

REC: 1-3-23



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: 01/03/2023
 Permit Number: DPR-2023-00013
 GPIN/Tax Map: 6768-78-6465 / 31-10-36-A
 Issued: 1-27-23
 This 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>2738 Pouchouse rd, Goochland VA 23063</u>	
	Owner <u>Justin Cochran</u>	Phone # <u>559 936 6334</u>
APPLICANT INFORMATION	Address <u>Justin Cochran</u>	
	Applicant/Contact <u>Justin Cochran</u>	Email <u>Justin.Cochran@gmail.com</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>Justin Cochran</u>	
	Applicant/Contact <u>Justin Cochran</u>	Phone #

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from P4 Road</u>	Center Line Setback <u>100'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____	Planning & Zoning Officer <u>[Signature]</u> Date <u>1/18/23</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>Carport 20x18</u>				
	Proposed Use <u>Cover for vehicles</u>	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed) _____		
	SEWER Public/Private : _____	WATER Public/Private _____	# of Bathrooms _____	# of Bedrooms _____	# of floors _____
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. _____	Unfinished Sq. Ft. _____	Total Sq. Ft. <u>360</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>30</u> 2,400 <u>5,400</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 1/03/2023

Application Fee	\$ <u>36.30</u>
State Levy Fee	\$ <u>.73</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>62.03</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 1/18/23
 Permit Number: BPR-2023-00035

GPIN/Tax Map: 6126-36-3008/50-8-0-41

Issued: 1/27/23

This 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>1385 Marlin rd. Goochland VA. 23063</u>	
	Owner <u>Bert and Theresa Waite</u>	Phone # <u>(804) 387-9928</u>
	Address <u>2150 Marlin rd.</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>Steven Parrish</u>	Phone # <u>804-398-9167</u>
	Address <u>1385 Marlin rd.</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</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 of use</u>			
Planning & Zoning Officer: <u>David Floyd</u> Date: <u>1/23/23</u>				

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

DESCRIPTION OF WORK	Scope of Work: <u>Kitchen remodel</u> <u>revised 1/31/23 remodel two existing bathrooms</u>		
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms # of Bedrooms # of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. Total Sq. Ft.

Building Only - Excludes All Trades Permits

Value of Work	<u>16,000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 1-18-23

Application Fee	\$ <u>84.00</u>
State Levy Fee	\$ <u>1.68</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>110.68</u>



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type: Commercial
 Residential

Trade: Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date <i>1-27-23</i>
Permit # <i>EX-2023-00080</i>
GPIN <i>00080</i>
Tax Map

LOCATION

Street Address *2727 Turner Rd Goochland 23063*

PROPERTY OWNERSHIP

Name <i>Author Development</i>	Phone
Mailing Address <i>2727 Turner Rd Goochland 23063</i>	Email

APPLICANT

Name	Phone
Address	Email

CONTRACTOR

Name <i>Myers Electric</i>	Phone <i>804-363-8543</i>
Mailing Address <i>4964 Shannon Rd Kenton VA 23084</i>	Email <i>JamesMyers747@gmail.com</i>
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <i>2705017621</i>
Expiration <i>11-30-24</i>	License Type <i>Electrical</i>
	Class <i>B</i>

DESCRIPTION OF WORK

resize 18 KW generator

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <i>\$ 2500.00</i>			

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

Signature of Applicant: *James W Myers* Date: *1-27-23*

Approval: <u><i>Fishek</i></u> Permit Fee: <u><i>\$102</i></u>	Office Use Only Approval date: <u><i>1/31/23</i></u> Issued date: _____
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TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date: 1-28-23

Permit #: OK-0023-00000

GPIN: _____

Tax Map: _____

LOCATION 855 MANAKIN RD

Street Address: ~~773 DAK SPRING LANE MANAKIN SAHOT VA 23109~~

PROPERTY OWNERSHIP

Name: DOLLY JAVIELS Phone: _____

Mailing Address: ~~773 DAK SPRING LANE MANAKIN SAHOT~~ Email: _____

APPLICANT

Name: _____ Phone: _____

Address: _____ Email: _____

CONTRACTOR

Name: Myers Electric Phone: 804-363-8543

Mailing Address: 4964 SHANNON RD KENT STONE VA 23084 Email: JAMES MYERS 7417 @

Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2705017621</u>	Expiration <u>11-30-24</u>	License Type <u>Electer</u>	Class <u>901211, com B</u>
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DESCRIPTION OF WORK

wire 48 KW Generator

# of Bathrooms	Service Size	Power Company	Inquiry #

Value of Work (required): \$4000.00

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

Signature of Applicant: James Myers Date: 1/27/23

Approval: <u>Fisher</u>	Office Use Only
Permit Fee: <u>\$100</u>	Approval date: <u>1/31/23</u>
	Issued date: _____

