



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 12/01/2023 and 12/31/2023

<u>Permit Number</u>	<u>Issued Date</u>	<u>Structure Type</u>	<u>Value</u>
BPR-2023-00420	12/01/2023	New Construction	\$236,000.00
BPR-2023-00462	12/01/2023	New Construction	\$233,000.00
BPR-2023-00495	12/08/2023	New Construction	\$640,135.00
BPR-2023-00546	12/01/2023	New Construction	\$276,675.00
BPR-2023-00497	12/08/2023	New Construction	\$640,135.00
BPR-2023-00494	12/08/2023	New Construction	\$620,840.00
BPR-2023-00579	12/04/2023	New Construction	\$297,942.00
BPR-2023-00564	12/01/2023	New Construction	\$236,000.00
BPR-2023-00562	12/15/2023	New Construction	\$900,000.00
BPR-2023-00582	12/04/2023	New Construction	\$298,656.00
BPR-2023-00578	12/04/2023	New Construction	\$259,896.00
BPR-2023-00580	12/04/2023	New Construction	\$280,398.00
BPR-2023-00581	12/04/2023	New Construction	\$259,182.00
BPR-2023-00577	12/04/2023	New Construction	\$280,704.00
BPR-2023-00607	12/19/2023	New Construction	\$246,000.00
BPR-2023-00596	12/15/2023	New Construction	\$528,000.00
BPR-2023-00603	12/27/2023	New Construction	\$146,347.50
BPR-2023-00597	12/14/2023	New Construction	\$450,000.00
BPR-2023-00614	12/27/2023	New Construction	\$139,522.50
BPR-2023-00602	12/15/2023	New Construction	\$487,000.00
BPR-2023-00592	12/21/2023	New Construction	\$350,000.00
BPR-2023-00584	12/01/2023	New Construction	\$254,287.50
BPR-2023-00609	12/22/2023	New Construction	\$253,087.50

Total SFD: 23

Total Value:

\$8,313,808.00

Commercial Building Permits Issued 12/1/23-12/31/23			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPC-2023-00084	12/14/2023	Alteration, Remodel, Renovation, Tenant upfit	\$1,200,000.00
BPC-2023-00047	12/27/2023	Accessory Structure	\$112,404.00
BPC-2023-00099	12/29/2023	Addition	\$272,129.00
BPC-2023-00102	12/18/2023	Accessory Structure	\$10,000.00

Residential Building Permits Issued 12/1/23-12/31/23			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPR-2023-00595	12/7/2023	Deck	\$1,280.00
BPR-2023-00545	12/13/2023	Addition	\$25,000.00
BPR-2023-00583	12/1/2023	Deck	\$7,883.00
BPR-2023-00589	12/4/2023	Alteration, Remodel, Renovation, Tenant upfit	\$6,400.00
BPR-2023-00573	12/1/2023	Alteration, Remodel, Renovation, Tenant upfit	\$55,000.00
BPR-2023-00604	12/15/2023	Photo Voltaic	\$18,240.00
BPR-2023-00572	12/15/2023	Alteration, Remodel, Renovation, Tenant upfit	\$5,000.00
BPR-2023-00613	12/19/2023	Addition	\$9,500.00
BPR-2023-00601	12/19/2023	Alteration, Remodel, Renovation, Tenant upfit	\$2,600.00
BPR-2023-00612	12/19/2023	Alteration, Remodel, Renovation, Tenant upfit	\$3,000.00
BPR-2023-00587	12/1/2023	Alteration, Remodel, Renovation, Tenant upfit	\$23,722.00
BPR-2023-00608	12/22/2023	Accessory Structure	\$100,000.00
BPR-2023-00610	12/18/2023	Alteration, Remodel, Renovation, Tenant upfit	\$25,000.00
BPR-2023-00615	12/26/2023	Alteration, Remodel, Renovation, Tenant upfit	\$13,071.40
BPR-2023-00585	12/14/2023	Accessory Structure	\$13,455.00
BPR-2023-00588	12/6/2023	Addition	\$40,222.00
BPR-2023-00611	12/26/2023	Deck	\$26,000.00
BPR-2023-00616	12/27/2023	Accessory Structure	\$82,975.19
BPR-2023-00586	12/1/2023	Alteration, Remodel, Renovation, Tenant upfit	\$25,000.00
BPR-2023-00575	12/4/2023	Alteration, Remodel, Renovation, Tenant upfit	\$120,000.00
BPR-2023-00576	12/1/2023	Alteration, Remodel, Renovation, Tenant upfit	\$34,500.00
BPR-2023-00590	12/5/2023	Alteration, Remodel, Renovation, Tenant upfit	\$12,900.00
BPR-2023-00593	12/12/2023	Accessory Structure	\$8,000.00

