

* Alternative System *

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM: 47.28.12

Application Date: 4-5-16
 Application Accepted: BP-2016-00214
 GPIN: 47-28-0-12-5
 Issued: 7.14.2016

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.

OWNER INFORMATION

Site Address 2020 Sycamore Creek		District
Owner Blue Ridge Custom Homes		Phone # 804-614-4556
Address 1186 Lickinghole Rd Goochland		
Proposed Use	Current Use	Existing Buildings on Property
Proposed Occupant Load (Commercial)	Acreage 1.626	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District R1	
Front Setback 40' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit
Side Setback 15'	Side Setback 15'	COA	Flood Zone
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: David Floyd Date: 4/7/16

Applicant/Contact: Nathan Brock Phone: _____
 Email: Nathan Brock@gmail.com

CONTRACTOR INFORMATION

Contractor Blue Ridge Custom Homes	Phone 540-478-3110
Address 1186 Lickinghole Rd Goochland VA 23063	
Contractor License Number 2705086712	Type A
Expiration 7-31-16	

Description of Work

Scope of Work:
New single family home

SEWER Public/Private	WATER Public/Private	# of Bathrooms 3		
# of Floors 2	Total Sq. Ft. 8246	Finished Sq. Ft. 7002	Unfinished Sq. Ft. 1244	# of Bedrooms 4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

<p>VALUE OF WORK: 9890</p> <p>Building: \$648,040.00</p> <p>Excludes All Trades Permits</p> <p>\$717,910.00</p>	2888	<p>Application Fee: \$3242.00</p> <p>Zoning Fee: \$50.00</p> <p>Septic/Well Fee: \$40.00</p> <p>State Levy Fee: \$65.105</p> <p>RLD: \$100.00</p>
Total: \$3498.25		

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.

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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: Title Alliance of Richmond Telephone: 804-237-8577

Mailing Address: 6600 W. Broad Street Richmond

OWNER'S AFFIDAVIT

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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE 

PERMIT FEE SCHEDULE

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

Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee

RLD \$ 100.00
Septic & well \$ 40.80 For Commercial & Residential
Septic only \$ 25.44 for Commercial & Residential
Zoning Commercial \$ 100.00
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official

BUILDING 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

Issued 7.6.16

Application Date: 5-25-2016
 Application Accepted: BP-2016-00389
 Old Map Number: 17-1-86-H
 GPIN: 60719-27-0748

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.

OWNER INFORMATION

Site Address 2683 Hadensville Fie Rd		District
Owner Don + Melonie Rowe		Phone # (804) 839-3517
Address 2675 Hadensville Fie Rd Goochland VA 23063		
Proposed Use Residential	Current Use Farm	Existing Buildings on Property None
Proposed Occupant Load (Commercial)	Acreage 8	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District A-1	
Front Setback 55'	Center Line Setback old row	Rear Setback 35	C.U. Permit
Side Setback 20	Side Setback 20'	C O A	Flood Zone

APPROVED REJECTED COMMENTS:

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 5-27-2016

Applicant/Contact: _____ Phone: _____

Email: _____

CONTRACTOR INFORMATION

Contractor Haleyshomes Victor Werthe	Phone (434) 392-2211
Address 2519 West 3rd St Farmville, VA 23901	
Contractor License Number 00000000 270017812	Type Class A
	Expiration 8-31-2017

Description of Work

Scope of Work:
 new modular home w/ unfinished attic

SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
# of Floors 2	Total Sq. Ft. 2483	Finished Sq. Ft. 1715	Unfinished Sq. Ft. 768	# of Bedrooms 3

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building - 107,554.40
 Excludes All Trades Permits

Application Fee	\$ 1105.99
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 16.12
RLD Total	\$ 872.11

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]

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: Bankers Title - Shenandoah Telephone: _____

Mailing Address: 2040 Deyente Avenue Harrisonburg, VA 22801

OWNER'S AFFIDAVIT

I, Don Bawe of (address) TBD affirm that I am the owner of a certain tract of parcel of land located at TBD 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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

_____(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee
Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee
RLD \$ 100.00
Septic & well \$ 40.80 For Commercial & Residential
Septic only \$ 25.44 for Commercial & Residential
Zoning Commercial \$ 100.00
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL [Signature] DATE 7.6.16.
Code Official

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM: A-1-26-B

Application Date: 6/13/2016

Application Accepted: BP-2016-00438

GPIN: U803-02-4904

Issued: 7.12.2016

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.

