



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/2
 Permit Number: BRP-2022-01474
 GPIN/Tax Map: 6832-TT-0533/12-8-0-11-0
 Issued: 12/2/22

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

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

OWNER INFORMATION	Site Address	4260 HADENSVILLE FARM Rd Mineral, Va 23117	
	Owner	Timothy SORENSEN	Phone # 8043396261
	Address	4260 HADENSVILLE FARM Rd Mineral, Va 23117	Email tsorensen1@yahoo.com

APPLICANT INFORMATION	Applicant/Contact	Timothy SORENSEN	Phone # 8043396261
	Address	4260 HadenSVille Farm Rd Mineral VA 23117	Email tsorensen1@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 80' CE	Center Line Setback	Rear Setback 5	CUP/Variance/COA
	Side Setback 5	Side Setback 5	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: Property lines must be marked		

Planning & Zoning Officer: Andrew Bannor Date: 12-14-22

CONTRACTOR INFORMATION	Contractor	Tim SORENSEN	Phone 8043396261
	Address	4260 HADENSVILLE FARM Rd MINERAL VA 23117	Email tsorensen1@yahoo.co
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Construct 18x20 carport			
	Proposed Use Vehicle storage	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. 360	Total Sq. Ft.

Building Only - Excludes All Trades Permits

Value of Work	2500.00 \$15,400	Application Fee	\$ 30.00
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.		State Levy Fee	\$ 13
		Zoning Fee	\$ 20
		RLD	\$
		SWP	\$
Signature of Applicant: <u>Timothy W Sorenson</u>	Date: <u>11/20/2022</u>	Total	\$ 63.03



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/2/22
 Permit Number: BP2-2022-01485
 GPIN/Tax Map: 6821-69-408/11-1-0-4A-B2
 Issued: 12-21-22
 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.

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>3907 Shelton's Springs Lane</u>	
	Owner <u>Bianca Shelton Romano</u>	Phone # <u>804 457 4861</u>
	Address <u>3907 Shelton's Springs Ln 23063</u>	Email <u>bianca-romano@me.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Bianca Shelton Romano</u>	
	Address <u>3907 Shelton's Springs Ln.</u>	Email <u>bianca-romano@me.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' 000 ROW</u>	Center Line Setback	Rear Setback <u>5</u>	CUP/Variance/COA
	Side Setback <u>5</u>	Side Setback <u>5</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer: Amatabama Date: 12-14-22

CONTRACTOR INFORMATION	Contractor <u>Orlando S. Structured</u>		Phone <u>410-793-9100</u>
	Address <u>6015 Laurel Valley Rd RA 31219310</u>		Email <u>cancell@myshedd.com</u>
	Contractor License Number <u>2105132301</u>	Type <u>ABC</u>	Expiration <u>01/31/2029</u>

DESCRIPTION OF WORK	Scope of Work: <u>Garage Shed</u>				
	Proposed Use <u>Storage</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)	Finished Sq. Ft. <u>unsure</u>	Unfinished Sq. Ft. <u>95%</u>	Total Sq. Ft. <u>1344 1920.</u>	
	Building Only - Excludes All Trades Permits				

Value of Work: 52,800.00

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: B. Romano Date: 12/1/22

Application Fee	\$ <u>200.00</u>
State Levy Fee	\$ <u>200</u>
Zoning Fee	\$ <u>20</u>
RLD	\$
SWP	\$
Total	\$ <u>219.59</u>

mailed in 11/18

 <p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial</p>	Application Date: <u>12-7-22</u>
	Permit Number: <u>64-1-0-24-T</u> <u>64-1-0-24-T</u>
	GPIN/Tax Map: <u>64-1-0-24-T</u>
	Issued: <u>12-27-22</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>218 224 Pagebrook Dr. Richmond, VA 23238</u>	
	Owner Crown Castle USA Inc	Phone # 410-9257839
	Address 10980 Grantchester Way, Columbia, MD 21044	Email joseph.stewart@crowncastle.com
APPLICANT INFORMATION	Applicant/Contact AT&T c/o Joseph Stewart (Crown Castle)	
	Address 10980 Grantchester Way, Columbia, MD 21044	Phone # 410-9257839
		Email joseph.stewart@crowncastle.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	<u>CU-2006-00002</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Amelia Barnes</u> Date <u>12-7-2022</u>			

CONTRACTOR INFORMATION	Contractor Jacobs Telecommunications INC		Phone 443-910-3525
	Address 5449 Bells Ferry RD		Email brad.roth@jacobs.com
	Contractor License Number 2705066988	Type Class A	Expiration 03/31/24

DESCRIPTION OF WORK	Scope of Work: <small>AT&T to remove existing equipment and mount. Install new mount, reinstall (6) RRH's, (3) TMA's and (3) Antennas. Install (12) new antennas (9) RRH's, install (2) rectifiers and (1) battery rack with associated equipment.</small>				
	Proposed Use Telecommunications	Current Use Telecom	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	\$28,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Joseph Stewart Date: 11/9/23

Application Fee	\$ <u>210.00</u>
State Levy Fee	\$ <u>4.20</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$
SWP	\$
Total	\$ <u>264.20</u>

Proc: 12-5-22



BUILDING PERMIT APPLICATION

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

Application Date:

Permit Number:

DP# 2022-01478

GPIN/Tax Map:

2021-0-380 0840-93-1625

Issued:

12-28-22

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

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

OWNER INFORMATION	Site Address	3006 WILLOW TRACE MILL FOREST II 23153		
	Owner	TOM BAKER		
	Address	AS ABOVE		

Phone #	804-334-4092
Email	WOODWRIGHT-STARKE@MWR

APPLICANT INFORMATION	Applicant/Contact	JEFFREY R STARKE		
	Address	3108 ROCK CRESS LN 23153		

Phone #	AS ABOVE
Email	

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	
	55' 0" ROW	80' CL	35	R-R

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: Anita Barnes Date: 12-14-2022

CONTRACTOR INFORMATION	Contractor	WOODWRIGHT CONSTRUCTION INC		
	Address	3108 ROCK CRESS LN 23153		
	Contractor License Number	Type	Expiration	

Phone	804-334-4092
Email	WOODWRIGHT-STARKE@MWR
Type	A
Expiration	2-25-24

DESCRIPTION OF WORK	Scope of Work: - no shrub swell per Michael Brooking a 384 -				
	REMOVING EXISTING DECK & CONSTRUCTION OF SCREEN PORCH				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	\$25,000
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Application Fee	\$ 124.50
State Levy Fee	\$ 2.49
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 151.99

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

Signature of Applicant: *[Signature]* Date: 12/5/2022

opened 12/20



BUILDING PERMIT APPLICATION

Application Date: 12/12/2022

Permit Number: 6012-20022-011415

GPIN/Tax Map: 7733-08-3556 | 64-27A-8-0

Issued: 12/30/22

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
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TDD 711 VA Relay

Residential Commercial

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OWNER INFORMATION
Site Address: 124 LINDENHURST

Owner: GARY LeCLAIR Phone #: 804-714-7470

Address: 124 Lindenhurst, Richmond, VA 23238 Email: GQB195@YAHOO.COM

APPLICANT INFORMATION
Applicant/Contact: GERARDO PEREZ Phone #: 703-944-0530

Address: 1021 SPAIN DR, STAFFORD, VA 23039 Email: gfperez@live.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: West Oak Proffer: Yes No Amount: Date Paid:

Front Setback: 30' off pavement Center Line Setback: Rear Setback: 50' B/S CUP/Variance/COA: RPUD

Side Setback: 20' B/S Side Setback: 20' B/S Flood Zone: APPROVED REJECTED COMMENTS:

Planning & Zoning Officer: Date:

CONTRACTOR INFORMATION
Contractor: GREAT DAY IMPROVEMENTS Phone: 703-944-0530

Address: 8436 KAO CIR, MANASSAS, VA 20110 Email:

Contractor License Number: 2705157137 Type: CBC/RBC Expiration: 5/31/2023

DESCRIPTION OF WORK
Scope of Work: CONSTRUCT AN 14'x21' SUNROOM ON AN EX. DECK & EX. ROOF. no sink/swell

Proposed Use: LANAI CONVERSION Current Use: PORCH 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.: 294 Unfinished Sq. Ft.: 294 Total Sq. Ft.:

Building Only - Excludes All Trades Permits

Value of Work: 35,629 Application Fee: \$ 178.33 State Levy Fee: \$ 35.00 Zoning Fee: \$ 20.00 RLD: \$ SWP: \$ Total: \$ 200.78

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

Signature of Applicant: Date: 12/12/2022



BUILDING PERMIT APPLICATION

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Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Residential Commercial

Application Date: 12/15/2022

Permit Number: BPL-2022-01498

GPIN/Tax Map: 6841-830778/1310-44-01

Issued: 12/30/22

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

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OWNER INFORMATION	Site Address 3701 Broad Street Road Gum Spring Va 23065	
	Owner Brian Clemms	Phone # 804 339 2903
	Address 3701 Broad Street Rd Gum Spring Va 23065	Email stumpyc9@aol.com
APPLICANT INFORMATION	Applicant/Contact Brian Clemms	
	Address 3701 Broad Street Rd Gum Spring Va 23065	Phone # 804 339 2903 Email stumpyc9@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' 000 ROW DE RT 250	Center Line Setback	Rear Setback 5	CUP/Variance/COA A-1
	Side Setback 5	Side Setback 5	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Cannot be with Power line easement Planning & Zoning Officer: <u>Ante Bann</u> Date: 12.27.22			

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

DESCRIPTION OF WORK	Scope of Work: Having a prefabricated building delivered 14x28 storage building				
	Proposed Use Storage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 392	

Building Only - Excludes All Trades Permits

Value of Work	15,493.63
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant: [Signature] Date: 12/15/2022

Application Fee	\$ 81.70
State Levy Fee	\$ 1.63
Zoning Fee	\$ 25
RLD	\$
SWP	\$
Total	\$ 108.35



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: ~~11/12~~ 12/22/22

Permit Number: 2022-00006

GPIN/Tax Map: 7116-24-0306/5736-0-70

Issued: 12/30/22

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	414 Shadow Creek Ln. Manakin Va ²³²³⁸ 23238	Phone #	804 354-5053
	Owner	Pete Luxhoj	Email	
	Address	414 Shadow Creek Ln.		
APPLICANT INFORMATION	Applicant/Contact	JB Farikhoff III	Phone #	804 502 1733
	Address	3400 Taylor Dr. Ridgely Va 23235	Email	jb30@cplva.com

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

APPROVED REJECTED COMMENTS: Planning & Zoning Officer Ann Barnes Date 12-28-22

CONTRACTOR INFORMATION	Contractor	Custan Pools and Landscapes of Richmond, Inc.	Phone	804 502 1733
	Address	3400 Taylor Dr. Ridgely	Email	jb30@cplva.com
	Contractor License Number	Type	Expiration	

Scope of Work: Install 16x38 fiberglass pool in backyard with an auto cover (Coverstar) model: Kingstar by Latham

DESCRIPTION OF WORK	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.	
			608	608	

Building Only - Excludes All Trades Permits		Application Fee	\$ 46.25
Value of Work	# 18,500	State Levy Fee	\$ 1.40
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>JB Farikhoff</u> Date: 11/1/22		Zoning Fee	\$ 20
		RLD	\$
		SWP	\$
		Total	\$ 162.15

