



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 09/01/2025 and 09/30/2025

Permit Number	Issued Date	Structure Type	Value
BPR-2025-00271	09/23/2025	New Construction	\$309,262.50
BPR-2025-00364	09/03/2025	New Construction	\$450,000.00
BPR-2025-00450	09/26/2025	New Construction	\$215,000.00
BPR-2025-00444	09/03/2025	New Construction	\$222,450.00
BPR-2025-00451	09/26/2025	New Construction	\$215,000.00
BPR-2025-00446	09/16/2025	New Construction	\$350,000.00
BPR-2025-00459	09/04/2025	New Construction	\$300,000.00
BPR-2025-00452	09/26/2025	New Construction	\$215,000.00
BPR-2025-00479	09/11/2025	New Construction	\$550,000.00
BPR-2025-00474	09/16/2025	New Construction	\$235,125.00
BPR-2025-00476	09/11/2025	New Construction	\$284,062.50
BPR-2025-00463	09/16/2025	New Construction	\$238,050.00
BPR-2025-00467	09/16/2025	New Construction	\$234,975.00
BPR-2025-00470	09/29/2025	New Construction	\$331,645.00
BPR-2025-00521	09/29/2025	New Construction	\$400,000.00
BPR-2025-00486	09/29/2025	New Construction	\$293,137.50
BPR-2025-00487	09/29/2025	New Construction	\$233,475.00
BPR-2025-00505	09/29/2025	New Construction	\$250,650.00

Total SFD: 18

Total Value:

\$5,327,832.50

Commercial Building Permits Issued 9/1/25 - 9/30/25

Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
ROOF-2025-00005	9/15/2025	Roof Replacement (Commercial)	\$36,463.00
CELL-2025-00038	9/5/2025	Cell Tower	\$15,000.00
BPC-2025-00046	9/4/2025	Accessory Structure	\$206,000.00
BPC-2025-00068	9/17/2025	Other	\$15,000.00
BPC-2025-00042	9/17/2025	Alteration, Remodel, Renovation, Tenant upfit	\$120,000.00
BPC-2025-00075	9/18/2025	Alteration, Remodel, Renovation, Tenant upfit	\$4,200.00
SIGN-2025-00013	9/25/2025	Freestanding	\$5,000.00
BPC-2025-00069	9/9/2025	Alteration, Remodel, Renovation, Tenant upfit	\$150,000.00
CELL-2025-00037	9/29/2025	Cell Tower	\$28,000.00
BPC-2025-00065	9/2/2025	Demolition	\$48,000.00

Residential Building Permits Issued 9/1/25 - 9/30/25

Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
BPR-2025-00441	9/2/2025	Accessory Structure	\$150,000.00
BPR-2025-00481	9/3/2025	Alteration, Remodel, Renovation, Tenant upfit	\$30,000.00
BPR-2025-00473	9/3/2025	Deck	\$30,000.00
BPR-2025-00415	9/3/2025	Accessory Structure	\$39,875.00
BPR-2025-00337	9/4/2025	Accessory Structure	\$45,375.00
BPR-2025-00322	9/4/2025	Alteration, Remodel, Renovation, Tenant upfit	\$2,720.00
BPR-2025-00436	9/8/2025	Deck	\$14,000.00
BPR-2025-00446	9/16/2025	New Construction	\$350,000.00
BPR-2025-00484	9/8/2025	Accessory Structure	\$36,000.00
BPR-2025-00501	9/10/2025	Alteration, Remodel, Renovation, Tenant upfit	\$50,000.00
BPR-2025-00465	9/3/2025	Alteration, Remodel, Renovation, Tenant upfit	\$25,000.00
BPR-2025-00504	9/5/2025	Deck	\$35,000.00
BPR-2025-00496	9/16/2025	Accessory Structure	\$33,000.00
BPR-2025-00497	9/16/2025	Alteration, Remodel, Renovation, Tenant upfit	\$10,000.00
BPR-2025-00502	9/17/2025	Alteration, Remodel, Renovation, Tenant upfit	\$10,370.03
BPR-2025-00509	9/18/2025	Alteration, Remodel, Renovation, Tenant upfit	\$90,000.00
BPR-2025-00483	9/18/2025	Photo Voltaic	\$19,710.00
BPR-2025-00489	9/18/2025	Photo Voltaic	\$11,130.00
BPR-2025-00461	9/2/2025	Photo Voltaic	\$14,500.00
BPR-2025-00513	9/19/2025	Accessory Structure	\$60,000.00
BPR-2025-00507	9/18/2025	Accessory Structure	\$27,445.00
BPR-2025-00544	9/22/2025	Demolition	\$2,000.00
BPR-2025-00515	9/22/2025	Alteration, Remodel, Renovation, Tenant upfit	\$21,585.70
BPR-2025-00034	9/22/2025	Demolition	\$25,000.00
BPR-2025-00529	9/23/2025	Addition	\$125,000.00
BPR-2025-00520	9/23/2025	Addition	\$11,250.00
BPR-2025-00488	9/9/2025	Addition	\$76,345.00
BPR-2025-00499	9/23/2025	Accessory Structure	\$80,000.00
BPR-2025-00467	9/16/2025	New Construction	\$234,975.00
BPR-2025-00271	9/23/2025	New Construction	\$309,262.50
BPR-2025-00475	9/26/2025	Accessory Structure	\$98,133.00
BPR-2025-00450	9/26/2025	New Construction	\$215,000.00
BPR-2025-00476	9/11/2025	New Construction	\$284,062.50