OWNER INFORMATION	Site Address 4000 Payne Rd Columbia, VA		District Byrd	
	Owner Ryan Merton		Phone # 804-387-1623	
	Address 4416 Whitetail Rd Sandy Hook VA 23153			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreeage 11.199	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	
	New Street Address		Amount:	
	Zoning District A-1		Date Paid:	
	Front Setback 75' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A
	Side Setback 20'	Side Setback 20'	COA N/A	Variance N/A
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 6/14/16

Applicant/Contact: Jim Starke Phone: 804-519-6270

Email:

CONTRACTOR INFORMATION	Contractor Starke Construction		Phone 804-519-6270	
	Address 1707 Shallow Well Rd. Manakin Sabot VA 23103			
	Contractor License Number 2705038805		Type RFD	Expiration 4-30-2017

Description of Work	Scope of Work: New SFD attached garage				
	SEWER Public/Private	WATER Public/Private	3 Full		# of Bathrooms
	# of Floors 1	Total Sq. Ft. 2920	Finished Sq. Ft. 2024	Unfinished Sq. Ft. 576 + 120	# of Bedrooms 4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	\$ 220,000 ²
Excludes All Trades Permits	

Application Fee	\$ 1002.00
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 20.84
RFD Total	\$ 1112.84

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.

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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: DARVIN SATTERWHITE Telephone: _____

Mailing Address: _____

OWNER'S AFFIDAVIT

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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL *Michael R. D...* DATE 7-12-16
Code Official

BUILDING 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

Application Date: 6/9/16
 Application Accepted: OP-2016-00439
 Old Map Number: 43-37-B-16-0
 GPIN: 6767-43-4330

Issued: 7-8-16

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.

OWNER INFORMATION

Site Address	2507 Bucknell Lane		District
Owner	Rivers Realty LLC		Phone #
Address	9954 Mayland Dr, Ste 2100 Richmond 23233		
Proposed Use	Current Use	Existing Buildings on Property	
Sngl Fam Sub	Same	N/A	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
N/A	1.943	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	19,851	DUE
New Street Address	Zoning District		
	R-1		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
65' of ROW		35	
Side Setback	Side Setback	C.O.A.	Flood Zone
15	15		C
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 6-14-2016

Applicant/Contact: Ray Avery, Exec VP Emerald Homes Phone: 674-0231 ext. 16
 Email: ray@emerald-homes.com

Contractor: Chesterfield Construction SVCS, Inc. Phone: 674-0231 ext. 16
 DBA Emerald Homes
 Address: PO Box 4309 Midlothian 23112
 Contractor License Number: 2701 024711A Type: Class A - BLD Expiration: 9/30/17

Description of Work: Construct single family dwelling w/ attached garage

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
		2 1/2		
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
2	2529	1963	566	4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK
 Building: 145,990
 Excludes All Trades Permits

Total: 873.13

Application Fee	\$ 668.95
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 14.18
RLD RLD	\$ 100.00

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

Signature of Applicant: Ray Avery, Exec VP

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: Philip L McDaniel Attorney Telephone: 379-0380

Mailing Address: Po Box 353
Midlothian 23113

OWNER'S AFFIDAVIT

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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

_____ (Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job. \$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee
Commercial fee is based on the building value of the job. \$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000
Add 2% State Levy to fee
RLD \$ 100.00
Septic & well \$ 40.80 For Commercial & Residential
Septic only \$ 25.44 for Commercial & Residential
Zoning Commercial \$ 100.00
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5851 TDD 711 Va Relay

TM: 03-38-14

Application Date: 6/28/16
 Application Accepted: BP-2016-00493
 Old Map Number: ~~03-88-009~~ Issued: 7-14-10
 GPIN: 7724-14-0232

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.

