



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 11/01/2023 and 11/30/2023

Permit Number	Issued Date	Structure Type	Value
BPR-2023-00270	11/20/2023	New Construction	\$789,607.50
BPR-2023-00368	11/14/2023	New Construction	\$244,500.00
BPR-2023-00511	11/14/2023	New Construction	\$297,000.00
BPR-2023-00472	11/14/2023	New Construction	\$285,975.00
BPR-2023-00521	11/21/2023	New Construction	\$1,050,000.00
BPR-2023-00524	11/01/2023	New Construction	\$1,111,593.00
BPR-2023-00553	11/09/2023	New Construction	\$1,175,000.00
BPR-2023-00537	11/14/2023	New Construction	\$262,650.00
BPR-2023-00558	11/17/2023	New Construction	\$750,000.00
BPR-2023-00551	11/06/2023	New Construction	\$508,000.00
BPR-2023-00552	11/15/2023	New Construction	\$141,407.50
BPR-2023-00531	11/14/2023	New Construction	\$277,237.50
BPR-2023-00561	11/20/2023	New Construction	\$250,000.00
BPR-2023-00559	11/20/2023	New Construction	\$166,270.00
BPR-2023-00568	11/28/2023	New Construction	\$242,700.00

Total SFD: 15

Total Value:

\$7,551,940.50

Commercial Building Permits Issued 11/1/23-11/30/23			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPC-2023-00090	11/8/2023	Accessory Structure	\$15,000.00
BPC-2023-00093	11/9/2023	Alteration, Remodel, Renovation, Tenant upfit	\$0.00
BPC-2023-00091	11/15/2023	Other	\$15,000.00
BPC-2023-00081	11/13/2023	Addition	\$1,500,000.00
BPC-2023-00089	11/13/2023	New Construction	\$75,916.00
BPC-2023-00085	11/22/2023	Alteration, Remodel, Renovation, Tenant upfit	\$10,000.00
Residential Building Permits Issued 11/1/23-11/30/23			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPR-2023-00548	11/1/2023	Addition	\$45,000.00
BPR-2023-00517	11/1/2023	Photo Voltaic	\$18,100.00
BPR-2023-00554	11/6/2023	Accessory Structure	\$29,250.00
BPR-2023-00539	11/6/2023	Alteration, Remodel, Renovation, Tenant upfit	\$325,000.00
BPR-2023-00556	11/14/2023	Addition	\$25,000.00
BPR-2023-00557	11/14/2023	Alteration, Remodel, Renovation, Tenant upfit	\$16,700.00
BPR-2023-00406	11/16/2023	Accessory Structure	\$110,000.00
BPR-2023-00571	11/17/2023	Alteration, Remodel, Renovation, Tenant upfit	\$5,500.00
BPR-2023-00555	11/17/2023	Accessory Structure	\$6,000.00
BPR-2023-00526	11/8/2023	Alteration, Remodel, Renovation, Tenant upfit	\$14,500.00
BPR-2023-00563	11/17/2023	Accessory Structure	\$16,500.00
BPR-2023-00574	11/27/2023	Alteration, Remodel, Renovation, Tenant upfit	\$30,000.00
BPR-2023-00528	11/16/2023	Addition	\$24,000.00
BPR-2023-00540	11/6/2023	Addition	\$404,780.00
BPR-2023-00456	11/17/2023	Addition	\$45,000.00
BPR-2023-00547	11/2/2023	Photo Voltaic	\$6,450.00
BPR-2023-00510	11/15/2023	Alteration, Remodel, Renovation, Tenant upfit	\$10,900.00
BPR-2023-00522	11/3/2023	Accessory Structure	\$45,100.00
BPR-2023-00544	11/6/2023	Alteration, Remodel, Renovation, Tenant upfit	\$89,245.00
BPR-2023-00560	11/16/2023	Alteration, Remodel, Renovation, Tenant upfit	\$29,000.00
Electrical Generators 11/1/23-11/30/23			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
ELR-2023-00724	11/13/2023	Generator	\$1,500.00
ELR-2023-00732	11/14/2023	Generator	\$200.00
ELR-2023-00737	11/15/2023	Generator	\$2,450.00
ELR-2023-00743	11/16/2023	Generator	\$10,000.00
ELR-2023-00738	11/16/2023	Generator	\$2,450.00
ELR-2023-00756	11/22/2023	Generator	\$12,349.00
ELR-2023-00776	11/28/2023	Generator	\$8,000.00
ELR-2023-00731	11/13/2023	Generator	\$10,000.00
ELR-2023-00758	11/20/2023	Generator	\$8,000.00
ELR-2023-00746	11/20/2023	Generator	\$10,000.00



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 11/20/23

Permit #: EK-2300758

GPIN

Tax Map

LOCATION

Street Address: 4355 Westwind Drive Mineral VA. 23228

PROPERTY OWNERSHIP

Name: James Morton Deac as Ann Greengwalt	Phone:
Mailing Address:	Email:

APPLICANT

Name: Carroll Electric Service LLC	Phone: 804-357-3443
Address: P.O. Box 871 Mech. VA. 23111	Email:

CONTRACTOR

Name: SAAC	Phone:			
Mailing Address: SAAC	Email:			
Gas Certification: YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number: 2705146932	Expiration: 7/31/2024	License Type: Elec.	Class: B

DESCRIPTION OF WORK

Wire, 22KW Generator

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required): 8,000.00			

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

Signature of Applicant: [Signature] Date: 11/20/2023

Office Use Only

Approval: Fisher Approval date: 11/20/23
Permit Fee: \$100 Issued date: _____

(owner's statement on back)

Owner's Statement Required if Owner is the Applicant

I _____ of (address) _____

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

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

_____ (Owner Signature)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 11-1-23

Permit #: EX-2300708

GPIN: _____

Tax Map: _____

LOCATION

Street Address: 1519 Smoker Ridge Rd

PROPERTY OWNERSHIP

Name: <u>Conversion Breeze Hill inc.</u>	Phone: _____
Mailing Address: _____	Email: _____

APPLICANT

Name: <u>Jay Cox</u>	Phone: <u>804 357 1964</u>
Address: <u>1334E Furrington Rd Ashland</u>	Email: <u>coxelectric64@gmail</u>

CONTRACTOR

Name: <u>Cox Electric</u>	Phone: <u>804 357 1964</u>			
Mailing Address: <u>1334E Furrington Rd Ashland</u>	Email: <u>coxelectric64@gmail</u>			
Gas Certification: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number: <u>2705016860</u>	Expiration: <u>11-30-25</u>	License Type: <u>elec.</u>	Class: <u>B</u>

DESCRIPTION OF WORK

wire new SFD with 22kw generator

# of Bathrooms: <u>5</u>	Service Size: <u>400A</u>	Power Company: <u>Dominion</u>	Inquiry #: <u>1066 8004</u>
Value of Work (required): <u>\$18,000.00</u>			

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

Signature of Applicant: Jay Cox Date: 11-1-23

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>11/1/23</u>
Permit Fee: <u>\$138.72</u>		Issued date: _____

(owner's statement on back)

Owner's Statement Required if Owner is the Applicant

I _____ of (address) _____

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

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

_____ (Owner Signature)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

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

Date: 11-1-23

Permit #: EX-2300707

GPIN

Tax Map

LOCATION

Street Address: 1550 Smokey Ridge Rd

PROPERTY OWNERSHIP

Name: Kirkovic & Ziegler LLC

Phone:

Mailing Address: mech va

Email:

APPLICANT

Name: Jay Cox

Phone: 804 357 1964

Address: 13346 Farrington Rd Ashland

Email: coxelectric64@gmail

CONTRACTOR

Name: Cox Electric

Phone: 804 357 1964

Mailing Address: 13346 Farrington Rd Ashland

Email: coxelectric64@gmail

Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	Expiration	License Type	Class
		2705016860	11-30-25	elec	B

DESCRIPTION OF WORK

Work: wire new SFD with 22kw generator

# of Bathrooms	Service Size	Power Company	Inquiry #
5	400	dominion	10668007
Value of Work (required): \$17,000.00			

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

Signature of Applicant: Jay Cox Date: 11-1-23

Approval: FINEX Office Use Only

Permit Fee: \$134.13

Approval date: 11/1/23

Issued date: _____

(owner's statement on back)

Owner's Statement Required if Owner is the Applicant

I _____ of (address) _____

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

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

_____ (Owner Signature)



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: 07-17-23

Permit Number: 692-0003-003108

GPIN/Tax Map: 6842-60-6710 tax 13-1-0-2-D

Issued: 1114/23

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 4670 Moes Lane, Gum Spring, VA 23065	
	Owner Michael D. & Virginia M. Spence	Phone # 804-399-4388
	Address 8504 Henrico Ave, Henrico VA 23229	Email mdspence@purewaterplace.com

APPLICANT INFORMATION	Applicant/Contact Michael D. Spence	Phone # 804-399-4388
	Address 8504 Henrico Ave, Henrico, VA 23229	Email mdspence@purewaterplace.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 PC	Center Line Setback —	Rear Setback 35'	GUP/Variance/COA —
	Side Setback 20'	Side Setback 20'	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: *Zoning approval for House, only! AI		
Planning & Zoning Officer David [Signature]	Date 7/26/23			

CONTRACTOR INFORMATION	Contractor Owner	Phone —
	Address —	Email —
	Contractor License Number —	Type —

DESCRIPTION OF WORK	Scope of Work: SFD w/ finished basement				
	Proposed Use SFD 4 bdrm w/ finished basement	Current Use —	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 0		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3	# of Bedrooms 3	# of floors 3
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 2,800	Unfinished Sq. Ft. 920	Total Sq. Ft. 3,720	

Building Only - Excludes All Trades Permits

Value of Work \$ 200,000 \$ 200,000

Application Fee	\$ 112.00
State Levy Fee	\$ 00.00
Zoning Fee	\$ 50
RLD	\$
SWP	\$
Total	\$ 1184.00

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: Michael D. Spence Date: 07-17-23