BPR-2025-00451	9/26/2025	New Construction	\$215,000.00
BPR-2025-00452	9/26/2025	New Construction	\$215,000.00
BPR-2025-00482	9/11/2025	Alteration, Remodel, Renovation, Tenant upfit	\$26,180.99
BPR-2025-00459	9/4/2025	New Construction	\$300,000.00
BPR-2025-00435	9/4/2025	Addition	\$30,000.00
BPR-2025-00486	9/29/2025	New Construction	\$293,137.50
BPR-2025-00470	9/29/2025	New Construction	\$331,645.00
POLR-2025-00020	9/11/2025	In Ground	\$40,000.00
BPR-2025-00493	9/29/2025	Photo Voltaic	\$15,090.00
BPR-2025-00505	9/29/2025	New Construction	\$250,650.00
POLR-2025-00019	9/5/2025	In Ground	\$17,775.00
BPR-2025-00463	9/16/2025	New Construction	\$238,050.00
BPR-2025-00548	9/19/2025	Other	\$5,000.00
BPR-2025-00479	9/11/2025	New Construction	\$550,000.00
BPR-2025-00531	9/23/2025	Accessory Structure	\$8,233.12
BPR-2025-00444	9/3/2025	New Construction	\$222,450.00
BPR-2025-00464	9/9/2025	Addition	\$33,800.00
BPR-2025-00480	9/2/2025	Deck	\$12,400.00
BPR-2025-00008	9/23/2025	Alteration, Remodel, Renovation, Tenant upfit	\$40,000.00
BPR-2025-00534	9/25/2025	Addition	\$17,875.00
BPR-2025-00478	9/10/2025	Addition	\$50,000.00
BPR-2025-00364	9/3/2025	New Construction	\$450,000.00
BPR-2025-00474	9/16/2025	New Construction	\$235,125.00
BPR-2025-00487	9/29/2025	New Construction	\$233,475.00
BPR-2025-00521	9/29/2025	New Construction	\$400,000.00
BPR-2025-00490	9/10/2025	Deck	\$22,000.00
POLR-2025-00021	9/29/2025	In Ground	\$60,000.00

Electrical Generator Permits Issued 9/1/25 - 9/30/25			
Permit Number	Permit Issue Date	Permit Work Class	Permit Valuation
ELR-2025-00566	9/2/2025	Generator	\$10,000.00
ELR-2025-00597	9/11/2025	Generator	\$8,000.00
ELR-2025-00600	9/12/2025	Generator	\$10,000.00
ELR-2025-00585	9/8/2025	Generator	\$15,000.00
ELR-2025-00604	9/16/2025	Generator	\$10,000.00
ELR-2025-00561	9/5/2025	Generator	\$15,000.00
ELC-2025-00088	9/11/2025	Generator	\$38,453.10
ELC-2025-00082	9/16/2025	Generator	\$325,000.00
ELR-2025-00612	9/18/2025	Generator	\$9,500.00
ELR-2025-00623	9/23/2025	Generator	\$10,000.00
ELR-2025-00618	9/22/2025	Generator	\$2,075.00
ELR-2025-00634	9/24/2025	Generator	\$12,000.00
ELR-2025-00631	9/24/2025	Generator	\$2,200.00
ELR-2025-00564	9/3/2025	Generator	\$10,000.00
ELR-2025-00567	9/2/2025	Generator	\$10,000.00
ELR-2025-00632	9/25/2025	Generator	\$13,800.00
ELR-2025-00641	9/26/2025	Generator	\$100.00
ELR-2025-00626	9/24/2025	Generator	\$2,000.00

ELR-2025-00633	9/30/2025	Generator	\$20,400.00
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Rec: 9-3-25



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: 9-5-25

Permit Number: PPH-202500520

GPIN/Tax Map: 1-1-0-20-A / 6804-87-0381

Issued: 9-23-25

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: 5355 DUVAL ROAD KENTS STORE VA 23084

Owner: JAMES M. WALDRUP Phone #: 540-938-0001

Address: JW2691234@gmail.com Email: JW2691234@gmail.com

APPLICANT INFORMATION

Applicant/Contact - Title: JAMES M. WALDRUP Phone #: _____

Address: 5355 DUVAL ROAD KENTS STORE VA 23084 Email: _____

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
Front Setback <u>82.5-ft</u>	Center Line Setback	Rear Setback <u>5-ft</u>	CUP/Variance/COA
Side Setback <u>5-ft</u>	Side Setback <u>5-ft</u>	Flood Zone <u>NO</u>	

APPROVED REJECTED COMMENTS: _____

Planning & Zoning Officer: ADAM BARBER Date: 9/15/2025

CONTRACTOR INFORMATION

Contractor: James M. Waldrup - Owner Phone: _____

Address: 5355 DUVAL ROAD KENTS STORE VA 23084 Email: _____

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK

Scope of Work: INSTALL A 30' X 25' CARPORT

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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		<u>750</u>	<u>750</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$11,250.00</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. 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: James M. Waldrup Date: 9-3-2025

Application Fee	\$ <u>6398</u>
State Levy Fee	\$ <u>125</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>88.88</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I James M. Walby of (address) 5355 DUYAL ROAD KEWINGTON VA 22089 affirm that I am the owner of a certain tract of parcel

of land located at 5355 DUYAL ROAD 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.

James M. Walby 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable:
RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS
STORIES 1
CONSTRUCTION TYPE VB
OCCUPANT LOAD —
CODE EDITION 21
FIRE SPRINKLER —
FIRE ALARM —
MODIFICATION —

APPROVAL MICHAEL BROOKING DATE 9-22-25
Code Official

Rec: 9-2-25



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: 9/2/25
 Permit Number: DPH-2025-00529
 GPIN/Tax Map: 6779-06-7700/31-1-0-59-0
 Issued: 9-23-25

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>2844 PONY FARM RD.</u>	
	Owner <u>ANDREW DEVAULT</u>	Phone # <u>(904) 861-5991</u>
	Address <u>2844 PONY FARM RD.</u>	Email <u>andrew.w.devault@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact - Title <u>BILL SEAY</u>		Phone # <u>(804) 240-1123</u>
	Address <u>3301 NUTTREE WOODS PL. MIDLOTHIAN VA 23112</u>		Email <u>wescobuildersinc@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>35-FT TO ACCESS EXISTING</u>	Center Line Setback	Rear Setback <u>35-FT</u>	CUP/Variance/COA
	Side Setback <u>20-FT</u>	Side Setback <u>20-FT</u>	Flood Zone <u>NO</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>9/15/25 WESCO BUILDERS INC</u> Planning & Zoning Officer: <u>ADAM BURBEE</u> Date: <u>9/15/25</u> <u>WESCO BUILDERS INC@gmail.com</u>			