Electrical Generator Permits Issued 12/1/23-12/31/23			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
ELR-2023-00793	12/6/2023	Generator	\$1,000.00
ELR-2023-00814	12/14/2023	Generator	\$19,560.00
ELR-2023-00781	12/4/2023	Generator	\$10,000.00
ELR-2023-00820	12/19/2023	Generator	\$11,025.00
ELR-2023-00821	12/20/2023	Generator	\$7,000.00
ELR-2023-00795	12/11/2023	Generator	\$17,235.00
ELR-2023-00789	12/13/2023	Generator	\$12,016.00
ELR-2023-00766	12/4/2023	Generator	\$11,250.00
ELR-2023-00765	12/4/2023	Generator	\$13,232.00



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: 11/14/2023

Permit Number: 602-002300500

GPIN/Tax Map: 6832-37-7376 / 12-28-0-3-0

Issued: 12/11/23

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: 4094 Lively Ln Gum Spring VA 23065

Owner: CARTER HOME BUILDERS, LLC Phone #: 804 241 6507

Address: 1751 SHALLOW WELL RD MANAKIN SABOT, VA 23103 Email: carterhomebuilders@gmail

APPLICANT INFORMATION

Applicant/Contact: SAME AS ABOVE Phone #: _____

Address: _____ Email: _____

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: Lake Killarney Proffer Yes No Amount: _____ Date Paid: _____

Front Setback: 55' Center Line Setback: _____ Rear Setback: 35' CUP/Variance/COA: _____

Side Setback: 20' Side Setback: 20' Flood Zone: _____

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: David [Signature] Date: 11/21/23

CONTRACTOR INFORMATION

Contractor: CARTER HOME BUILDERS, LLC Phone: 804 241 6507

Address: 1751 SHALLOW WELL ROAD MANAKIN SABOT, VA 23103 Email: carterhomebuilders@gmail

Contractor License Number: 2705078604 Type: CLASS A Expiration: 9/30/25

DESCRIPTION OF WORK

Scope of Work: Build New Residential Home w/ attached garage

Proposed Use <u>RESIDENTIAL HOME</u>	Current Use <u>NONE</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>0.000</u>		
SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>3.5</u>	# of Bedrooms <u>4</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>2950</u>	Unfinished Sq. Ft. <u>1555</u>	Total Sq. Ft. <u>4505</u>	

Building Only - Excludes All Trades Permits

Value of Work: \$350,000

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

Signature of Applicant: [Signature] Date: 11/14/23

Application Fee	\$ <u>158.00</u>
State Levy Fee	\$ <u>21.74</u>
Zoning Fee	\$ <u>100</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>1008.74</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: John Wilkinson, Esq Telephone: 804 556-3914

Mailing Address: 3063 River Road West Goochland, VA 23063

OWNER'S STATEMENT

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

Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

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

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

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

OFFICE USE ONLY

USE RS # STORIES 2 CONSTRUCTION TYPE VB OCCUPANT LOAD 8 CODE EDITION 1B

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12.5.23.

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 # 12/14/23
 Permit Number: 802-2023-00003
 GPIN/Tax Map: 6000-64-8204 / 21-1-0-01-0
 Issued: 12/27/23
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

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

OWNER INFORMATION	Site Address <u>3183 Sandy Hook Rd Sandy Hook VA 23153</u>	
	Owner <u>Virginia First Properties</u>	Phone # <u>804-914-4888</u>
	Address <u>6939 Passing Sky drive Colorado Springs CO 80911</u>	Email <u>tocarrollconstr@aol.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Monument Home Builders/ Tom Carroll</u>		Phone # <u>804-914-4888</u>
	Address <u>1913 Huguenot Rd Ste 302 N Chesterfield, va 23235</u>		Email <u>same</u>

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

CONTRACTOR INFORMATION	Contractor <u>Monument Home Builders Inc</u>		Phone <u>804-914-4888</u>
	Address <u>1913 Huguenot Rd Ste 302 N Chesterfield, VA 23235</u>		Email <u>tocarrollconstr@aol.com</u>
	Contractor License Number <u>2705070776</u>	Type <u>class A</u>	Expiration <u>2024-08-31</u>