12-29-22

Doc: 12-12-22

 BUILDING PERMIT APPLICATION Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay	Application Date: 12/12/2022
	Permit Number: BPR-2022-01493
	GPIN/Tax Map: Ad-1-0-15-0 / 6757-72-3893
	Issued: 12-30-22

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 2040 River Valley Lane, Goochland VA 23063	Phone # 804-467-3774
	Owner Dawn Dotson	Email ddotson72@gmail.com
APPLICANT INFORMATION	Address 2491 Fairground Rd., Maidens VA 23102	Phone # 804-467-3774
	Applicant/Contact Dawn Dotson	Email ddotson72@gmail.com

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

Planning & Zoning Officer: Anita Barnes Date: 12-28-22

CONTRACTOR INFORMATION	Contractor Dawn Dotson/OWNER Steel Buildings & Structures, Inc.	Phone 804-467-3774 877-272-8276
	Address 2491 Fairground Rd, Maidens VA 23102 POB 1287, Mt. Airy, NC 27030	Email ddotson72@gmail.com steelbuildings@steelbuildings.com
	Contractor License Number 2705159377	Type Contractor Expiration 2/27/2024

DESCRIPTION OF WORK	Scope of Work: detached garage enclosed with lean-to 30' x 35' x 14' 30' x 12' x 10'				
	Proposed Use garage storage	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) < 1/4 acre up to 3000 sq ft		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)	Finished Sq. Ft. N/A	Unfinished Sq. Ft. 1500/1410	Total Sq. Ft. 1500 1410	

Building Only - Excludes All Trades Permits		Application Fee \$ 186.49
Value of Work	\$27,000 \$38,775.00	State Levy Fee \$ 373
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ 25.00
Signature of Applicant	<u>Dawn Dotson</u>	RLD \$
Date	12/12/2022	SWP \$
		Total \$ 215.22



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: 11-17-22

Permit Number: BPL-2022-01450

GPIN/Tax Map: 28-1-097-B / 0738-36 6101

Issued: 12/01/22

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>4336 River Road West Goochland Va 23063</u>			
	Owner	<u>Angela Mercedes</u>		Phone #	<u>804-310-4562</u>
	Address	<u>4336 River Road West</u>		Email	<u>zenhorizon2012@gmail.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	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>Barnes</u> Date <u>11-29-2022</u> Planning & Zoning Officer <u>[Signature]</u>			

CONTRACTOR INFORMATION	Contractor	<u>owner - Eagle Carpents</u>		Phone	<u>804-579-8589</u>
	Address	<u>210 Airport Road in Henning NC 27030</u>		Email	<u>eaglecarpents.com</u>
	Contractor License Number	Type	Expiration		

DESCRIPTION OF WORK	Scope of Work: <u>Erecting 30x35 ft metal structure with anchor, no shrink/swell</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Storage / Shed</u>	<u>none</u>	# of Bathrooms	# of Bedrooms	# of floors
	SEWER <u>Public/Private</u> <u>NONE</u>	WATER <u>Public/Private</u> <u>NONE</u>	<u>N/A</u>	<u>N/A</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>1080</u>	<u>1080</u>	<u>1080 Sq. Ft</u>		

Building Only - Excludes All Trades Permits

Value of Work 46,292.00 29,700

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

Signature of Applicant Angela Mercedes Date 11-17-22

Application Fee	\$ <u>145.00</u>
State Levy Fee	\$ <u>2.91</u>
Zoning Fee	\$ <u>20</u>
RLD	\$
SWP	\$
Total	\$ <u>173.50</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/7/22

Permit Number: BP2-2022-01481

GPIN/Tax Map: 01A-000246/32-U0-30

Issued: 12/20/22

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

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

OWNER INFORMATION	Site Address	<u>22165 Pony Farm Rd Maidens VA 23102</u>	
	Owner	<u>Christopher Card</u>	
APPLICANT INFORMATION	Address	<u>22165 Pony Farm Rd Maidens VA 23102</u>	
	Applicant/Contact	<u>Christopher Card</u>	
	Phone #	<u>434-962-3926</u>	
	Email	<u>ccard@rostermanva.com</u>	
	Phone #		
	Email		

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
	<u>100' CL ROW</u>		<u>5</u>	
	Side Setback	Side Setback	Flood Zone	
	<u>5</u>	<u>35' DAD ROW</u>		
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:	
	Planning & Zoning Officer	<u>Ann Barnes</u>	Date	<u>12-14-22</u>

CONTRACTOR INFORMATION	Contractor	<u>Rivas General Contracting LLC</u>		Phone	<u>336-755-7027</u>
	Address	<u>628 Romie Snow Rd Dobson NC 27017</u>		Email	<u>rivasbac@gmail.com</u>
	Contractor License Number	Type	Expiration		
	<u>2700183968</u>	<u>Commercial</u>	<u>06/30/2024</u>		

DESCRIPTION OF WORK	Scope of Work: <u>30x50 Metal Building, (4) RUD, (1) WFD STORAGE</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Storage</u>		# of Bathrooms	# of Bedrooms	# of floors
	SEWER Public/Private	WATER Public/Private	<u>0</u>	<u>0</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>1,500</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>\$125,000</u> <u>48,750</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: Christopher Card Date: _____

Application Fee	\$ <u>201.51</u>
State Levy Fee	\$ <u>0.03</u>
Zoning Fee	\$ <u>20</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>201</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/12
 Permit Number: BRZ-2022-01465
 GPIN/Tax Map: 6107-02-1403/42-1-0-430
 Issued: 12/20/22

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

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

OWNER INFORMATION	Site Address	3245 MARSH DR GOOCHLAND VA 23063	
	Owner	Kim I PRATT, Fred Jenkins	
APPLICANT INFORMATION	Address	3245 MARSH DR. GOOCHLAND VA 23063	
	Applicant/Contact	Kim I PRATT	
	Phone #	845-943-0007	
	Email	prattk63@yahoo.com	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount
	Front Setback	Center Line Setback	Rear Setback
CONTRACTOR INFORMATION	Side Setback	Side Setback	Flood Zone
	APPROVED <input type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: Replacing old deck
	Planning & Zoning Officer	[Signature] Date 12-14-2022	
	Contractor	GEORGE T. LUNCH	
DESCRIPTION OF WORK	Address	2592 SHEPPARD TOWN RD. MAIDENS, VA. 23102	
	Contractor License Number	Type	Expiration
	Scope of Work:	BUILDING A 12' LONG X 8' WIDE FREE STANDING DECK	

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
Side Setback	Side Setback	Flood Zone	
APPROVED <input type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: Replacing old deck	
Planning & Zoning Officer	[Signature] Date 12-14-2022		

Contractor	GEORGE T. LUNCH		Phone
Address	2592 SHEPPARD TOWN RD. MAIDENS, VA. 23102		804-556-6306
Contractor License Number	Type	Expiration	
2705135810	C	7-31-2024	

DESCRIPTION OF WORK	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	To sit on	Access to Front Door			
	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	3,300.00
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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: 12-2-2022

Application Fee	\$ 30
State Levy Fee	\$.00
Zoning Fee	\$ 20
RLD	\$
SWP	\$
Total	\$ 50.00



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 12/7/22
 Permit Number: 692-2022-01480

GPIN/Tax Map: 6188-43-0057/22-1-0-70-0

Issued: 12/20/22

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

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

OWNER INFORMATION	Site Address	<u>1686 Broad Street Rd.</u>	
	Owner	<u>Doug + Tamara Adams</u>	
	Address	<u>1686 Broad Street Rd.</u>	

Phone #	
Email	

APPLICANT INFORMATION	Applicant/Contact	<u>David Hudnell</u>	Phone #	<u>804-461-1699</u>
	Address	<u>1651 Mellick Ridge Rd, Manakin-Sabot</u>	Email	<u>hudnellconstruction@comcast.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
	<u>100' 000 ROW</u>		<u>35</u>	
	Side Setback	Side Setback	Flood Zone	

APPROVED REJECTED COMMENTS: no change to footprint
 Planning & Zoning Officer: Ann Barnes Date: 12-14-22

CONTRACTOR INFORMATION	Contractor	<u>D.L. Hudnell Construction Inc.</u>	Phone	<u>1699</u> <u>804-461-1699</u>
	Address	<u>1651 Mellick Ridge Rd, Manakin-Sabot</u>	Email	<u>hudnellconstruction@comcast.net</u>
	Contractor License Number	Type	Expiration	

DESCRIPTION OF WORK	Scope of Work: <u>renovate master bathroom, laundry room pantry</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Personal</u>	<u>Personal</u>	<u>None</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
			<u>5 1/2</u>	<u>5</u>	<u>2</u>

Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
	<u>6887</u>		<u>6887</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>20,000.00</u>
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Application Fee	\$ <u>102</u>
State Levy Fee	\$ <u>2.04</u>
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>104.04</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: [Signature] Date: 12-7-2022



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: 7-21-22

Permit Number: BP-2022-00973

GPIN/Tax Map: 7117-32-7182

Issued: 12-20-22

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

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

OWNER INFORMATION	Site Address	<u>2202 Manakin rd Manakin Sabot VA 23103</u>	
	Owner	<u>Jose C Correa</u>	Phone # <u>804-252-9732</u>
	Address	<u>2202 Manakin rd Manakin Sabot</u>	Email <u>dannycorrea1999@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact	<u>Daniel Correa</u>	
	Address		Phone # <u>804-252-9732</u> Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone <u>C</u>	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>David Boyd</u> Date <u>8/1/22</u>		

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

DESCRIPTION OF WORK	Scope of Work:	<u>22 x 30 Foot Shed for Tools</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			<u>036</u>	<u>036</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$3,000</u> \$12,150 \$25,740
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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: Jose C Correa Date 21/July/22

Application Fee	\$ <u>93.68</u>
State Levy Fee	\$ <u>1.87</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>120.55</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: April 18, 2022
 Permit Number: BP-2022-00553

GPIN/Tax Map: 60119-29-4190/38-1-0-112-0
 Issued: 12-20-22

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

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

OWNER INFORMATION	Site Address	<u>5260 St Pauls Church Rd. Goochland VA</u>	
	Owner	<u>Philip Smethers III</u>	Phone # <u>(804) 591-8733</u>
APPLICANT INFORMATION	Address	<u>3009 Kenwood Ave Henrico VA 23228</u>	Email <u>prsmethers3@gmail.com</u>
	Applicant/Contact	<u>Philip Smethers III</u>	Phone # <u>same</u>
	Address	<u>same</u>	Email <u>same</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	<u>N/A</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>* No change to foot print / use. AI</u>		
Planning & Zoning Officer: <u>David Floyd</u>		Date: <u>5/9/22</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>Dry wall, Rot repair, Flooring, Siding, Remove Hall way wall, Trims, cabinets, renovate existing SFD</u>					
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)			
	<u>Family home</u>	<u>Family home</u>	<u>none</u>			
	SEWER <u>septic Private</u>	WATER <u>well Private</u>	# of Bathrooms	# of Bedrooms	# of floors	
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>(No)</u>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	<u>1035</u>	<u>0</u>	<u>1035</u>			

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>111.00</u>
Value of Work	<u>\$22,000</u>	State Levy Fee	\$ <u>2.22</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>138.22</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>4-18-22</u>