CONTRACTOR INFORMATION	Contractor <u>WESCO BUILDERS INC</u>		Phone <u>(804) 240-1123</u>
	Address <u>3301 NUTTREE WOODS PL MIDLOTHIAN VA 23112</u>		Email <u>wescobuildersinc@gmail.com</u>
	Contractor License Number <u>2705084978</u>	Type <u>CLASS A CONTRACTOR</u>	Expiration <u>5/31/26</u>

DESCRIPTION OF WORK	Scope of Work: <u>DEMO + REPLACE KITCHEN, BATH, CLOSET - INTERIOR REMOVE AND REPLACE FRONT + REAR PORCHES, EXTEND FOUNDATION @ FRONT FOYER 4' x 8'</u>				
	Proposed Use <u>RESIDENTIAL</u>	Current Use <u>RESIDENTIAL</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>1220 32</u>	Unfinished Sq. Ft. <u>420 800</u>	Total Sq. Ft. <u>3440 832.00</u>	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>574.50</u> State Levy Fee \$ <u>11.29</u> Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>610.99</u>
Value of Work	<u>\$125,000</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. 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	<u>[Signature]</u>	
Date	<u>9/02/25</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: _____ Telephone: _____

Mailing Address: _____

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

PERMIT FEE SCHEDULE

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

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS
STORIES 2
CONSTRUCTION TYPE VB
OCCUPANT LOAD 6
CODE EDITION 21
FIRE SPRINKLER
FIRE ALARM
MODIFICATION

APPROVAL MICHAEL BROOKING DATE 9-22-25
Code Official



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: **Rec: 7-17-25**

Permit Number: **BPR-2025-00446**

GPIN/Tax Map: **28-1-096-R1 6738-36-3489**

Issued: **9-16-25**

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 4340 River Rd West	Phone # 804-221-2291
	Owner Herbert H Bolling	Email HBolling@aol.com
	Address 5918 ESSLING Rd	

APPLICANT INFORMATION	Applicant/Contact - Title Herbert H Bolling OWNER	Phone # 804-221-2291
	Address 5918 ESSLING Rd	Email hbolling@aol.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 162.5' CL	Center Line Setback 162.5' CL	Rear Setback 35'	CUP/Variance/COA
	Side Setback 35' east P (commit)	Side Setback 20'	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS:		

Planning & Zoning Officer: **BLE** Date: **9/15/25**

CONTRACTOR INFORMATION	Contractor Herbert H Bolling	Phone 804-221-2291
	Address 5918 ESSLING Rd	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: SFD W/ ATTACHED GARAGE AND GARAGE IN BASEMENT.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 9200		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3 1/2	# 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. 2430	Unfinished Sq. Ft. 2240	Total Sq. Ft. 4,670	

Building Only - Excludes All Trades Permits

Value of Work 350,000.00	Application Fee \$1587.00
	State Levy Fee \$31.74
	Zoning Fee \$50.00
	RLD \$
	SWP \$
	Total \$1668.74

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: **Herbert H Bolling** Date: **6-25**

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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Herbert H Bolling of (address) 5918 ESSLING Rd affirm that I am the owner of a certain tract of parcel

of land located at 4340 River Rd West 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.

Herbert H. Bolling 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE _____
STORIES _____
CONSTRUCTION TYPE _____
OCCUPANT LOAD _____
CODE EDITION _____
FIRE SPRINKLER _____
FIRE ALARM _____
MODIFICATION _____

APPROVAL _____ DATE _____

Code Official



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: 8/11/25
 Permit Number: 002-00005-00079
 GPIN/Tax Map: 6787-25-8243 32-18-0-27-0
 Issued: 9-11-25
 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: 1701 Bridgewater BP Maidens, VA 23102
 Owner: Southern Traditions, LLC Phone #: 804-241-5405
 Address: 4013 Riverplace Ter Glen Allen VA 23059 Email: MCARTER@Southerntraditions.com

APPLICANT INFORMATION
 Applicant/Contact - Title: Megan Carter, VP Phone #: Same homes.com
 Address: Same Email: Same

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Bridgewater Proffer: Yes No Amount: \$24,433 Date Paid: _____
 Front Setback: 5' Center Line Setback: N/A Rear Setback: 35' CUP/Variance/COA: _____
 Side Setback: 15' min. 135' total Side Setback: 15' min/ 35' total Flood Zone: _____
 APPROVED REJECTED COMMENTS: Nothing not be behind BL
 Planning & Zoning Officer: BLE Date: 9/10/25

CONTRACTOR INFORMATION
 Contractor: Southern Traditions, LLC Phone: Same
 Address: 4013 Riverplace Ter Glen Allen, VA 23059 Email: Same
 Contractor License Number: 2705082094 Type: A, C, B, R, B, C Expiration: 2-28-26

DESCRIPTION OF WORK
 Scope of Work: Construct a new single family house w/ attached garage

Proposed Use <u>Single Family house</u>	Current Use <u>Vacant</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A 12,000 sqft</u>		
SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>4.5</u>	# of Bedrooms <u>4</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 <u>2908</u>	Finished Sq. Ft. <u>1352</u>	Unfinished Sq. Ft. <u>420</u>	Total Sq. Ft. <u>1530</u>	

Building Only - Excludes All Trades Permits
 Value of Work: \$550,000
 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. 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: Megan Carter Date: 8/11/25

Application Fee	\$ <u>2487</u>
State Levy Fee	\$ <u>40.74</u>
Zoning Fee	\$ <u>50</u>
RLD	\$ <u>100</u>
SWP	\$ <u>200</u>
Total	\$ <u>2880.74</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: Parker Pollard Wilton Peader Telephone: 804-262-3600

Mailing Address: 6802 Paragon Pl #205 Richmond, VA 23230

OWNER'S STATEMENT

I Megan Carter, VP of (address) 4013 Riverplace Ter affirm that I am the owner of a certain tract of parcel Glen Allen VA 23054

of land located at 1704 Bridgewater Bluff Maidens 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.

Megan Carter, VP Southern Traditions, LLC
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 \$ 1000 above \$ 4000

Add 2% State Levy to fee

Other fees that may be applicable:

RLD \$100.00 for disturbing over 10,000 square feet

Stormwater \$200 in certain subdivisions

Zoning Residential SFD \$50.00

Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5

STORIES 2

CONSTRUCTION TYPE VB.

