



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 01/01/2024 and 01/31/2024

<u>Permit Number</u>	<u>Issued Date</u>	<u>Structure Type</u>	<u>Value</u>
BPR-2023-00619	01/17/2024	New Construction	\$565,972.50
BPR-2023-00630	01/31/2024	New Construction	\$433,032.50
BPR-2024-00009	01/19/2024	New Construction	\$255,675.00
BPR-2023-00631	01/31/2024	New Construction	\$418,071.00

Total SFD: 4	Total Value:	\$1,672,751.00
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Commercial Building Permits Issued 1/1/24-1/31/24			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPC-2024-00003	1/19/2024	Demolition	\$0.00
BPC-2023-00079	1/19/2024	Accessory Structure	\$150,000.00
BPC-2023-00097	1/25/2024	Alteration, Remodel, Renovation, Tenant upfit	\$187,000.00
BPC-2024-00005	1/26/2024	Demolition	\$17,500.00
BPC-2024-00002	1/29/2024	Accessory Structure	\$600,000.00
BPC-2023-00108	1/5/2024	Demolition	\$17,500.00
BPC-2023-00107	1/5/2024	Demolition	\$17,500.00
BPC-2023-00094	1/25/2024	Other	\$9,000.00

Residential Building Permits Issued 1/1/24-1/31/24			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPR-2023-00541	1/11/2024	Alteration, Remodel, Renovation, Tenant upfit	\$4,898.88
BPR-2023-00621	1/9/2024	Alteration, Remodel, Renovation, Tenant upfit	\$10,000.00
BPR-2024-00021	1/10/2024	Demolition	\$6,000.00
BPR-2023-00642	1/10/2024	Alteration, Remodel, Renovation, Tenant upfit	\$31,280.00
BPR-2023-00628	1/23/2024	Alteration, Remodel, Renovation, Tenant upfit	\$30,000.00
BPR-2023-00643	1/19/2024	Alteration, Remodel, Renovation, Tenant upfit	\$3,000.00
BPR-2024-00006	1/22/2024	Alteration, Remodel, Renovation, Tenant upfit	\$40,000.00
BPR-2023-00620	1/22/2024	Alteration, Remodel, Renovation, Tenant upfit	\$6,000.00
BPR-2024-00014	1/22/2024	Alteration, Remodel, Renovation, Tenant upfit	\$15,200.00
BPR-2023-00623	1/25/2024	Deck	\$14,548.00
BPR-2024-00032	1/26/2024	Addition	\$266,375.00
BPR-2024-00030	1/26/2024	Alteration, Remodel, Renovation, Tenant upfit	\$645,000.00
BPR-2023-00566	1/10/2024	Addition	\$210,000.00
BPR-2024-00046	1/30/2024	Alteration, Remodel, Renovation, Tenant upfit	\$25,130.00
BPR-2024-00026	1/30/2024	Alteration, Remodel, Renovation, Tenant upfit	\$7,100.00
BPR-2024-00027	1/31/2024	Addition	\$75,000.00
BPR-2023-00648	1/10/2024	Alteration, Remodel, Renovation, Tenant upfit	\$8,500.00
BPR-2023-00605	1/22/2024	Deck	\$10,630.00

Electrical Generator Permits Issued 1/1/24-1/31/24			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
ELR-2023-00827	1/2/2024	Generator	\$2,000.00
ELR-2024-00009	1/11/2024	Generator	\$12,449.00
ELR-2024-00037	1/25/2024	Generator	\$15,605.00
ELR-2024-00032	1/30/2024	Generator	\$11,249.00
ELR-2024-00033	1/30/2024	Generator	\$11,249.00



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 1.24.24
Permit # EX-24-00011
GPIN
Tax Map

LOCATION

Street Address
2121 PINE LN MAIDENS VA 23102

PROPERTY OWNERSHIP

Name VALERIE HAWK	Phone (804) 763-9906
Mailing Address 2121 PINE LN MAIDENS VA 23102	Email Whitetyger136@gmail.com