BUILDING PERMIT APPLICATION

Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

LOT 1-4 READERS BRANCH

Application Date:
11/15/2022

Permit Number:
602-2022-01154

Old Map Number:
58-55-4-1-0

GPIN:
7726-15-3962

Issued: 12/14/22

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

OWNER INFORMATION	Site Address 12403 North Crossing Dr		District	
	Owner Readers Branch Partners LLC		Phone # 804-741-4663	
	Address 10618 PATTERSON AVE. HENRICO VA 23238			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
Side Setback	Side Setback	Census Track	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer

Am Barnes Date 11-30-2022

Applicant/Contact:
BERTON JAMES

Phone
(804)217-6910

Email: bjames@eagleofva.com

Contractor
EAGLE CONSTRUCTION OF VA., LLC

Phone
(804)741-4663

Address
10618 PATTERSON AVE. HENRICO VA 23238

Contractor License Number
2705096467A

Type
CLASS A

Expiration
6-30-2022

Description of Work
Scope of Work:
12 FOOT RETAINING WALL

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	5000.00
Excludes All Trades Permits	

Application Fee	\$ 34.50
Septic/Well Fee	\$
State Levy Fee	\$.69
Zoning Fee	\$ 25
Total	\$ 60.19

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 *Berton James*

REVIEWED BY: *MICHAEL BROOKS*

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317
LOT 26-4 READERS BRANCH

Application Date:

11/15/2022

Permit Number:

802-2062-01153

Old Map Number:

58-55-4-26-0

GPIN:

7726-16-1360

Issued: 12/14/22

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

OWNER INFORMATION	Site Address 12415 Leith Hill Drive		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 10618 PATTERSON AVE. HENRICO VA 23238			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District RPUD	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	Side Setback	Side Setback	Census Track	Flood Zone
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer Amelia Bauer Date 11-30-2022

Applicant/Contact: BERTON JAMES Phone (804)217-6910

Email: bjames@eagleofva.com

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 10618 PATTERSON AVE. HENRICO VA 23238			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 6-30-2022	

Description of Work	Scope of Work: CONSTRUCT 20' LONG RETAINING WALL				
	SEWER Public/Private		WATER Public/Private		# of Bathrooms
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	\$7000.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ 43.50
Septic/Well Fee	\$
State Levy Fee	\$.87
Zoning Fee	\$.25
Total	\$ 69.37

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 Berton James



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: 11/10/22
 Permit Number: 002-0022-01440
 GPIN/Tax Map: 0820-15-6514 | 19-1-0-120
 Issued: 12/15/22
 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 4431 Whitehall Rd		Phone # 804-512-4765
	Owner Amanda Taliaferro		Email mrs.taliaferro84@gmail
	Address 4431 Whitehall Rd Sandy Hook VA 23153		Phone # 804-512-8773
APPLICANT INFORMATION	Applicant/Contact Eric Taliaferro		Email eric.taliaferro@gmail
	Address same		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' CL ROW	Center Line Setback	Rear Setback 5	CUP/Variance/COA
	Side Setback 5	Side Setback 5	Flood Zone	A-1
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>M. Barnes</u> Date: 11-29-2022			

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

DESCRIPTION OF WORK	Scope of Work: freestanding 10 x 16 deck for pool				
	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. 256	Unfinished Sq. Ft.	Total Sq. Ft. 256	

Building Only - Excludes All Trades Permits

Value of Work	2,500 \$2560.00
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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: 11/1/22

Application Fee	\$ 30
State Levy Fee	\$ 100
Zoning Fee	\$ 00
RLD	\$
SWP	\$
Total	\$ 130



BUILDING PERMIT APPLICATION

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

Application Date: 11-28-22

Permit Number: POL-2022-00004

GPIN/Tax Map: 6777-77-0690 | 43-40-C-8-C

Issued: 12/15/22

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	2122 Jockey Ridge Rd		
	Owner	David Emery	Phone # 253-219-4466	
APPLICANT INFORMATION	Address	2122 Jockey Ridge Rd		
	Applicant/Contact	Billy's Pool Service LLC - Billy Becker	Phone # 804-761-7904	
TO BE COMPLETED BY ZONING DEPARTMENT	Address	13372 Greenwood Church Rd. Ashland VA 23005		
	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	
CONTRACTOR INFORMATION	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12-7-2022</u>	
	Planning & Zoning Officer <u>Anita Barber</u>			
DESCRIPTION OF WORK	Contractor	Billy's Pool Service LLC		
	Address	13372 Greenwood Church Rd, Ashland VA 23005		
	Contractor License Number	Type	Expiration	
Scope of Work:		install inground fiberglass pool (Whitsunday 2 by Barrier Reef) 15'8"x35' with auto cover as barrier		
Proposed Use		Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
SEWER Public/Private		WATER Public/Private	# of Bathrooms # of Bedrooms # of floors	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.	

OWNER INFORMATION	Site Address	2122 Jockey Ridge Rd		
	Owner	David Emery	Phone # 253-219-4466	
APPLICANT INFORMATION	Address	2122 Jockey Ridge Rd		
	Applicant/Contact	Billy's Pool Service LLC - Billy Becker	Phone # 804-761-7904	
TO BE COMPLETED BY ZONING DEPARTMENT	Address	13372 Greenwood Church Rd. Ashland VA 23005		
	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	
CONTRACTOR INFORMATION	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12-7-2022</u>	
	Planning & Zoning Officer <u>Anita Barber</u>			
DESCRIPTION OF WORK	Contractor	Billy's Pool Service LLC		
	Address	13372 Greenwood Church Rd, Ashland VA 23005		
	Contractor License Number	Type	Expiration	
Scope of Work:		install inground fiberglass pool (Whitsunday 2 by Barrier Reef) 15'8"x35' with auto cover as barrier		
Proposed Use		Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
SEWER Public/Private		WATER Public/Private	# of Bathrooms # of Bedrooms # of floors	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.	

OWNER INFORMATION	Site Address	2122 Jockey Ridge Rd		
	Owner	David Emery	Phone # 253-219-4466	
APPLICANT INFORMATION	Address	2122 Jockey Ridge Rd		
	Applicant/Contact	Billy's Pool Service LLC - Billy Becker	Phone # 804-761-7904	
TO BE COMPLETED BY ZONING DEPARTMENT	Address	13372 Greenwood Church Rd. Ashland VA 23005		
	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	
CONTRACTOR INFORMATION	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12-7-2022</u>	
	Planning & Zoning Officer <u>Anita Barber</u>			
DESCRIPTION OF WORK	Contractor	Billy's Pool Service LLC		
	Address	13372 Greenwood Church Rd, Ashland VA 23005		
	Contractor License Number	Type	Expiration	
Scope of Work:		install inground fiberglass pool (Whitsunday 2 by Barrier Reef) 15'8"x35' with auto cover as barrier		
Proposed Use		Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
SEWER Public/Private		WATER Public/Private	# of Bathrooms # of Bedrooms # of floors	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.	

OWNER INFORMATION	Site Address	2122 Jockey Ridge Rd		
	Owner	David Emery	Phone # 253-219-4466	
APPLICANT INFORMATION	Address	2122 Jockey Ridge Rd		
	Applicant/Contact	Billy's Pool Service LLC - Billy Becker	Phone # 804-761-7904	
TO BE COMPLETED BY ZONING DEPARTMENT	Address	13372 Greenwood Church Rd. Ashland VA 23005		
	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	
CONTRACTOR INFORMATION	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12-7-2022</u>	
	Planning & Zoning Officer <u>Anita Barber</u>			
DESCRIPTION OF WORK	Contractor	Billy's Pool Service LLC		
	Address	13372 Greenwood Church Rd, Ashland VA 23005		
	Contractor License Number	Type	Expiration	
Scope of Work:		install inground fiberglass pool (Whitsunday 2 by Barrier Reef) 15'8"x35' with auto cover as barrier		
Proposed Use		Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
SEWER Public/Private		WATER Public/Private	# of Bathrooms # of Bedrooms # of floors	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.	

OWNER INFORMATION	Site Address	2122 Jockey Ridge Rd		
	Owner	David Emery	Phone # 253-219-4466	
APPLICANT INFORMATION	Address	2122 Jockey Ridge Rd		
	Applicant/Contact	Billy's Pool Service LLC - Billy Becker	Phone # 804-761-7904	
TO BE COMPLETED BY ZONING DEPARTMENT	Address	13372 Greenwood Church Rd. Ashland VA 23005		
	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	
CONTRACTOR INFORMATION	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12-7-2022</u>	
	Planning & Zoning Officer <u>Anita Barber</u>			
DESCRIPTION OF WORK	Contractor	Billy's Pool Service LLC		
	Address	13372 Greenwood Church Rd, Ashland VA 23005		
	Contractor License Number	Type	Expiration	
Scope of Work:		install inground fiberglass pool (Whitsunday 2 by Barrier Reef) 15'8"x35' with auto cover as barrier		
Proposed Use		Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
SEWER Public/Private		WATER Public/Private	# of Bathrooms # of Bedrooms # of floors	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.	

OWNER INFORMATION	Site Address	2122 Jockey Ridge Rd		
	Owner	David Emery	Phone # 253-219-4466	
APPLICANT INFORMATION	Address	2122 Jockey Ridge Rd		
	Applicant/Contact	Billy's Pool Service LLC - Billy Becker	Phone # 804-761-7904	
TO BE COMPLETED BY ZONING DEPARTMENT	Address	13372 Greenwood Church Rd. Ashland VA 23005		
	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	
CONTRACTOR INFORMATION	Front Setback	Center Line Setback	Rear Setback	
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:		Date <u>12-7-2022</u>	
	Planning & Zoning Officer <u>Anita Barber</u>			
DESCRIPTION OF WORK	Contractor	Billy's Pool Service LLC		
	Address	13372 Greenwood Church Rd, Ashland VA 23005		
	Contractor License Number	Type	Expiration	
Scope of Work:		install inground fiberglass pool (Whitsunday 2 by Barrier Reef) 15'8"x35' with auto cover as barrier		
Proposed Use		Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
SEWER Public/Private		WATER Public/Private	# of Bathrooms # of Bedrooms # of floors	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>100</u>
Value of Work	\$28,000.00	State Levy Fee	\$ <u>2.10</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>105.10</u>
Signature of Applicant	<u>[Signature]</u>	Date	11-28-22



BUILDING PERMIT APPLICATION

Application Date: 11-28-22

Permit Number: POL-2022-00003

GPIN/Tax Map: 6777-46-8741 / 4338-B30

Issued: 12/15/22

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 1659 Indy's Run		Phone # 804-822-5443
	Owner Doraiswamy Sundar		Email doraisundar@gmail.com
APPLICANT INFORMATION	Address 1659 Indy's Run, Maidens VA 23102		Phone # 804-761-7904
	Applicant/Contact Billy's Pool Service LLC - Billy Becker		Email poolsbybilly@yahoo.com
	Address 13372 Greenwood Church Rd. Ashland VA 23005		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Breeze Hill	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 40' off property line	Center Line Setback 65' CL	Rear Setback 5	CUP/Variance/COA RP
	Side Setback 5	Side Setback 5	Flood Zone	

APPROVED REJECTED COMMENTS: _____ Date **12-7-2022**

Planning & Zoning Officer **[Signature]**

CONTRACTOR INFORMATION	Contractor Billy's Pool Service LLC		Phone 804-761-7904
	Address 13372 Greenwood Church Rd, Ashland VA 23005		Email poolsbybilly@yahoo.com
	Contractor License Number 2705136588	Type B (class POL)	Expiration 9-30-23

Scope of Work:
install inground fiberglass pool (Whitsunday 1 by Barrier Reef) 15'8"x40' with auto cover as barrier

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 650	

Building Only - Excludes All Trades Permits

Value of Work	\$30,000.00
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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 **11-28-22**

Application Fee	\$ 50.00
State Levy Fee	\$ 00
Zoning Fee	\$ 00
RLD	\$ _____
SWP	\$ _____
Total	\$ 50.00

MICHAEL - PERMITTING 12-14-22



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: 11/21/22

Permit Number: BR-2022-01444

GPIN/Tax Map: 7114-92-7383/03-1-0-187-0

Issued: 12/15/22

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 13056 River Road Richmond Va 23238	
	Owner Angela Rhodes Robinson Eric S.P.	Phone # (804)426-7254
	Address 13056 River Road Richmond Va 23238	Email ayrr321@gmail.com
APPLICANT INFORMATION	Applicant/Contact Capital Remodeling	
	Address 7480 Candlewood Road Hanover Md 21076	Phone # (301) 699-6161 Email jdear@capitalremodeling.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: INTERIOR WORK	
Planning & Zoning Officer: <i>[Signature]</i>		Date: 12-6-2022		

CONTRACTOR INFORMATION	Contractor Capital Remodeling		Phone (301) 699-6161
	Address 7480 Candlewood Rd Hanover Md 21076		Email jdear@capitalremodeling.com
	Contractor License Number 2705073678	Type HIC	Expiration 04/30/23

Scope of Work:
Interior Alteration. Making pass through in load bearing wall between kitchen and living room.