OCCUPANT LOAD 8

CODE EDITION 21

FIRE SPRINKLER

FIRE ALARM

MODIFICATION

APPROVAL MICHAEL BROOKING DATE 9.3.25

Code Official

Rec: 8-15-25



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: 8/15/2025 -
 Permit Number: BPA-2025-00484
 GPIN/Tax Map: 21-14-0-1-0 / 6850-55-1259
 Issued: 9-8-25-

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 3110 Peters Way	
	Owner Ken Spaulding	Phone # 804 539-5674
	Address 3110 Peters Way	Email spauldingken@msn.com

APPLICANT INFORMATION	Applicant/Contact - Title owner	Phone #
	Address 3110 Peters Way	Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision SPRING VALLEY	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 55-FT	Center Line Setback	Rear Setback 5-FT	CUP/Variance/COA
	Side Setback 5-FT	Side Setback 5-FT	Flood Zone NO	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>ADAM BRADY</u> Date <u>8/22/2025</u>			

CONTRACTOR INFORMATION	Contractor OWNER	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: detached Concrete slab and metal building garage				
	Proposed Use garage	Current Use none	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 2000 sq ft		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0	# of Floors 1
	Will a foundation be installed within 20 ft. of any septic system components, including reserve drain fields? Yes / No	Finished Sq. Ft. 0	Unfinished Sq. Ft. 1200	Total Sq. Ft. 1200	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>174.00</u> State Levy Fee \$ <u>3.48</u> Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>202.48</u>
Value of Work	\$36,000	
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. 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 <u>Ken Spaulding</u>	Date <u>8/15/2025</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Ken Spaulding of (address) 3110 Peters Way, Gum Spring, VA affirm that I am the owner of a certain tract of parcel

of land located at 3110 Peters Way, Gum Spring 23065 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.

Ken Spaulding 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5

STORIES _____

CONSTRUCTION TYPE V3

OCCUPANT LOAD _____

CODE EDITION 2021

FIRE SPRINKLER _____

FIRE ALARM _____

MODIFICATION _____

APPROVAL [Signature]

Code Official

DATE 9/15/2025



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: **REC: 8-13-25**

Permit Number: **2018-2025-00019**

GPIN/Tax Map: **32-19-0-2-0/6779-25-8857**

Issued: **9-5-25**

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 2802 Perkinsville Road, Maidens, VA 23102	
	Owner Mark S. Jones	Phone # 804.852.3045
	Address 2802 Perkinsville Road, Maidens, VA 23102	Email mark@fluentnetwork.com
APPLICANT INFORMATION	Applicant/Contact - Title Self	
	Address 2802 Perkinsville Road, Maidens, VA 23102	Phone # 804.852.3045 Email MarkofFluentnetwork.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 55 FT	Center Line Setback	Rear Setback 5 FT	CUP/Variance/COA
	Side Setback 5 FT	Side Setback 5 FT	Flood Zone NO	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS		Date 9/5/2025	

Planning & Zoning Officer: **Adam [Signature]**

CONTRACTOR INFORMATION	Contractor SELF		Phone
	Address		Email mark@fluentnet
	Contractor License Number	Type	Expiration work.com

DESCRIPTION OF WORK	Scope of Work: I install 16' x 32' In Ground Pool With Fence barrier				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	Private	WATER 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.	

512 SF **512 SF**

Building Only - Excludes All Trades Permits		Application Fee \$ 91.99
Value of Work 17,775		
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.		State Levy Fee \$ 1.84
Signature of Applicant Mark S. Jones		Zoning Fee \$ 25.00
Date 8-13-25		RLD \$
		SWP \$
		Total \$ 118.83

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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Mark S. Jones of (address) 2802 Parkinsville Road, Maidens, VA 23102 affirm that I am the owner of a certain tract of parcel

of land located at 2802 Parkinsville Road, Maidens, VA 23102 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.

Mark S. Jones 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5
STORIES _____
CONSTRUCTION TYPE _____
OCCUPANT LOAD _____
CODE EDITION 2021 VRC
FIRE SPRINKLER _____
FIRE ALARM _____
MODIFICATION _____

APPROVAL [Signature]
Code Official

DATE 9/3/2025



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: **Rec: 7-7-25**

Permit Number: **DPA-2025-00415**

GPIN/Tax-Map: **55-18-0-1A-0 / 6776-95-4001**

Issued: **9-3-25**

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: **1552 Beauverdun Creek Rd Crozier VA**

Owner: **JEFF Craig**

Address: **Sam**

Phone #: _____

Email: **FunKology2012@gmail.com**

APPLICANT INFORMATION

Applicant/Contact - Title: **Mitchell Pereira**

Address: **14106 Aidenzato Rd Middlethorpe VA 23114**

Phone #: **804-216-1522**

Email: **MAPConstruction36@gmail.com**

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: **DEERFIELD**

Proffer: Yes No

Amount: _____ Date Paid: _____

Front Setback: **87-feet** Center Line Setback: **107-feet** Rear Setback: **5-feet** CUP/Variance/COA: _____

Side Setback: **5-feet** Side Setback: **5-feet** Flood Zone: **No**

APPROVED REJECTED COMMENTS: **NO KITCHEN ALLOWED**

Planning & Zoning Officer: **ADAM BURGER** Date: **8/5/2025**

CONTRACTOR INFORMATION

Contractor: **MAP Construction Inc**

Address: **14106 Aidenzato Rd Middlethorpe VA 23114**

Phone: **804 216 1522**

Email: **MAPConstruction36@gmail.com**

Contractor License Number: **2705027997** Type: **B** Expiration: **03-31-27**

DESCRIPTION OF WORK

Scope of Work: **Detached Garage upstairs Frame but unfinished garage**

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, and land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of Floors 2
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Finished Sq. Ft.	Unfinished Sq. Ft. 1450	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	32,000 \$39,875	Application Fee	\$ 19.44
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.		State Levy Fee	\$ 3.83
		Zoning Fee	\$ 25.00
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ 220.27