APPLICANT

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

CONTRACTOR

Name WOODFIN	Phone 804-730-5000
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number Expiration License Type Class 2701037820A 11.30.24 A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR WITH 200 AMP ATS			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$11,249			

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: *Jim Hall* Date: 1-24-2024

Approval: <u><i>Fisher</i></u> Permit Fee: <u>\$107.73</u>	Office Use Only Approval date: <u>2/2/24</u> Issued date: _____
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(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:
 Commercial
 Residential

Trade:
 Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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www.goochlandva.us/permitcalc

Date: 1-23/24
 Permit #: EX-2400032
 GPIN:
 Tax Map:

LOCATION

Street Address
 1803 TRIPLE ESTATE LANE CROZIER, VA 23039

PROPERTY OWNERSHIP

Name SYLVIA COX	Phone (804) 763-9906
Mailing Address 1803 TRIPLE ESTATE LANE CROZIER, VA 23039	Email Sfscox62@gmail.com

APPLICANT

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

CONTRACTOR

Name WOODFIN	Phone 804-730-5000			
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM			
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A	Expiration 11.30.24	License Type	Class A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR WITH 200 AMP ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 11,249.00			

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: 1-23-24

Approval: Fisher Office Use Only
 Permit Fee: \$107.73 Approval date: 1/30/24
 Issued date: _____

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type: Commercial
 Residential

Trade: Fire
 Electrical
 Mechanical
 Plumbing
 Gas

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.

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www.goochlandva.us/permitcalc

Date 1-5-24 1/30/24
Permit # EX-24-00033
GPIN
Tax Map

LOCATION

Street Address
 2500 FAIRGROUNDS RD MAIDENS, VA 23102

PROPERTY OWNERSHIP

Name Mr. JOYCE KENNEY	Phone (804) 556-3646
Mailing Address 2500 FAIRGROUNDS RD MAIDENS, VA 23102	Email

APPLICANT

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

CONTRACTOR

Name WOODFIN	Phone 804-730-5000
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A
Expiration 11.30.24	License Type Class A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR WITH 200 AMP ATS			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 11,249.00			

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: Joe Allen Date: 1-27-2024

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/30/24</u>
Permit Fee: <u>\$107.73</u>		Issued date: _____

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:	<input type="checkbox"/> Commercial
	<input checked="" type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input checked="" type="checkbox"/> Electrical
	<input type="checkbox"/> Mechanical
	<input type="checkbox"/> Plumbing
	<input type="checkbox"/> Gas

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

Date	1.8.24
Permit #	EX-24-00009
GPIN	
Tax Map	

LOCATION

Street Address	1270 HAMMOCK CIR., MANAKIN SABOT, VA 23103
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PROPERTY OWNERSHIP

Name	BRUCE KELLEHER	Phone	(804) 334-6201
Mailing Address	1270 HAMMOCK CIR., MANAKIN SABOT, VA 23103	Email	Brucemkelleherjr@gmail.com

APPLICANT

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

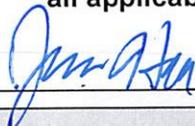
CONTRACTOR

Name	WOODFIN	Phone	804-730-5000
Mailing Address	1823 N HAMILTON ST. RICHMOND, VA 23230	Email	PERMITS@ASKWOODFIN.COM
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820A
		Expiration	11.30.24
		License Type	
		Class	A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR WITH (2) 200 AMP ATS			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)			
12,449.00			

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

Signature of Applicant:  Date: 1.8.24

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>1/11/24</u>
Permit Fee: <u>\$113.24</u>		Issued date: _____

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

REC: 12-12-23

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date
12.01.23

Permit #
11-2023-00820

GPIN

Tax Map

LOCATION

Street Address
1381 HERMITAGE RD MANAKIN SABOT, VA 23103-2310

PROPERTY OWNERSHIP

Name JAMES RIGGS	Phone (804) 784-9004
Mailing Address 1381 HERMITAGE RD MANAKIN SABOT, VA 23103-2310	Email JRIGGS@MONSECO.COM