Proposed Use Pass Through in Wall	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. 100	

Building Only - Excludes All Trades Permits		Application Fee \$ 30.00
Value of Work 3000.00		State Levy Fee \$ 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: 11/21/22		Zoning Fee \$ 00
		RLD \$
		SWP \$
		Total \$ 55.00

Rec: 11-17-22

BUILDING PERMIT APPLICATION

GOOCHLAND COUNTY

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: 11/16/2022

Permit Number: *BPR-2022-01466*

GPIN/Tax Map: 50-4-0-A-0 / *16726-60-1333*

Issued: *12-19-22*

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

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

OWNER INFORMATION

Site Address: 1192 West View Road

Owner: **Carter Jarrett** Phone #: 804-363-4775

Address: 1192 West View Road, Goochland, VA 23063 Email: carter.jarrett@gmail.com

APPLICANT INFORMATION

Applicant/Contact: **Angela Martin-Whatley** Phone #: 804-495-4646

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

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED COMMENTS:

Planning & Zoning Officer: *Angela Barnes* Date: *12-6-2022*

CONTRACTOR INFORMATION

Contractor: **JES Construction LLC** Phone: 804-495-4646

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

Contractor License Number: 2705068655 Type: A Expiration: 04/30/24

DESCRIPTION OF WORK

Scope of Work: Installing 15 each intellibraces for the existing foundation for stabilization

Proposed Use Dwelling	Current Use Dwelling	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 0		
<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.	63	Unfinished Sq. Ft.	63	Total Sq. Ft.

Building Only - Excludes All Trades Permits

Value of Work	17000.00
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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: *Angela Martin Whatley* Date: 11/16/2022

Application Fee	\$ 88.50
State Levy Fee	\$ 1.77
Septic/Well Fee	\$
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 115.27



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/23/22
 Permit Number: BPR-2022-01448
 GPIN/Tax Map: 0117-4108741/43-38-B-30
 Issued: 12/19/22
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION
 Site Address: 1659 Indy's Run, Maidens, VA 23102
 Owner: Doras wamy Sundar
 Address: 1659 Indy's Run, Maidens, VA 23102
 Phone #: 804-629-0521
 Email: dorasundar@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: Alec Eberle
 Address: 3823 Gaskins Rd, Glen Allen, VA 23233
 Phone #: 804-629-7298
 Email: fabling@fablingbuilt.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Breeze Hill	Proffer: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
Front Setback: 40' off property line	Center Line Setback:	Rear Setback: 25	CUP/Variance/COA: R-P
Side Setback: 20	Side Setback: 20	Flood Zone:	

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: Amber Barnes Date: 12-8-2022

CONTRACTOR INFORMATION
 Contractor: Casey Fabling
 Address: 3823 Gaskins Rd, Henrico, VA 23233
 Phone: 804-822-2625
 Email: alee@fablingbuilt.com
 Contractor License Number: 2705160552 Type: A Expiration: 10-31-2024

DESCRIPTION OF WORK
 Scope of Work: 12 x 24 Addition work out room

Proposed Use: Workout Room	Current Use: Patio	Environmental Impacts (stream crossing, wetlands, amt land disturbed): N/A		
SEWER: Public/Private	WATER: Public/Private	# of Bathrooms:	# of Bedrooms:	# 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.: 288	Unfinished Sq. Ft.: N/A	Total Sq. Ft.: 288	

Building Only - Excludes All Trades Permits

Value of Work: <u>15K 10,840</u>	Application Fee: \$ <u>83.08</u>
	State Levy Fee: \$ <u>1.01</u>
	Zoning Fee: \$ <u>65</u>
	RLD: \$
	SWP: \$
	Total: \$ <u>109.06</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: Bruce Johnson Date: 11/23/22

Moses

POC: 12-5-22



BUILDING PERMIT APPLICATION

Application Date:

Permit Number:

POIR-2022-00025

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:

4521-05-A / 6797-99-5242

Issued:

12-19-22

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	2009 Gravel Hill dr. Manakin-Sabot 23103		
	Owner	Sonya Moses		Phone # 804-878-8884
	Address	2009 Gravel Hill dr. Manakin-Sabot		Email Dru.sugar@aol.com

APPLICANT INFORMATION	Applicant/Contact	Unique Pools & Spas LLC		
	Address	6540 Emmaus Church rd. Providence Forge 23140		Phone # 804-557-2753 Email uniquepoolsoffice@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Ante Barnes</u> Date <u>12-14-22</u>			

CONTRACTOR INFORMATION	Contractor	Unique Pools & Spas LLC		
	Address	6540 Emmaus Church rd. Providence Forge 23140		Phone 11/30/22 Email uniquepoolsoffice@yahoo.com
	Contractor License Number	2705172451	Type	class A POL

DESCRIPTION OF WORK	Scope of Work: Installation of inground swimming pool with automatic pool cover. (12' x 24')				
	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	\$ 102.00
Value of Work	\$ 20,000.00	State Levy Fee	\$ 2.04
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 129.04
Signature of Applicant <u>Ante Barnes</u>		Date	11/30/22

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I _____ 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 — OCCUPANT LOAD — CODE EDITION 18

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 16 DEC 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: 12/02/2022

Permit Number: BPZ-2022-01482

GPIN/Tax Map: 6708-97-0992 / 26-1-0-28-F

Issued: 12/16/22

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 5224 Fox Field Farm Court Goochland, VA 23063	
	Owner Loolol II LLC Darling	Phone # (804) 334-3636
	Address 5224 Fox Field Farm Court Goochland, VA 23063	Email tfink36@yahoo.com

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 80' CL ROW	Center Line Setback	Rear Setback 5	CUP/Variance/COA A-1
	Side Setback 5	Side Setback 5	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date 12-14-22			

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC		Phone (434) 996-6141
	Address 490 Westfield Road Suite A Charlottesville, VA 22901		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type A	Expiration 07/31/2024

DESCRIPTION OF WORK	Scope of Work: Ground Mounted Solar Array. System Capacity: 15.580 kWp DC. Install of one enphase battery backup				
	Proposed Use SFD	Current Use SFD	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>60.15</u>
Value of Work 10,700		State Levy Fee \$ <u>1.20</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25</u>
Signature of Applicant <u>Henry Keith</u>	Date <u>12/02/2022</u>	RLD \$
		SWP \$
		Total \$ <u>86.35</u>

Inspected by: MICHAEL BROOKING 12-16-22



BUILDING PERMIT APPLICATION

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

Application Date: 11/29/22

Permit Number: BPZ-2022-01472

GPIN/Tax Map: 60-4-0-6-0 | 078U-28-1551

Issued: 12/19/22

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

Residential Commercial

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

OWNER INFORMATION	Site Address	<u>639 Lee Road, Crozier, VA 23039</u>		
	Owner	<u>Jeffrey & Jean Sparrow</u>	Phone #	<u>804-379-4973</u>
APPLICANT INFORMATION	Address	<u>639 Lee Rd, Crozier, VA 23039</u>		
	Applicant/Contact	<u>Jeff Sparrow</u>	Email	<u>jms31602@hotmail.com</u>
	Address	<u>639 Lee Rd, Crozier, VA 23039</u>		
			Phone #	<u>804-551-1080</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100'</u>	Center Line Setback <u>CL ROW</u>	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>A-2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Shula Balkin</u> Date <u>12-14-2022</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>New Detached Shed 24'x30'</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Storage</u>	<u>none</u>	# of Bathrooms	# of Bedrooms	# of floors
	SEWER Public/Private	WATER Public/Private	<u>0</u>	<u>0</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>No</u>	<u>0</u>	<u>720</u>	<u>720</u>		

Building Only - Excludes All Trades Permits

Value of Work	<u>11,094-19,800</u>
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Application Fee	\$ <u>10.10</u>
State Levy Fee	\$ <u>2.02</u>
Zoning Fee	\$ <u>20</u>
RLD	\$
SWP	\$
Total	\$ <u>168.12</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 Jeffrey Sparrow Date 11/29/22

Rec: 10-17-22



BUILDING PERMIT APPLICATION

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

Application Date: 10/13/2022

Permit Number: -

BD-2022-01386

GPIN/Tax Map: → 58-50-10-12-0

↳ 7715-98-2342

Issued: 12-9-22

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

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

OWNER INFORMATION	Site Address PIPING ROCK ROAD		SIGN B	
	Owner BOONE HUNES - DAVID OWEN (CONTACT)		Phone # 804-218-7786	
	Address 129 BROAD STREET, STE B., MANAICIN, VA		Email davidleowen@comcast.net	
APPLICANT INFORMATION	Applicant/Contact CAROUSEL SIGNS & DESIGNS - JAMES FOLEY		Phone # 804-620-3200	
	Address 6501 DICKENS PLACE, RICHMOND, VA 23230		Email jay@carouselsigns.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 5' 0" ROW	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>J. Barnes</i> Date: 12-6-2022			

CONTRACTOR INFORMATION	Contractor CAROUSEL SIGNS & DESIGNS		Phone 804-620-3200	
	Address 6501 DICKENS PLACE, RICHMOND, VA 23230		Email jay@carouselsigns.com	
	Contractor License Number 2705115473	Type CLASS A	Expiration 6-30-2023	

DESCRIPTION OF WORK	Scope of Work: FREESTANDING 'KINLOCH' ID SIGN AT INTERSECTION OF PIPING ROCK ROAD & TUCKAHOE CREEK PKWY				
	Proposed Use SIGN	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms N/A	# of Bedrooms N/A	# of floors N/A
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. N/A	Unfinished Sq. Ft. N/A	Total Sq. Ft. SIGN: 97	

Building Only - Excludes All Trades Permits

Value of Work	10,000.00
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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: *J. Barnes* Date: 10/13/2022

Application Fee	\$ 74.97
State Levy Fee	\$ 1.53
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 126.50