Signature of Applicant: **MR** Date: **7-6-25**

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: _____ Telephone: _____

Mailing Address: _____

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

PERMIT FEE SCHEDULE

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

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5

STORIES _____

CONSTRUCTION TYPE _____

OCCUPANT LOAD _____

CODE EDITION _____

FIRE SPRINKLER _____

FIRE ALARM _____

MODIFICATION _____

APPROVAL 

Code Official

DATE 8/28/2025

Rec 6-12-25



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: 5/28/25

Permit Number: EPA-2025-00364

GPIN/Tax Map: 6749-28-4569/ 20-1-0-32-0

Issued: 9-3-25

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: 3879 Robinson Road, Goochland VA 23066
Owner: Robert & Cynthia Hart
Phone #: 859-808-0431
Address: 15509 Fox Gate Court Midlothian Va 23111

APPLICANT INFORMATION
Applicant/Contact - Title
Address: 15509 Fox Gate Court Midlothian Va 23111
Phone #
Email: Kenton@kentonconstruction.com

TO BE COMPLETED BY ZONING DEPARTMENT
Subdivision, Proffer (Yes/No), Amount, Date Paid
Front Setback: 55' Off Row, Center Line Setback, Rear Setback: 35
Side Setback: 20, Side Setback: 20, Flood Zone
APPROVED [checked] REJECTED [] COMMENTS: property line was vacated
Planning & Zoning Officer: A Barnes Date: 9-3-2025

CONTRACTOR INFORMATION
Contractor: Kenton Construction Inc
Phone: 804-869-3794
Address: 4303 Old River Trail Powhatan Va 23139
Email: kenton@kentonconstruction.com
Contractor License Number: 2705097394
Type: CBC RBC
Expiration: 7-31-25

DESCRIPTION OF WORK
Scope of Work: Single family dwelling with attached garage.
Proposed Use, Current Use, Environmental Impacts (stream crossing, wetlands, amt land disturbed): 40,000 sq ft
SEWER: Public/Private, WATER: Public/Private
of Bathrooms: 2, # 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: No
Finished Sq. Ft.: 2174, Unfinished Sq. Ft.: 1464, Total Sq. Ft.: 3638

Building Only - Excludes All Trades Permits
Value of Work: 450,000

Table with 2 columns: Fee Name, Amount. Application Fee \$2027.00, State Levy Fee \$40.74, Zoning Fee \$50.00, RLD \$100.00, SWP \$, Total \$2227.74

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: 5-28-25

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: _____ Telephone: _____

Mailing Address: _____

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

PERMIT FEE SCHEDULE

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

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS
STORIES 2
CONSTRUCTION TYPE VB
OCCUPANT LOAD 6
CODE EDITION R21
FIRE SPRINKLER -
FIRE ALARM -
MODIFICATION -

APPROVAL MICHAEL BROOKING

Code Official

DATE 07.16.25

HOC 8-8-25



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: 8-8-2025

Permit Number: BPR 2025-00480

GPIN/Tax Map: 26-2-0-2-D

Issued: 9-2-25

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 5361 River Rd W	
	Owner Alva Allen	Phone # 804-241-0862
	Address 5361 River Rd W Goochland, VA 23063	Email marciemoo@gmail.com

APPLICANT INFORMATION	Applicant/Contact - Title Alva Allen - Property Owner		Phone #
	Address 5361 River Rd W Goochland, VA 23063		Email

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback 100-Ft	Center Line Setback 155-Ft	Rear Setback 35-Ft	CUP/Variance/COA
	Side Setback 20-Ft	Side Setback 20-Ft	Flood Zone NO	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Adam Barber</u> Date <u>8/20/25</u>			

CONTRACTOR INFORMATION	Contractor Alva Allen		Phone
	Address same		Email
	Contractor License Number	Type	Expiration

DESCRIPTION OF WORK	Scope of Work: Furnish and install one 12' X 12' exterior deck				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of Floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>69.16</u>
Value of Work	<u>\$12,400</u>	State Levy Fee	\$ <u>1.36</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. 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	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>94.16</u>
Signature of Applicant <u>Alva Allen</u>		Date <u>8-8-25</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Alva Allen of (address) 5361 River Rd. W affirm that I am the owner of a certain tract of parcel Goochland, VA 23063

of land located at 5361 River Rd. W 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.

Alva Allen 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5
STORIES _____
CONSTRUCTION TYPE VB
OCCUPANT LOAD _____
CODE EDITION 2021
FIRE SPRINKLER _____
FIRE ALARM _____
MODIFICATION _____

APPROVAL [Signature]
Code Official

DATE 9/2/2025



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: 7/16/25
 Permit Number: BL-2025-00111
 GPIN/Tax Map: 6766-08-7733 | 1402-030
 Issued: 9/13/25
 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: 2787
Lot 3 River Road West Goochland VA 23063
 Owner: Trek Properties LLC Phone #: 540-478-3110
 Address: 3609 Milbranch Pl Henrico VA 23233 Email:

APPLICANT INFORMATION
 Applicant/Contact - Title: Decem Design Build LLC Contractor Phone #: 434-981-8822
 Address: 1700 Bridgewater Ct. Maidens VA 23102 Email: decemdesignbuild@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
Front Setback <u>55'</u>	Center Line Setback <u>N/A</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone	

APPROVED REJECTED COMMENTS:
 Planning & Zoning Officer: BLE Date: 8/11/25

CONTRACTOR INFORMATION
 Contractor: Decem Design Build LLC Phone: 434-981-8822
 Address: 1700 Bridgewater Ct Maidens VA Email: decemdesignbuild@gmail.com
 Contractor License Number: 2705181647 Type: Class A Contractors RBC Expiration: 12.31.2025

DESCRIPTION OF WORK
 Scope of Work: New Build two story w/garage.