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: 10-23-23

Permit Number: 2023-00561

GPIN/Tax Map: 12-1-0-5-0 / 1622-75-4741

Issued: 11-20-23

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>4699 Three Chopl Rd, Louisa, VA 23093</u>	
	Owner <u>Amelia's Home Construction</u>	Phone # <u>(804) 678-8394</u>
APPLICANT INFORMATION	Address <u>3998 Cabin Rd Gum Spring VA 23065</u>	Email <u>ameliashomeconstruction@gmail.com</u>
	Applicant/Contact <u>Amelia Daves</u>	Phone #
	Address <u>Same</u>	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>75' From Pk Drive</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>A1</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:	Planning & Zoning Officer <u>David Floyd</u> Date <u>10/31/23</u>		

CONTRACTOR INFORMATION	Contractor <u>Amelias Home Construction / Amelia Daves</u>		Phone <u>(804) 678-8394</u>
	Address <u>3998 Cabin Rd Gum Spring VA 23065</u>		Email <u>ameliashomeconstruction@gmail.com</u>
	Contractor License Number <u>2705156400</u>	Type <u>RBC/CBC A</u>	Expiration <u>6-30-25</u>

DESCRIPTION OF WORK	Scope of Work: <u>Building a single family home w/ attached garage</u>			
	Proposed Use <input checked="" type="checkbox"/>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A 12,000</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2</u>	# of Bedrooms <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>1530</u>	Unfinished Sq. Ft. <u>558 + 271 + 829</u>	Total Sq. Ft. <u>3088 2359</u>

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>1137.00</u>
Value of Work	<u>250,000</u>	State Levy Fee	\$ <u>22.74</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>50.00</u>
		RLD	\$ <u>100.00</u>
		SWP	\$
		Total	\$ <u>1309.74</u>
		Signature of Applicant	<u>Amelia Daves</u>

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Powhatan Real Estate Settlements Telephone: (804)678-8394

Mailing Address: 3923 Old Buckingham Rd Powhatan VA 23139

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 35 # STORIES _____ CONSTRUCTION TYPE VB OCCUPANT LOAD _____ CODE EDITION 2018

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL [Signature] DATE 11/15/23

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

Application Date: 10/19/23

Permit Number: BP2-2023-00553

GPIN/Tax Map: 715-00-0285/58-21-1-2-0

Issued: 11/9/23

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 224 Kinloch Road, Manakin Sabot, VA 23103	
	Owner Michael Konvicka & Teresa Steinfatt	Phone # 804-314-9542
	Address 10921 Parkshire Lane, Henrico, VA 23233	Email makonvicka@aol.com
APPLICANT INFORMATION	Applicant/Contact Michael A. Konvicka, MIKKON Construction Co.	
	Address P. O. Box 295, Powhatan, VA 23139	Phone # 804-379-3441
		Email MIKKONInc@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Kinloch</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>50' from Parcels</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>R.P.D.S</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS			
Planning & Zoning Officer <u>[Signature]</u>		Date <u>10/26/23</u>		

CONTRACTOR INFORMATION	Contractor MIKKON Construction Company, Inc.		Phone 804-379-3441
	Address P. O. Box 295, Powhatan, VA 23139		Email MIKKONInc@aol.com
	Contractor License Number 2701033179	Type Class A	Expiration 11-30-2024

DESCRIPTION OF WORK	Scope of Work: Construction of single family dwelling <u>w/attached garage</u>				
	Proposed Use primary residence	Current Use vacant lot	Environmental Impacts (stream crossing, wetlands, amt land disturbed) clearing < 1 acre for house site and driveway <u>\$1,000</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms 5 1/2	# of Bedrooms 5	# of floors 2
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 5659	Unfinished Sq. Ft. 2174	Total Sq. Ft. Total under roof 7833	

Building Only - Excludes All Trades Permits

Value of Work	\$1,175,000
---------------	--------------------

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 Michael A Konvicka Date 12/19/2023

Application Fee	\$ <u>500.00</u>
State Levy Fee	\$ <u>0.00</u>
Zoning Fee	\$ <u>50.00</u>
RLD	\$ <u>100.00</u>
SWP	\$ <u>0.00</u>
Total	\$ <u>650.00</u>



BUILDING PERMIT APPLICATION

Application Date: 10/18/2023

Permit Number: 002-0063-00518

GPIN/Tax Map: 1734-00-52026/04-08-F-09-0

Issued: 11/1/23

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 <u>182 Woodfern Richmond, Va 23238</u>	
	Owner <u>Martha & Bob Mc Grail</u>	Phone # <u>540-846-1851</u>
	Address <u>Same as above</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>Same as contractor</u>	Phone #
	Address <u>B</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Oak</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from Pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA <u>RPUB</u>
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>David [Signature]</u> Date <u>10/29/23</u>			

CONTRACTOR INFORMATION	Contractor <u>Maize Remodeling, LLC</u>	Phone <u>804-475-5167</u>	Office <u>804-598-7300 / 804-683-371</u>
	Address <u>PO Box 701 Midlothian VA 23113</u>	Email <u>Maryanne@maizeremodeling.com</u>	
	Contractor License Number <u>2705106340</u>	Type <u>Class A</u>	Expiration <u>5/31/2025</u>

DESCRIPTION OF WORK	Scope of Work: <u>Converting existing porch to enclosed climate control space. Adding adjoining deck</u>				
	Proposed Use <u>Living Space</u>	Current Use <u>Open porch</u>	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>200</u>	Unfinished Sq. Ft. <u>156</u>	Total Sq. Ft. <u>356</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>214.50</u>
Value of Work	<u>45K</u>	State Levy Fee	\$ <u>4.09</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date <u>10/18/2023</u>		Zoning Fee	\$ <u>00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>218.59</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: 10/11/2023 10/10/23

Permit Number: BP2-2023-0057

GPIN/Tax Map: T700-05-4916/08-05-4-00

Issued: 11/2/23

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 12563 North Readers Lane, Manakin Sabot, VA 23233	
	Owner Annie Duignan	Phone # 757-672-1741
	Address 12563 North Readers Lane.	

