



Goochland County

Building Inspections

1800 Sandy Hook Rd Goochland, VA 23063
(804)556-5815, Fax (804)556-5651, TDD: (804)556-5317

New Single Family Dwelling Permits
Issued between 06/01/2023 and 06/30/2023

Permit Number	Issued Date	Structure Type	Value
BPR-2023-00149	06/06/2023	New Construction	\$238,350.00
BPR-2023-00192	06/28/2023	New Construction	\$403,000.00
BPR-2023-00224	06/15/2023	New Construction	\$298,361.00
BPR-2023-00229	06/15/2023	New Construction	\$280,000.00
BPR-2023-00225	06/15/2023	New Construction	\$284,000.00
BPR-2023-00238	06/07/2023	New Construction	\$230,850.00
BPR-2023-00247	06/07/2023	New Construction	\$235,725.00
BPR-2023-00244	06/01/2023	New Construction	\$269,000.00
BPR-2023-00254	06/16/2023	New Construction	\$275,000.00
BPR-2023-00242	06/14/2023	New Construction	\$233,287.50
BPR-2023-00257	06/14/2023	New Construction	\$600,000.00
BPR-2023-00245	06/14/2023	New Construction	\$237,000.00
BPR-2023-00267	06/15/2023	New Construction	\$355,725.00
BPR-2023-00251	06/14/2023	New Construction	\$300,000.00
BPR-2023-00294	06/26/2023	New Construction	\$387,600.00
BPR-2023-00279	06/20/2023	New Construction	\$257,346.00
BPR-2023-00277	06/20/2023	New Construction	\$280,602.00
BPR-2023-00273	06/22/2023	New Construction	\$191,850.00
BPR-2023-00269	06/26/2023	New Construction	\$585,225.00
BPR-2023-00278	06/20/2023	New Construction	\$261,936.00
BPR-2023-00280	06/20/2023	New Construction	\$288,762.00
BPR-2023-00300	06/29/2023	New Construction	\$252,000.00

Total SFD: 22

Total Value:

\$6,745,619.50



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 5/13/2023 *REC-3-3-23*

Permit Number: DPK-2023-00251

GPIN/Tax Map: 6841-79-3479/13-1-0-11-C

Issued: 6-14-23

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>3822 CABIN RD</u>	Phone # <u>804 216 7222</u>
	Owner <u>WONDERVIEW HOMES</u>	Email <u>WONDERVIEW99@yahoo.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>same as owner</u>	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55' from PLYKON</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David Floyd</u> Date <u>5/16/23</u>			

CONTRACTOR INFORMATION	Contractor <u>WONDERVIEW HOMES</u>	Phone <u>804 216 7222</u>
	Address <u>PO BOX 71595 RICHMOND VA 23255</u>	Email <u>WONDERVIEW99@yahoo.com</u>
	Contractor License Number <u>2705135088</u>	Type <u>CLASS A REG. HIC, CBC</u>

DESCRIPTION OF WORK	Scope of Work: <u>BUILD NEW CONSTRUCTION SINGLE FAMILY HOME WITH ATTACHED GARAGE</u>				
	Proposed Use <u>SINGLE FAMILY</u>	Current Use <u>VACANT</u>	Environmental Impacts (stream crossing, wetlands, airt land disturbed) <u>Less than 10,000 sq ft. 9000 sq ft 1st time</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>2</u>	# of Bedrooms <u>3</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)	Finished Sq. Ft. <u>1779</u>	Unfinished Sq. Ft. <u>1371</u>	Total Sq. Ft. <u>3150</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>1362.00</u>
Value of Work	<u>\$300,000</u>	State Levy Fee	\$ <u>27.24</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>50.00</u>
		RLD	\$ <u>100.00</u>
		SWP	\$ <u>2000.00</u>
		Total	\$ <u>1739.24</u>
Signature of Applicant	<u>[Signature]</u> President	Date	<u>5/3/23</u>

22-0-000

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: Patrick Carroll PC Kne Jeffries LLP Telephone: 804 298-1672

Mailing Address: 1700 Bayberry court #103 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 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 6 CODE EDITION 18

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BECKING DATE 6-13-23

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: **Dec: 5-18-23**

Permit Number: **DPR-2023-00267**

GPIN/Tax Map: **6-11-0-3-0/68-23-75-2690**

Issued: **6-15-23**

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 WALTON RD	
	Owner SUAT PEKESEN	Phone # 804 840 7597
APPLICANT INFORMATION	Address 4211 LYNCHES TER DR N. CHESTERFIELD VA 23236	
	Applicant/Contact SUAT PEKESEN	Email pekesensuat@gmail.com

APPLICANT INFORMATION	Address 4211 LYNCHES TER DR. N. CHESTERFIELD VA 23236	
	Phone # 804 840 7597	Email pekesensuat@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 25' from PC/ROW	Center Line Setback 100'	Rear Setback 35'	GUP/Variance/COA _____
	Side Setback 30'	Side Setback 30'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: Daniel Page Date: 5/25/23			

CONTRACTOR INFORMATION	Contractor SUAT PEKESEN (OWNER)		Phone 804 840 7597
	FRANKELL BUILDERS LLC		804 929 6054
	Address 3316 Sutherland Rd Richmond VA 23227		Email pekesensuat@gmail.com
Contractor License Number 270 514 3417		Type RBC/CBE	Expiration 12/31/23

DESCRIPTION OF WORK	Scope of Work: SFD (No Basement) (with attached garage)				
	Proposed Use Residential 1	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None 9000 sq ft.		
	SEWER Public/Private Private	WATER Public/Private Private	# of Bathrooms 3 1/2	# of Bedrooms 4	# of floors 2
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No) No	Finished Sq. Ft. 2850	Unfinished Sq. Ft. 2850	Total Sq. Ft. 3250 4850	

Building Only - Excludes All Trades Permits		Application Fee	\$ 437.38
Value of Work \$ 224,000 \$ 288,750		State Levy Fee	\$ 26.23
		Zoning Fee	\$ 50.00
		RUD	\$ 100.00
		SWP	\$ 300.00
Signature of Applicant: [Signature]		Total	\$ 6,627.61
Date: 4/17/2023			



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 6/1/23
 Permit Number: BP2-2023-00294
 GPIN/Tax Map: 7715-23-3380/58-56-0-1-0
 Issued: 6/26/23
 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: 951 MANAKIN RD.
 Owner: FRANK JENKINS Phone #: _____
 Address: 231 WYLDEROSE DR. MIDLOTTON VA 22113 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: TEAM HENRY ENTERPRISES; MICHAEL SIRAS Phone #: _____
 Address: 2150 MAGNOLIA ST. RICHMOND, VA 23223 Email: MSIRAS@TEAMHENRYENT.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>100' from R4 ROW</u>	Center Line Setback: <u>125'</u>	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
Side Setback: <u>45' 35' from ROW R/S 20'</u>	Side Setback: _____	Flood Zone: _____	_____

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Floyd Date: 6/6/23

CONTRACTOR INFORMATION
 Contractor: TEAM HENRY ENTERPRISES Phone: 757-634-4010
 Address: 2150 MAGNOLIA ST. RICHMOND, VA 23223 Email: MSIRAS@TEAMHENRYENT.COM
 Contractor License Number: 2705117363 Type: Class A Expiration: 9/30/23

DESCRIPTION OF WORK
 Scope of Work: BUILD GARAGE AND APARTMENT AS PER PLANS TO INCLUDE CLEARING OF LAND, EROSION CONTROL, DRIVEWAY, WELL & SEPTIC
SD w/ attached garage

Proposed Use: <u>Apartment</u>	Current Use: _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>N/A 30000</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>1</u>	# of Bedrooms: <u>1</u>	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.: <u>9500</u>	Unfinished Sq. Ft.: <u>1750</u>	Total Sq. Ft.: <u>APRT 11250, GARAGE 7920</u>	

Building Only -- Excludes All Trades Permits 594 6782

Value of Work: <u>90,000.00</u>	<u>\$387,600</u>	Application Fee: <u>\$1500</u>
		State Levy Fee: <u>\$200</u>
		Zoning Fee: <u>\$50</u>
		RLD: <u>\$100</u>
		SWP: _____
		Total: <u>\$1951.32</u>

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

Signature of Applicant: [Signature] Date: 5-1-23

RECEIVED BY MAIL
6-15-23



BUILDING PERMIT APPLICATION

Application Date: May 9, 2023

Permit Number: 2023-00313

GPIN/Tax Map: 28-5-0-1-0 / 6738-07-6080

Issued: 6-26-23

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.