Rec: 10-17-22



BUILDING PERMIT APPLICATION

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

Application Date: 10/12/2022

Permit Number: BP-2022-01387

GPIN/Tax Map: 58-50-10-2-0
 ↳ 7715-98-2342

Issued: 12-9-22

Residential Commercial

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

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

OWNER INFORMATION	Site Address SWINBURNE ROAD (GIS) PROPERTY ACCOUNT #: 19965 SIGN A	
	Owner BOONE HOMES - DAVID OWEN (CONTRACTOR)	Phone # 804-218-7786
	Address 129 BROAD STREET, SIB, MANASSIN SAPOOT, VA 23103	Email davidleowen@comcast.net
APPLICANT INFORMATION	Applicant/Contact CAROUSEL SIGNS & DESIGNS - JAMES FOLEY	Phone # 804.620.3200
	Address 6501 DICKENS PLACE, RICHMOND, VA 23230	Email jay@carouselsigns.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 5' 0" ROW	Center Line Setback	Rear Setback	CUP/Variance/GOA
	Side Setback	Side Setback	Flood Zone	

APPROVED REJECTED COMMENTS: *Asht Barn* Date 12-7-2022
 Planning & Zoning Officer

CONTRACTOR INFORMATION	Contractor CAROUSEL SIGNS & DESIGNS	Phone 804.620.3200
	Address 6501 DICKENS PLACE, RICHMOND, VA 23230	Email jay@carouselsigns.com
	Contractor License Number 2705115473	Type CLASS A

DESCRIPTION OF WORK	Scope of Work: FREESTANDING 'KINLOCH' ID SIGN AT INTERSECTION OF AND TUCKAHOE CREEK PKWY				
	Proposed Use SIGN	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms N/A	# of Bedrooms N/A	# of floors N/A
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. N/A	Unfinished Sq. Ft. N/A	Total Sq. Ft. SIGN: 97	

Building Only - Excludes All Trades Permits

Value of Work	10,000.00
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Application Fee	\$ 74.97
State Levy Fee	\$ 1.53
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 126.50

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 *Jay Foley* Date 10/13/2022

mailed in 11/18/22

 <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 type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial</p>	Application Date: 11/11/22
	Permit Number: <u>Cell-2022-00002</u>
	GPIN/Tax Map: <u>47-21-0-15-AT / 7726-08-9914.999</u>
	Issued: <u>12-12-22</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 1661 Saint Matthew Ln, 23233	Phone #
	Owner Goochland County	
	Address	Email

APPLICANT INFORMATION	Applicant/Contact Tootie Hudgins, Jacobs Telecommunications	Phone # 804-218-7414
	Address 4209 Carolina Ave, Richmond	Email tootie.hudgins@jacobs.com

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

APPROVED REJECTED COMMENTS: Anda Barnes Date 12-6-2022

Planning & Zoning Officer

CONTRACTOR INFORMATION	Contractor Jacobs Telecommunications	Phone 8042187414
	Address 4209 Carolina Ave, Richmond	Email tootie.hudgins@jacobs.com
	Contractor License Number 2705066988	Type A

DESCRIPTION OF WORK	Scope of Work: Upgrade AT&T antenna on existing install on watertank				
	Proposed Use U	Current Use U	Environmental Impacts (stream crossing, wetlands, amt land disturbed) n/a		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. n/a	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>90.00</u>
Value of Work	12000	State Levy Fee \$ <u>1.80</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>Tootie Hudgins</u> Date <u>11/11/22</u></p>		Zoning Fee \$ <u>50.00</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>141.80</u>

REC: 10-13-22



BUILDING PERMIT APPLICATION

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

Application Date: 10/6/22
 Permit Number: BP-2022-01379
 GPIN/Tax Map: 58-54-2-53-0 / 7725-21-5035
 Issued: 12-12-22
 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.

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>15619 Mosaic Creek Blvd</u>		Phone # <u>(703) 598-9801</u>
	Owner <u>Mike Larkin</u>		Email <u>mikelarkin21@gmail.com</u>
	Address <u>15619 Mosaic Creek Blvd Richmond VA 23238</u>		Phone # <u>(804) 218-1781</u>
APPLICANT INFORMATION	Applicant/Contact <u>Spencer Monroe</u>		Email <u>smonroe@archadeck.net</u>
	Address <u>10418 Falconbridge Dr. Richmond VA 23238</u>		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' off property line</u>	Center Line Setback	Rear Setback <u>25</u>	CUP/Variance/COA <u>RPUD</u>
	Side Setback <u>10</u>	Side Setback <u>10</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Survey locate side + rear</u>		Date <u>12-6-2022</u>	
Planning & Zoning Officer: <u>Anita Barnes</u>				

CONTRACTOR INFORMATION	Contractor <u>Archadeck of Richmond</u>		Phone <u>(804) 218-1781</u>
	Address		Email <u>smonroe@archadeck.net</u>
	Contractor License Number <u>2705166852</u>	Type <u>Class B RBC</u>	Expiration <u>2/28/24</u>

Scope of Work: Build new 22' out by 16' across open porch

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>SEWER</u> <u>Public/Private</u>	<u>WATER</u> <u>Public/Private</u>	# of Bathrooms <u>—</u>	# of Bedrooms <u>—</u>	# of floors <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. <u>352 0</u>	Unfinished Sq. Ft. <u>352</u>	Total Sq. Ft. <u>352 352</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$ 25,000.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 10/6/22

Application Fee	\$ <u>124.50</u>
State Levy Fee	\$ <u>2.49</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>151.99</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/24/2022

Permit Number: BP-2022-01368

GPIN/Tax Map: 7725-11-1177 | 58-54-3-61-0

Issued: 12-12-22

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 9221 Cerulean Place - Lot 61H		Phone # 8044976540
	Owner HHHunt Homes, LLC		Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		Phone # 8044976540
APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>25' from P4 Row</i>	Center Line Setback <i>50'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA <i>RPUD</i>
	Side Setback <i>0' Lt. Side 0' Rt. Side 10'</i>	Side Setback	Flood Zone <i>X</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer Dec. * Survey Locate</i>			
Planning & Zoning Officer <i>David Floyd</i>		Date <i>11/2/22</i>		

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2419	Unfinished Sq. Ft. 416	Total Sq. Ft. 2835		

Building Only - Excludes All Trades Permits

Value of Work	\$289,170.00
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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 *sbisaacs* Date 10/24/2022

Application Fee	\$ <u>2168.00</u>
State Levy Fee	\$ <u>43.38</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>100.-</u>
RLD	\$ <u>100.-</u>
SWP	\$
Total	\$ <u>2412.15</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RB # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 18

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12.9.22

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/24/2022

Permit Number: BP-2022-01369

GPIN/Tax Map: 7725-11-2117/58-54-3-62-0

Issued: 12-13-22

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

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

OWNER INFORMATION	Site Address 9219 Cerulean Place - Lot 62H		Phone # 8044976540
	Owner HHHunt Homes, LLC		Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosgic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>25' from PL/ROW</i>	Center Line Setback <i>50'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>Cash Proffer Due. & Survey Lock Tie.</i>			

Planning & Zoning Officer: *David Boyd* Date: *11/3/22*

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 2	# of floors 2
	Finished Sq. Ft. 1916	Unfinished Sq. Ft. 607	Total Sq. Ft. 2523		

Building Only - Excludes All Trades Permits

Value of Work	\$257,346.00
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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: *Isaacs* Date: 10/24/2022

Application Fee	\$1030.10
State Levy Fee	\$38.60
Septic/Well Fee	\$
Zoning Fee	\$100-
RLD	\$100-
SWP	\$
Total	\$2168.70

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 4 CODE EDITION VB

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12.9.22

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/24/2022

Permit Number: BP-2022-01370

GPIN/Tax Map: 7725-11-2147/58-54-3-63-D

Issued: 12-13-22

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

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

OWNER INFORMATION	Site Address 9217 Cerulean Place - Lot 63H		Phone # 8044976540
	Owner HHHunt Homes, LLC	Email sbisaacs@hhhunthomes.com	
	Address 11237 Nuckols Road Glen Allen, VA 23059		

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>84966.00</i>	Date Paid <i>Done</i>
	Front Setback <i>25' from PL/RW</i>	Center Line Setback <i>50'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone <i>X</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer Due *Survey Locate</i>			
Planning & Zoning Officer <i>David Floyd</i> Date <i>11/3/22</i>				

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2085		Unfinished Sq. Ft. 483		Total Sq. Ft. 2568

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>19164.52</i>
Value of Work		State Levy Fee	\$ <i>39.29</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <i>100-</i>
Signature of Applicant <i>[Signature]</i>		RLD	\$ <i>100-</i>
Date 10/24/2022		SWP	\$
		Total	\$ <i>2203.81</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: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD B CODE EDITION 15

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12.22.22

Code Official



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/24/2022

Permit Number: BP-2022-01372

GPIN/Tax Map: 7725-11-2167/S8-5A-3-64-0

Issued: 12-13-22

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

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

OWNER INFORMATION	Site Address 9215 Cerulean Place - Lot 64H		Phone # 8044976540
	Owner HHHunt Homes, LLC		Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Mosaic</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <i>\$ 4966.00</i>	Date Paid <i>Due</i>
	Front Setback <i>25' from Pylon</i>	Center Line Setback <i>50'</i>	Rear Setback <i>25'</i>	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone <i>X</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>*Cash Proffer Due * Survey Locate</i> Planning & Zoning Officer: <i>David Lloyd</i> Date: <i>11/3/22</i>			

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.			
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet	
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3
	# of floors 2	Finished Sq. Ft. 1916	Unfinished Sq. Ft. 607	Total Sq. Ft. 2523

Building Only - Excludes All Trades Permits		Application Fee	\$ 1930.10
Value of Work	\$257,346.00	State Levy Fee	\$ 38.60
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <i>Stephanie Isaacs</i> Date 10/24/2022		Septic/Well Fee	\$
		Zoning Fee	\$ 100.-
		RLD	\$ 100.-
		SWP	\$
		Total	\$ 2168.70

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

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

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12.9.22
Code Official



BUILDING PERMIT APPLICATION

Application Date: 10/24/2022

Permit Number: BP-2022-01373

GPIN/Tax Map: 7725-11-2197 / 58-SA-3-65-0

Issued: 12-13-22

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

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 9213 Cerulean Place - Lot 65H	Phone # 8044976540
	Owner HHHunt Homes, LLC	Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059	

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Mosaic	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$ 4966.00	Date Paid Due
	Front Setback 25' from P/L Rod	Center Line Setback 50'	Rear Setback 25'	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: * Cash Buffer Due * Survey Locate		

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

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 1931	Unfinished Sq. Ft. 591	Total Sq. Ft. 2522		

Building Only - Excludes All Trades Permits		Application Fee	\$ 1929.33
Value of Work	\$257,244.00	State Levy Fee	\$ 38.51
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ 100.-
		RLD	\$ 100.-
		SWP	\$
		Total	\$ 2167.92

Signature of Applicant: *Stephanie Isaacs* Date: 10/24/2022



BUILDING PERMIT APPLICATION

Application Date: 10/24/2022

Permit Number: BP-2022-01373

GPIN/Tax Map: 7725-11-2197 / 58-SA-3-65-0

Issued: 12-13-22

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

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 9213 Cerulean Place - Lot 65H	Phone # 8044976540
	Owner HHHunt Homes, LLC	Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059	

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Mosaic	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$4966.00	Date Paid Due
	Front Setback 25' from P/L Road	Center Line Setback 50'	Rear Setback 25'	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone X	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Cash Buffer Due * Survey Locate			

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

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC	Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059	Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	1931 Finished Sq. Ft.	591 Unfinished Sq. Ft.	2522 Total Sq. Ft.		