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NO, 321070</u>		
SEWER Public/Private: <u>Private</u>	WATER Public/Private: <u>Private</u>	# of Bathrooms <u>3</u>	# of Bedrooms <u>4</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: <u>No</u>	Finished Sq. Ft. <u>2500</u>	Unfinished Sq. Ft. <u>932</u>	Total Sq. Ft. <u>3432</u>	

Building Only - Excludes All Trades Permits

Value of Work	Application Fee
<u>\$220000.00</u>	\$ <u>103.03</u>
	State Levy Fee
	\$ <u>20.26</u>
	Zoning Fee
	\$ <u>50</u>
	RLD
	\$ <u>500</u>
	SWP
	\$ <u>200</u>
	Total
	\$ <u>1,383.09</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. 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: 7/15/25



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: 7/23/20

Permit Number: 802-20005-004105

GPIN/Tax Map: 1133-45-175A/07-23-B-230

Issued: 9/3/25

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>23 Mystic Road</u>	
	Owner <u>Sterling Wong</u>	Phone # <u>804-304-9368</u>
	Address <u>23 Mystic Road</u>	Email <u>rwong817@me.com</u>

APPLICANT INFORMATION	Applicant/Contact - Title <u>Andrew Brooks - Owner</u>	Phone # <u>804-402-7671</u>
	Address <u>2520 Lochness Road Richmond VA 23235</u>	Email <u>augustarenovations@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>LOWER TUCKAHOE</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40-feet</u>	Center Line Setback	Rear Setback <u>35-feet</u>	CUP/Variance/COA
	Side Setback <u>15-feet</u>	Side Setback <u>15-feet</u>	Flood Zone <u>NO</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Adam Barbee</u> Date <u>8/5/2025</u>			

CONTRACTOR INFORMATION	Contractor <u>Augusta Renovations LLC</u>		Phone <u>804-402-7671</u>
	Address <u>2520 Lochness Road Richmond, VA 23235</u>		Email <u>augustarenovations@gmail.com</u>
	Contractor License Number <u>2705182018</u>	Type <u>Class A</u>	Expiration <u>2/28/26</u>

DESCRIPTION OF WORK	Scope of Work: <u>Kitchen renovations, to include new electrical and plumbing fixture locations</u>				
	Proposed Use <u>Kitchen</u>	Current Use <u>Kitchen</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>N/A</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>3.5</u>	# 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>7634</u>	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>101.50</u>
Value of Work <u>\$25,000</u>		State Levy Fee \$ <u>2.09</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. 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 \$ <u>20</u>
Signature of Applicant <u>[Signature]</u>	Date <u>7/21/26</u>	RLD \$
		SWP \$
		Total \$ <u>101.99</u>



RESIDENTIAL BUILDING PERMIT APPLICATION

Department of Building Inspection
P. O. Box 119
Richmond, VA 23003
(804) 788-3212 Fax (804) 552-2621
700 YF VA Relay

This application is not authorization to start work. No work shall start until a permit is issued on this job site. The location will be scheduled with 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 to existing footings showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, side, and rear lot lines. Lot lines must be clearly marked prior to calling for a building inspection. A utility well shall report is required for all new construction.

Site Address

OWNER	Address	Phone #
APPLICANT	Address	Phone #
ADJACENT PARTY	Address	Phone #

APPROVED	REJECTED	COMMENTS
Front Setback	Corner Lot Setback	Yard Setback
Side Setback	Side Setback	Flood Zone

CONTRACTOR	Address	Phone #
CONTRACTOR LICENSE NUMBER	Expiration	Address

SCOPE OF WORK	Proposed Use	Current Use
Will a foundation be installed within 30 ft. of any septic system components including septic tanks? Yes (No)	Public/Private	Public/Private
Unfinished Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.
% of Bathrooms	% of Bathrooms	% of Bathrooms
% of Bedrooms	% of Bedrooms	% of Bedrooms
% of Floors	% of Floors	% of Floors
Total Sq. Ft.	Total Sq. Ft.	Total Sq. Ft.

Building Only - Excludes All Trades Permits	Value of Work
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and state laws regarding building construction and use. Only those individuals whose names are on the list of responsible officers can sign this application on behalf of a company, firm, etc.	
Signature of Applicant	Date
Total	Application Fee
SWF	State Levy Fee
RDG	zoning Fee



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: 07/02/2025 7/11/25
 Permit Number: B02-2025-00130
 GPIN/Tax Map: 7717-72-8735 | 47-40-2-18-0
 Issued: 9/8/25
 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 **2260 Osborne Hill Drive Rockville VA 23146**

Owner **Mallory Schaffer** Phone # **804-892-4839**

Address **2260 Osborne hill Drive** Email **schaffer11809@gmail.com**

APPLICANT INFORMATION
 Applicant/Contact - Title _____ Phone # _____

Address **2260 Osborne hill Drive** Email _____

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>TUCKAHEE BRIDGE</u>	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30-FT</u>	Center Line Setback	Rear Setback <u>25-Feet</u>	CUP/Variance/COA
	Side Setback <u>10-FT</u>	Side Setback <u>10-FT</u>	Flood Zone	

APPROVED REJECTED COMMENTS: _____
 Planning & Zoning Officer Adam Barber Date 8/20/2025

CONTRACTOR INFORMATION
 Contractor **Matt Bill Construction OWNER** Phone **804-200-9605**

Address **8319 Barbour road Richmond Va 23228** Email **Mb1.mattbillconstruction@gmail.com**

Contractor License Number 2705171064 Type **FRM** Expiration **03/31/2027**

DESCRIPTION OF WORK
 Scope of Work:
 Demolition steps on rear and Build a platform from existing screened in porch and add stairs. 12x9 landing with stairs deck

Proposed Use Grilling area	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) None		
SEWER Public/Private	WATER Public/Private	# of Bathrooms N/a	# of Bedrooms N/a	# of Floors N/a
Will a foundation be installed within 20 ft. of any septic system component including reserve drain fields? Yes/No <u>No</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>108</u>	Total Sq. Ft. <u>108</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>14,000</u>
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Application Fee	\$ <u>10.00</u>
State Levy Fee	\$ <u>1.50</u>
Zoning Fee	\$ <u>20</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>101.50</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. 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 Matt Bill Date 07/02/2025

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: Matthew Bill Telephone: 804-200-9605

Mailing Address: 8319 Barbour road Richmond Va 23228

OWNER'S STATEMENT

Mallory of (address) 2260 Osborne Hill DR affirm that I am the owner of a certain tract of parcel

of land located at 2260 Osborne Hill DR 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.