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: 4455 River road West, Goochland, VA 23063
Owner: Patrick V Cooke
Phone #: 703-587-1367
Address: 202 Major King Lane, FT Washington, MD, 20744
Email: patrick0824@aol.com

APPLICANT INFORMATION
Applicant/Contact: Michelle Florio
Phone #: 847964870
Address: 11716 Jefferson Davis Hwy Chester VA 23083
Email: michelle.florio@claytonhomes.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision: N/A
Proffer: Yes No
Amount: _____ Date Paid: _____
Front Setback: 100' from P.Y. Line
Center Line Setback: 125'
Rear Setback: 35'
Side Setback: 20' Side Setback: 20' Flood Zone: _____
CUP/Variance/COA: A1
APPROVED REJECTED COMMENTS:
Planning & Zoning Officer: David Lloyd Date: 6/20/23

CONTRACTOR INFORMATION
Contractor: Clayton Homes of Chester
Phone: 847964870
Address: 11716 Jefferson Davis Hwy
Email: michelle.florio@claytonhomes.com
Contractor License Number: 2703048123 Type: A Expiration: 4/30/2024

DESCRIPTION OF WORK
Scope of Work: set new manufactured home on private property existing well & septic
Proposed Use: _____ Current Use: _____ Environmental Impacts (stream crossing, wetlands, and land disturbed): no
SEWER: Public/Private _____ WATER: Public/Private _____ # of Bathrooms: 2 # of Bedrooms: 3 # of floors: 1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No: _____ Finished Sq. Ft.: 1344 Unfinished Sq. Ft.: 0 Total Sq. Ft.: 1344

Building Only - Excludes All Trades Permits
Value of Work: 60,000
Application Fee: \$282.00
State Levy Fee: \$5.64
Zoning Fee: \$50.00
RLD: \$
SWP: \$
Total: \$337.64

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
Signature of Applicant: [Signature] Date: 5/19/23

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 38-95.01 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: Statewide Settlement Svc Telephone: 540 209 3167

Mailing Address: 2282 Lillards Ford Rd, Brightwood, VA

OWNER'S STATEMENT

I, Patrick Cooke of (address) 209 Major King Ln affirm that I am the owner of a certain tract of parcel of land located at 4555 River Rd W Goochland ^{Fr Washington, MD 20744} 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.

[Signature]
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 38-99.7 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 25 # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 6 CODE EDITION 18

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL [Signature] DATE 6.23.23

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: 6/11/23Permit Number: POL2-2023-00021GPIN/Tax Map: 6850-7A-1489/18-11-0-120Issued: 6/11/23
 Residential Commercial

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

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

OWNER INFORMATION	Site Address <u>3327 Tillar Ln, Goochland, VA 23063</u>	
	Owner <u>Wade Dixon</u>	Phone # <u>619.606.3525</u>
	Address <u>3327 Tillar Ln, Goochland, VA 23063</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Wade Dixon</u>		Phone # <u>619.606.3525</u>
	Address <u>3327 Tillar Ln, Goochland, VA 23063</u>		Email <u>dxn717@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Whitshell Creek</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from R/L</u>	Center Line Setback	Rear Setback	CUP/Variance/GOA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>OWNERS REQUEST</u> Date: <u>5/15/23</u>			

CONTRACTOR INFORMATION	Contractor <u>Tim Pritchett, Mountain Creek Hardscapes, LLC</u>		Phone <u>804.921.1397</u>
	Address <u>7330 Staples Mill Rd #258, Richmond, VA 23228</u>		Email <u>rtpritchett@gmail.com</u>
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Install 14'x28' in-ground vinyl pool with 615 sq ft of concrete around the edge. and within existing 48" tall aluminum pool-code fence, 30' from house.</u>				
	Proposed Use <u>Private</u>	Current Use <u>N/A</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>		
	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. <u>1302</u>	Total Sq. Ft. <u>392</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>28013</u>
Value of Work	<u>\$52,916.74</u>	State Levy Fee	\$ <u>0</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>05</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>28013</u>
Signature of Applicant	<u>Wade M. Dixon</u>	Date	<u>5/11/2023</u>

Rec: 2-14-23

 <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>	Application Date: <u>2-23-23</u>
	Permit Number: <u>BPA-202300088</u>
	GPIN/Tax Map: <u>7723-46-7121 / 67-12-0-12-0</u>
	Issued: <u>3-15-23</u>
<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial	
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 12 Partridge Hill Road	Phone # 804-514-2166
	Owner Willis J. & Kristin M. Hidell	Email blhidell@gmail.com
	Address 12 Partridge Hill Road	
APPLICANT INFORMATION	Applicant/Contact John Bauhan	Phone # 970-274-0466
	Address 1641 Genito Lane, Manakin-Sabot, VA 23103	Email jbauhan@bauhancustombuilders.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Partridge Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from P4 Ave</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	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>2/24/23</u>		

CONTRACTOR INFORMATION	Contractor Bauhan Custom Builders, Inc.	Phone 970-274-0466
	Address 1641 Genito Lane, Manakin-Sabot, VA 23103	Email jbauhan@bauhancustombuilders.com
	Contractor License Number 2705137373	Type Class A <u>CDC/RDC</u> Expiration 11-30-2024

DESCRIPTION OF WORK	Scope of Work: Remove rear sun porch and rebuild as living space adding a fireplace to west end. Addition of a mudroom to the east and remodel of the kitchen. <u>15x43</u> <u>2405sq ft</u>				
	<u>Revised: 5-30-23 to add 64 ft of unfinished</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>395</u>	Unfinished Sq. Ft. <u>64</u>	Total Sq. Ft. <u>395 - 885</u> <u>9.40</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>3,612.00</u>
Value of Work	800,000	State Levy Fee	\$ <u>72.24</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>3,709.24</u>

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

Signature of Applicant: [Signature] Date: 2-14-23

395 + 64 = 459 sq ft
 459 sq ft + 885 sq ft = 1344 sq ft

Rec: 9-30-20

 <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: September 29, 2020
	Permit Number: BP-2020-00935
	GPIN/Tax Map: 0034-02-1557/UA-1-0-50-B
	Issued: 11-6-2020

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 12501 Patterson Avenue Richmond VA 23238
	Owner: David R. Milligan James River Self Storage Phone # 804-314-7925
	Address: 12501 Patterson Avenue Richmond VA 23238 Email: rmilligan@jamesriverinteriorsinc.com

APPLICANT INFORMATION	Applicant/Contact: David R. Milligan Phone # 804-314-7925
	Address: 12543 Patterson Avenue Richmond VA 23238 Email: rmilligan@jamesriverinteriorsinc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: None	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: 10' from Reg. line	Center Line Setback: _____	Rear Setback: 10'	CUP/Variance/COA: COA-2020-17
	Side Setback: 10'	Side Setback: 10'	Flood Zone: _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: * Non-conforming Bldg. No closer than current structure. Date 10/15/2020		

Planning & Zoning Officer: *David Floyd*

CONTRACTOR INFORMATION	Contractor: James River Interiors, Inc. Phone: 804-314-7925
	Address: 12543 Patterson Avenue Email: rmilligan@jamesriverinteriorsinc.com
	Contractor License Number: 2701034582 Type A Expiration: 06/30/2021