Building Only - Excludes All Trades Permits

Value of Work	\$257,244.00
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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: *sbisaacs* Date: 10/24/2022

Application Fee	\$1929.33
State Levy Fee	\$38.51
Septic/Well Fee	\$
Zoning Fee	\$100-
RLD	\$100-
SWP	\$
Total	\$2167.92



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: 10/24/2022

Permit Number: **BP-2022-01374**

GPIN/Tax Map: 7725-11-3137/58-54-3-106-D

Issued: **12-13-22**

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

Residential Commercial

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

OWNER INFORMATION	Site Address 9211 Cerulean Place - Lot 66H		Phone # 8044976540
	Owner HHHunt Homes, LLC		Email sbisaacs@hhhunthomes.com
	Address 11237 Nuckols Road Glen Allen, VA 23059		
APPLICANT INFORMATION	Applicant/Contact Stephanie Isaacs		Phone # 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Mosaic	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$4966.00	Date Paid Done
	Front Setback 25' From PL/ROW	Center Line Setback 50'	Rear Setback 25'	CUP/Variance/COA
	Side Setback 10' E. Side	Side Setback E. Side	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: * Cash Proffer Done. * Survey Located.	

Planning & Zoning Officer: **David Ford** Date: **11/3/22**

CONTRACTOR INFORMATION	Contractor HHHunt Homes, LLC		Phone 8044976540
	Address 11237 Nuckols Road Glen Allen, VA 23059		Email sbisaacs@hhhunthomes.com
	Contractor License Number 2705119751 A	Type Contractor	Expiration 1/31/2024

DESCRIPTION OF WORK	Scope of Work: 6 unit townhome with attached garages.				
	Proposed Use Townhomes	Current Use None	Environmental Impacts (stream crossing, wetlands, amt land disturbed) Land disturbance of 26,509 square feet		
	SEWER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	WATER <input checked="" type="checkbox"/> Public/Private <input type="checkbox"/>	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
	Finished Sq. Ft. 2239	Unfinished Sq. Ft. 592	Total Sq. Ft. 2831		

Building Only - Excludes All Trades Permits

Value of Work	\$288,762.00
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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: **sbisaacs** Date: **10/24/2022**

Application Fee	\$ 2165.12
State Levy Fee	\$ 43.31
Septic/Well Fee	\$
Zoning Fee	\$ 100.-
RLD	\$ 100.-
SWP	\$
Total	\$ 2409.03

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: MeyerGoergen PC Telephone: 804-288-3600

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

OWNER'S STATEMENT

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

_____ Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 6 CODE EDITION 18

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12-9-22

Code Official



BUILDING PERMIT APPLICATION

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

Application Date: 10/18/2022 10/19/22

Permit Number: 62-0022-01352

GPIN/Tax Map: 7733-57-9367 61-23-0-530

Issued: 12/19/22

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

Residential Commercial

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

OWNER INFORMATION	Site Address 75 West Square Drive Richmond, VA 23238	
	Owner Maryann Scioscia T & Christina M Truste DeVincentis	Phone # (804) 467-1240
	Address 75 West Square Drive Richmond, VA 23238	Email msdevin@comcast.net

APPLICANT INFORMATION	Applicant/Contact Kelly Tracy	
	Address 2410 Southland Drive Chester, VA 23831	Phone # (804) 495-4646
		Email chesterpermits@jeswork.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Randolph Square</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/area. RPU</u>			
	Planning & Zoning Officer <u>David [Signature]</u> Date <u>11/2/22</u>			

CONTRACTOR INFORMATION	Contractor JES Construction LLC		Phone (804) 495-4646
	Address 2410 Southland Drive Chester, VA 23831		Email chesterpermits@jeswork.com
	Contractor License Number 2705068655	Type Class A	Expiration 04-30-2024

DESCRIPTION OF WORK	Scope of Work: Installing 8 Intellijacks & 16 LNFT of supplemental beam to existing foundation for stabilization.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 38		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>64.18</u>
Value of Work	\$ <u>11,594.00</u>	State Levy Fee	\$ <u>1.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Kelly Tracy</u> Date <u>10/18/2022</u>		Septic/Well Fee	\$
		Zoning Fee	\$ <u>0.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>65.18</u>

7-13-2018 [Signature] 8 Dec 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: 09-19-2022

Permit Number: BP-2022-01213

GPIN/Tax Map: 7707-15-6160 / 46-1-0-16-0

Issued: 12-9-22

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

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

OWNER INFORMATION	Site Address	850 BROAD ST Rd	Phone #	
	Owner	Grace Chinese Baptist church	Email	
APPLICANT INFORMATION	Applicant/Contact	Fomin Construction inc Paul Fomin	Phone #	804 400 8032
	Address		Email	fominfci@aol.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	100' from P4/KW	Center Line Setback	195'	Rear Setback	35'	CUP/Variance/COA	
	Side Setback	30'	Side Setback	30'	Flood Zone		POD-2020-16-Approved CU-2009-10A-Approved	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer Darius Ford Date 10/5/22

CONTRACTOR INFORMATION	Contractor	Fomin Construction inc	Phone	804 400 8032
	Address	273 Whitney Ln Bumpass VA 23024	Email	fominfci@aol.com
	Contractor License Number	2705115707	Type	A
	Expiration	05-31-2023		

Scope of Work: construction of 38 x 48 Fellowship Halls + 6 additional classrooms

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.	
	10 800	0	10,800	

Building Only - Excludes All Trades Permits

Value of Work	<u>650,000 \$ 1,576,800.00</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date 9-19-2022

Application Fee	\$ <u>11,826.00</u>
State Levy Fee	\$ <u>236.52</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>12,162.52</u>



BUILDING PERMIT APPLICATION

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

Application Date: 11/09/2022

Permit Number: 602-2022-01430

GPIN/Tax Map: 67-0-45-A/16726-96-621F

Issued: 12/7/22

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 1409 Rock Castle Road	
	Owner Mark Rhodes & Alice Benzinger	Phone # 757-593-1633
APPLICANT INFORMATION	Address 1409 Rock Castle Road	Email alice.benzinger@gmail.com
	Applicant/Contact Southside Contracting LLC/Brian Wells	Phone # 804-720-5533
TO BE COMPLETED BY ZONING DEPARTMENT	Address PO Box 340 Sutherland, VA 23885	Email brianwells@southsidecontracting.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100' CE 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	<u>A-1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>NO CHANGE TO FOOTPRINT</u> Planning & Zoning Officer <u>Anda Barnes</u> Date <u>11-29-22</u>			

CONTRACTOR INFORMATION	Contractor Southside Contracting, LLC	Phone 804-861-2386
	Address PO Box 340 Sutherland, VA 23885	Email brianwells@southsidecontracting.com
	Contractor License Number 2705099544	Type Class A

Scope of Work:
Repairs to the home due to tree falling on it to include roofing, attic, 2nd floor ceiling, etc.

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

Building Only - Excludes All Trades Permits

Value of Work	\$150,000.00
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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 Brian Wells Date 11/9/2022

Application Fee	\$ _____
State Levy Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ _____

fees waived due to storm damage

Rec: 11-9-22



BUILDING PERMIT APPLICATION

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

Application Date: 11/4/2022

Permit Number: 2011-2022-00001

GPIN/Tax Map: 11-10-49-B2

Issued: 12-2-22

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 3007 3709 Shelton Springs Lane	Phone # 757-707-7518
	Owner Bianca Romano	Email bianca_romano@me.com
Address 3709 Shelton Springs Lane, Goochland, VA 23063		

APPLICANT INFORMATION	Applicant/Contact Janet Childs	Phone # 804-445-4378
	Address P. O. Box 1711, Tappahannock, VA 22560	Email janet@hometurfinc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' off Row	Center Line Setback	Rear Setback 5	CUP/Variance/COA
	Side Setback 5	Side Setback 5	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <i>[Signature]</i> Date: 11-30-2022			

CONTRACTOR INFORMATION	Contractor Home & Turf, Inc.	Phone 804-445-4378
	Address P. O. Box 1711, Tappahannock, VA 22560	Email ris@hometurfinc.com
	Contractor License Number 2705082448	Type Class A

DESCRIPTION OF WORK	Scope of Work: Inground Pool Installation <i>16x41 - with auto cover</i> <i>216 sq. ft. decking</i>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 1000 sq. ft of disturbed land		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms N/A	# of Bedrooms N/A	# of floors N/A
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 872	

Building Only - Excludes All Trades Permits		Application Fee	\$ 453.00
Value of Work	\$98,000.00	State Levy Fee	\$ 9.06
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 487.06

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: **11/4/22**



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:

OCTOBER 25, 2022

Permit Number:

BP-2022-01427

GPIN/Tax Map:

7705-72-1697/62-28-0-19-0

Issued:

12-2-22

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

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

OWNER INFORMATION	Site Address		Phone #
	724 MANAKIN TOWNE LANE, MANAKIN SABOT, VA 23103		804 370 6998
APPLICANT INFORMATION	Owner	Email	
	CYNDI FINLEY	cyndifinley@gmail.com	
APPLICANT INFORMATION	Address	Phone #	
	724 MANAKIN TOWNE LANE, MANAKIN SABOT, VA 23103	804 548 5750	
APPLICANT INFORMATION	Applicant/Contact	Email	
	DOUBLEE DESIGN GROUP / BILL RICEY	bill@willhouserva.com	
APPLICANT INFORMATION	Address		
	11402 WHISPERING PINES CT., ROCKVILLE VA 23146		

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	The Meadows at Manakin	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		PKC
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	55' From Pylon	80'	5'	
Side Setback	Side Setback	Flood Zone		
	5'	5'		

APPROVED REJECTED COMMENTS:

Planning & Zoning Officer: Daniel Floyd Date: 11/9/22

CONTRACTOR INFORMATION	Contractor	Phone
	DOUBLEE DESIGN GROUP LLC	804 548 5750
	Address	Email
11402 WHISPERING PINES CT., ROCKVILLE VA 23146	bill@willhouserva.com	
Contractor License Number	Type	Expiration
2705162797	RVC/A	1/31/2023

DESCRIPTION OF WORK	Scope of Work:			
	CONSTRUCTION OF POOL HOUSE AT RESIDENCE.			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	POOL HOUSE	N/A		
SEWER	WATER	# of Bathrooms	# of Bedrooms	# of floors
Public/Private	Public/Private			
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	0	540	540	

Building Only - Excludes All Trades Permits

Value of Work	\$ 45,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: W. Ricey Date: 10/25/2022

Application Fee	\$
State Levy Fee	\$ 4.29
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 243.79



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: October 27, 2022

Permit Number: BP-2022-01428

GPIN/Tax Map: 46-1-0-114-C / 7717-04-499A

Issued: 12-5-22

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

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

OWNER INFORMATION	Site Address 462 Massies Lane, Manakin Sabot, VA. 23103	
	Owner Dunford Peter A Dunford Sara N	Phone # 570-815-0151
	Address 462 Massies Lane, Manakin Sabot, VA. 23103	

APPLICANT INFORMATION	Applicant/Contact Andrew Campbell/Campbell Home Improvement		Phone # 804-503-4900
	Address 14807 Colony Forest Place, Midlothian VA. 23114		Email chi.permits@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>46' from PULKON</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone <u>X</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David [Signature]</u> Date <u>11/9/22</u>			