Mallory Schaffer Owner's Signature Mallory Schaffer

PERMIT FEE SCHEDULE

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

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE R5
STORIES _____
CONSTRUCTION TYPE VB
OCCUPANT LOAD _____
CODE EDITION 2021
FIRE SPRINKLER _____
FIRE ALARM _____
MODIFICATION _____

APPROVAL [Signature] DATE 5 Sept 2025
Code Official



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: 8/18/2025
 Permit Number: 802-2025-00496
 GPIN/Tax Map: 6822-UB-4212/11-30-30
 Issued: 9/16/2025

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>3900 Hadensville Fife Rd</u>	Phone # <u>938-8684</u>
	Owner <u>Gayle Long</u>	Phone # <u>804 937-0067</u>
	Address <u>3900 Hadensville Fife Rd</u>	Email <u>melpen75@yahoo.com</u>

APPLICANT INFORMATION	Applicant/Contact - Title <u>Same</u>	Phone # <u>Same</u>
	Address <u>Same</u>	Email <u>Same</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>95-ft from SE LINE</u> <u>85-ft to NE LINE</u>	Center Line Setback	Rear Setback <u>5-ft</u>	CUP/Variance/COA
	Side Setback <u>5-ft</u>	Side Setback <u>5-ft</u>	Flood Zone <u>NO</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Adam Brazner</u> Date: <u>9/15/2025</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>30' x 40' Detached garage, metal building, concrete slab turn door footer's</u>				
	Proposed Use <u>Detached Garage</u>	Current Use <u>Driveway</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of Floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No <u>NO</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1200</u>	Total Sq. Ft. <u>1200</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>30,000</u> \$33,000
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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. 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: Gayle Long Date: 8-18-2025

Application Fee	\$ <u>160.50</u>
State Levy Fee	\$ <u>3.21</u>
Zoning Fee	\$ <u>0.00</u>
RLD	\$
SWP	\$
Total	\$ <u>188.71</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Gaule Long of (address) 3900 Hadensville Fife Rd affirm that I am the owner of a certain tract of parcel

of land located at 3900 Hadensville Fife Rd 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.

Gaule Long 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS. accessory

STORIES 1

CONSTRUCTION TYPE VB

OCCUPANT LOAD _____

CODE EDITION 21

FIRE SPRINKLER _____

FIRE ALARM _____

MODIFICATION _____

APPROVAL Amal C. B... DATE 9-11-25
Code Official



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: 8/18/25
 Permit Number: 002-0025-0047
 GPIN/Tax Map: 6707-32-4489/42-23-0-130
 Issued: 9/16/25
 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>2410 Dorothea Ln Maidens, VA 23102</u>	
	Owner <u>Kane Layburn</u>	Phone # <u>804-402-4033</u>
APPLICANT INFORMATION	Address <u>1718 Hillenwood Dr Powhatan, VA 23139</u>	
	Applicant/Contact - Title <u>Kane Layburn - owner</u>	Email <u>Kane Layburn@gmail.com</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>1718 Hillenwood Dr Powhatan, VA 23139</u>	
	Phone # <u>804-402-4033</u>	Email <u>Kane Layburn@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>75-ft</u>	Center Line Setback	Rear Setback <u>35-ft</u>	CUP/Variance/COA
	Side Setback <u>30-ft</u>	Side Setback <u>20-ft</u>	Flood Zone <u>NO</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Adam Barber</u> Date: <u>8/29/2025</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>reframing of interior walls, foot print of current structure will remain unchanged, new insulation through out house</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.	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$3,000 \$10,000</u>
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. 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: 8/18/25

Application Fee	\$ <u>57</u>
State Levy Fee	\$ <u>1.14</u>
Zoning Fee	\$ <u>00</u>
RLD	\$
SWP	\$
Total	\$ <u>83.14</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Kane Layburn of (address) 2410 Dorothea Ln affirm that I am the owner of a certain tract of parcel

of land located at 2410 Dorothea Ln and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job:

\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000

Add 2% State Levy to fee

Other fees that may be applicable:

RLD \$100.00 for disturbing over 10,000 square feet

Stormwater \$200 in certain subdivisions

Zoning Residential SFD \$50.00

Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE 25

STORIES 2

CONSTRUCTION TYPE VB

OCCUPANT LOAD 6-

CODE EDITION 21

FIRE SPRINKLER

FIRE ALARM

MODIFICATION

APPROVAL MICHAEL BROOKING DATE 2.15.25
Code Official



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: 8/22/25

Permit Number: 802-2025-00509

GPIN/Tax Map: 1734-00-5830/04-28-F-320

Issued: 9/18/25

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>188 Woodfern Road Goochland Co., VA 23238</u>	
	Owner <u>RONALD + LOEL MILLIGAN</u>	Phone # <u>804-347-7385</u>
	Address <u>SAME</u>	Email <u>RONNIE.MILLIGAN@VAFW.COM</u>

APPLICANT INFORMATION	Applicant/Contact - Title <u>WM Sawals</u>		Phone # <u>804-914-6311</u>
	Address <u>3307 CROSSINGS WAY MIDLOTHIAN, VA 23113</u>		Email <u>WSAWALS3@GMAIL.COM</u>

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 FT FROM PAVEMENT</u>	Center Line Setback	Rear Setback <u>50 FT BETWEEN PLUMBING STRUCTURES</u>	CUP/Variance/COA
	Side Setback <u>20 FT BETWEEN DEGRADED PLUMBING STRUCTURES ← (SAME)</u>	Side Setback	Flood Zone <u>NO</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Tom Barber</u> Date: <u>9/15/2025</u>			

CONTRACTOR INFORMATION	Contractor <u>WM Sawals Const.</u>		Phone <u>804-914-6311</u>
	Address <u>3307 CROSSINGS WAY MIDLOTHIAN, VA 23113</u>		Email <u>WSAWALS3@GMAIL.COM</u>
	Contractor License Number <u>2701030860</u>	Type <u>CLASS A</u>	Expiration <u>11-30-25</u>

DESCRIPTION OF WORK	Scope of Work: <u>CONVERT EXISTING PORCH INTO SCREENED OUTDOOR LIVING AREA</u>				
	Proposed Use <u>OUT DOOR LIVING AREA</u>	Current Use <u>Porch</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>-</u>		
	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	\$ <u>417</u>
Value of Work	<u>\$ 90,000.00</u>	State Levy Fee	\$ <u>8.34</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. 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	\$ <u>00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>425.34</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>8-22-25</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, RONALD K. MILUGAN of (address) 138 WOODFERN, RICHMOND VA 23238 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.