DESCRIPTION OF WORK	Scope of Work: No interior work at this time per Mr. Milligan Demolition of existing EIFS on exterior of building and all interior finishes. Add new metal stud facade and EIFS. Add new bathrooms and (2) offices. New office tenant unit for U-Fab				
	Proposed Use: Self Storage Facility	Current Use: Home Furnishings Store	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER: Public/Private	WATER: Public/Private	# of Bathrooms: 2	# of Bedrooms: 0	# of floors: 1
	Will a foundation be installed within 20 ft. of any septic system components? (Yes/No)	Finished Sq. Ft.: 18,500	Unfinished Sq. Ft.:	Total Sq. Ft.: 18,500	

Building Only - Excludes All Trades Permits		Application Fee: \$ 910.00
Value of Work: \$128,000 + \$18,000 = \$146,000		State Levy Fee: \$ 19.20
		Septic/Well Fee: \$
		Zoning Fee: \$ 500
		RLD: \$
		SWP: \$
Signature of Applicant: <i>[Signature]</i>	Date: 9.29.20	Total: \$ 979.20



BUILDING PERMIT APPLICATION

Application Date: 5/17/23Permit Number: BPL-2023000259GPIN/Tax Map: 677-45-0138/43-42-0-13-0Issued: 6/6/23This 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
 Southland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

 Residential
 Commercial

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

OWNER INFORMATION	Site Address <u>1741 Fishers Pond Drive</u>	
	Owner <u>Bonnie & Jeff Horton</u>	Phone #
	Address <u>1741 Fishers Pond Drive</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>Steve Thompson</u>	Phone # <u>539-2524</u>
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze H. 11</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Varlance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David [Signature]</u> Date <u>5/22/23</u>			

CONTRACTOR INFORMATION	Contractor <u>Steve Thompson Builder</u>	Phone <u>539-2524</u>
	Address <u>1390 B Broad Street 12d Oakville 23129</u>	Email <u>stevethompsonbuilder@comcast.net</u>
	Contractor License Number <u>2705054732</u>	Type <u>CBCL23C</u>

DESCRIPTION OF WORK	Scope of Work: <u>attached</u> <u>Finish Room over Garage with 1/2 Bath</u> <u>playroom & conditioned storage</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>P</u>	WATER Public/Private <u>P</u>	# of Bathrooms <u>1/2</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>730</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>730</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>100</u>
Value of Work	<u>20,000</u>	State Levy Fee	\$ <u>200</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>
Signature of Applicant	<u>[Signature]</u>	RLD	\$
Date	<u>5/17/23</u>	SWP	\$
		Total	\$ <u>100.00</u>



BUILDING PERMIT APPLICATION

Application Date: ~~5/16/2023~~ 5/18/23

Permit Number: 892-5023-00261

GPIN/Tax Map: 7706-0683105/08-05-4-34-0

Issued: 6/6/23

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

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 12432 Leith Hill Circle, Manakin Sabot, VA 23103	
	Owner Gary Roemmich	Phone # 757-376-0442
	Address 12432 Leith Hill Cir. Manakin Sabot, VA 23103	Email uwgary15@gmail.com

APPLICANT INFORMATION	Applicant/Contact Christine Clawson/Convert Solar LLC	Phone # 757-447-6527
	Address 5770 Thurston Ave ste106, Va Beach, Va 23455	Email npi@convert-solar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Readers Brand</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to landscaping / use</i>			
	Planning & Zoning Officer: <i>[Signature]</i>		Date: <i>5/23/23</i>	

CONTRACTOR INFORMATION	Contractor Chad Wilikins /Convert Solar LLC		Phone 757-447-6527
	Address 5770 Thurston Ave ste 106, Virginia Beach, Va 23455		Email npi@conavert-solar.com
	Contractor License Number 2705183097	Type AES;ELE	Expiration 08-31-2024

DESCRIPTION OF WORK	Scope of Work: Solar Panels- Roof-mounted, Grid-tied, 6.885kW solar pv system on existing residence				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.		Unfinished Sq. Ft.		Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$ <i>25.10</i>
Value of Work	9577.50	State Levy Fee	\$ <i>1.10</i>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Septic/Well Fee	\$
		Zoning Fee	\$ <i>25</i>
		RLD	\$
		SWP	\$
		Total	\$ <i>81.00</i>
Signature of Applicant	<i>[Signature]</i>	Date	5/16/2023



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 550-5818 Fax (804) 558-5851
 TDD 711 VA Relay

Residential Commercial

Application Date: **Rec: 5-16-23**

Permit Number: **DPR-202300256**

GPIN/Tax Map: **1726006-8242158-55-436-0**

Issued: **6-7-23**

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 12428 Leith Hill Circle Manakin Sabot, Va 23103	
	Owner Joseph Pellegrino	Phone # (804) 241-2165
	Address 12428 Leith Hill Cir. Manakin Sabot, Va 23103	Email mlpjjp@verizon.net

APPLICANT INFORMATION	Applicant/Contact Joseph Pellegrino	Phone # (804) 241-2165
	Address 12428 Leith Hill Cir. Manakin Sabot, Va 23103	Email mlpjjp@verizon.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Readers Branch	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 30' from P/R/W	Center Line Setback 55'	Rear Setback 25'	CUP/Variance/COA mlpjjp@verizon.net
	Side Setback 10'	Side Setback 10'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: David Floyd Date 5/17/23			

Planning & Zoning Officer: **David Floyd** Date: **5/17/23**

CONTRACTOR INFORMATION	Contractor Joseph Pellegrino (owner)	Phone (804) 241-2165
	Address 12428 Leith Hill Cir. Manakin Sabot, Va 23103	Email mlpjjp@verizon.net
	Contractor License Number	Type Expiration

DESCRIPTION OF WORK	Scope of Work: build new landing and stairs to existing covered 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.	
		54	54	53.865 54	

Building Only - Excludes All Trades Permits		Application Fee	\$ 30.00
Value of Work	\$ 3,700.00	State Levy Fee	\$ 60
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ 25.00
Signature of Applicant	[Signature]	RLD	\$
Date		SWP	\$
		Total	\$ 50.60



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: 5/23/23
 Permit Number: 612-0030020
 GPIN/Tax Map: 58-23-0-1-0 | 7716-87-8001
 Issued: 6/7/23
 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	1564 Oak Grove Dr. Manakin Sabot, Va 23103		
	Owner	Raine N & Naji Salhab		Phone #
	Address	1564 Oak Grove Dr. Manakin Sabot, Va 23103		Email

APPLICANT INFORMATION	Applicant/Contact	Larry Felbush		Phone #	804-337-5253
	Address	13315 Farm View Dr. Ashland, Va 23005		Email	felbushhomes@yahoo.com

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

Planning & Zoning Officer: [Signature] Date: 5/23/23

CONTRACTOR INFORMATION	Contractor	Felbush Homes LLC		Phone	804-337-5253
	Address	13315 Farm View Dr. Ashland, Va 23005		Email	felbushhomes@yahoo.com
	Contractor License Number	2705108957	Type	CBC RBC	Expiration

DESCRIPTION OF WORK	Scope of Work: Construct 3 Car Garage				
	Proposed Use Storage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 4000 Sq. Ft.		
	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	\$56,000.00
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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: 5-28-2023

Application Fee	\$ <u>604</u>
State Levy Fee	\$ <u>5.00</u>
Zoning Fee	\$ <u>00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>604.00</u>

R5 VB 2018 Ball 6/June/2023



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: 5-8-23 5/12/23

Permit Number: BP2-0003-00248

GPIN/Tax Map: 7105-86-5894/57-10-0-27C

Issued: 6/7/23

Residential Commercial

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

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

OWNER INFORMATION	Site Address	<u>1674 Devon Way, Monahan-Sobot, VA 23103</u>	
	Owner	<u>Mitch Johnson</u>	Phone # <u>804-402-9112</u>
	Address	<u>1674 Devon Way</u>	Email <u>MF.Johnson3333@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact	<u>Nick Farruggio</u>	Phone # <u>804-878-2690</u>
	Address	<u>9143 Rob Pony Ct, Mechanicsville VA 23116</u>	Email <u>Nick.Farruggio@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	<u>55' from P4 ROW</u>	<u>80'</u>	<u>35'</u>	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer David Floyd Date 5/16/23