OWNER INFORMATION	Site Address 411 REGINA LN RICHMOND VA 23238		District		
	Owner DELSOL GROUP, LLC		Phone # 804-740-7119		
	Address PO Box 29321 RICHMOND, VA 23242				
	Proposed Use RESIDENCE	Current Use	Existing Buildings on Property NO		
	Proposed Occupant Load (Commercial)	Acreeage 0.525	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision CREEK MORE PARK	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 2316 ⁰⁰	Date Paid: Pd 6/28/2016	
	New Street Address		Zoning District R-3		
	Front Setback 40' AT ROW	Center Line Setback	Rear Setback 25'	C.U. Permit None	Variance None
	Side Setback 10'	Side Setback 10'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: David Floyd Date: 6/29/16

Applicant/Contact: CARLOS SOL Phone: 804-740-7119
 Email: DELSOLRICHMOND @ AOL.COM

CONTRACTOR INFORMATION	Contractor DELSOL GROUP, LLC	Phone 804-740-7119
	Address PO Box 29321 RICHMOND VA 23242	
	Contractor License Number 2705076637	Type CLASS A

Description of Work	Scope of Work: NEW SINGLE FAMILY DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3 1/2		
	# of Floors 2	Total Sq. Ft. 4,551	Finished Sq. Ft. 3070	Unfinished Sq. Ft. 1481	# of Bedrooms 3
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	450,000
Excludes All Trades Permits	

Application Fee	\$ 2,037.00
Zoning Fee	\$ 50.00
Septic/Well Fee	\$
State Levy Fee	\$ 40.74
BLD Total	\$ 2,127.74

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.

Signature of Applicant: Carlos Sol

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: SHAHEED LAW FIRM P.C. Telephone: _____

Mailing Address: 8890 THREE CHOPT ROAD RICHMOND VA 23229

OWNER'S AFFIDAVIT

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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL Lewis Beck DATE 07/13/2016
Code Official

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM# 18-14-0-11-0

Application Date: 6-1-16

Application Accepted: BP-2016-00395

GPIN: 6821-60-5877

Issued: 7-15-16

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.

OWNER INFORMATION

Site Address 3347 Tiller Lane	District
Owner El. & Liz Korikoff	Phone #
Address 9003 Avalon Dr Richmond Va 23229	
Proposed Use single family dwelling	Current Use none
Proposed Occupant Load (Commercial)	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District A1	
Front Setback 75' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A
Side Setback 20'	Side Setback 20'	COA N/A	Variance N/A
Flood Zone N/A			
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: David Funch Date: 6/7/16

Applicant/Contact: Kenton Mayer Phone: 804-869-3794

Email: Kenton@kentonconstruction.com

CONTRACTOR INFORMATION	Contractor Kenton Construction Inc	Phone 804-869-3794
	Address 4303 Old River Trail Powhatan Va 23139	
	Contractor License Number 2705097394	Type Class A CBC RBC

Description of Work	Scope of Work: Single family dwelling w/ attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 4		
	# of Floors 3	Total Sq. Ft. 6373	Finished Sq. Ft. 3800 3684	Unfinished Sq. Ft. 2689	# of Bedrooms 4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	400,000
Excludes All Trades Permits	

Application Fee	\$ 1,819.
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 37.04
R&D	\$ 100.00
Total	2,039.04

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.

Mark R. Meyer

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.

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

Name: Old Republic National Title Insurance Co. Telephone: 804-281-7490

Mailing Address: 1800 Bayberry Court Suite 104 Richmond, Va 23226

OWNER'S AFFIDAVIT

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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value.... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL _____ DATE _____

Code Official

BUILDING 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

ISSUED: 7-26-16

Application Date: 6-23-16

Application Accepted: BP-2016-00478

Old Map Number: 6803228938

GPIN: 0000-3-1-0-40

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.