APPLICANT

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

CONTRACTOR

Name WOODFIN	Phone 804-730-5000			
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM			
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A	Expiration 11.30.24	License Type	Class A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR WITH 100 AMP ATS

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$11,025.00			

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

Signature of Applicant: *James Hull* Date: 12.01.23

Approval: <u><i>Lisher</i></u>	Office Use Only	Approval date: <u><i>12-19-23</i></u>
Permit Fee: <u><i>\$106.70</i></u>		Issued date: _____

(owner's statement on back)

19-11-23



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

Rec: 12-5-23

P. O. Box 119 Goochland, VA 23063

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

Type:	<input type="checkbox"/> Commercial
	<input checked="" type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input checked="" type="checkbox"/> Electrical
	<input type="checkbox"/> Mechanical
	<input type="checkbox"/> Plumbing
	<input type="checkbox"/> Gas

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

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

Date 12.01.23
Permit # <i>EL-2023-00789</i>
GPIN
Tax Map

LOCATION

Street Address 2409 WHEATLANDS DR MANAKIN SABOT VA 23103

PROPERTY OWNERSHIP

Name NATHAN DEWITT SCHNEIDER	Phone 9015980900
Mailing Address 2409 WHEATLANDS DR MANAKIN SABOT VA 23103	Email F14AMDO@GMAIL.COM

APPLICANT

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

CONTRACTOR

Name WOODFIN		Phone 804-730-5000	
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230		Email PERMITS@ASKWOODFIN.COM	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A	Expiration 11.30.24	License Type A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR WITH 200 AMP AST			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$12,016.00			

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: *Jason Hall* Date: 12.01.23

Approval: <u><i>Fisher</i></u>	Office Use Only	Approval date: <u><i>12/13/23</i></u>
Permit Fee: <u><i>\$ 111.25</i></u>		Issued date: _____

(owner's statement on back)

11/27

11/27

11/27



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

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

Date: 12/14/23

Permit #: EUR-23-793

GPIN:

Tax Map:

LOCATION

Street Address: 2455 Hillstream Dr Rockville VA 23146

PROPERTY OWNERSHIP

Name: Brady McWhirter	Phone: (716) 912-3712
Mailing Address: 2455 Hillstream Dr Rockville VA 23146	Email: budmeword@msn.com

APPLICANT

Name: OWNER	Phone:
Address:	Email:

CONTRACTOR

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

DESCRIPTION OF WORK

Electrical for portable generator Install in Home Panel

# of Bathrooms:	Service Size:	Power Company:	Inquiry #:
Value of Work (required): \$1000.00			

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

Signature of Applicant: [Signature] Date: 12/16/2023

Office Use Only

Approval: Fisher Approval date: 12/16/23

Permit Fee: 102 Issued date: 12/16/23

Owner's Statement Required if Owner is the Applicant

I Brady McWhirter of (address) 2455 Hillstream Dr Rockville VA 23146

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

2455 Hillstream Dr Rockville VA 23146

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.

Brady McWhirter (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:	<input type="checkbox"/> Commercial
	<input type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input type="checkbox"/> Electrical
	<input type="checkbox"/> Mechanical
	<input type="checkbox"/> Plumbing
	<input type="checkbox"/> 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	11.17.23
Permit #	EUR-23-765
GPIN	
Tax Map	

LOCATION

Street Address	1708 MANAKIN RD MANAKIN SABOT, VA 23103
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PROPERTY OWNERSHIP

Name	Mr. MARK DAVIS	Phone	(804) 839-0214
Mailing Address	1708 MANAKIN RD MANAKIN SABOT, VA 23103	Email	MJDRHD@COMCAST.COM

APPLICANT

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

CONTRACTOR

Name	WOODFIN	Phone	804-730-5000
Mailing Address	1823 N HAMILTON ST. RICHMOND, VA 23230	Email	PERMITS@ASKWOODFIN.COM
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820A
		Expiration	11.30.24
		License Type	
		Class	A

DESCRIPTION OF WORK

22KW GENERATOR WITH 200 AMP ATS			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)	13232		