CONTRACTOR INFORMATION	Contractor	<u>Blue Skies Construction</u>	Phone <u>804-878-2690</u>
	Address	<u>1415 Windsor Way, Monahan Sobot VA 23103</u>	Email <u>Blueskiesconstructionva@gmail.com</u>
	Contractor License Number	<u>2705182886</u>	Type <u>Class A-RBC</u> Expiration <u>6-22-24</u>

Scope of Work: Construct 16x16 "sunroom" addition on existing residence.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>SEWER Public/Private</u>	<u>WATER Public/Private</u>	# of Bathrooms	# of Bedrooms	# of floors
		<u>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>256</u>	<u>0</u>	<u>256</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>297.00</u>
Value of Work	<u>\$63,344</u>	State Levy Fee	\$ <u>15.00</u>
		Zoning Fee	\$ <u>20</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>327.00</u>

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

Signature of Applicant [Signature] Date 5-8-23



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

NIC: 23-23

Application Date: 5-16-23

Permit Number: PR-2023-00253

GPIN/Tax Map: 6729-84-0169 / 28-10-4-0

Issued: 6-8-23

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 2540 Chapel Hill Rd, Goochland, VA 23063	
	Owner Tyler and Brooke Payne	Phone # 540-894-6014
APPLICANT INFORMATION	Address 2540 Chapel Hill Rd, Goochland, VA 23063	Email
	Applicant/Contact Tyler Paune	Phone # 540-894-6014
TO BE COMPLETED BY ZONING DEPARTMENT	Address 2540 Chapel Hill Rd, Goochland, VA 23063	Email TWP946@gmail.com

Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
Front Setback <u>55' from P/L</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
Side Setback <u>35' from P/L</u>	Side Setback <u>5'</u>	Flood Zone	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>[Signature]</u> Date <u>5/17/23</u>			

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

Scope of Work: detached
25' x 30' metal garage on concrete slab.

Proposed Use Garage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
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.	Unfinished Sq. Ft.	Total Sq. Ft.	
	750	750		

Building Only - Excludes All Trades Permits

Value of Work	\$21,700.00	Application Fee	\$ <u>109.65</u>
		State Levy Fee	\$ <u>2.19</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>136.84</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.

Signature of Applicant [Signature] Date 4/20/2023



BUILDING PERMIT APPLICATION

Application Date: **Rec: 5-26-23**

Permit Number: **BPR-2023-0284**

GPIN/Tax Map: **6850-2A-6439 / 21-11-0-86-0**

Issued: **6-8-23**

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.

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	Joe + Kelly Clarke	
	Owner	2791 Fallen Creek Dr. Sandy Hook, VA	
	Address		
	Phone #	804-400-2373	
	Email	the.clarkehouse@gmail.com	

APPLICANT INFORMATION	Applicant/Contact	Timothy Kidd	
	Address	58 Centre Hill Ct Palmyra VA 22963	
	Phone #	434-260-4033	
	Email	info@decksbydak.com	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	Mill Forest	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	55' from PL/BL	80'	35'	
Side Setback	Side Setback	Flood Zone		
15' / 35'	15' / 35'		RR	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:	
	Planning & Zoning Officer	<i>David Floyd</i>	Date	5/31/23

CONTRACTOR INFORMATION	Contractor	DAK Construction LLC		Phone	434-260-4033
	Address	58 Centre Hill Ct. Palmyra VA 22963		Email	info@decksbydak.com
	Contractor License Number	2705079124	Type	Class A	Expiration

Scope of Work: Remove existing deck + stairs. Build new deck on same location. Expanding size to 27' x 12'. Trex deck w/ blk signature rails. Constructing patio below with Trex rain escape system

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Outside Recreation	Same	# of Bathrooms	# of Bedrooms	# of floors
SEWER Public/Private	WATER Public/Private	Unfinished Sq. Ft.	Total Sq. Ft.	
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / (No)		324	824	

Building Only - Excludes All Trades Permits

Value of Work	24,798	Application Fee	\$ 123.59
		State Levy Fee	\$ 2.41
		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 151.00

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

Signature of Applicant: *[Signature]* Date: *05/22/23*



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: 8/9/22
 Permit Number: BP-2022-01020
 GPIN/Tax Map: 715-79-6370/58-51-0-22-0
 Issued: 9/7/22
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential Commercial

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

OWNER INFORMATION	Site Address <u>1110 Getaway Lane, Manakin Sabot, VA 23103 / Lot 22 tuckahoe Creek</u>	
	Owner <u>Mary & Andrew Scott</u>	Phone # <u>804-874-8090</u>
APPLICANT INFORMATION	Address <u>10617 Harborough Way, Henrico, VA 23238</u>	Email <u>msscott@gibrall.com</u>
	Applicant/Contact <u>Rebecca Martinez Steve Thompson</u>	Phone # <u>804-659-4218</u>
	Address <u>1390 B Broad Street Road Oilville 23129</u> <u>1606 Wood Grove Circle Henrico, VA 23238</u>	Email <u>rebecca@dunkum.net</u> <u>SteveThompsonBuilder@Comcast.net</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Tuckahoe Creek</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount <u>\$15,561.00</u>	Date Paid <u>Done</u>
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone <u>X</u>	<u>RPUD</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Cash Proffer due.</u>	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>8/17/22</u>		

CONTRACTOR INFORMATION	Contractor <u>Dunkum Inc. Steve Thompson Builder, LLC</u>	Phone <u>804-740-4071</u> <u>804-539-2524</u>
	Address <u>1390 B Broad Street Road Oilville VA 23129</u> <u>1606 Wood Grove Circle, Henrico, VA 23238</u>	Email <u>SteveThompsonBuilder</u> <u>jim@dunkum.net</u> <u>Comcast.net</u>
Contractor License Number <u>2705024754</u> <u>2705054732</u>		Type <u>BLD-A BLDH</u> Expiration <u>06-30-2024 3/31/24</u>

Scope of Work: Revised: 5-30-20 to include 1 elevator

New Single Family Home dwelling with attached garage with finished basement & unfinished 800 sft of storage.

Proposed Use <u>Single Family Dwelling</u>	Current Use <u>N/A</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u> <u>21870</u>		
SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>4 1/2</u>	# of Bedrooms <u>5</u>	# of floors <u>3</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>6705</u>	Unfinished Sq. Ft. <u>2407 sqft.</u>	Total Sq. Ft. <u>9546</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>1.1 million</u>	Application Fee <u>\$ 2000</u>
	State Levy Fee <u>\$ 22.24</u>
	Zoning Fee <u>\$ 100</u>
	BLD <u>\$ 100</u>
	SWP <u>\$ 200</u>
	Total <u>\$ 2522.24</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: 8.9.22

Signature of Building Official: [Signature] Date: 8.17.22



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: 5-25-23

Permit Number: BP2-202300274

GPIN/Tax Map: 6779-85-1101 / 32-1-0-10 B

Issued: 6/12/23

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.