OWNER INFORMATION	Site Address 4489 Shinnon Hill Road, Columbia VA		District Byrd		
	Owner Morgan Bowman Associates LLC		Phone # 804 399 5218		
	Address PO Box 177 Rockville Va 23144				
	Proposed Use Residence	Current Use Trees	Existing Buildings on Property None		
	Proposed Occupant Load (Commercial)	Acreage 3.	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A1		
	Front Setback 75' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit None	Variance None
	Side Setback 20'	Side Setback 20'	C O A N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 6/27/16

Applicant/Contact: Darrell Bowman Phone: 804 399 5218
 Email: Darrell.Bowman@verizon.net

CONTRACTOR INFORMATION	Contractor self	Phone 804 399 5218
	Address	
	Contractor License Number	Type

Description of Work	Scope of Work: 3 Bedroom 2 1/2 Bath Home N/W SFD				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2		
	# of Floors 1	Total Sq. Ft. 1576	Finished Sq. Ft.	Unfinished Sq. Ft. 88	# of Bedrooms 3

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	105,300
Excludes All Trades Permits	

RLO \$100.00

Application Fee	\$485.85
Zoning Fee	\$50.00
Septic/Well Fee	\$40.80
State Levy Fee	\$
RLO Total	\$686.37

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]

BUILDING 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

Application Date: 6/7/16 received 6-24-16
 Application Accepted: **BP-2016-00497**
 Old Map Number: 5-3-0-28-0
 GPIN: 6824-11-5706

Issued: 7/27/16

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.

OWNER INFORMATION	Site Address 4461 Windsor Lake Drive		District Byrd		
	Owner Liberty Homes		Phone # (804) 730-7770		
	Address 8249 Crown Colony Pkwy Mechanicsville 23116				
	Proposed Use Residential	Current Use	Existing Buildings on Property N/A		
Proposed Occupant Load (Commercial)	Acreage 3.8 acres	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Windsor Park	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A1		
	Front Setback 55' off line	Center Line Setback	Rear Setback 35'	C.U. Permit None	Variance None
	Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	This application requires two copies of a site plan of the property 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.				

Planning & Zoning Officer: Daniel Floyd Date: 7/1/16

Applicant/Contact: Shawn Tuthill Phone: (804) 229-9703
 Email: ST2@libertyhomesva.com

CONTRACTOR INFORMATION	Contractor Liberty Homes	Phone (804) 730-7770
	Address 8249 Crown Colony Pkwy Mechanicsville VA 23116	
	Contractor License Number 2705038060	Type A

Description of Work	Scope of Work: single family dwelling w/ Attached Garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2.5		
	# of Floors 2	Total Sq. Ft. 2083	Finished Sq. Ft. 1640	Unfinished Sq. Ft. 443	# of Bedrooms 3
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		Total 776.79	Application Fee	\$ 574.50
Building	125 K		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 40.00
			State Levy Fee	\$ 12.29
			RLD	\$ 100.00

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

Signature of Applicant: [Signature]

BUILDING 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

Issued: 7/28/16

Application Date: 6-24-16
 Application Accepted: BP-2016-00486
 Old Map Number: 29-3-0-20-0
 GPIN: 6749-63-0592

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.

OWNER INFORMATION	Site Address 3782 Riddles Bridge Rd lot 20			District Lickinghole		
	Owner Liberty Homes			Phone # 804-730-7770		
	Address 8249 Crown Colony Pkwy Mechanicsville VA 23116					
	Proposed Use Residential		Current Use	Existing Buildings on Property N/A		
	Proposed Occupant Load (Commercial)		Acreage 2.420	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Fauquier Gardens		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount:	
	New Street Address		Zoning District A1			
	Front Setback 75' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit None	Variance None	
	Side Setback 20'	Side Setback 20'	C O A N/A	Flood Zone N/A		
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:					

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: David Floyd Date: 6/29/16

Applicant/Contact: Liberty Homes / Shawn Tuthill II Phone: 804-730-7770
 Email: ST2@libertyhomesva.com