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

Signature of Applicant: James Allen Date: 11-20-2023

Approval:	<u>Fisher</u>	Office Use Only	Approval date:	<u>12/4/23</u>
Permit Fee:	<u>116.83</u>		Issued date:	<u>12/4/23</u>

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

Type:	<input type="checkbox"/> Commercial
	<input type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input type="checkbox"/> Electrical
	<input type="checkbox"/> Mechanical
	<input type="checkbox"/> Plumbing
	<input type="checkbox"/> 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 11.17.23
Permit # EL-23-746
GPIN
Tax Map

LOCATION

Street Address 619 ELM CREEK CIR MANAKIN-SABOT, VA 23103

PROPERTY OWNERSHIP

Name ROGER HART	Phone (804) 922-3328
Mailing Address 619 ELM CREEK CIR MANAKIN-SABOT, VA 23103	Email vmi7299@gmail.com

APPLICANT

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

CONTRACTOR

Name WOODFIN	Phone 804-730-5000
Mailing Address 1823 N HAMILTON ST. RICHMOND, VA 23230	Email PERMITS@ASKWOODFIN.COM
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2701037820A
Expiration 11.30.24	License Type A

DESCRIPTION OF WORK

22KW GENERATOR WITH 200 AMP ATS			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) 11,250.00			

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: *Joe Hart* Date: 11-20-2023

Approval: <u><i>Fisher</i></u>	Office Use Only	Approval date: _____
Permit Fee: <u>107.73</u>		Issued date: <u>12/4/23</u>

(owner's statement on back)



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: **Rec: 12-19-23**

Permit Number: **BPA-2023-COVAR**

GPIN/Tax Map: **7713-86-9895 / 66-1-0-6-0**

Issued: **1-10-24**

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 287 FLAG STATION RD	
	Owner SCOTT BRANLIT	Phone #
	Address 287 FLAG STATION RD	Email

APPLICANT INFORMATION	Applicant/Contact PITTS & ASSOCIATES, INC. - TONY PITTS		Phone # 804-405-2282
	Address 7714 WHITEPINE RD - N. CHESTERFIELD, VA		Email Tony @ pittsassociates inc.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 75'	Center Line Setback	Rear Setback 5'	CUP/Variance/COA A2
	Side Setback 5'	Side Setback 5'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: No change to footprints.			

Planning & Zoning Officer: **Daniel Floyd** Date: **12/29/23**

CONTRACTOR INFORMATION	Contractor PITTS & ASSOCIATES, INC		Phone 804-405-2282
	Address 7714 WHITEPINE RD N. CHESTERFIELD VA		Email Tony @ pittsassociates inc.com
	Contractor License Number 2705038947	Type CLASS A	Expiration 5-31-24

DESCRIPTION OF WORK	Scope of Work: RENOVATION OF EXISTING POOL HOUSE				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2 BATH	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)	Finished Sq. Ft. 0	Unfinished Sq. Ft. 250	Total Sq. Ft. 250	

Building Only - Excludes All Trades Permits

Value of Work	\$31,280
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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: **12-19-23**

Application Fee	\$ 165.82
State Levy Fee	\$ 3.06
Zoning Fee	\$ 25.00
RLD	\$
SWP	\$
Total	\$ 193.88

Rec: 12-8-23



BUILDING PERMIT APPLICATION

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

Application Date: 12/8/2023
 Permit Number: BPA-2023-0620
 GPIN/Tax Map: 58-53-0-11-0 / 7726-1A-4500
 Issued: 1-22-24
 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: 12140 Branch Overlook Dr Manakin Sabot VA 23103
 Owner: Scott Richards Phone #: 646-453-9689
 Address: 12140 Branch Overlook Dr Manakin Sabot VA 23103 Email: richardsc@comcast.net

APPLICANT INFORMATION
 Applicant/Contact: Scott Richards Phone #: 646-453-9689
 Address: 12140 Branch Overlook Dr Manakin Sabot VA 23103 Email: richardsc@comcast.net