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Readers Beach</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CJP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change in footprint/use.</u>			
	Planning & Zoning Officer: <u>David Lloyd</u>		Date: <u>10/24/23</u>	

CONTRACTOR INFORMATION	Contractor Chad Wilkins/ Convert Solar		Phone 757-447-6527
	Address 5770 Thurston Ave #106 Va Beach, VA 23455		Email npi@convert-solar.com
	Contractor License Number 2705183097	Type AES;ELE	Expiration 8-31-24

DESCRIPTION OF WORK	Scope of Work: Roof-mounted, grid-tied, 4.8kW 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

Value of Work	6450.00
---------------	----------------

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 10-11-2023

Application Fee	\$ <u>11.00</u>
State Levy Fee	\$ <u>.00</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>66.81</u>



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 10/2/2023 **REC: 10-2-23**

Permit Number: BPR-202300522

GPIN/Tax Map: 63-1-0-110-A / 7715-32-5413

Issued: 11-3-23

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>895 Manakin Rd</u>	
	Owner <u>NATE WEAN</u>	Phone # <u>804-484-4951</u>
	Address <u>895 Manakin Rd Manakin Sabot, VA 23103</u>	Email <u>nhvac21@aol.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Nate Wean</u>	
	Address <u>895 Manakin Rd Manakin Sabot VA 23103</u>	Email <u>nhvac21@aol.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount <u>730</u>	Date Paid
	Front Setback <u>20' from P/R/W</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	<u>NA</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
Planning & Zoning Officer <u>[Signature]</u>		Date <u>10/1/23</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>Building a pool house w/office, full bathroom and sitting room</u>				
	Proposed Use <u>Pool House</u>	Current Use <u>NA</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NA</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>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	Finished Sq. Ft. <u>730</u>	Unfinished Sq. Ft. <u>180</u>	Total Sq. Ft. <u>910</u>	

Building Only - Excludes All Trades Permits		<u>730</u>	<u>180</u>	Application Fee \$ <u>187.67</u>	<u>219.25</u>
Value of Work <u>\$35,000</u>	<u>28,225.00</u>	<u>\$45,100</u>		State Levy Fee \$ <u>3.68</u>	<u>4.30</u>
				Zoning Fee \$ <u>25.00</u>	
				RLD \$	
				SWP \$	
				Total \$ <u>212.69</u>	

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

Signature of Applicant [Signature] Date 10/1/2023



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: ~~10-2-23~~ 10/18/23

Permit Number: 692-6003-005740

GPIN/Tax Map: 7705-32-2236 | 00-3-C-00-0

Issued: 11/6/23

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 569 Ice Pond Cove	
	Owner Cynthia Seal	Phone # 357-2754
	Address 569 Ice Pond Cove	Email sealbeal@icloud.com
APPLICANT INFORMATION	Applicant/Contact John Chandler & Co., LLC	
	Address 1100 Welborne Dr., Ste. 203-A, Richmond, VA 23229	Phone # 955-0228 Email john@chandlerbuild.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: Meadows @ Manakin	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: 55' from P&K Rd	Center Line Setback: 80'	Rear Setback: 35'	GUP/Variance/GOA: _____
	Side Setback: 15' / 35'	Side Setback: 15' / 35'	Flood Zone: _____	RR: RR
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____	Planning & Zoning Officer: David [Signature] Date: 10/26/23		

CONTRACTOR INFORMATION	Contractor John Chandler & Co., LLC		Phone 955-0228
	Address 1100 Welborne Dr., Ste. 203-A, Richmond, VA 23229		Email john@chandlerbuild.com
	Contractor License Number 2705156238	Type BLD Class A	Expiration 3-31-25

DESCRIPTION OF WORK	Scope of Work: renovation of 2nd-floor bedroom & conversion of shed dormer and front porch per submitted plans.				
	Proposed Use Detached Single Family	Current Use Detached Single Family	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>	WATER Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>	# of Bathrooms existing	# of Bedrooms existing	# of floors no change
	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. 37	Unfinished Sq. Ft. 477	Total Sq. Ft. 37 514	

Building Only - Excludes All Trades Permits

Value of Work 404,780	Application Fee 183.00
	State Levy Fee 20.10
	Zoning Fee 80
	RLD 0
	SWP 0
	Total 1996.10

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

Signature of Applicant: **[Signature]** Date: **10/16/23**

REVIEWED BY: **Michael [Signature]** 11.3.23.