CONTRACTOR INFORMATION	Contractor Liberty homes		Phone 804-730-7770	
	Address 8249 Crown Colony Pkwy Mechanicsville VA 23116			
	Contractor License Number 2705038060		Type	Expiration 3/17

Description of Work	Scope of Work: New SF Dwelling w/ Attached Garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2.5		
	# of Floors 2	Total Sq. Ft. 2,083	Finished Sq. Ft. 1640	Unfinished Sq. Ft. 443	# of Bedrooms 3

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		Total 776.79	Application Fee	\$ 574.50
Building	125 K		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 40.00
			State Levy Fee	\$ 12.29
			RLD	\$ 100.00

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

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM# 64-28-F-36-0

Application Date: 7-11-16

Application Accepted: BP-2016-00528

GPIN: 7734-00-7910

Issued: 7-19-16

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.

OWNER INFORMATION	Site Address 191 WOODFERN		District DOVER
	Owner R & N CONSTRUCTION, INC.		Phone # 804 784 4603
	Address 12564 PATTERSON AVE. RICHMOND, VA. 23238		
	Proposed Use RESIDENCE	Current Use VACANT LOT	Existing Buildings on Property NO
	Proposed Occupant Load (Commercial)	Acreage .339 ACRES	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision WEST OAK	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$5269.00	Date Paid: DUE	
	New Street Address 191 WOODFERN		Zoning District RPUD		
	Front Setback 30' off pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit	Variance
	Side Setback 20' B/S	Side Setback	C O A	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: CASH proffer due before C.O. is issued		

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: Andre Banno Date: 7-11-2016 Verify front setback

Applicant/Contact: CARL NEASE OR RONNESE Phone: 804 306 7252

Email: C.RONALDNEASE@AOL.COM

CONTRACTOR INFORMATION	Contractor R & N CONSTRUCTION, INC.	Phone 804 784 4603
	Address 12564 PATTERSON AVE. RICHMOND, VA. 23238	
	Contractor License Number 2701020357	Type CLASS A

Description of Work	Scope of Work: NEW CONSTRUCTION OF BRICK VENEER RESIDENCE NEWSFD w/ attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3 1/2		
	# of Floors 1 1/2	Total Sq. Ft. 4363	Finished Sq. Ft. 3424	Unfinished Sq. Ft. 939	# of Bedrooms 4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	455,000	Total 2,450.69	Application Fee	\$ 2,039.50
Building	575,000		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$
			State Levy Fee	\$ 41.19
			RLB	\$ 100.00
			Stormwater	200.00

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

BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

Issued 7/18/2010

Application Date: 7/11/10

Permit Number: BP-2010-00529

Old Map Number: 58 37 4 50

GPIN: 7715 78 8712

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.

OWNER INFORMATION

Site Address	428 Wellfield Rd	District	Dover
Owner	W.B. Garrett, Inc.	Phone #	515-9150 ext. 23
Address	9041 Hermitage Rd. Suite 100, Richmond VA. 23228		
Proposed Use	SFD	Current Use	Existing Buildings on Property No
Proposed Occupant Load (Commercial)	-	Lot Size	.777 ac.
		Commercial Use	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
New Street Address	Zoning District RPUD		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
30' From Pave	-	50' B/S	None
Side Setback	Side Setback	Census Track	Flood Zone
20' B/S	20' B/S		N/A
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: David Floyd Date: 7/13/10

Applicant/Contact:	WB Garrett Inc / Bill Garrett	Phone	515-9150 ext. 23
Email:	bgarrett@wbgarrett.com		

CONTRACTOR INFORMATION	Contractor	W.B. Garrett, Inc	Phone	515-9150 ext. 23
	Address	9041 Hermitage Rd Suite 100 Richmond, VA. 23228		
	Contractor License Number	2701037824	Type	Class A
			Expiration	11/30/2016

Description of Work	Scope of Work: Detached single family dwelling w/ (2) car attached gar.				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	5196	3700	1496	4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		Zoning - storm water \$200.00	Application Fee	\$1879.50
Building	415,000		Septic/Well Fee	\$50.00
Excludes All Trades Permits			State Levy Fee	\$37.59
			RLD	\$100.00
			Total	\$2267.09

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: William B. Garrett Pres

Issued: 7/20/2016
BUILDING PERMIT APPLICATION
 Goochland County Building Inspection Department
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317
LOT 24-2 PARKSIDE VILLAGE

Application Date: 07-14-16
 Permit Number: 30-2016-00535
 Old Map Number: 48.18.24
 GPIN: 7738-21-0601

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.