Site Address: **2754 Perkinsville Rd. Maidens, VA 23102**

Owner: **Donald & Joyce Ford**
Address: **2754 Perkinsville Rd. Maidens, VA 23102**

Applicant/Contact: **SN Home Maintenance & Construction LLC**
Address: **14902 Scotchtown Rd. Montpelier, VA 23192**

Subdivision: N/A
Proffer: Yes No
Amount: _____ Date Paid: _____
Front Setback: 75' from PL Row
Center Line Setback: _____ Rear Setback: 5'
Side Setback: Left Side - 5' Side Setback: Right Side - 35'
Flood Zone: _____
APPROVED REJECTED COMMENTS: _____
Planning & Zoning Officer: [Signature] Date: 5/31/23

Contractor: **SN Home Maintenance & Construction LLC**
Address: **14902 Scotchtown Rd. Montpelier, VA 23192**
Contractor License Number: **2705113068** Type: **Class A** Expiration: **02-28-2025**

Scope of Work: **Construction of a new 28' x 40' detached garage.**

Proposed Use Detached garage	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
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. 0	Unfinished Sq. Ft. 1,120	Total Sq. Ft. 1,120	

Building Only - Excludes All Trades Permits

Value of Work	\$ 79,496
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Application Fee	\$ <u>309.15</u>
State Levy Fee	\$ <u>1.39</u>
Zoning Fee	\$ <u>0.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>408.12</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: [Signature] Date: 5-25-23

Rec: by mail 12-30-22



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: 12/07/2022

Permit Number: *BPC-2023-0002*

GPIN/Tax Map: 59-1-0-38-A / 726-96-0570

Issued: *12-13-23*

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 1504 Little Tuckahoe Ct.	
	Owner → Cox Property LLC	Phone # 804-271-5685
	Address P O Box 72075; Richmond, VA 23255	Email jeff.lee@SuperiorSignsRVA.com
APPLICANT INFORMATION	Applicant/Contact Jeff Lee	
	Address C/O Superior Signs; 2510 Willis Road; N. Chesterfield, VA 23237	Phone # 804-605-1396 Email jeff.lee@SuperiorSignsRVA.com

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

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

DESCRIPTION OF WORK	Scope of Work: Install (1) Double Face LED Monument Sign to read "Four Rings" with individual tenant panels per attached plans.				
	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. 92.7	

Building Only -- Excludes All Trades Permits

Value of Work	30,000.00
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Application Fee	\$ 225.00
State Levy Fee	\$ 4.50
Zoning Fee	\$ 50.00
RID	\$
SWP	\$
Total	\$ 279.50

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: *[Signature]* Date: 12/07/2022



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 5/17/23
 Permit Number: BPC-202300051
 GPIN/Tax Map: T206571317 / 48-3-4-4-0
 Issued: 6/15/23
 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: 1700 Mills Rd
 Owner: Bellview Gardens Medical LLC Phone #: 804-359-3575
 Address: 5809 York Rd, Richmond Va 23226 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: Jim Kinter Phone #: 804-366-3998
 Address: 5809 York Rd, Richmond Va Email: JKINTER@GLVA.COM

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: _____ Center Line Setback: _____ Rear Setback: _____ CUP/Variance/COA: _____
 Side Setback: _____ Side Setback: _____ Flood Zone: _____
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David [Signature] Date: 6/15/23

CONTRACTOR INFORMATION
 Contractor: Commonwealth Masonry Phone: 804-598-7758
 Address: 4432 Summer Court. Moseley, VA Email: JANHAY@MSN.COM
 Contractor License Number: 2705129610 Type: Class A Expiration: 7-31-2023

DESCRIPTION OF WORK
 Scope of Work: Pour floor slab and electrical, plumbing and HVAC work.

Proposed Use: <u>Office</u>	Current Use: <u>Vacant</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>None</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>0</u>	# of Bedrooms: <u>0</u>	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No: <u>0</u>	Finished Sq. Ft.: <u>0</u>	Unfinished Sq. Ft.: <u>2000</u>	Total Sq. Ft.: <u>2000</u>	

Building Only - Excludes All Trades Permits
 Value of Work: \$15,000

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: _____ Date: 5-15-23

Application Fee: \$16.50
 State/Lay Fee: \$0.00
 Zoning Fee: \$0
 RLD: _____
 SWP: _____
 Total: \$16.50



BUILDING PERMIT APPLICATION

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

Application Date: June 5 2023

Permit Number: BPZ-2023-00301

GPIN/Tax Map: 6161-41-032 / 43-1-0-32-A

Issued: 6/21/23

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>1614 Maidens Road</u>	
	Owner	<u>Robert Townsend</u>	Phone # <u>804-334-1987</u>
APPLICANT INFORMATION	Address	<u>1614 Maidens Road</u>	Email <u>flash930@gmail.com</u>
	Applicant/Contact	<u>Robert Townsend</u>	Phone # <u>8043341987</u>
	Address	<u>1614 Maidens Road</u>	Email <u>flash930@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	<u>N/A</u>	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	_____	Date Paid	_____
	Front Setback	<u>75' from Ryker</u>	Center Line Setback	<u>100'</u>	Rear Setback	<u>5'</u>	CUP/Variance/COA	
	Side Setback	<u>5'</u>	Side Setback	<u>5'</u>	Flood Zone	_____	_____	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS		_____			
	Planning & Zoning Officer	<u>[Signature]</u>	Date	<u>6/14/23</u>				

CONTRACTOR INFORMATION	Contractor	<u>Owner</u>	Phone	<u>804-334-1987</u>
	Address	_____	Email	<u>flash930@gmail.com</u>
	Contractor License Number	_____	Type	_____
			Expiration	_____

DESCRIPTION OF WORK	Scope of Work:	<u>storage building 20x20</u>			
	Construct	<u>pole shed with electrical power</u>			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<u>Storage</u>	<u>WATER</u>	# 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.	
		400	400		

Building Only - Excludes All Trades Permits

Value of Work	<u>40,000 \$11,000</u>	Application Fee	\$ <u>0.50</u>
		State Levy Fee	\$ <u>0.23</u>
		Zoning Fee	\$ <u>0.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>0.73</u>

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

Signature of Applicant [Signature] Date 6-5-23



BUILDING PERMIT APPLICATION

Application Date: May 30, 2023

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

Permit Number: BLD-2023-00286

GPIN/Tax Map: 7123-652574 | 67-A-E-4-0

Issued: 6/21/23

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 209 East Brook Run Drive	
	Owner William & Robin Telfian	Phone # (804) 357-4664
	Address 209 East Brook Run Drive	Email brad@creativecontractingva.com

APPLICANT INFORMATION	Applicant/Contact Brad Telfian		Phone # (804) 357-4664
	Address 209 East Brook Run Drive		Email brad@creativecontractingva.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>James River EST.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from PLY ROW</u>	Center Line Setback <u>6.5'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer: <u>[Signature]</u> Date: <u>6/5/23</u>			

CONTRACTOR INFORMATION	Contractor Creative Contracting, LLC <u>owner</u>		Phone (804) 643-6005
	Address 1621 West Cary Street, Richmond, Virginia 23220		Email brad@creativecontractingva.com
	Contractor License Number 2705022681	Type Class A	Expiration 11/30/2023

DESCRIPTION OF WORK	Scope of Work: Construct a pergola on back of the house.				
	Proposed Use Outdoor Living Space	Current Use Brick & Concrete Patio	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 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft. Approximately 384	Total Sq. Ft. Approximately 384	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>48</u>	
Value of Work	\$8,000.00	State Levy Fee	\$ <u>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.		Zoning Fee	\$ <u>85</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>1396</u>
Signature of Applicant	<u>W.B. Telfian</u>	Date	<u>5/30/23</u>



BUILDING PERMIT APPLICATION

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

Application Date: 6/16/23

Permit Number: 642-000300310

GPIN/Tax Map: 7733-19-410211/64-00-B-A-0

Issued: 6/22/23

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 13285 Barkstone Court	
	Owner Dave & Diana Beran	Phone # 804-387-0961
	Address 13285 Barkstone Court	Email

APPLICANT INFORMATION	Applicant/Contact Matt Gunn		Phone # 804-512-5486
	Address 12535 Patterson Ave		Email matt@classickitchensofva.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Rivergate</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 changes to footprint/use R1</u>		

Planning & Zoning Officer: David Taylor Date: 6/21/23

CONTRACTOR INFORMATION	Contractor Classic Kitchens of Virginia		Phone
	Address 12535 Patterson Ave		Email matt@classickitchensofva.com
	Contractor License Number 2705031158	Type Class A Contractors	Expiration 10/31/2023

DESCRIPTION OF WORK	Scope of Work: ENLARGING OPENINGS, KITCHEN & BUTLER'S PANTRY FOR KITCHEN RENOVATION				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	\$ 3,000
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 6/16/23

Application Fee	\$ <u>30</u>
State Levy Fee	\$ <u>60</u>
Zoning Fee	\$ <u>30</u>
RLD	\$
SWP	\$
Total	\$ <u>120.00</u>