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Reels Branch Proffer: Yes No Amount: _____ Date Paid: _____
 Front Setback: 30' Center Line Setback: _____ Rear Setback: 25' CUP/Variance/COA: _____
 Side Setback: 10' Side Setback: 10' Flood Zone: _____
 APPROVED REJECTED COMMENTS: Interior work only
 Planning & Zoning Officer: [Signature] Date: 1/18/2024

CONTRACTOR INFORMATION
 Contractor: Owner Phone: _____
 Address: _____ Email: _____
 Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: Study & Family Room w/ wet bar
Finished without basement add bedroom + bathroom/Flex room

Proposed Use: <u>living space</u>	Current Use: <u>Storage</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>2</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 checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.: <u>1350</u>	Unfinished Sq. Ft.: <u>90</u>	Total Sq. Ft.: <u>1440</u>	

Building Only - Excludes All Trades Permits

Value of Work: <u>\$6000.00</u>	Application Fee: <u>\$39.00</u>
	State Levy Fee: <u>\$78</u>
	Zoning Fee: <u>\$25.00</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: [Signature] Date: 12/8/2023



BUILDING PERMIT APPLICATION

Application Date: 12-21-2023

Permit Number: BPR-2024-0006

GPIN/Tax Map: 7723-35-9907 1663-0-4-0

Issued: 1-22-24

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>4 Partridge Hill Rd Richmond, Va 23238</u>	
	Owner <u>Jim Whitney PISA</u>	Phone # <u>804-212-5035</u>
	Address <u>4 Partridge Hill Rd Richmond, Va 23238</u>	Email <u>jwhitney@ccrmtx.com</u>

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

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Partridge Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40'</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Boyer</u> Date <u>1/19/2024</u>			

CONTRACTOR INFORMATION	Contractor <u>Walsh Builders Inc</u>	Phone <u>804-641-1591</u>
	Address <u>2810 Turner Rd Goochland, Va 23063</u>	Email <u>Walshbuilders@verizon.net</u>
	Contractor License Number <u>2701 084172</u>	Type <u>Building</u>

DESCRIPTION OF WORK	Scope of Work: <u>Kitchen Renovation & New Porch Additions</u>				
	Proposed Use <u>Dwelling</u>	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>—</u>	# of Bedrooms <u>—</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>Is Existing Space</u>	Unfinished Sq. Ft. <u>95</u>	Total Sq. Ft. <u>95</u>	

Building Only - Excludes All Trades Permits <u>NO ADD ON</u>		Application Fee \$ <u>195.84</u>
Value of Work <u>\$40,000</u>		State Levy Fee \$ <u>3.84</u>
		Zoning Fee \$ <u>25.00</u>
		RLD \$ <u>—</u>
		SWP \$ <u>—</u>
		Total \$ <u>220.84</u>

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

Signature of Applicant D. Kelly Date 12-21-23



RESIDENTIAL 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: **2024-1-9-24**

Permit Number:

BP2-2024-00032

GPIN/Tax Map:

7713-20-0895 / 06-1-0-6-0

Issued:

1/26/24

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. All information to be filled out completely.

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. A shrink swell soil report is required for all new construction.

OWNER INFORMATION	Site Address 287 Flag Station Rd	
	Owner Scott Branch	Phone #
	Address 287 Flag Station Rd	Email

APPLICANT INFORMATION	Applicant/Contact - Title Tony Pitts - Builder	Phone # 804-405-2282
	Address 7714 Whitestone Rd, N. Chesterfield, VA 23237	Email Tony@pittsassociates inc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer BLE Date 1/25/24			

CONTRACTOR INFORMATION	Contractor Pitts & Associates, Inc.	Phone 804-405-2282
	Address 7714 Whitestone Rd N. Chesterfield, VA 23237	Email Tony@pittsassociates inc.com
	Contractor License Number 2705038947	Type Class A

DESCRIPTION OF WORK	Scope of Work: LOW STRUCTURES OF NEW ATTACHED GARAGE to home w/ finished storage on end floor bathroom				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# of Bedrooms 0	# 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. 800	Unfinished Sq. Ft. 1072	Total Sq. Ft. 1964	