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: ~~10-5-23~~ 10/01/23

Permit Number: BPL-202300554

GPIN/Tax Map: 7715-20-1093/6307-09-0

Issued: 11/6/23

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 55 Sadie Dr. Manakin Sabot, VA 23103	
	Owner Robert Freeman	Phone # 804-690-7819
	Address 55 Sadie Dr. Manakin Sabot, VA 23103	Email freeman0000@yahoo.com

APPLICANT INFORMATION	Applicant/Contact Robert Freeman		Phone # 804-690-7819
	Address 55 Sadie Dr, Manakin Sabot, VA 23103		Email freeman0000@yahoo.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 PL/ML	Center Line Setback _____	Rear Setback 55'	CUP/Variance/COA A2
	Side Setback 5'	Side Setback 5'	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer David Boyd Date 10/26/23			

CONTRACTOR INFORMATION	Contractor Carolina Carports		Phone 336-367-6400
	Address 187 Cardinal Ridge Trail, Dobson, NC 27017		Email alexis.v@ccihq.biz
	Contractor License Number 032260	Type Engineer	Expiration _____

DESCRIPTION OF WORK	Scope of Work: 30' by 65' metal building. 4" concrete slab will be installed at later date.				
	Proposed Use storage and workshop		Current Use n/a	Environmental Impacts (stream crossing, wetlands, amt land disturbed)	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 0
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No		Finished Sq. Ft. 1,950	Unfinished Sq. Ft. 1,950	Total Sq. Ft. 1,950

Building Only - Excludes All Trades Permits

Value of Work	\$27,335 \$29,050
---------------	-------------------------------------

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

Signature of Applicant: **[Signature]** Date: **10/5/23**

Application Fee	\$ 143.00
State Levy Fee	\$ 281
Zoning Fee	\$ 00
RLD	\$ _____
SWP	\$ _____
Total	\$ 171.00



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: October 31, 2023

Permit Number: PRC-2023-00093

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

Issued: 11/9/23

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 1616 Three Chopt Road, Henrico, VA 23233

OWNER INFORMATION	Owner <u>Abi's Four Rings LLC c/o Jim McVey</u>	Phone # <u>804-363-7073</u>
	Address <u>4198 Cox Road, Suite 200, Glen Allen, VA 23060</u>	Email <u>ciii@jonescorporations.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>JRCC / Bingham Jones</u>	Phone # <u>757-784-0390</u>
	Address <u>1058 Technology Park Drive, Glen Allen, VA 23059</u>	Email <u>bingham74@icloud.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100 55'</u>	Center Line Setback <u>80'</u>	Rear Setback <u>10'</u>	CUP/Variance/COA
	Side Setback <u>10'</u>	Side Setback <u>10'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change in use / footprint</u> B-3			

Planning & Zoning Officer BLE Date 11/2/2023

CONTRACTOR INFORMATION	Contractor <u>Jones Realty & Construction Corporation</u>	Phone <u>804-321-1700</u>
	Address <u>1058 Technology Park Drive, Glen Allen, VA 23059</u>	Email <u>bingham74@icloud.com</u>
	Contractor License Number <u>2701003757</u>	Type <u>Class A RBC & CBC</u>

Scope of Work:
install automatic sliding doors at six previously roughed-in interior locations

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

Building Only - Excludes All Trades Permits

Value of Work	<u>included in original building cost</u> <u>BR-2022-00854</u>
---------------	---

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

Signature of Applicant [Signature] Date 10-31-2023

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

fees included in original building permit



BUILDING PERMIT APPLICATION

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

Application Date: 10-13-2023

Permit Number: 802-20023-00544

GPIN/Tax Map: 7704-95-0981 | 102-260-8-0

Issued: 11/6/23

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 713 Sawdust Dr. Manakin Sabot, VA 23103	
	Owner Timothy & Allyson Hummel	Phone # 804-380-9706
	Address 713 Sawdust Dr. Manakin Sabot, VA 23103	Email thummel15@gmail.com

APPLICANT INFORMATION	Applicant/Contact Stacy Short	Phone # 804-691-0078
	Address	Email stacy@cardiffconstruction.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Manakin Farms</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from driveway</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>RPAD</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer: David Lloyd Date: 10/24/23

CONTRACTOR INFORMATION	Contractor Cardiff Renovations, LLC	Phone 804-814-4115
	Address 1400 County Line Rd. Midlothian, VA 23112	Email chase@cardiffconstruction.com
	Contractor License Number 2705167913	Type Contractor

DESCRIPTION OF WORK	Scope of Work: Renovation of fire damaged property. Additions include a new sun room, new screened in porch, new 2 car attached garage with living space above (includes living space, 1 bedroom, 1 full bath, 1 closet)				
	Proposed Use Residential	Current Use Residential	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A		
	SEWER <u>Public</u> Private	WATER <u>Public</u> Private	# of Bathrooms 3.5	# 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	Finished Sq. Ft. 4,375	Unfinished Sq. Ft. 670	1396	Total Sq. Ft. 4,375
					2071

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>113.00</u>
Value of Work	\$ <u>215,000</u> <u>\$89,245</u>	State Levy Fee	\$ <u>8.81</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>116.81</u>
		Signature of Applicant	<u>Stacy Short</u>

fees waived due to fire damage



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: 04/26/2023

Permit Number: *Sign 2023-00008*

GPIN/Tax Map: 59-4-0-6-0

Issued: *11-15-23*

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 1606 Three Chopt Road	
	Owner LJP Properties LLC	Phone # 8042715685
	Address P O Box 72075; Richmond, VA 23235	