CONTRACTOR INFORMATION	Contractor Campbell Home Improvement		Phone 804-503-4900
	Address 14807 Colony Forest Place, Midlothian VA. 23114		Email chi.permits@gmail.com
	Contractor License Number 2705100592	Type B	Expiration 8/23

DESCRIPTION OF WORK	Scope of Work: Remove old deck and build a new 16x19 freestanding deck				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No <u>No</u>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			304		

Building Only -- Excludes All Trades Permits

Value of Work	4,560.00
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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 10/27/2022

Application Fee	\$ <u>82.52</u>
State Levy Fee	\$ <u>.65</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>58.17</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: 11/9/22

Permit Number: B/PK-2022-01430

GPIN/Tax Map: 1705-58-7664/57-10-0-17-0

Issued: 12-5-22

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

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

Site Address: **1467 WINDSORWAY, MANAKIN-SABOT VA 23103**

OWNER INFORMATION
 Owner: _____ Phone #: _____
 Address: _____ Email: _____

APPLICANT INFORMATION
 Applicant/Contact: **ELMAN LUNA** Phone #: **8049861433**
 Address: **9017 ARCHWIND CT N CHESTERFIELD VA 23236** Email: **elman@elmanscontractors.com**

TO BE COMPLETED BY ZONING DEPARTMENT

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

APPROVED REJECTED COMMENTS: NO Setback requirements
 Planning & Zoning Officer: Daniel Boyd Date: 11/17/22

CONTRACTOR INFORMATION
 Contractor: **ELMANS CONTRACTORS INC** Phone: **8042761894**
 Address: **9017 ARCHWIND CT N CHESTERFIELD VA 23236** Email: **danielat@elmanscontractors.com**
 Contractor License Number: **2705185010** Type: **Corporation** Expiration: **09/30/2024**

DESCRIPTION OF WORK
 Scope of Work:
 Building a retaining wall, 75 linear by 56" finished height. Installed over a 21A rock base. 57 gravel backfill with geogrid every 2 courses. This geogrid goes 5' into grade. LOCATION: BACKYARD

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: \$6,700

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

Signature of Applicant: [Signature] Date: 11/8/2022

Application Fee	\$ <u>42.15</u>
State Levy Fee	\$ <u>.84</u>
Zoning Fee	\$ <u>2500</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>67.99</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/7/22

Permit Number: 672-2022-01438

GPIN/Tax Map: 6708-71-9129/38-1-0-2-A

Issued: 12/2/22

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

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

OWNER INFORMATION	Site Address 5460 Hackney Road, Goochland, VA 23063	
	Owner Allen Meta	Phone # 804-239-4340
APPLICANT INFORMATION	Address 5460 Hackney Road, Goochland, VA 23063	
	Applicant/Contact Andrew Campbell	Phone # 804-503-4900
	Address 14807 Colony Forest Place, Midlothian, VA. 23114	
	Email chi.permits@gmail.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 100' C.R.O.W.	Center Line Setback	Rear Setback 35	CUP/Variance/COA
	Side Setback 20	Side Setback 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Amber</u> Date: <u>11.29.2022</u>			

CONTRACTOR INFORMATION	Contractor Campbell Home Improvements, LLC		Phone 804-503-4900
	Address 14807 Colony Forest Place, Midlothian, VA. 23114		Email chi.permits@gmail.com
	Contractor License Number 2705100592	Type Class B	Expiration 8/23

DESCRIPTION OF WORK	Scope of Work: Build a 672 square foot freestanding deck				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. 672	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>51.36</u>
Value of Work 10080		State Levy Fee \$ <u>16</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>
Signature of Applicant <u>[Signature]</u>	Date 11/7/22	RLD \$
		SWP \$
		Total \$ <u>83.51</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 36-89.7 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 11.30.22

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: 11/14/22

Permit Number: 602-5002-01447

GPIN/Tax Map: 05-10-13-A / 6776-82-60509

Issued: 12/2/22

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

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

OWNER INFORMATION	Site Address	CROZIER, VA 23039	
	Owner	DALE AND JAMES AGNEW	
	Address	1442 BEAVERDAM CREEK RD.	CROZIER VA 23039

APPLICANT INFORMATION	Applicant/Contact	LEGACY HOMES LLC / TRAVIS JOHNSON	Phone # 804-564-9097
	Address	207 ECHO MEADOWS RD. ROCKVILLE, VA 23146	Email LEGACYHOMES09@AOL.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	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: Deck no closer than existing. Planning & Zoning Officer: <u>[Signature]</u> Date: 11-29-2022			

CONTRACTOR INFORMATION	Contractor	LEGACY HOMES LLC		Phone 804-564-9097
	Address	207 ECHO MEADOWS RD. ROCKVILLE, VA 23146		Email LEGACYHOMES09@AOL.com
	Contractor License Number	Type	Expiration	

DESCRIPTION OF WORK	Scope of Work: NEW DECK				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			432	432	

Building Only - Excludes All Trades Permits		Application Fee	\$ 40.14
Value of Work \$7,500.00		State Levy Fee	\$ 0.00
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 0.00
Signature of Applicant <u>[Signature]</u>		RLD	\$
Date 11-14-2022		SWP	\$
		Total	\$ 71.60



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 11/14/22

Permit Number: 602-2022-01446

GPIN/Tax Map: 4333-0-11-0/6767-95-6106

Issued: 12/2/22

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

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

OWNER INFORMATION	Site Address 1822 Blackwoods DR Maidens VA	
	Owner Larry & Megan Proffitt	Phone # (804) 833-5993
	Address 1822 Blackwoods DR Maidens VA	Email

APPLICANT INFORMATION	Applicant/Contact Jel construction LLC (Buck Jones)	Phone # (804) 641-7756
	Address 16309 Pleasant Mill Rd Montpelier VA 23192	Email jelconstructs@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 55' 0" ROW	Center Line Setback 80' 0"	Rear Setback 5	CUP/Variance/COA
	Side Setback 5	Side Setback 5	Flood Zone	

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: Amelia Barnes Date: 11-29-2022

CONTRACTOR INFORMATION	Contractor Jel construction LLC (Buck Jones)	Phone (804) 641-7756
	Address 16309 Pleasant Mill Rd Montpelier VA 23192	Email jelconstructs@gmail.com
	Contractor License Number 2705-110868	Type Class A Bld

Expiration: 10/15/23

DESCRIPTION OF WORK	Scope of Work: 36' x 36' Barn				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms N/A	# of Bedrooms 2	# of floors 4
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 1296	Unfinished Sq. Ft. 1096	Total Sq. Ft. 1296	

Building Only - Excludes All Trades Permits

Value of Work: 58,000

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: 11/14/22

Application Fee	\$ 210
State Levy Fee	\$ 6.46
Zoning Fee	\$ 20
RLD	\$
SWP	\$
Total	\$ 236.46

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: Mills Title Agency Inc Telephone: 804 556-4921

Mailing Address: 3063 River Rd w Goodland VA 23063

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 MA

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 \$60.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

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

ACCESSORY

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12.1.22

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: 10-25-2022 11/10

Permit Number: BRP-2000-0437

GPIN/Tax Map: 7715-77-0944/58-37-4-20-0

Issued: 12/2/22

This application is for 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 300 Glenmeade Circle, Manakin Sabot, VA 23103	
	Owner Wayne and Ann J. Donne	Phone # 804-475-5049
	Address 300 Glenmeade Circle, Manakin Sabot, VA 23103	Email wldonne@comcast.net

APPLICANT INFORMATION	Applicant/Contact Wayne Donne	Phone # 804-475-5049
	Address 300 Glenmeade Circle, Manakin Sabot, VA 23103	Email wldonne@comcast.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 30' 0" 060 pavement	Center Line Setback	Rear Setback 50' B/S	GUP/Variance/COA
	Side Setback 20' B/S	Side Setback	Flood Zone	RPUD
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: Amelia Barber Date: 11-30-22			

CONTRACTOR INFORMATION	Contractor Wayne Donne, homeowner	Phone 804-475-5049
	Address 300 Glenmeade Circle, Manakin Sabot, VA 23103	Email wldonne@comcast.net
	Contractor License Number see license exemption wksht	Type

DESCRIPTION OF WORK	Scope of Work: finishing of entertainment room			
	See attachment			
	Proposed Use Entertainment room	Current Use 75% finished not use	Environmental impacts (stream crossing, wetlands, amt land disturbed) None	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms None	# of Bedrooms None
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. 800	Unfinished Sq. Ft. 100	Total Sq. Ft. 900

Building Only - Excludes All Trades Permits		Application Fee \$ 109.50
Value of Work 35000		State Levy Fee \$ 3.34
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.		Zoning Fee \$ 20
Signature of Applicant Wayne Donne	Date 11/4/2022	R.I.D. \$
		SWP \$
		Total \$ 197.84

Rec'd 11-7-22

 <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: 11-7-22
	Permit Number: 692-0002-01U33
	GPIN/Tax Map: 01-10-U3-A
	Issued: 12/2/22
	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 982 MANAKIN ROAD MANAKIN SABOT VA 23103
	Owner: MICHAEL + EMILY FELIX Phone # Cell: 503-333-9720
	Address: 982 MANAKIN ROAD MANAKIN SABOT VA 23103 Email:

APPLICANT INFORMATION	Applicant/Contact: TOM HOMER Phone #: 804-426-7846
	Address: 12536 PATTERSON AVE. RICHMOND VA. 23238 Email: TOM@lanebuilt.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: N/A	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: _____	Center Line Setback: _____	Rear Setback: _____	CUP/Variance/COA: _____
	Side Setback: _____	Side Setback: _____	Flood Zone: _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: * No change to footprint. A2		

Planning & Zoning Officer: Daniel Floyd Date: 11/17/22

CONTRACTOR INFORMATION	Contractor: LANE HOMES + REMODELING Phone: 804-784-0012
	Address: 12536 PATTERSON AVE. RICHMOND VA. 23238 Email: GEOF@lanebuilt.com
	Contractor License Number: 2701 0291 25 A Type: CLASS A Expiration:

DESCRIPTION OF WORK	Scope of Work: CONVERT LAUNDRY INTO 1/2 BATH "NO ADDITION LIVING SPACE ADDED"				
	Proposed Use: Residence	Current Use: Residence	Environmental Impacts (stream crossing, wetlands, amt land disturbed): NO		
	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.: 48	Unfinished Sq. Ft.:	Total Sq. Ft.: 48	

Building Only - Excludes All Trades Permits		Application Fee: \$ 136.20
Value of Work: \$27,600.00		State Levy Fee: \$ 272
		Zoning Fee: \$ 25.00
		RLD: \$
		SWP: \$
		Total: \$ 163.92

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

Signature of Applicant: Thomas G. Homer Date: 11-7-22

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:
	Permit Number: <u>BP-2022-01422</u>
	GPIN/Tax Map: <u>27-1-0-1-0/6719-66-5414</u>
	Issued: <u>12-1-22</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>2550 Danieltown Rd Goochland, VA 23063</u>
	Owner <u>FRED T. BARBER, III</u>
	Address <u>2000 Danieltown Rd Goochland, VA 23063</u>

APPLICANT INFORMATION	Applicant/Contact <u>Fred T. Barber III</u>	Phone # <u>804-920-0846</u>
	Address <u>2000 Danieltown Rd Goochland, VA 23063</u>	Email <u>tommy@commonwealthgaragedoors.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from P/R/W</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>R1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>11/15/22</u>		