DROP OFF 1-17-23

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 #	EL-23-51
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	1051 GRACE LANE	District	
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PROPERTY OWNERSHIP

Name	MICHAEL FIFE	Phone	804-229-1910
Mailing Address	1051 GRACE LANE 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 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 Jim Ball

Value of Work: 13,232.00

Approval Fisher

Permit fee: 114.83

Date 1-17-2023

Issue date: 1/25/23

1-94-23



TRADE PERMIT APPLICATION

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

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

Date	1.24.23
Permit #	EW-23-70
GPIN	
Tax Map	

LOCATION

Street Address
3668 FOREST GROVE RD

PROPERTY OWNERSHIP

Name	ALICE MARIE TIMBERLAKE	Phone	(804) 457-2188
Mailing Address	3668 FOREST GROVE RD, SANDY HOOK, VA 23152	Email	

APPLICANT

Name	WOODFIN	Phone	804-730-5000
Address	1823 N HAMILTON ST. RICHMOND, VA 23230	Email	PERMITS@ASKWOODFIN.COM

CONTRACTOR

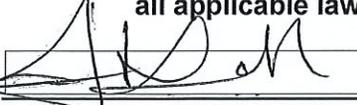
Name	WOODFIN	Phone	804-730-5000						
Mailing Address	1823 N HAMILTON ST. RICHMOND, VA 23230	Email	PERMITS@ASKWOODFIN.COM						
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820A	Expiration	11.30.23	License Type		Class	A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, 200AMP ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 15,632.00			

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

Signature of Applicant:  Date: 1.24.23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/25/23</u>
Permit Fee: <u>127.85</u>		Issued date: <u>1/25/23</u>

(owner's statement on back)

1-24-23

~~8-27-22~~



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 #	EP-23-00069
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	575 LEE ROAD	District	
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PROPERTY OWNERSHIP

Name	DAVID & LISA MONCURE	Phone	804-338-0500
Mailing Address	575 LEE ROAD CROZIER, VA 23039		

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: 14,132.00

Signature of Applicant [Signature]
 Approval Fisher Date _____

Permit fee: 120.94
 Issue date: 1/25/23



1-12-23

~~Handwritten scribble~~

TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

Date
1.11.23

Permit #
EUR-23-38

GPIN

Tax Map

LOCATION

Street Address
1656 MAIDENS ROAD

PROPERTY OWNERSHIP

Name SHARON COX	Phone (804) 839-1633
Mailing Address 1656 MAIDENS ROAD, MAIDENS, VA 23102	Email

APPLICANT

Name WOODFIN	Phone 804-730-5000
Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM

CONTRACTOR

Name WOODFIN		Phone 804-730-5000	
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230		Email PERMITS@ASKWOODFIN.COM	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A	Expiration 11.30.23	License Type A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR AND 200AMP ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 13,882			

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

Signature of Applicant [Signature] Date: 1.11.23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/17/23</u>
Permit Fee: <u>119.82</u>		Issued date: <u>1/17/23</u>

(owner's statement on back)

1-19-23

~~Handwritten scribble~~



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 1.11.23

Permit #
EP-23-39

GPIN

Tax Map

LOCATION

Street Address
1265 MILLERS LANE

PROPERTY OWNERSHIP

Name SHARON COX <u>YVONNE HOPKINS</u>	Phone 804-784-3281
Mailing Address 1265 MILLERS LANE MANAKIN SABOT, VA 23103	Email

APPLICANT

Name WOODFIN	Phone 804-730-5000
Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM

CONTRACTOR

Name WOODFIN	Phone 804-730-5000			
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM			
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2701037820A</u>	Expiration <u>11.30.23</u>	License Type	Class <u>A</u>

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR AND 200AMP ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) <u>13,732</u>			

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

Signature of Applicant: C Beck Date: 1.11.23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/17/23</u>
Permit Fee: <u>119.13</u>		Issued date: <u>1/17/23</u>

(owner's statement on back)