[Signature] 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 \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS
STORIES 1
CONSTRUCTION TYPE VB
OCCUPANT LOAD _____
CODE EDITION 21
FIRE SPRINKLER _____
FIRE ALARM _____
MODIFICATION _____

APPROVAL MICHAEL BROOKING DATE 9/15/25
Code Official



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: 8/25/25
 Permit Number: PR-2025-00513
 GPIN/Tax Map: T33-15-2152/07-10-0-18-0
 Issued: 9/19/25
 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>19 LOWER TUCKAHOE ROAD WEST</u>	Phone # <u>(501) 779-6970</u>
	Owner <u>Lot: Tommy & Lori Clements Revocable Trust</u>	Email <u>tclements@vscfire.com</u>
	Address <u>19 LOWER TUCKAHOE ROAD WEST</u>	

APPLICANT INFORMATION	Applicant/Contact - Title <u>Tommy Clements</u>	Phone # <u>(501) 779-6970</u>
	Address <u>19 LOWER TUCKAHOE ROAD WEST</u>	Email <u>tclements@vscfire.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40-ft</u>	Center Line Setback	Rear Setback <u>5-ft</u>	CUP/Variance/COA
	Side Setback <u>5-ft</u>	Side Setback <u>5-ft</u>	Flood Zone <u>NO</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Alan Bauer</u> Date <u>9/5/2025</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>New 600sqft (20x30) outdoor living structure</u> <u>Pool House for new pool - 1 open side to pool</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>NONE</u>		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>	# of Floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>600</u>	Unfinished Sq. Ft. <u>000</u>	Total Sq. Ft. <u>600</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>200</u>
Value of Work	<u>\$60,000</u>	State Levy Fee	\$ <u>51.04</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. 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	\$ <u>0</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>312.04</u>
Signature of Applicant	<u>[Signature]</u>	Date	<u>8/25/2025</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I J. T. CLEMENTS, III of (address) 19 LOWER TUCKAHOE ROAD WEST affirm that I am the owner of a certain tract of parcel

of land located at 19 LOWER TUCKAHOE ROAD WEST and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

PERMIT FEE SCHEDULE

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

Other fees that may be applicable: RLD \$100.00 for disturbing over 10,000 square feet
Stormwater \$200 in certain subdivisions
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE 25. ACCESSORY.

STORIES 1

CONSTRUCTION TYPE VB.

OCCUPANT LOAD —

CODE EDITION 21

FIRE SPRINKLER —

FIRE ALARM —

MODIFICATION —

APPROVAL MANUEL BROOKING DATE 9.17.25.

Code Official



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: 9/3/25

Permit Number: 602-2025-00531

GPIN/Tax Map: 6158-33-0969 | 30-7-0-16-0

Issued: 9/23/25

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>3127 Kensington Lane</u>	
	Owner <u>Christian + Mary Meyers</u>	Phone # <u>804.244.4477</u>
	Address <u>same</u>	Email <u>cedarhtts@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact - Title <u>Christian Meyers - owner</u>	Phone # <u>same</u>
	Address <u>same</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 <u>55 ft to P/L & 35 ft to Access easement</u>	Center Line Setback	Rear Setback <u>5 ft</u>	CUP/Variance/COA
	Side Setback <u>5 ft</u>	Side Setback <u>5 ft</u>	Flood Zone <u>No</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>AdmBuse</u> Date <u>9/15/2025</u>			

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

DESCRIPTION OF WORK	Scope of Work: <u>install 12x22 shed</u>				
	Proposed Use <u>storage yard equipment</u>	Current Use <u>NA</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>none known</u>		
	SEWER Public/Private <u>NA</u>	WATER Public/Private <u>NA</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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	Finished Sq. Ft. <u>0</u>	Unfinished Sq. Ft. <u>232 sq ft</u>	Total Sq. Ft. <u>264 (with 4x8 porch)</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>\$8,233.12</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. 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 9.3.2025

Application Fee	\$ _____
State Levy Fee	\$ _____
Zoning Fee	\$ _____
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>15.03</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: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I, Christian Meyers of (address) 3127 Kensington Lane affirm that I am the owner of a certain tract of parcel

of land located at Kensington Creek, Lot 16 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

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job:

\$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000

Add 2% State Levy to fee

Other fees that may be applicable:

RLD \$100.00 for disturbing over 10,000 square feet

Stormwater \$200 in certain subdivisions

Zoning Residential SFD \$50.00

Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS Accessory

STORIES 1

CONSTRUCTION TYPE VB

OCCUPANT LOAD

CODE EDITION 21

FIRE SPRINKLER

FIRE ALARM

MODIFICATION

APPROVAL MICHAEL BROOKING DATE 10-22-25

Code Official



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 09/22/2025
Permit # EUR-2025-00634
GPIN
Tax Map

LOCATION

Street Address 12462 N CROSSING DRIVE
--

PROPERTY OWNERSHIP

Name BRIAN COLLINS	Phone
Mailing Address 12642 N CROSSING DRIVE MANAKIN SABOT VA 23103	Email

APPLICANT

Name JOSEPH SCHIESS	Phone 8046571075
Address PO BOX	Email JSSCHIESS21@GMAIL.COM

CONTRACTOR

Name J S SCHIESS ELECTRICAL	Phone 8046571075
Mailing Address PO BOX 231 MANAKIN SABOT, VA 23103	Email SELEC21@AOL.COM
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number Expiration License Type Class 2705046710 10-31-2026 ELE B

DESCRIPTION OF WORK

INSTALL A 22KW GENERATOR AND ATS			
# of Bathrooms	Service Size 200 A	Power Company	Inquiry #
Value of Work (required) 12,000			

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: 09/22/2025

Office Use Only

Approval: <u>Fisher</u>	Approval date: <u>9/24/25</u>
Permit Fee: <u>\$111.18</u>	Issued date: <u>9/24/25</u>

(owner's statement on back)