APPLICANT INFORMATION	Applicant/Contact Jeff Lee		Phone # 8046051396
	Address 2510 Willis Road; N. Chesterfield, VA 23237		Email jeff.lee@SuperiorSignsRVA.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>N/A</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <i>5'</i>	Center Line Setback —	Rear Setback —	CUP/Variance/COA <i>COA-2023-00014 Approved 53</i>
	Side Setback —	Side Setback —	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>COA</i>			
	Planning & Zoning Officer <i>David [Signature]</i>		Date <i>11/3/25</i>	

CONTRACTOR INFORMATION	Contractor Superior Signs LLC		Phone 8042715685
	Address 2510 Willis Road; N. Chesterfield, VA 23237		Email jeff.lee@SuperiorSignsRVA.com
	Contractor License Number 2705156399	Type CBC RBC	Expiration 03/31/2025

DESCRIPTION OF WORK	Scope of Work: Install (1) Freestanding Monument Sign for the Four Rings Development 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.	

Building Only - Excludes All Trades Permits		Application Fee \$ <i>228.10</i> State Levy Fee \$ <i>4.56</i> Zoning Fee \$ <i>- COA</i> RLD \$ _____ SWP \$ _____ Total \$ <i>232.66</i>
Value of Work	\$30,414.00	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	<i>[Signature]</i>	
Date	04/26/2023	



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: **Dec: 8-4-23**
 Permit Number: **2023-004010**
 GPIN/Tax Map: **76-2111/58-34-3-6-0**
 Issued: **11-16-23**
 This application is not authorization to start work. No inspections will be scheduled until the 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		APPLICANT INFORMATION	
Owner	204 KINLOCH RD MANKIN SABOT VA 23103	Address	1175 Ridgefield Pkwy Ste 105 Richmond VA 23238
Owner Name	TRI MIRSCH	Applicant/Contact	VMAX LLC / VITLIUS REINIKOVAS
Phone #	804-380-5070	Phone #	
Email		Email	

SUBDIVISION		TO BE COMPLETED BY ZONING DEPARTMENT	
Subdivision	Kinloch	APPROVED	REJECTED
Front Setback	5	Front Setback	5
Center Line Setback	5	Center Line Setback	5
Rear Setback	5	Rear Setback	5
Side Setback	5	Side Setback	5
Flood Zone		Flood Zone	
Project	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	CUP/Variance/COA	PPVD
Amount		Date Paid	
Comments	Planning & Zoning Officer: [Signature] Date: 8/11/23		

CONTRACTOR INFORMATION		CONTRACTOR LICENSE INFORMATION	
Contractor	VMAX LLC	Contractor License Number	2705101121
Address	1175 Ridgefield Pkwy Ste 105 Richmond VA	Type	CLASS A CONTRACTOR
Phone	804-426-1030	Expiration	11-30-2023
Email	VITAS1902@gmail.com		

DESCRIPTION OF WORK		CONTRACTOR INFORMATION	
Proposed Use	SEWER Public/Private	Contractor License Number	2705101121
Current Use	WATER Public/Private	Type	CLASS A CONTRACTOR
Environmental Impacts (stream crossing, wetlands, amt land disturbed)		Expiration	11-30-2023
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No			
Finished Sq. Ft.	240		
Unfinished Sq. Ft.			
Total Sq. Ft.	240		

BUILDING ONLY - Excludes All Trades Permits		CONTRACTOR INFORMATION	
Value of Work	110,000	Contractor License Number	2705101121
Signature of Applicant	[Signature]	Type	CLASS A CONTRACTOR
Date	11/15/2023	Expiration	11-30-2023
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.			

FEES	
Application Fee	\$ 50.00
State Levy Fee	\$ 10.14
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 549.14

Application Date: **Dec: 8-4-23**



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: **Dec: 10-10-23**

Permit Number: **APR-2023-00528**

GPIN/Tax Map: **48-19-0-20-0 / 7738-11-3601**

Issued: **11-16-23**

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: **7294 ELLINGHAM CT. GLEN ALLEN VA 23059**

Owner: **TOM AND SANDY OWEN** Phone #: **804-382-5759**

Address: **7294 ELLINGHAM CT. GLEN ALLEN VA.** Email: **SANDYTOWEN@gmail.com**

APPLICANT INFORMATION

Applicant/Contact: **STEVE SCHMIDT** Phone #: **804-908-2637**

Address: **8180 REDGATE LN. MECH VA. 23111** Email: **schmidtsgc@gmail.com**

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: **Parkside Village** Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: **30' from Parkway** Center Line Setback: _____ Rear Setback: **50' b/s** CUP/Variance/COA: _____

Side Setback: **20' b/s** Side Setback: **20' b/s** Flood Zone: _____

APPROVED REJECTED COMMENTS: **Per Applicant. No change to footprint**

Planning & Zoning Officer: **David Boyd** Date: **10/17/23**

CONTRACTOR INFORMATION

Contractor: **SCHMIDT'S GENERAL CONTRACTING LLC** Phone: **804-908-2637**

Address: **8180 REDGATE LN. MECH. VA. 23111** Email: **schmidtsgc@gmail.com**

Contractor License Number: **2705162172** Type: **RBC/HVA** Expiration: **2-28-2025**