DESCRIPTION OF WORK	Scope of Work: <u>2 Story single family dwelling / New Construction w/ attached garage</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>3</u>	# of Bedrooms <u>3</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>1880</u>	Unfinished Sq. Ft. <u>743</u>	Total Sq. Ft. <u>2623</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>146,347.50</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 12-4-2023

Application Fee	\$ <u>600.00</u>
State Levy Fee	\$ <u>13.41</u>
Zoning Fee	\$ <u>00</u>
RLD	\$ <u>100</u>
SWP	\$ _____
Total	\$ <u>833.98</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: Bon-Air Title Telephone: 804-320-1336

Mailing Address: 9211 Forest Hill Ave, Suite 111
Richmond, VA 23235

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 R5 # STORIES 2 CONSTRUCTION TYPE VB OCCUPANT LOAD 2 CODE EDITION 18

FIRE SPRINKLER _____ FIRE ALARM _____ MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 12-19-23.

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

Application Date: Rec: 11-2-23Permit Number: DPR-2023-00575GPIN/Tax Map: 45-1-0-87-0 / 6797-76-700Issued: 12/14/23

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 <u>1891 Shallow Well Road Manakin Sabot, VA 23103</u>	
	Owner <u>Cheryl Coleman</u>	Phone # <u>804-477-2837</u>
	Address <u>1891 Shallow Well Rd. Manakin Sabot, VA 23103</u>	Email <u>cheridcoleman1@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Charles Liesfeld</u>	Phone # <u>703-935-6343</u>
	Address <u>540 Three Chopt Rd. Manakin Sabot, VA 23103</u>	Email <u>cliesfeld@gmail.com</u>

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

CONTRACTOR INFORMATION	Contractor _____ <u>Clean Cut Sawing and Drilling, Inc.</u>	Phone <u>804-594-5378</u> 804-690-2970
	Address <u>1887 Anderson Highway Powhatan, VA 23139</u> 540 Three Chopt Rd. Manakin Sabot, VA 23103	Email <u>cliesfeld@gmail.com</u> _____
	Contractor License Number <u>2705159398</u> 2701032406 Type <u>Class A</u> Class A Expiration <u>1-31-24</u> 2024	

DESCRIPTION OF WORK	Scope of Work: <u>Turning a garage into a kitchen that's attached to the house. Creating a small laundry room.</u>				
	Proposed Use <u>Kitchen</u>	Current Use <u>Garage</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <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>649</u>	Unfinished Sq. Ft. <u>—</u>	Total Sq. Ft. <u>649</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>252.00</u>
Value of Work <u>120,000</u>		State Levy Fee \$ <u>11.04</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25.00</u>
Signature of Applicant <u>[Signature]</u>	Date <u>11-2-23</u>	RLD \$ _____
		SWP \$ _____
		Total \$ <u>588.04</u>



BUILDING PERMIT APPLICATION

Application Date: 11/20/23

Permit Number: BP-2023-005910

GPIN/Tax Map: 43-41-0-4-0 6767-44-8845

Issued: 12/1/23

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 <u>2524 BUCKNELL LANE MAIDENS VA 23102</u>	
	Owner <u>JIM STEVENS</u>	Phone # <u>(804) 647-9185</u>
	Address <u>2524 BUCKNELL LANE MAIDENS VA 23102</u>	Email

APPLICANT INFORMATION	Applicant/Contact <u>SAME</u>	Phone #
	Address <u>SAME</u>	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N. Clifton</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>35'</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>30'</u>	Side Setback <u>30'</u>	Flood Zone	<u>A2</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS			

Planning & Zoning Officer: [Signature] Date: 11/30/23

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

DESCRIPTION OF WORK	Scope of Work: <u>TWO SMALL DECKS/LANDINGS CONNECTED W/ TWO SETS OF STEPS WITH FALL PROTECTION + RAILINGS</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.	

128 sq ft

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30.00</u>
Value of Work	<u>500⁰⁰</u>	State Levy Fee	\$ <u>1.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>55.00</u>
		Signature of Applicant	<u>[Signature]</u>



BUILDING PERMIT APPLICATION

Application Date: 10/13/23

Permit Number: PR-2023-00593

GPIN/Tax Map: 67189-0291 / 45-200-20

Issued: 12/12/23

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.