Rec: 5-30-23

GOOCHLAND COUNTY

APPLICATION

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

Permit Number:

DPH-2023-00291

GPIN/Tax Map:

683-30-8361 / 2-16-0-3-0

Issued:

6-22-23

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	3429 Three Chopt Rd Gum Spring VA 23065		
	Owner	Logan Monk	Phone #	8042528886
	Address	3429 Three Chopt Rd Gum Spring VA 23065	Email	monkloganw@gmail.com

APPLICANT INFORMATION	Applicant/Contact	Logan Monk	Phone #	8042528886
	Address	3429 Three Chopt Rd Gum Spring VA 23065	Email	monkloganw@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid		
	Front Setback	25' from P/R/W	Center Line Setback	100'	Rear Setback	5'	CUP/Variance/COA	
	Side Setback	5'	Side Setback	5'	Flood Zone			A1
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:					

Planning & Zoning Officer David Boyd Date 6/5/23

CONTRACTOR INFORMATION	Contractor	Homeowner	Phone	8042528886
	Address	3429 Three Chopt Rd Gum Spring VA 23065	Email	monkloganw@gmail.com
	Contractor License Number	Homeowner	Type	n/a

DESCRIPTION OF WORK	Scope of Work:	16'x24' carport. Plans attached.				
	Proposed Use	Park car, storage	Current Use	none	Environmental Impacts (stream crossing, wetlands, arnt land disturbed) none	
	SEWER Public/Private		WATER Public/Private		# of Bathrooms	0
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	0	Finished Sq. Ft.	384	# of Bedrooms	0

Application Fee	\$ 60.71
State Levy Fee	1.79
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$ 85.71
Total	\$

Building Only - Excludes All Trades Permits

Value of Work	\$10560
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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.

[Handwritten Signature]



BUILDING PERMIT APPLICATION

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 656-5815 Fax (804) 656-5651
TDD 711 VA Relay

Residential Commercial

Application Date: 06/07/2023

Permit Number: 2023-00004

GPIN/Tax Map: 6798-36-87A1 / 33-7-0-9-7

Issued: 6-22-23

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.

Site Address: **2570 Oilville Road Oilville, VA 23146**

Owner: **CROWN CASTLE USA INC** Phone #: **201-236-9093**

Address: **POST OFFICE BOX 203112, HOUSTON, TX 77216-3112** Email: **karen.cancro@crowncastle.com**

Applicant/Contact: **Cellco Partnership d/b/a Verizon Wireless by Crown Castle USA Inc.** Phone #: **201-236-9093**

Address: **1200 MacArthur Blvd Suite 240 Mahwah NJ 07430** Email: **karen.cancro@crowncastle.com**

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: <u>Oilville Bus. Park</u>	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: _____	Center Line Setback: _____	Rear Setback: _____	CUP/Variance/COA: _____
	Side Setback: _____	Side Setback: _____	Flood Zone: _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change so footprint use.</u>	Date: <u>6/20/23</u>		

Planning & Zoning Officer: David Floyd

Contractor: **Old Dominion Professional Services Inc** Phone: **(434) 213-6706**

Address: **3700 Magnolia Rd Gordonsville VA 22942** Email: **Nathan.halfinger@gmail.com**

Contractor License Number: **2705182614** Type: **Class A CBC RBC** Expiration: **03.31.2024**

Scope of Work: **Remove (12) Antennas, (9) RRHs, (6) Coax Cables. Install (6) Antennas, (3) Antennas w/Integrated RRHs, (6) RRHs, (10) Boost & Bypass Modules, (2) Controllers, Powershift Shelves & RS485 Card, (4) Alarms**

Proposed Use: existing wireless communication facility	Current Use: existing wireless communication facility	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: **\$20,000**

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

Signature of Applicant: **Karen Cancro** Date: _____

Digitally signed by Karen Cancro
Date: 2023.06.07 11:04:10 -0400

Application Fee	\$ <u>150.00</u>
State Levy Fee	\$ <u>3.00</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>203.00</u>

Rec: 5-26-23



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

Residential Commercial

Application Date: 5.26.2023
 Permit Number: GR-2023-00285
 GPIN/Tax Map: 616821-2273 / 43-20-0-28-0
 Issued: 6-22-23
 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: 2116 Old Stone Road Maidens Va 23102

Owner: Charles Robinson Phone #: 1757 613-8755

Address: 2116 Old Stone Road Email: rcrobinsonv@gmail.com

APPLICANT INFORMATION
 Applicant/Contact: _____ Phone #: _____

Address: _____ Email: _____

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

Front Setback: 25' from PLYAW Center Line Setback: 100' Rear Setback: 5' CUP/Variance/COA: _____

Side Setback: 5' Side Setback: 5' Flood Zone: _____ A2

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: Daniel Floyd Date: 6/1/23

CONTRACTOR INFORMATION
 Contractor: Middleton Construction LLC Phone: 804-837-8153

Address: 13321 Cowley Road Amelia Courthouse Va Email: MiddletonConstLLC@ymail.com

Contractor License Number: 2705169208 Type: Class A RBC Expiration: 9-23-2024

DESCRIPTION OF WORK
 Scope of Work: build 23 x 35 detached garage

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
<u>Garage</u>		# of Bathrooms	# of Bedrooms	# of floors

SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>305 sqft</u>	Unfinished Sq. Ft. <u>800 sqft</u>	Total Sq. Ft. <u>1105.00</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$90,000.00</u>	<u>260</u>	<u>1504</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 5.26.2023

Application Fee	\$ <u>417.00</u>
State Levy Fee	\$ <u>8.34</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>450.34</u>



BUILDING PERMIT APPLICATION

Application Date: 6-2-23

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

Permit Number: BPL-2023-002910

GPIN/Tax Map: 670490-2727 / 22-10-0-M-1

Issued: 6/23/23

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	3534 Mealy Rd	
	Owner	Lester Robinson	Phone #
	Address	3534 Mealy Rd	Email

APPLICANT INFORMATION	Applicant/Contact	LHC Services	Phone #	804 291 8273
	Address	11920 Silbyrd Dr Middleton VA 23113	Email	woodboy5018@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	N/A	Proffer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	---	Date Paid	---
	Front Setback	55' from P/L corner	Center Line Setback	---	Rear Setback	5'	CUP/Variance/GOA	
	Side Setback	5'	Side Setback	5'	Flood Zone	---	A-1	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>		COMMENTS		Date 6/8/23	

CONTRACTOR INFORMATION	Contractor	LHC Services	Phone	804 291 8273
	Address	11920 Silbyrd Dr	Email	woodboy5018@gmail.com
	Contractor License Number	2705186515	Type	RBC

DESCRIPTION OF WORK	Scope of Work: Build and Install 24'x36' freestanding Garage w/ MAN CAVE			
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	Storage		# of Bathrooms	# of Bedrooms
	SEWER Public/Private	WATER Public/Private	# 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.	
	334.	864	864	

Building Only - Excludes All Trades Permits		400.	Application Fee	\$ 200
Value of Work	60,000		State Levy Fee	\$ 0.00
			Zoning Fee	\$ 0
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.			RLD	\$
Signature of Applicant	<i>[Signature]</i>	Date	SWP	\$
	6-2-23		Total	\$ 200.00



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

Application Date: 6/14/23

Permit Number: 802-000300318

GPIN/Tax Map: 71381-7757/63-1-0-77-0

Issued: 6/23/23

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	308 Flag Station Rd, Richmond Va. 23238	
	Owner	Edward and Nora Nickel	Phone # 757-810-0591
	Address	308 Flag Station Rd, Richmond Va. 23238	

APPLICANT INFORMATION	Applicant/Contact	Preston Montague	Phone # 804-690-1993
	Address	499 Boscobell Ferry Rd, Manikin Sabot Va 23103	Email PRESTONMONTAGUE LLC @ GMAIL . COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback		Center Line Setback	Rear Setback	CUP/Variance/COA		
	Side Setback		Side Setback	Flood Zone			
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: No change to footprint / use.		Date 6/21/23		