DESCRIPTION OF WORK

Scope of Work: **BUILD SCREEN PORCH 192 sq Feet**

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms 3	# of Bedrooms 3	# of floors 2
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.	
<input checked="" type="checkbox"/>		192	192	

Building Only - Excludes All Trades Permits

Value of Work: **\$24,000** TWENTY FOUR THOUSAND DOLLARS

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

Signature of Applicant: **[Signature]** Date: **10/10/2023**

Application Fee	\$ 120.00
State Levy Fee	\$ 2.40
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 147.40

REVIEWED BY: MICHAEL BROOKING 11/16/23

Rec: 10-17-23



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: 10-12-23

Permit Number: *BPA-2023-00560*

GPIN/Tax Map: *713536-3924 67-13-B-6-0*

Issued: *11-16-23*

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 23 Dahlgren Road	
	Owner Manley, Walter	Phone # 8043387928
	Address 23 Dahlgren Road	Email clarke.manley@gmail.com

APPLICANT INFORMATION	Applicant/Contact Sam Sleem	Phone # 8043342510
	Address 601 Moorefield park drive	Email sam@capitalconstruction.cc

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Lower Tuckahoe</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA R1
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer: <i>Daniel Boyd</i> Date: <i>10/30/23</i>			

CONTRACTOR INFORMATION	Contractor Capital Construction Services	Phone 8043342510
	Address 601 Moorefield Park Drive	Email sam@capitalconstruction.cc
	Contractor License Number 2705071985	Type A

DESCRIPTION OF WORK	Scope of Work: Rebuilding the <i>corner</i> on the left front of the dwelling that was impacted by the tree and reshingling only a small area of the front roof <i>the front left slope down roof</i>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3	# 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	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 4200	
	<i>See waived storm damage</i>				

Building Only - Excludes All Trades Permits		Application Fee	\$
Value of Work	29,000	State Levy Fee	\$
		Zoning Fee	\$
		RLD	\$
		SWP	\$
		Total	\$ 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.

Signature of Applicant: *[Signature]* Date: **10-12-23**



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: 10/20/23

Permit Number: BP2-2023-00055

GPIN/Tax Map: 6126-44-0915/50-5-0-20

Issued: 11/7/23

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 <u>1229 Lickinghole Road, Goochland Va, 23063</u>	
	Owner <u>Peter T.A. Haenlein</u>	Phone # <u>540-220-8811</u>
	Address <u>1229 Lickinghole Road, Goochland Va, 23063</u>	Email <u>haenlept@yahoo.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Peter T.A. Haenlein</u>	Phone # <u>540-220-8811</u>
	Address <u>1229 Lickinghole Road, Goochland Va, 23063</u>	Email <u>haenlept@yahoo.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>James River Land</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>55' from PL/PLH</u>	Center Line Setback _____	Rear Setback <u>5'</u>	CUP/Variance/COA _____
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	<u>A1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>10/26/23</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>install 21'x21' gravel bed at 6' depth, install 20'x20' Garage port on top, run electric from panel for 1 gfi outlet</u>				
	Proposed Use <u>Storage shed</u>	Current Use <u>N/A</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>none</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / (No)	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>400</u>	Total Sq. Ft. <u>400</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>\$5,000.00 \$10,000</u>	Application Fee \$ <u>29</u>
	State Levy Fee \$ <u>18</u>
	Zoning Fee \$ <u>00</u>
	RLD \$ _____
	SWP \$ _____
	Total \$ <u>64.78</u>

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

Signature of Applicant Peter T.A. Haenlein Date 10/16/23



BUILDING PERMIT APPLICATION

Application Date: 11-17-23Permit Number: 2023-00563GPIN/Tax Map: 6759-37-8237 / 21-4-0-10-0Issued: 11-17-23

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 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 2562 Old Dam Road, Goochland, VA 23063	
	Owner Cornelius Dandrdge	Phone # 804-928-8913
	Address 2562 Old Dam Road, Goochland, VA 23063	Email gloriagdandridge@gmail.com

APPLICANT INFORMATION	Applicant/Contact same as above	Phone #
	Address	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55 ft</u>	Center Line Setback <u>125 ft</u>	Rear Setback <u>5 ft</u>	CUP/Variance/COA #2
	Side Setback <u>5 ft</u>	Side Setback <u>5 ft</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer: BLE Date: 11/2/2023

CONTRACTOR INFORMATION	Contractor OWNER	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: detached garage Set up enclosed car port (2 door) 24' x 25'				
	Proposed Use	Current Use none	Environmental Impacts (stream crossing, wetlands, amt land disturbed) none		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of floors 0
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 600	

Building Only - Excludes All Trades Permits

Value of Work	\$10,000.00 \$16,500
---------------	-----------------------------

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: Cornelius Dandrdge Date: 10/25/2023

Application Fee	\$ <u>86.25</u>
State Levy Fee	\$ <u>1.70</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>112.95</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: **Rec: 10-27-23**Permit Number: **APR-2023-00571**GPIN/Tax Map: **7725-30-4427 / 58-54.8-37-0**Issued: **11-17-23**