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>2030 Shallow well Rd</u>	
	Owner <u>Abel Gonzalez-Lopez</u>	Phone # <u>804-687-6013</u>
	Address <u>2030 Shallowell Rd.</u>	Email <u>Ivan.g45@aol.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Abel Gonzalez-Lopez</u>	
	Address <u>2030 Shallow well. Rd.</u>	Email <u>Ivan.g45@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 _____	Date Paid _____
	Front Setback <u>75'</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>12/11/23</u>		

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

DESCRIPTION OF WORK	Scope of Work: <u>hopefully getting started once we get approved only planning on to cover the back of the <u>carport</u> finish this by the mid of February end of March</u>				
	Proposed Use _____	Current Use <u>nothing</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>0</u>
	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>800</u>	Unfinished Sq. Ft. <u>800</u>	Total Sq. Ft. <u>800</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>48</u>
Value of Work	<u>\$8,000</u>	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>05</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>73.90</u>
		Signature of Applicant	<u>Abel Gonzalez-Lopez</u>



BUILDING PERMIT APPLICATION

Application Date: 10/13/23

Permit Number: 892-2008-00525

GPIN/Tax Map: 6197-81-0291 | 45-20-0-0-0

Issued: 12/13/23

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 <u>2030 shallowwell Rd.</u>	
	Owner <u>Abel Gonzalez-Lopez</u>	Phone # <u>804-687-6013</u>
APPLICANT INFORMATION	Address <u>2030 shallowwell Rd.</u>	Email <u>Ivan.g45@ad.com</u>
	Applicant/Contact <u>Abel Gonzalez-Lopez</u>	Phone # <u>804-687-6013</u>
	Address <u>2030 shallow well Rd</u>	Email <u>Ivan.g45@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 _____	Date Paid _____
	Front Setback <u>75' from PL/RAW</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>30'</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>10/24/23</u>		

CONTRACTOR INFORMATION	Contractor <u>Abel Gonzalez-Lopez</u>	Phone <u>804-687-6013</u>
	Address <u>2030 shallowwell Rd.</u>	Email <u>Ivan.g45@aol.com</u>
	Contractor License Number _____	Type _____

DESCRIPTION OF WORK	Scope of Work: <u>Planning to get started once we get approved. Hopefully finish by the day we've agreed on around August-September office building attached</u>				
	Proposed Use _____	Current Use <u>deck</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>0</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>280</u>	Unfinished Sq. Ft. _____	Total Sq. Ft. <u>280</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>101.50</u>
Value of Work <u>\$25,000</u>	State Levy Fee \$ <u>2.49</u>	Zoning Fee \$ <u>0.00</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.		RLD \$ _____
Signature of Applicant <u>Abel Lopez</u>	Date <u>10-13-2023</u>	SWP \$ _____
		Total \$ <u>101.99</u>



BUILDING PERMIT APPLICATION

Application Date: 11/14/2023 - 11/27/23

Permit Number: 692-0023001004

GPIN/Tax Map: 715-80-1993/103-27-0-9-0

Issued: 12/15/23

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.

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 55 Sadie Drive, Manakin Sabot, VA 23103	
	Owner Robert Freeman	Phone # 804-690-7819
	Address 55 Sadie Drive	

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>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to front private use</u>			
	Planning & Zoning Officer <u>David [Signature]</u>		Date <u>12/11/23</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, 6.4kW solar pv system on existing residence				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input type="checkbox"/> SEWER <input type="checkbox"/> Public/Private <input type="checkbox"/>	<input type="checkbox"/> WATER <input type="checkbox"/> 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	\$ <u>51.80</u>
Value of Work	<u>8850.00 - 18,240.00</u>	State Levy Fee	\$ <u>1.00</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>11/14/2023</u>		Septic/Well Fee	\$ _____
		Zoning Fee	\$ <u>00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>77.80</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: 10/31/23Permit Number: 692-20023-00570GPIN/Tax Map: 6768-01-0139 | 31-10-38-AIssued: 12/15/23

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 <u>2660 Poorhouse Rd, Goochland Va, 23063</u>	Phone # <u>804-396-5891</u>
	Owner <u>Melvin Kendall Dolan</u>	Email <u>Brenda.dolan912@gmail.com</u>
	Address <u>Same as above</u>	

APPLICANT INFORMATION	Applicant/Contact <u>Same as above</u>	Phone #
	Address <u>Same as above</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	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint/ use. H2</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>11/15/23</u>			