Building Only - Excludes All Trades Permits		Application Fee \$ 1210.00 State Levy Fee \$ 24.21 Zoning Fee \$ 25.00 RLD \$ _____ SWP \$ _____ Total \$ 1,259.90
Value of Work	\$266,375⁰⁰	
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. Only those individuals whose names are on the list of responsible officers can sign the permit application on behalf of a company, church, etc.		
Signature of Applicant	[Signature]	
Date	1-9-24	



RESIDENTIAL 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 1-9-24

Permit Number: 802-2024-00030

GPIN/Tax Map: 7713-86-9895/6610-60

Issued: 1/26/24

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. All information to be filled out completely.

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. A shrink swell soil report is required for all new construction.

OWNER INFORMATION	Site Address <u>287 Flag Station Rd</u>	
	Owner <u>Scott Branch</u>	Phone #
	Address <u>287 Flag Station Rd</u>	Email

APPLICANT INFORMATION	Applicant/Contact - Title <u>Tony Pitts - Builder</u>		Phone # <u>804 - 405 - 2282</u>
	Address <u>7714 Whitepine Rd N Chesterfield, VA 23237</u>		Email <u>Tony@pittsassociates inc. com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>55'</u>	Center Line Setback	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

Planning & Zoning Officer BLE Date 1/25/24

CONTRACTOR INFORMATION	Contractor <u>Pitts & Associates, Inc</u>		Phone <u>804-405-2282</u>
	Address <u>7714 WHITEPINE RD. N. CHESTERFIELD, VA 23237</u>		Email <u>Tony@pittsassociates inc. com</u>
	Contractor License Number <u>2705038947</u>	Type <u>CLASS A</u>	Expiration <u>5-31-24</u>

DESCRIPTION OF WORK	Scope of Work: <u>INTERIOR REMODEL INCLUDES: KITCHEN, BATH, LAUNDRY, AND BEDROOMS RENOVATIONS TO EXISTING RESIDENCE. MASTER + GUEST</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms	# of Bedrooms <u>4</u>	# of Floors <u>3</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$
Value of Work	<u>645,000⁺⁺</u>	State Levy Fee	\$ <u>58.29</u>
<p>I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Only those individuals whose names are on the list of responsible officers can sign the permit application on behalf of a company, church, etc.</p> <p>Signature of Applicant: <u>[Signature]</u> Date: <u>1-9-24</u></p>		Zoning Fee	\$ <u>25.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>2,997.79</u>



BUILDING PERMIT APPLICATION

Application Date: **1-3-24**Permit Number: **BPA 2024-0023**GPIN/Tax Map: **56-1-0-58-0/679666-6026**Issued: **1-26-24**

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 1487 SHALLON WELL RD	
	Owner FULLSTREAM FARM	Phone # 804-370-1865
	Address HENRY A SHIELD 1289 FULLSTREAM FARM RD	

APPLICANT INFORMATION	Applicant/Contact HENRY A SHIELD	Phone #
	Address 1289 FULLSTREAM FARM RD, MANAKIN-SABO, VA	

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid 2/20/2024
	Front Setback 60' 25"	Center Line Setback 20' 25"	Rear Setback 35'	CUP/Variance/COA
	Side Setback 20'	Side Setback 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer BLE Date 1/25/24			

CONTRACTOR INFORMATION	Contractor HENRY A. SHIELD OWNER	Phone 804-370-1865
	Address 1289 FULLSTREAM FARM RD. MANAKIN-SABO, VA	
	Contractor License Number	Type LS103

DESCRIPTION OF WORK	Scope of Work: REPLACE CURRENT DOUBLE WIDE WITH NEW DOUBLE WIDE SAME FT <i>model + Serial # Required</i> <i>New 2023 Dinwiddie - R30</i> <i>3 BED + BATH</i>				
	Proposed Use RESIDENCE	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 3	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (Y) No (N)	Finished Sq. Ft. 1580	Unfinished Sq. Ft. 105	Total Sq. Ft. 1580 1685	

