and footings

Proposed Use: residential	Current Use: residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>none</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>3</u>	# of Bedrooms: <u>2</u>	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No: <u>Yes</u>	Finished Sq. Ft.: <u>912</u>	Unfinished Sq. Ft.: <u>32</u>	Total Sq. Ft.: <u>944</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$10,000	Application Fee: \$0
	State Levy Fee: \$14
	Zoning Fee: \$80
	RLD: \$
	SWP: \$
	Total: \$108.14

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant: Frederick Pryor Date: 8/4/22

RS. VB Reviewed by: MICHAEL BROOKS 11-2-22

4 OCCUPANT LOAD



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

Date 11-17-22

Permit # BP 2022-00523

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: 237-DEER KEEP Richmond, VA. 23238

PROPERTY OWNERSHIP

Name: <u>MACK & ANDREA DRAKE</u>	Phone:
Mailing Address: <u>Richmond, VA, 23229</u>	Email:

APPLICANT

Name: <u>M.E. KEETON ELECTRICAL CONTRACTOR, INC.</u>	Phone: <u>804-798-7356</u>
Address: <u>P.O. Box 1146 Ashland, VA, 23005</u>	Email: <u>MEKEETON@AOL.COM</u>

CONTRACTOR

Name: <u>M.E. KEETON ELECTRICAL CONTRACTOR, INC.</u>	Phone: <u>804-798-7356</u>
Mailing Address: <u>P.O. Box 1146 Ashland, VA, 23005</u>	Email: <u>MEKEETON@AOL.COM</u>
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: <u>2705006613</u>
Expiration: <u>1-31-2024</u>	License Type: <u>Electrical</u>
	Class: <u>[Signature]</u>

DESCRIPTION OF WORK

WIRE SINGLE FAMILY DWELLING & INSTALL 22KW GENERATOR

# of Bathrooms:	Service Size: <u>400 AMP</u>	Power Company: <u>DOMINION</u>	Inquiry #: <u>10585453</u>
Value of Work (required): <u>\$44,000.00</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: Michael Keeton Sr. Date: 11-17-22

Office Use Only

Approval: Fisher Approval date: 11/23/22
Permit Fee: 258.00 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: 11/9

Permit #: 22-01430

GPIN:

Tax Map:

LOCATION

Street Address: 5995 COMMUNITY HOUSE RD

PROPERTY OWNERSHIP

Name: DERECK ANDREWS

Phone: 252-526-1343

Mailing Address: 5995 COMMUNITY HOUSE RD.

Email: DANDEWS1744@GMAIL.COM

APPLICANT

Name: Virginia Power Solutions

Phone: 804-365-0263

Address: 10102 Whitesel Road, B, Ashland, VA 23005

Email: JNS7AUS@virginiapowersolutions.com

CONTRACTOR

Name: Virginia Power Solutions

Phone: 804-365-0263

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005

Email: JNS7AUS@virginiapowersolutions.com

Gas Certification: YES NO

State License Number: 2705123991

Expiration: 8/31/24

License Type: ELE, GFC

Class: B

DESCRIPTION OF WORK

INSTALL 24kw GENERATOR & 200A SWITCH

of Bathrooms: _____ Service Size: _____ Power Company: DOM 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: 11/8/22

Office Use Only

Approval date: _____

Issued date: _____

(owner's statement on back)

11-9-22

CK# 1269

11.18



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	11.01.2022
Permit #	EU-2022-61431
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	4968 DOUBLE EAGLE DR	District
----------------	-----------------------------	----------

PROPERTY OWNERSHIP

Name	PATRICK CROWSON	Phone	434-962-2573
Mailing Address	4968 DOUBLE EAGLE DR LOUISA, VA 23093		

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

INSTALL 22KW, 200 AMP ATS			
<i>GEN</i>			
# of Baths	Service Size	Power Company	Inquiry #

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Signature of Applicant *Jim Han*

Value of Work: **13,985.00**

Permit fee: ~~102.00~~ **120.29**

Approval _____ Date **10-12-2022**

Issue date: _____

11-9-22

CK# 1269

11.16



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	11.01.2022
Permit #	EU-2022-01433
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	2306 MAIDENS RD	District	
----------------	-----------------	----------	--

PROPERTY OWNERSHIP

Name	JOHN MCPHERSON	Phone	804-833-2586
Mailing Address	2306 MAIDENS RD, VA 23102		

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

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

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 13,493.00

Signature of Applicant Jim Am

Permit fee: ~~402.00~~ 118.03

Approval Fisher Date 10-12-2022

Issue date: 11/9/22

11-9-99 CK# 1269

11.21



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date 11.08.2022

Permit # EL-2022-01435

GPIN

Tax Map

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

LOCATION

Street Address	5268 THREE CHOPT RD	District
----------------	----------------------------	----------

PROPERTY OWNERSHIP

Name	PAM POPE	Phone	804-274-9109
Mailing Address	5268 THREE CHOPT RD LOUISA, VA 23093		

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

INSTALL 22KW, 200 AMP ATS			
<i>GEN</i>			
# of Baths	Service Size	Power Company	Inquiry #

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

I _____ of (address) _____ affirm that I am the owner of a certain tract or parcel of land located at _____ I affirm that I am not subject to licensure as a contractor or subcontractor as required by section 54.1.1111 of the Code of Virginia.