CONTRACTOR INFORMATION	Contractor	Preston Montague	Phone 804-690-1993
	Address	499 Boscobell Ferry Rd, Manikin Sabot Va 23103	
	Contractor License Number	#2705 109885A	Type Class A Expiration 9/30/24

Scope of Work:
Existing Screen porch conversion to finished space and two paver patios. *to mudroom*

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Conditioned space	Screen porch	Footings for raised patio and steps		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		1	0	1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
	250 270	500 300	750 575	

Building Only - Excludes All Trades Permits

Value of Work	\$125,000	Application Fee	\$ 510.00
		State Levy Fee	\$ 110.00
		Zoning Fee	\$ 65.00
		RLD	\$
		SWP	\$
		Total	\$ 685.00

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

Signature of Applicant *[Signature]* Date 6/14/23



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: 6/2/23

Permit Number: 2023-00304

GPIN/Tax Map: 7723-08-0602 63-32-0-E-0

Issued: 6-26-23

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	360 Flag Station Rd. Richmond, VA 23238	
	Owner	Crawford C. & Deborah N. Smith	Phone # 804-928-4725 804-928-4724
	Address	360 Flag Station Rd., Richmond, VA 23238	Email debsmith360@gmail.com Phone # 804-928-4725

APPLICANT INFORMATION	Applicant/Contact	Debbie Smith	Email debsmith360@gmail.com
	Address	360 Flag station Rd., Richmond, VA 23238	Phone # 804-928-4725

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: Planning & Zoning Officer: <i>[Signature]</i> Date: 6/14/23						

CONTRACTOR INFORMATION	Contractor	owner contractor	Phone 804-928-4725
	Address	360 Flag station Rd., Richmond, VA 23238	Email debsmith360@gmail.com
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Finish 3rd floor loft with storage and Bathroom + workroom					
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)			
	loft with storage & bathroom	Storage	None			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors	
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		
	1,300		1,300			

Building Only - Excludes All Trades Permits

Value of Work	5,000
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Application Fee	\$ 34.50
State Levy Fee	\$.69
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$

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 regarding building construction and use.



BUILDING PERMIT APPLICATION

Application Date: **REC: 6-1-23**

Permit Number: **BPR-2023-00303**

GPIN/Tax Map: **6717-08-92271 38-6-0-3-0**

Issued: **6-26-23**

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.

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 5307 St Pauls Church RD	
	Owner Dylan Kyles	Phone # 804-709-4145
	Address Same	Email Kylesdylan@yahoo.com

APPLICANT INFORMATION	Applicant/Contact	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA _____
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____		Date 6/18/23	

CONTRACTOR INFORMATION	Contractor Dylan Kyles		Phone 804-709-4145
	Address		Email Kylesdylan@yahoo.com
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Adding 12x24 Roof over Existing 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. 288	

Building Only - Excludes All Trades Permits		Application Fee	\$ 30.00
Value of Work	\$2000.00	State Levy Fee	\$ 60
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances, and State laws regulating building construction and use.		Zoning Fee	\$ 25.00
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ 55.60
Signature of Applicant [Signature]		Date 6-1-23	

REC: 4-18-23



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: 4-18-2023
 Permit Number: BL-2023-0038
 GPIN/Tax Map: 589a-51-4621 19-10-66-C
 Issued: 01/27/23
 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: 3845 Shannon Hill Rd, Columbia, Va
 Owner: Trustees of Pleasant Grove Baptist Church
 Phone #: 804-347-8643
 Address: 3845 Shannon Hill Rd, Columbia, Va
 Email: _____

APPLICANT INFORMATION
 Applicant/Contact: Allen Jennings / Jennings Const.
 Phone #: 540-223-8064
 Address: P.O. Box 525, Louisa, Va 23093
 Email: JENNINGS Construction @ Yahoo.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>75' from PLYWOOD</u>	Center Line Setback: <u>100'</u>	Rear Setback: <u>35'</u>	CUP/Variance/COA: _____
Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	Flood Zone: _____	

APPROVED REJECTED COMMENTS: Non-Conforming. May not build closer to road than existing structure. AI
 Planning & Zoning Officer: David Floyd Date: 4/20/23

CONTRACTOR INFORMATION
 Contractor: Allen Jennings Jennings Construction Co.
 Phone: 540-223-8064
 Address: P.O. Box 525, Louisa, Va
 Email: Jennings Construction @ Yahoo.com
 Contractor License Number: 5701035572A Type: Class A BID Expiration: 11-30-23

DESCRIPTION OF WORK
 Scope of Work: adding a 6x8 bathroom and a 6x8 storage on front of bldg.

Proposed Use: <u>Bathroom</u>	Current Use: <u>Assembly</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed): <u>NONE</u>		
SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>1</u>	# of Bedrooms: <u>0</u>	# of floors: <u>1</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No) <u>(No)</u>	Finished Sq. Ft.: <u>48+48</u>	Unfinished Sq. Ft.: _____	Total Sq. Ft.: <u>96</u>	

Building Only - Excludes All Trades Permits

Value of Work: <u>\$37,500</u>	Application Fee: <u>\$281.25</u>
	State Levy Fee: <u>\$5.63</u>
	Zoning Fee: <u>\$50.00</u>
	RLD: \$ _____
	SWP: \$ _____
Signature of Applicant: <u>Allen Jennings</u> Date: <u>4-23</u>	Total: <u>\$336.88</u>

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

(SIGN)

Rec: 4-24-23 - mail



BUILDING PERMIT APPLICATION

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

Application Date: 4/18/23

Permit Number: Sign-2023-00006

GPIN/Tax Map: 7724-13-3355

Issued: 6-28-23

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 12872 PATTERSON AVE	
	Owner CREEKMORE, LLC	Phone # 804-314-6008
APPLICANT INFORMATION	Address 350 PEMBROKE LN RICHMOND, VA 23238	
	Applicant/Contact CENTAUR HOLDINGS DBA HOLIDAY SIGNS (MIKE LONG)	Email SCAMITAS@GMAIL.COM
APPLICANT INFORMATION	Address 11930 OLD STAGE RD CHESTER, VA 23836	
	Phone # 804-773-8892	Email MLONG@HOLIDAYSIGNS.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Creekmore</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: Planning & Zoning Officer <u>[Signature]</u> Date <u>4/27/23</u>			

CONTRACTOR INFORMATION	Contractor CENTAUR HOLDINGS DBA HOLIDAY SIGNS		Phone 804-796-9443
	Address 11930 OLD STAGE RD CHESTER, VA 23836		Email MLONG@HOLIDAYSIGNS.COM
	Contractor License Number 2705155751	Type CLASS A	Expiration 12-31-2023

DESCRIPTION OF WORK	Scope of Work: BUILDING MOUNTED SIGN FOR VIRGINIA SPINE ABOVE ENTRANCE. BUILDING FRONTAGE FOR THIS OFFICE IS 75'				
	Proposed Use MEDICAL OFFICE BLDG	Current Use NEW	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. 3,000	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>37.50</u>
Value of Work	<u>\$ 5,000.00</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		State Levy Fee \$ <u>75</u>
Signature of Applicant <u>Mike Long</u>		Zoning Fee \$ <u>50.00</u>
Date <u>4/18/23</u>		RLD \$ <u> </u>
		SWP \$ <u> </u>
		Total \$ <u>88.25</u>

Rec: 6-20-23



BUILDING PERMIT APPLICATION

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

Application Date: 6-23-23
 Permit Number: BPR-2023-00325

GPIN/Tax Map: 078-81-0763 / 32-60-A-0

Issued: 6-28-23

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>1867 SPRUCE LAWN, MAIDEN VA 23102</u>	
	Owner	<u>KEITH FLANNAGAN</u>	Phone # <u>804 363 1415</u>
APPLICANT INFORMATION	Address	<u>SAME</u>	Email <u>COMCAST.NET</u>
	Applicant/Contact	<u>Keith Flannagan</u>	Phone #
	Address		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	<u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount		Date Paid	
	Front Setback	<u>55' from PLYMOUTH</u>	Center Line Setback		Rear Setback	<u>5'</u>	CUP/Variance/COA
	Side Setback	<u>5'</u>	Side Setback		Flood Zone		<u>A2</u>
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS:		Planning & Zoning Office	<u>David Taylor</u>	Date