CONTRACTOR INFORMATION	Contractor <u>OWNER (SAME AS ABOVE)</u>	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Install New in Ground Pool Vinyl - 18' x 36' Pool - (NO Auto Cover) Fence dimensions w/ Gate AROUND Pool (will be sent ASD)</u>				
	Proposed Use <u>SPD Pool</u>	Current Use <u>SPD Pool - None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>1,500</u>		
	<input type="checkbox"/> SEWER Public/Private <input checked="" type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input checked="" type="checkbox"/>	# of Bathrooms <u>N/A</u>	# of Bedrooms <u>N/A</u>	# of floors <u>N/A</u>
	Finished Sq. Ft. <u>N/A</u>	Unfinished Sq. Ft. <u>N/A</u>	Total Sq. Ft. <u>N/A</u>		

Building Only - Excludes All Trades Permits		Application Fee \$ <u>192.00</u>
Value of Work <u>\$40,000</u>		State Levy Fee \$ <u>3.84</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee \$
Signature of Applicant <u>[Signature]</u>	Date <u>10/25/2022</u>	Zoning Fee \$ <u>25.00</u>
		RLD \$
		SWP \$
		Total \$ <u>220.84</u>

29792

RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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



Date	12.23.2022
Permit #	EV-22-117
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	2458 SHEPPARD TOWN RD	District	
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PROPERTY OWNERSHIP

Name	JUANITA COLES	Phone	804-556-4129
Mailing Address	2458 SHEPPARD TOWN RD MAIDENS, 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	HBICKLEY@ASKWOODFIN.COM	E-mail address:	
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820	Expiration 11/2022 License Type: CONTRACTOR Class: A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, 150AMP ATS			
# of Baths	Service Size	Power Company	Inquiry #

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Value of Work: 13,232.00

Signature of Applicant [Signature]

Permit fee: 114.83

Approval [Signature] Date _____

Issue date: 12/28/22



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date 12/27/2022
Permit # EX-02-00115
GPIN
Tax Map

LOCATION

Street Address
3651 W Rocketts Ridg CT, Sandy Hook, VA 23153

PROPERTY OWNERSHIP

Name Carlton Colvin	Phone 4342429780
Mailing Address 3651 W Rocketts Ridg CT, Sandy Hook, VA 23153	Email dccolvin@comcast.net

APPLICANT

Name Carlton Colvin	Phone 4342429780
Address 3651 W Rocketts Ridg CT, Sandy Hook, VA 23153	Email dccolvin@comcast.net

CONTRACTOR

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

DESCRIPTION OF WORK

Installation of 14kw home backup Generator			
# of Bathrooms 3	Service Size 200A	Power Company Dominion	Inquiry #
Value of Work (required) \$5000.00 \$2500			

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

Signature of Applicant: Date: 12/27/2022

Approval: <u></u>	Office Use Only
Permit Fee: <u>\$100</u>	Approval date: <u>12/27/22</u>
	Issued date: _____

Owner's Statement Required if Owner is the Applicant

I Carlton Colvin of (address) 3651W Rocketts Ridge CT, Sandy Hook, Va 23153

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

3651W Rocketts Ridge CT, Sandy Hook, Va 23153

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 Signature)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

This 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 7/25/22
Permit # 22-00182
GPIN
Tax Map

LOCATION

Street Address **4127 CEDAR PLAINS RD SANDY HOOK**

PROPERTY OWNERSHIP

Name PACE, RAYMOND	Phone
Mailing Address 4127 CEDAR PLAINS RD	Email

APPLICANT

Name JOEY EVANS	Phone 804-396-0628
Address 4189 STAGE JUNCTION RD COLUMBIA, VA	Email joey.threephase@gmail.com

CONTRACTOR

Name THREE PHASE CONSTRUCTION		Phone 804-396-0628	
Mailing Address 4129 NAMOLINE RD AMELIA, VA		Email SAME	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705133904	Expiration 10/31/22	License Type ELE
		Class A	

DESCRIPTION OF WORK

WIRE NEW SINGLE FAMILY DWELLING			
22KW GENERATOR			
1	200	DOMINION	10559372
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$11,000 -no change			

amend scope to add:

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

Signature of Applicant: Date: 7/25/22

Approval: FISHER	Office Use Only
Permit Fee: \$106.09	Approval date: 7/25/22
	Issued date: _____



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Date	12.14.2022
Permit #	EX-02-00106
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	1168 LICKINGHOLE RD	District	
----------------	---------------------	----------	--

PROPERTY OWNERSHIP

Name	JOHN FARRELL	Phone	804-335-5603
Mailing Address	1168 LICKINGHOLE RD GOOCHLAND, VA 23063		

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	E-mail address:	HBICKLEY@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

INSTALL 24KW GENERATOR, (2) 150AMP ATS			
# of Baths	Service Size	Power Company	Inquiry #

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Signature of Applicant		Value of Work:	15550.00
Approval	FISHER	Permit fee:	127.48
Date	12/20/22	Issue date:	12/20/22

227-22

RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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



Date	12.23.2022
Permit #	EV-22-118
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	2474 SHEPPARD TOWN RD	District	
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PROPERTY OWNERSHIP

Name	DONALD COLES	Phone	804-556-4129
Mailing Address	2474 SHEPPARD TOWN RD MAIDENS, 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		HBICKLEY@ASKWOODFIN.COM
E-mail address:			
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	Class: A
		CONTRACTOR	

DESCRIPTION OF WORK

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

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

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

_____(Signature)
Signed and acknowledged by _____ in the city or county of _____, Virginia on the _____ day of _____, 20____ in the presence of the undersigned notary. _____(Notary) My commission expires _____

Signature of Applicant *Palmy D. Piddle* Value of Work: 13,232.00
Approval *Fisher* Date 12/28/22 Permit fee: 114.83
Issue date: 12/28/22

120-22

1208



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 #	EP-2022-00085
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

GEN This 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	1390 JASMINE RD	District	
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PROPERTY OWNERSHIP

Name	BETTY ROBINSON	Phone	804-457-4270
Mailing Address	1390 JASMINE RD GOOCHLAND, VA 23063		

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, NEW 200 AMP ATS			
<i>Generator</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**

Signature of Applicant *Jim Han*

Permit fee: **102.00 116.83**

Approval *Fisher* Date **10-12-2022**

Issue date: **12/9/22**

collected under

12-8-22

12.16



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

ER-22-79

Date	12.15.2022
Permit #	
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

GEN

This 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	3929 WHITEHALL RD	District	
----------------	-------------------	----------	--

PROPERTY OWNERSHIP

Name	COREY CAWARD	Phone	804-517-7785
Mailing Address	3929 WHITEHALL RD SANDY HOOK, VA 23153		

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: 13,232.00

Permit fee: 102.00 116.83

Signature of Applicant Jim Hall

Approval Fisher Date 10-12-2022

Issue date: 12/9/22

133.20



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 12/17

Permit #: 133-20-00014

GPIN:

Tax Map:

LOCATION

Street Address: 1347 Stokes Station Rd, Goochland, VA, 23063

PROPERTY OWNERSHIP

Name: Lucy Riley	Phone: 804-332-2612
Mailing Address: 1347 Stokes Station Rd., Goochland, VA, 23063	Email: riley.lucy@1@gmail.com

APPLICANT

Name: Clark Home Solutions LLC	Phone: 804-302-4200
Address: 9830 West Broad St., Glen Allen, VA, 23060	Email: w60cock@generatorsupercenter.com

CONTRACTOR

Name: Clark Home Solutions LLC		Phone: 804-302-4200	
Mailing Address: 9830 West Broad St., Glen Allen, VA, 23060		Email: w60cock@generatorsupercenter.com	
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705176647	Expiration: 08-31-2024	License Type: Contractor Class: A

DESCRIPTION OF WORK

Run 30 feet SE from transfer switch to generator.

18Kv generator install

# of Bathrooms:	Service Size: 200A	Power Company: Dominion	Inquiry #:
Value of Work (required): \$16,800			

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

Signature of Applicant: [Signature] Date: 12/15/22

Approval: <u>[Signature]</u>	Office Use Only	Approval date: 12/17/22
Permit Fee: 133.01		Issued date:



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date 12/5/22

Permit # ELR-22-00064

GPIN

Tax Map

LOCATION

Street Address 5030 Howard Trace Lane

PROPERTY OWNERSHIP

Name Kenneth Wright Phone 804-229-5635

Mailing Address 5030 Howard Trace Lane, Columbia VA 23032 Email

APPLICANT

Name Amber Blough Phone Jim 804-218-0794

Address 1735 Arlington Rd, Richmond, VA 23230 Email ablough@master-electrical.com

CONTRACTOR

Name Master Electrical Services LLC Phone 804-231-1973

Mailing Address 1735 Arlington Rd, Richmond, VA 23230 Email ablough@master-electrical.com

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

DESCRIPTION OF WORK

Installation of (1) 22kw generator w/ (1) 200 amp transfer switch wired by 15 ft of nm/sd cable

# of Bathrooms	Service Size	Power Company	Inquiry #
<u>68,000</u>	<u>200</u>		

Value of Work (required)

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

Signature of Applicant: [Signature] Date: 11/17/2022

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>12/6/22</u>
Permit Fee: <u>100</u>		Issued date: <u>12/6/22</u>

(owner's statement on back)



RESIDENTIAL TRADES PERMIT APPLICATION

11-29

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	11.10.2022
Permit #	EX-22-000160
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	2308 FAIRGROUND RD	District	
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PROPERTY OWNERSHIP

Name	PATRICE TURNER	Phone	804-513-1495
Mailing Address	2308 FAIRGROUND RD MAIDENS, 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	HBICKLEY@ASKWOODFIN.COM	E-mail address:
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
		Expiration	11/2022
		License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

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

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

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

_____(Signature)

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

_____(Notary)

My commission expires _____

Value of Work: 13,432.00

Permit fee: 117.75

Issue date: 10/21/22

Signature of Applicant

Approval

[Handwritten Signature]
[Handwritten Signature]

Date 11-29-22



RESIDENTIAL TRADES PERMIT APPLICATION

11-99

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

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

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

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

Date	11.10.2022
Permit #	EX-00-000001
GPIN	
Tax Map	

LOCATION

Street Address	1870 WICKER WOODS DR	District	
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PROPERTY OWNERSHIP

Name	PHILLIP WHITMAN & HEIDI WHITE	Phone	804-389-1150
Mailing Address	1870 WICKER WOODS DR MAIDENS, VA 23103		

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		E-mail address: HBICKLEY@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

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

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

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

_____(Signature)

Signed and acknowledged by _____ in the city or county of _____, Virginia on the _____ day of _____, 20____ in the presence of the undersigned notary. _____(Notary) My commission expires _____

Signature of Applicant [Signature]
Approval [Signature] Date _____

Value of Work: 15,232.00
Permit fee: 126.01
Issue date: 12/1/22

11-29



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	11.16.2022
Permit #	EX-22-00053
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	3125 HYATT LN GOOCHLAND, VA 23063	District	
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PROPERTY OWNERSHIP

Name	JOEL & JACQUE BUTKIEWICZ	Phone	248-635-9755
Mailing Address	3125 HYATT LN GOOCHLAND, VA 23063		

APPLICANT

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

CONTRACTOR

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

DESCRIPTION OF WORK

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

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

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

_____(Signature)

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

_____(Notary) My commission expires _____

Signature of Applicant [Signature] Value of Work: 14,750.00

Approval [Signature] Permit fee: 123.81

Date 11-29-22 Issue date: 12/1/22