CONTRACTOR INFORMATION	Contractor <u>Owner</u>	Phone <u>804-396-5891</u>
	Address	Email <u>Brenda.dolan912@gmail.com</u>
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Finishing existing square footage into, sitting room, kitchen office & Bathroom</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>480</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>480</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30.00</u>
Value of Work	<u>\$5,000.00</u>	State Levy Fee	\$ <u>.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: <u>[Signature]</u> Date: <u>10/31/2023</u>		Zoning Fee	\$ <u>00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>60.69</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: Dec: 12-5-23
 Permit Number: DK-2023-00610
 GPIN/Tax Map: 42-1-0-32-0 / 6767-01-6328
 Issued: 12-18-23
 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

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OWNER INFORMATION	Site Address <u>2887 RIVER RD. WEST</u>	Phone # <u>804-564-9097</u>
	Owner <u>LEGACY HOMES LLC</u>	Email <u>LEGACYHOMES@AOL.COM</u>
APPLICANT INFORMATION	Address <u>207 ECHO MEADOWS RD. ROCKVILLE, VA 23146</u>	Phone # <u>804-564-9097</u>
	Applicant/Contact <u>TRAVIS JOHNSON / LEGACY HOMES LLC</u>	Email <u>LEGACYHOMES@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 _____	Date Paid _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____	CUP/Variance/COA _____
	Side Setback _____	Side Setback _____	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to front porch.</u> Planning & Zoning Officer: <u>[Signature]</u> Date: <u>12/11/23</u>			

CONTRACTOR INFORMATION	Contractor <u>LEGACY HOMES LLC</u>	Phone <u>804-564-9097</u>
	Address <u>207 ECHO MEADOWS RD. ROCKVILLE, VA 23146</u>	Email <u>LEGACYHOMES@AOL.COM</u>
	Contractor License Number <u>2705052698</u>	Type <u>CLASS A</u>

DESCRIPTION OF WORK	Scope of Work: <u>All interior RENOVATION KITCHEN & BATHROOM & REMOVE WALL & INSTALL BERM</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Public</u>	WATER Public/Private <u>Public</u>	# of Bathrooms <u>1 1/2</u>	# of Bedrooms <u>3</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>2300</u>	Unfinished Sq. Ft. <u>200</u>	Total Sq. Ft. <u>2300 2500</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>\$25,000</u>	Application Fee \$ <u>124.50</u>
	State Levy Fee \$ <u>2.49</u>
	Zoning Fee \$ <u>25.00</u>
	RLD \$ _____
	SWP \$ _____
Signature of Applicant <u>[Signature]</u> Date <u>12-5-2023</u>	Total \$ <u>151.99</u>

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



BUILDING PERMIT APPLICATION

Application Date: December 4, 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: 602-200300613

GPIN/Tax Map: 6111-48-0107/4338-A-150

Issued: 12/19/23

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

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OWNER INFORMATION	Site Address <u>1668 Indys Run, Maidens, VA 23102</u>	
	Owner <u>Todd F. Miller</u>	Phone # <u>804-317-6100</u>
	Address <u>1668 Indys Run, Maidens, VA 23102</u>	Email <u>tmlbmil@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Todd F. Miller - Property/Homeowner</u>	Phone # <u>804-317-6100</u>
	Address <u>1668 Indys Run, Maidens, VA 23102</u>	Email <u>tmlbmil@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____	
	Front Setback <u>40'</u>	Center Line Setback <u>65'</u>	Rear Setback <u>25'</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 Royl</u> Date <u>12/12/23</u>				

CONTRACTOR INFORMATION	Contractor <u>Todd F. Miller - Property/Homeowner</u>		Phone <u>804-317-6100</u>
	Address <u>1668 Indys Run, Maidens, VA 23102</u>		Email <u>tmlbmil@gmail.com</u>
	Contractor License Number <u>N/A - Owner</u>	Type <u>N/A - Owner</u>	Expiration <u>N/A - Owner</u>

DESCRIPTION OF WORK	Scope of Work: <u>Adding 10ft.x9.5ft. closet to the left side of this house</u>			
	Proposed Use <u>Master Closet Extension</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>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No	Finished Sq. Ft. <u>95</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>95</u>

Building Only - Excludes All Trades Permits

Value of Work	<u>\$10,000 # 9,500</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 12-4-2023

Application Fee	\$ <u>51.74</u>
State Levy Fee	\$ <u>110</u>
Zoning Fee	\$ <u>00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>80.84</u>