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	7120 Montage Row	
	Owner	Larry & Karen Rios	Phone #
	Address	7120 Montage Row	Email

APPLICANT INFORMATION	Applicant/Contact	Walsh Builders Inc / Rossie Walsh	Phone #	804-641-1591
	Address	2810 Turner Rd Goochland, Va 23063	Email	Walshbuilders@Verizon.net

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

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: **Daniel Ford** Date: **11/13/23**

CONTRACTOR INFORMATION	Contractor	Walsh Builders Inc	Phone	804-641-1591
	Address	2810 Turner Rd Goochland, VA 23060	Email	Walshbuilders@Verizon.net
	Contractor License Number	2701034172	Type	Buildg

Expiration: **4-30-25**

DESCRIPTION OF WORK	Scope of Work: Finish an unfinished area for a playroom				
	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. 3105 Sq Ft	

Building Only - Excludes All Trades Permits		Application Fee	\$ 37.48
Value of Work	5300	State Levy Fee	\$ 70
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	\$ 2500
Signature of Applicant	Daniel Ford	RLD	\$ _____
Date	10-27-2023	SWP	\$ _____
		Total	\$ 62.48



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 4/30/23 7/13/23

Permit Number: POL-2023-00040

GPIN/Tax Map: 773305-0014/67-100-120

Issued: 11/27/23

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

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

OWNER INFORMATION
 Site Address: 22 Lower Tuckahoe Road West, Henrico, VA 23238

Owner: McComb Residence Phone #

Address: 22 Lower Tuckahoe Road West, Henrico, VA 23238 Email

APPLICANT INFORMATION
 Applicant/Contact: Premier Pools & Spas - Richmond West Phone # 757-207-0576

Address: 1107 Alverser Drive, Midlothian, VA 23113 Email: bmileski@ppas.com

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Lower Tuckahoe Proffer Yes No Amount Date Paid

Front Setback: 40' Center Line Setback: 65' Rear Setback: 5' CUP/Variance/COA

Side Setback: 5' Side Setback: 5' Flood Zone: RI

APPROVED REJECTED COMMENTS: Planning & Zoning Officer: David Boyd Date: 11/15/23

CONTRACTOR INFORMATION
 Contractor: Premier Pools & Spas - Richmond West Phone: 757-207-0576

Address: 1107 Alverser Drive, Midlothian, VA 23113 Email: bmileski@ppas.com

Contractor License Number: 2705183072 Type: Class A Expiration: 4-30-24

DESCRIPTION OF WORK
 Scope of Work: Installation of a 20'x60' inground gunite pool and 8'x8' spa. Includes an auto cover.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
Swimming	N/A			

SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
		N/A	N/A	N/A

Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
	N/A	N/A 1264	N/A 1264

Building Only - Excludes All Trades Permits

Value of Work: 250,000

Application Fee	\$ 113.74
State Levy Fee	\$ 22.14
Zoning Fee	\$ 00
RLD	\$
SWP	\$
Total	\$ 135.88

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] Digitally signed by Gelsey Mileski Date: 2023.10.30 04:44:13 -0400 Date: 10/30/23

REVIEWED BY: Michael Barber



BUILDING PERMIT APPLICATION

Application Date: Dec: 10-16-23
 Permit Number: 2011-2023-00039
 GPIN/Tax Map: 67-24-A-7-01 7733-55-1438
 Issued: 11-28-23
 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.

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: 200 RANDOLPH SQUARE LN Goochland VA 23238
 Owner: JULIE & GLEN FORTNER Phone #: Julie 804-241-8914
 Address: 200 RANDOLPH SQUARE LN. Goochland 23238 Email: docsfortner@comcast.net

APPLICANT INFORMATION
 Applicant/Contact: JAMIE PERKINS Phone #: 804-346-4600
 Address: 1301 S PROVIDENCE Rd N Chesterfield 23236 Email: _____

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Randolph Square Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 30' from Powerlines Center Line Setback: _____ Rear Setback: 51' B/S CUP/Variance/COA: _____
 Side Setback: 30' B/S Side Setback: 30' B/S Flood Zone: _____ COMMENTS: APUD
 APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer: David Lloyd Date: 10/30/23

CONTRACTOR INFORMATION
 Contractor: J PERKINS CONSTRUCTION Phone: 804 691-3332
 Address: 1301 S PROVIDENCE Rd N Chesterfield 23236 Email: jeperkins67@gmail.
 Contractor License Number: 2705060919 Type: CLASS A BLD Expiration: 12-31-23

DESCRIPTION OF WORK
 Scope of Work: REMOVE EXISTING DECK, CONSTRUCT NEW DECK, SCREEN PORCH AND INSTALL PRE-CAST ABOVE GROUND POOL & BARRIER.

Proposed Use <u>OUT DOOR RECREATIONAL SPACE</u>	Current Use <u>SAME</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NO</u>		
SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of floors <u>2</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>DECK SPACE 1700</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>265,000</u>	Application Fee	\$ <u>1,204.50</u>
		State Levy Fee	\$ <u>24.09</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>1,253.59</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: Jamie Perkins Date: 10-16-23