OWNER INFORMATION	Site Address 7052 Washbrook Terrace		District		
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 5,999.00	Date Paid: DUE	
	New Street Address		Zoning District		
	Front Setback 30' off pavement	Center Line Setback	Rear Setback 50' BS	C.U. Permit	Variance
	Side Setback 20' BS	Side Setback	Census Track	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: CASH Proffer Due Before C.O. is issued				
	This application requires two copies of a site plan of the property 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.				

Planning & Zoning Officer: Anita Barnes Date: 7-14-2016 *Verify all setbacks*

Applicant/Contact: BERTON JAMES Phone: (804)217-8910

Email: bjames@eagleofva.com

CONTRACTOR INFORMATION	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A		Type CLASS A	Expiration 3-31-2017

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3250	2656	594	3

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	\$221,475.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$1011.23
Septic/Well Fee	\$
State Levy Fee	\$20.17
Zoning Fee	\$50.00
Total	\$1081.40

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]*

BUILDING 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

Issued 7.11.16

Application Date: *June 30th 2016*
 Application Accepted: *BP-2016-00503*
 Old Map Number: *63.12.4.B*
 GPIN: *7714-43-6025*

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.

OWNER INFORMATION	Site Address <i>167 River Road West Manakin Sabot, VA 23103</i>		District <i>Dover</i>		
	Owner <i>Mike + Sandy Tkacz</i>		Phone # <i>(804) 310-3009</i>		
	Address <i>12813 Poplar Forest Drive Henrico VA 23233</i>				
	Proposed Use <i>residence</i>	Current Use <i>residence</i>	Existing Buildings on Property <i>YES</i>		
	Proposed Occupant Load (Commercial)	Acreage <i>11</i>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District <i>A2</i>	
	Front Setback <i>100' off road</i>	Center Line Setback <i>—</i>	Rear Setback <i>35'</i>	C.U. Permit <i>None</i>	Variance <i>None</i>
	Side Setback <i>20'</i>	Side Setback <i>20'</i>	COA <i>N/A</i>	Flood Zone <i>N/A</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: *David Taylor* Date: *7/1/16*

Applicant/Contact: *Home Mason Hearn* Phone: *(804) 400-0330*
 Email: *cmhearn@homeasons.com*

CONTRACTOR INFORMATION	Contractor <i>Home Masons Inc.</i>		Phone <i>(804) 784 1200</i>	
	Address <i>P.O. Box 248 Manakin Sabot, VA 23103</i>			
	Contractor License Number <i>2765020224</i>	Type <i>A</i>	Expiration <i>3/31/17</i>	

Description of Work	Scope of Work: <i>misc. interior renovations and breakfast room addition</i> <i>> 3br, Kitchen, enlarge bedroom by removing interior wall</i>				
	SEWER Public/Private	WATER Public/Private	3		# of Bathrooms
	# of Floors <i>2</i>	Total Sq. Ft. <i>85</i>	Finished Sq. Ft. <i>5000 85</i>	Unfinished Sq. Ft.	# of Bedrooms <i>4</i>

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		Application Fee	\$ <i>1452.00</i>
Building	<i>320,000</i>	Zoning Fee	\$ <i>25.00</i>
Excludes All Trades Permits		Septic/Well Fee	\$
		State Levy Fee	\$ <i>29.04</i>
		RLD Total	\$ <i>1506.04</i>

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

Signature of Applicant *[Signature]*

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: SHAHEED LAW FIRM P.C. Telephone: _____

Mailing Address: 8890 THREE CHOPT ROAD RICHMOND VA 23229

OWNER'S AFFIDAVIT

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

Signed and acknowledged by _____ in the city or county of _____ Virginia on the _____ Day of _____, 20____ in the presence of the undersigned notary. My Commission expires _____.