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

DESCRIPTION OF WORK	Scope of Work:				
	<u>30 X 25 PREFAB CABINETS FOR RV STORAGE</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>750</u>	<u>750</u>		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>62.02</u>
Value of Work	<u>6500.00 / 11,250</u>	State Levy Fee	\$ <u>1.25</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
Signature of Applicant	<u>[Signature]</u>	RLD	\$
	Date <u>6/20/23</u>	SWP	\$
		Total	\$ <u>88.87</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: 5/19/23
 Permit Number: BP-2023000104
 GPIN/Tax Map: 7716-43-5724/1001-A-8
 Issued: 6/22/23
 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>5 Hunting Ridge Rd</u>	
	Owner <u>Mike & Helene Meyer</u>	Phone # <u>804-218-0126</u>
	Address <u>5 Hunting Ridge Rd</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>George Vergant</u>	
	Address <u>11700 BURNAY RD CHRISTENFELD VA 23838</u>	Phone # <u>804-306-3130</u> Email <u>GMVERG@COMCAST..</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Broad Run</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75' from P/L</u>	Center Line Setback <u>10'</u>	Rear Setback <u>35'</u>	GUP/Variance/GOA
	Side Setback <u>16.41' from P/L</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Andre Barnes</u> Date: <u>6/22/2023</u>			

CONTRACTOR INFORMATION	Contractor <u>THE QUEST COMPANIES INC</u>		Phone <u>804 306 3130</u>
	Address <u>P.O. Box 1654 CHRISTENFELD VA 23832</u>		Email <u>GMVERG@COMCAST</u>
	Contractor License Number <u>2705029161</u>	Type <u>BLD "A"</u>	Expiration <u>6/30/2023</u>

Scope of Work: ADD a new front porch, an ATTACHED GARAGE
ADD a covered REAR porch w/ GAS F/P ✓

@COMCAST.NET

Proposed Use <u>SINGLE FAMILY</u>	Current Use <u>SINGLE FAMILY</u>	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
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft. <u>200</u>	Unfinished Sq. Ft. <u>82000</u>	Total Sq. Ft. <u>84000</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>300,000</u>	Application Fee <u>\$ 1300</u>
	State Levy Fee <u>\$ 2100</u>
	Zoning Fee <u>\$ 25</u>
	RLD <u>\$</u>
	SWP <u>\$</u>
	Total <u>\$ 1414.24</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.

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: FERRIS AND FERRIS Telephone: 804 768 - 2252

Mailing Address: 10321 Memory Ln Chesapeake VA 23832

OWNER'S STATEMENT

I _____ of (address) _____ affirm that I am the owner of a certain tract of parcel

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS #STORIES _____ CONSTRUCTION TYPE VB OCCUPANT LOAD _____ CODE EDITION 2018

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 6/27/2003

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5816 Fax (804) 556-5651
 TOD 711 VA Relay

Residential Commercial

Application Date: 4/18/23

Permit Number: BP 2021-01038

GPIN/Tax Map: 7716.39.1540. / 47.1.0.14.0

Issuer: 6-29-23

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 347 Broad Street Road	
	Owner TRU North (LPH) Bible Church	Phone # 804.247.2756
	Address P.O. Box 212 Rockville VA 23146	Email Pastor.tnbc@gmail.com
APPLICANT INFORMATION	Applicant/Contact James (Bobby) Bailey	
	Address 17046 Goshen Road Montpelier VA 23192	Phone # 804.247.2756 Email Pastor.tnbc@gmail.com

USE COMPLETELY ZONING DEPARTMENT	Subdivision	Proffer	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUR/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>[Signature]</i> Date: <i>5/10/23</i>			

CONTRACTOR INFORMATION	Contractor Self/Same GC		Phone 804.247.2756
	Address P.O. Box 212 Rockville VA 23146		Email Pastor.tnbc@gmail.com
	Contractor License Number N/A	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: HDF/PVC 4x8 backlit signage/ 2 sided.				
	Proposed Use Church	Current Use Church	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. 32 (surface)	Unfinished Sq. Ft.	Total Sq. Ft. 32 (surface)	

Building Only -- Excludes All Trades Permits

Value of Work	\$1350.00 materials
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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: **4/18/2023**

Application Fee	300.00
State Levy Fee	60.00
Zoning Fee	50.00
RLD	
SWP	
Total	410.00

By Mail 6-9-23



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

Residential Commercial

Application Date: 6/2/23
 Permit Number: SIGN-2023-00012
 GPIN/Tax Map: 7124-03-9427/63430-2-0
 Issued: 6-30-23
 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: 12874 PATTERSON AVE
 Owner: CREEKMORE LLC - Ownership form in file
 Phone #: 804 314 6008
 Address: 350 PEMBROKE LN RICHMOND, VA 23238
 Email: SCAMETAS@GMAIL.COM

APPLICANT INFORMATION
 Applicant/Contact: CENTAUR HOLDINGS DBA HOLIDAY SIGNS
 Phone #: 804 773 8892
 Address: 11930 OLD STAGE RD, CHESTER, VA 23836
 Email: MLONC@HOLIDAYSIGNS.COM

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: N/A
 Proffer: Yes No
 Amount: _____
 Date Paid: _____
 Front Setback: _____ Center Line Setback: _____ Rear Setback: _____ CUP/Variance/COA: _____
 Side Setback: _____ Side Setback: _____ Flood Zone: _____
 APPROVED REJECTED COMMENTS: No COA needed
 Planning & Zoning Officer: [Signature] Date: 6/16/23

CONTRACTOR INFORMATION
 Contractor: CENTAUR HOLDINGS DBA HOLIDAY SIGNS
 Phone: 804 773 8892
 Address: 11930 OLD STAGE RD, CHESTER, VA 23836
 Email: MLONC@HOLIDAYSIGNS.COM
 Contractor License Number: 2705155751 Type: CLASS A Expiration: 12-31-2023

DESCRIPTION OF WORK
 Scope of Work: INSTALLATION OF NON-ILLUMINATED SIGN AND DOOR GRAPHICS AT CENTRAL VIRGINIA PHYSICAL THERAPY OFFICE. (SEE DESIGN)

Proposed Use OFFICE	Current Use OFFICE	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	\$ 3,000.00	Application Fee	\$ 30.00
		State Levy Fee	\$.00
		Zoning Fee	\$ 50.00
		RLD	\$
		SWP	\$
		Total	\$ 80.00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: [Signature] Date: 6/2/23



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: 5/9/23

Permit #: EUR-23-350

GPIN

Tax Map

LOCATION

Street Address: 3543 Countyline RD, Kents Store, VA 23084

PROPERTY OWNERSHIP

Name: Dora Duvall	Phone: 804-677-3897
Mailing Address: 3543 Countyline RD, Kents Store, VA 23084	Email:

APPLICANT

Name: Willie Christmas	Phone: 434-589-4070
Address: 357 Rollins Lane, Louisa, VA 23093	Email: Christmasles@aol.com

CONTRACTOR

Name: LCS Electrical Communication	Phone:			
Mailing Address: 357 Rollins Lane, Louisa, VA 23093	Email:			
Gas Certification: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number: 2705004612	Expiration: 9/30/23	License Type: CBC ELE DLB RBC	Class: B

DESCRIPTION OF WORK

installation of 7.5 KW generac generator & transfer switch

# of Bathrooms	Service Size	Power Company: CVEC	Inquiry #
Value of Work (required): \$1800			

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: Willie Christmas Date: 5/9/23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>5/2/23</u>
Permit Fee: <u>102</u>		Issued date: <u>5/2/23</u>

(owner's statement on back)