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 13,232.00

Permit fee: 102.00 114.83

Signature of Applicant *Jim Allen*

Approval *Fisher* Date 10-12-2022

Issue date: 11/9/22



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

Date 11/3/22
Permit # 22-01415
GPIN
Tax Map

LOCATION

Street Address
800 Rockford Road Manakin Sabot, VA 23103

PROPERTY OWNERSHIP

Name JOSH & NICOLE Alan Lingerfelt	Phone 804-270-0015
Mailing Address 800 Rockford Road Manakin Sabot, VA 23103	Email ALingerfelt@LingerfeltCommonwealth.com

APPLICANT

Name B+B Electric	Phone 804 752 1075
Address 9982 Lickinghole Rd Ashland, VA 23005	Email chip@bb-electric.com

CONTRACTOR

Name B+B Electric		Phone	
Mailing Address 9982 Lickinghole Rd Ashland, VA 23005		Email	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2701038039A	Expiration 12/31/22	License Type Ele
		Class A	

DESCRIPTION OF WORK

upsizing a generator. 22,000 kW			
18kW →			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 10,895.00			

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

Signature of Applicant: **[Signature]** Date: **11-3-22**

Approval: <u>Fisher</u>	Approval date: <u>11/4/22</u>
Permit Fee: <u>106.11</u>	Issued 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: 6/8/21

Permit Number: DP-2021-00703

GPIN/Tax Map: 7726-26-8604 58-2-0-3.0

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.

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>1584-00 Whipponwill Rd Richmond, VA. 23233</u>	
	Owner <u>William Janulis</u>	Phone # <u>804 869 7474</u>
APPLICANT INFORMATION	Address <u>1586 Whipponwill Rd</u>	
	Applicant/Contact <u>1</u>	Email <u>wsjmgmt@yahoo.com</u>
Address <u>1</u>		Phone #
Address <u>1</u>		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Sunny Forest</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>—</u>	Date Paid <u>—</u>
	Front Setback <u>40' from P/L Row</u>	Center Line Setback <u>65'</u>	Rear Setback <u>25'</u>	CUP/Varlance/COA
	Side Setback <u>10' / 25'</u>	Side Setback <u>10' / 25'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>David Baune 127002 RN</u>			
Planning & Zoning Officer: <u>David Kemp</u>		Date: <u>6/10/21</u>		

CONTRACTOR INFORMATION	Contractor <u>owner/builder</u>		Phone <u>804. 869. 7474.</u>
	Address		Email <u>wsjmgmt@yahoo.com</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>SFD Revised: 11-29-22 to add</u> <u>Chen Lot Build House: Garage 988 sq ft deck</u>		
	Proposed Use <u>Residential</u>	Current Use <u>Empty Lot</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>none 9,500</u>
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>3 1/2</u> # of Bedrooms <u>3</u> # of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft. <u>2010.</u>	Unfinished Sq. Ft. <u>222</u> Total Sq. Ft. <u>2232</u> <u>3215</u>

Building Only - Excludes All Trades Permits

Value of Work <u>150,000</u>	<u>\$195,937.50</u>	Application Fee \$ <u>687.00</u>
		State Levy Fee \$ <u>13.74</u>
		Septic/Well Fee \$ <u>—</u>
		Zoning Fee \$ <u>50.00</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>750.74</u>

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

Signature of Applicant: M. Janulis Date: 6/8/21

Rec: 10-11-22



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

Application Date: 10/05/2022

Permit Number: *BJ-2022-01324*

GPIN/Tax Map: *7727-47-3959/1*

Issued: *11-29-22*

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: *2344 Greystone Court, Rockville, VA 23146*

Owner: *Richmond Machinery-2350 Greystone, LLC* Phone #: *John 979-8015*

Address: *10614 Courtney Rd, Glen Allen, VA 23060* Email: *Jbutler@southwoodbuilding.com*

APPLICANT INFORMATION
 Applicant/Contact: *Southwood Building Systems, Inc.* Phone #: *804-363-8564*

Address: *P.O. Box 1016, Ashland, VA 23005* Email: _____

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: *Rodenille Commerce Center* Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: *20' from P/L* Center Line Setback: *45'* Rear Setback: *30'* CUP/Variance/COA: _____
 Side Setback: *10'* Side Setback: *10'* Flood Zone: _____ *m2*

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: *David Pugh* Date: *10/21/22*

CONTRACTOR INFORMATION
 Contractor: *Southwood Building Systems, Inc.* Phone: *804-798-9225*

Address: *P.O. Box 1016, Ashland, VA 23005* Email: _____

Contractor License Number: *270102577* Type: *CBC,H/H,RBC* Expiration: *02/28/2023*

DESCRIPTION OF WORK
 Scope of Work: *Storage Building for storing Construction Equipment. @ Richmond Machinery*

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, ant land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors

Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
			<i>2,500</i>

Goochland County Dept. of Building Inspections

Building Only - Excludes All Trades Permits

Value of Work: *\$215,400.00*

NOV 29 2022
Deey Littlefield
APPROVED

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. Tom Evans* Date: *10/05/2022*

Application Fee	\$ <i>1,615.50</i>
State Levy Fee	\$ <i>32.31</i>
Zoning Fee	\$ <i>100.00</i>
RLD	\$ _____
SWP	\$ _____
Total	\$ <i>1,747.81</i>