(Notary)

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
Commercial fee is based on the building value of the job.	\$ 0 to \$ 4000 of value... \$ 30.00 + \$ 9.50 per \$ 1000 above \$ 4000 Add 2% State Levy to fee
	RLD \$ 100.00
	Septic & well \$ 40.80 For Commercial & Residential
	Septic only \$ 25.44 for Commercial & Residential
	Zoning Commercial \$ 100.00
	Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____
FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL Lewis Beck DATE 07/13/2016
Code Official

BUILDING 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

ISSUED: 3-17-16

Application Date: 2-24-16

Application Accepted: BP 2016-00111

Old Map Number: 43-38-0-AA

GPIN: 0711-48-9882

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.

OWNER INFORMATION	Site Address 2132 Withers Lane Maidens, VA 23102		District		
	Owner Breeze Hill Inc.		Phone # 347-4763		
	Address 1930 Soldiers Lodge Rd Crozer, VA 230 23039				
	Proposed Use	Current Use	Existing Buildings on Property None		
	Proposed Occupant Load (Commercial)	Acreage 2.5	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 19,857.00	Date Paid: DUE	
	New Street Address		Zoning District		
	Front Setback 40' 000	Center Line Setback ROW	Rear Setback 75	C.U. Permit	Variance
	Side Setback 10	Side Setback 20	C O A	Flood Zone	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: CASH Proffer Due Before C.O. is issued.	

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 2-25-2016

Applicant/Contact: Steve Thompson Phone: 539-2524

Email: Steve.thompsonbuilder@comcast.net

CONTRACTOR INFORMATION	Contractor Steve Thompson Builder, LLC		Phone 539-2524	
	Address 1390 B Broad Street Rd Oilville, VA 23129			
	Contractor License Number 2705054732	Type BLD	Expiration 3/31/16	

Description of Work	Scope of Work: Revised 7/21/16: extend & finish SASE of mud room New single family Dwelling with Attached Garage Fin bath on 2nd level				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3		
	# of Floors 2	Total Sq. Ft. 5,685	Finished Sq. Ft. 2585	Unfinished Sq. Ft. 3100	# of Bedrooms 4
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		Total \$1,978.39	Application Fee	\$ 1654.50
Building	365,000		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 40.00
			State Levy Fee	\$ 33.89
			-RLD Storm-Water	\$ 200.00

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

Signature of Applicant: Steve Thompson

Revised 7/27/10 Convert 4th bedroom to office & convert unfinished space on 2nd floor into 4th bedroom

BUILDING 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

Issued: 4.1.2016

Application Date: 3/3/16

Application Accepted: BP-2016-00139

Old Map Number: 43 38-0-A-1

GPIN: 6777-57-1012

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.

OWNER INFORMATION	Site Address: 1660 Indy's Run		District: Lickinghole	
	Owner: Krickovic & Ziegler LLC		Phone #: 569-9745	
	Address: P.O. Box 1510 Mechanicsville, VA 23116			
	Proposed Use: Residential	Current Use: none	Existing Buildings on Property: none	
TO BE COMPLETED BY ZONING DEPARTMENT	Proposed Occupant Load (Commercial): N/A	Acreage: 2.301	Commercial Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Subdivision: Breeze Hill	Proffer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 19,851	Date Paid: DUE
	New Street Address:		Zoning District: RP	
	Front Setback: 40' off property line	Center Line Setback: 40' off property line	Rear Setback:	C.U. Permit:
Side Setback:	Side Setback:	COA:		Flood Zone:
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Cash Proffer Due Before C.O. is issued				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 3-10-2016

Applicant/Contact: Mike Krickovic Phone: 908-2253
 Email: mike@kandzbuilders.com / lonnie@kandzbuilders.com