Building Only - Excludes All Trades Permits

Value of Work 104,000	
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant **Henry A Shield** Date **1/29/2023**

Application Fee	\$ 480.00
State Levy Fee	\$ 9.60
Zoning Fee	\$ 50.00
RLD	\$
SWP	\$
Total	\$ 539.60

Dec: 1-9-24



RESIDENTIAL 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: 1-18-24
Permit Number: BLD-2024-0046
GPIN/Tax Map: 28-49-8-35-01-7715-57-2154
Issued: 1-30-24

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. All information to be filled out completely.

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. A shrink swell soil report is required for all new construction.

OWNER INFORMATION	Site Address 852 Elmslie Lane, Manakin-Sabot, VA 23103	
	Owner Hoffmeyer, Adele & Richard	Phone # 201.519.1627
	Address 9280 Staple Lane Mechanicsville VA 23116	Email arec1@aol.com

APPLICANT INFORMATION	Applicant/Contact - Title Mike Bowes - GC		Phone # 804.814.2357
	Address 9280 Staple Lane Mechanicsville VA 23116		Email mike.bowes.jr@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Kinloch	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 30' from driveway	Center Line Setback	Rear Setback 50' from driveway	CUP/Variance/COA
	Side Setback 15' from driveway	Side Setback 15' from driveway	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Interior work only Planning & Zoning Officer BLE Date 1/22/24			

CONTRACTOR INFORMATION	Contractor My Space Remoeling Solutions		Phone 804.814.2357
	Address 9280 Staple Lane Mechanicsville VA 23116		Email mike.bowes.jr@gmail.com
	Contractor License Number 2705168415	Type Class A RBC	Expiration 11.30.25

DESCRIPTION OF WORK	Scope of Work: Finish out bonus room for family room <small>Frame remaining partitions of unfinished bonus room to include electrical and lighting requirements, insulation, drywall, flooring, trim and paint.</small>			
	Proposed Use Family Room - Interior dwelling	Current Use storage	Environmental Impacts (stream crossing, wetlands, amt land disturbed) n/a	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms
	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. 357	Unfinished Sq. Ft. 357	Total Sq. Ft.

Building Only - Excludes All Trades Permits		Application Fee	\$
Value of Work	31,380.00 25,130	State Levy Fee	\$ 2.50
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Only those individuals whose names are on the list of responsible officers can sign the permit application on behalf of a company, church, etc.		Zoning Fee	\$ 25.00
		RLD	\$
		SWP	\$
		Total	\$ 152.59
Signature of Applicant		Date	1-9-24



BUILDING PERMIT APPLICATION

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

Residential Commercial

Application Date: 1/10/24
 Permit Number: BPL-2024-00027

GPIN/Tax Map: 7115-08-0330 / 57-1-0-4A-A
 Issued: 1/31/24

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 1225 MANAKIN rd MANAKIN Sabot, VA 23103	
	Owner Gate LLC (George Poulos)	Phone # 804-399-8897
	Address 1233 MANAKIN rd MANAKIN Sabot, VA 23103	Email Gnpoulos63@gmail

APPLICANT INFORMATION	Applicant/Contact George Poulos	Phone # SAME
	Address 1233 MANAKIN rd MANAKIN Sabot, VA 23103	Email SAME

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 100'	Center Line Setback	Rear Setback 35'	CUP/Variance/COA
	Side Setback 20'	Side Setback 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: BLE Date: 1/29/24			

CONTRACTOR INFORMATION	Contractor Owner	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: 276 sq.ft addition, Closet / Bathroom				
	Proposed Use Closet / Bathroom	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 3	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 276	Unfinished Sq. Ft.	Total Sq. Ft. 276	

Building Only - Excludes All Trades Permits		Application Fee: \$ 300.00 State Levy Fee: \$ 6.99 Zoning Fee: \$ 20 RLD: \$ SWP: \$ Total: \$ 387.99
Value of Work 75K		
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	Date 1-10-24	