1-18-23



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date
1.12.23

Permit #
ER-23-37

GPIN

Tax Map

LOCATION

Street Address
2516 DOGTOWN RD

PROPERTY OWNERSHIP

Name JOHN DANDRIDGE	Phone 302-242-5317
Mailing Address 2516 Dogtown Rd GOOCHLAND, VA 23063	Email

APPLICANT

Name WOODFIN	Phone 804-730-5000
Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM

CONTRACTOR

Name WOODFIN	Phone 804-730-5000			
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM			
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A	Expiration 11.30.23	License Type	Class A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR AND 200AMP ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 13,750			

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

Signature of Applicant: Date: 1.12.23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/17/23</u>
Permit Fee: <u>119.22</u>		Issued date: <u>1/17/23</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date: 12/30/2022

Permit #: EUR-2023-00035

GPIN: 7715-76-0765

Tax Map: 58-34-3-12-0

LOCATION

Street Address: 207 Kinloch Rd

PROPERTY OWNERSHIP

Name: James C & Jennifer K Fagan	Phone:
Mailing Address: 12004 Sumner Ct. Glen Allen, VA 23059	Email:

APPLICANT

Name: Kelly Cathell	Phone: 804-266-4041
Address: 1575 Mountain Rd. Glen Allen, VA 23060	Email: KellyC@tribbleelectric.com

CONTRACTOR

Name: Tribble Electric		Phone: 804-266-4704	
Mailing Address: 1575 Mountain Rd. Glen Allen, VA 23060		Email: KellyC@tribbleelectric.com	
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705177312	Expiration: 1-31-2023	License Type: ELE Class: A

DESCRIPTION OF WORK

wirc generator - 22kw

# of Bathrooms	Service Size	Power Company: Dominion	Inquiry #: 10531109
Value of Work (required): \$ 5900.00			

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

Signature of Applicant: [Signature] Date: 12/30/2022

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/11/23</u>
Permit Fee: <u>102</u>		Issued date: <u>1/11/23</u>



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

Date: 11/8/22
 Permit #: EK-0023
 GPIN: 00024
 Tax Map:

LOCATION

Street Address: 5910 COMMUNITY HOUSE ROAD

PROPERTY OWNERSHIP

Name: ANDREW & TRACE SMITH
 Mailing Address: 5910 COMMUNITY HOUSE ROAD
 Phone: 804-933-9692
 Email: TGHOLSON428@GMAIL.COM

APPLICANT

Name: Virginia Power Solutions
 Address: 10102 Whitesel Road, B, Ashland, VA 23005
 Phone: 804-365-0263
 Email: JNS7AUS@virginiapowersolutions.com

CONTRACTOR

Name: Virginia Power Solutions
 Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005
 Phone: 804-365-0263
 Email: JNS7AUS@virginiapowersolutions.com

Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705123991	8/31/24	ELE, GFC	B

DESCRIPTION OF WORK

INSTALL 24kw GENERATOR & 200A SWITCH

# of Bathrooms	Service Size	Power Company	Inquiry #
		DOM	

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

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

Signature of Applicant: Date: 11/8/22

Office Use Only

Approval date: _____
 Issued date: _____

\$100

(owner's statement on back)

ISSUED: 11/15/23



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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

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

Date _____

Permit #
EUR-2023-00003

GPIN
6759-35-2737

Tax Map
30-1-0-5-0

LOCATION

Street Address
2798 SANDY HOOK RD GOOCHLAND VA 23063

PROPERTY OWNERSHIP

Name HAYNIE HITE	Phone 804-814-1315
Mailing Address 2798 SANDY HOOK RD GOOCHLAND VA 23063	Email hiteiii@gmail.com

APPLICANT

Name HAYNIE HITE	Phone 804-814-1315
Address 2798 SANDY HOOK RD GOOCHLAND VA 23063	Email hiteiii@gmail.com

CONTRACTOR

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

DESCRIPTION OF WORK

INSTALL A 20KW GENERATOR AND TRANSFER SWITCH

# of Bathrooms	Service Size 400 AMP	Power Company DOMINION	Inquiry # 33562991
Value of Work (required) \$250			

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: Haynie M. Hite, III Date: 1/2/23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/3/23</u>
Permit Fee: <u>102</u>		Issued date: <u>1/3/23</u>

(owner's statement on back)

Owner's Statement Required if Owner is the Applicant

I HAYNIE HITE of (address) 2798 SANDY HOOK RD COOCHLAND VA

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

2798 SANDY HOOK RD COOCHLAND VA 23063

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

Haynie M. Hite

(Owner Signature)