Contractor: Krickovic & Ziegler Phone: 804-569-9745
 Address: P.O. Box 1510 Mechanicsville, VA 23116
 Contractor License Number: 2705100072 A Type: A CBC/RBC Expiration: 11/30/17

Scope of Work: Build New single family home attached garage

SEWER Public/Private	WATER Public/Private	# of Bathrooms: 5		
# of Floors: 2	Total Sq. Ft.: 38035, 124	Finished Sq. Ft.: 3148	Unfinished Sq. Ft.: 4151, 676	# of Bedrooms: 4

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		Total: 2,075.22	Application Fee: \$1,651.39
Building: \$225,000 364,310.00	Excludes All Trades Permits		Zoning Fee: \$50.00
			Septic/Well Fee: \$40.00
			State Levy Fee: \$33.83
			RLD: \$100.00
			Stormwater: 200.00

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

Signature of Applicant: [Signature]



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

Date	7/29/14
Permit #	16-532
GPIN	
Tax Map	

Type:

- 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.

LOCATION

Street Address	4538 THREE SQUARE RD	District	
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PROPERTY OWNERSHIP

Name	KRISSEY LULL	Phone	380-5522
Mailing Address	SAME		

APPLICANT

Name	WOODFIN ELECTRICAL	Phone	730 5000
E-Mail Address	RSNYDER@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN ROBERT SMYDER	Phone	730 5000						
Mailing Address	1823 N HAMILTON ST	E-mail address:	RSNYDER@ASKWOODFIN.COM						
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820	Expiration	11/16	License Type:	ELE	Class:	A

DESCRIPTION OF WORK

22KW GEN SET ; WIRE 20A FEED SHED			
# of Baths	Service Size	Power Company	Inquiry #
	200	DOM	

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.

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

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)

Signed and acknowledged by _____ in the city or county of _____, Virginia on the _____ day of _____, 20____ in the presence of the undersigned notary.

_____(Notary)

My commission expires _____

Signature of Applicant [Signature]
Approval Fisher Date 7/29/14

Value of Work: \$9676.00
Permit fee: \$67.32
Issue date: 7/29/14



RESIDENTIAL TRADES 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)



received

7-29-16

Type:

- 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.

Date	7-29-16
Permit #	E11-2016-00
Old Map #	586
G-Pin	

LOCATION

Street Address 2793 Fallen Creek Drive Sandy Hook VA 23153	District
---	----------

PROPERTY OWNERSHIP

Name Danny & Debbie Tayman	Phone 301-641-8503
Mailing Address 2793 Fallen Creek Drive Sandy Hook VA 23153	

APPLICANT

Name Richard Medeiros	Phone 540-718-7505
E-Mail Address richieneverdark@gmail.com	

CONTRACTOR

Name Never Dark Whole House Generators	Phone 434-975-3275
Mailing Address 2293 Seminole Lane Charlottesville, VA 22901	License Type Contractors
Class A	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2710025076
Expiration 8-31-2016	7-31-17

DESCRIPTION OF WORK 2705141802

Wiring 22KW automatic generator with automatic Transfer Switch and sub panel for powering essential circuits only			
# of Baths	Service Size	Power Company	Inquiry #

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.

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

Signed and acknowledged by _____ in the city or county of _____, Virginia on the _____ day of _____, 20____ in the presence of the undersigned notary. _____ (Notary) My commission expires _____

Signature of Applicant: Richard Medeiros

Approval: Fisher Date: 7-29-16

Value of work: 1,800

Permit fee: 30.60

Issue date: 7-29-16



RESIDENTIAL TRADES 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:

- 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.

Date	7-28-16
Permit #	2016-578
Old Map #	
G-Pin	

LOCATION

Street Address	426 WellField Rd	District	
----------------	------------------	----------	--

PROPERTY OWNERSHIP

Name	SUZANNE LUCAS	Phone	708 0536
Mailing Address	426 WellField Rd MANAKIN SABOT VA		

APPLICANT

Name	Joseph Schiess	Phone	784 6774
E-Mail Address	selec21@aol.com		

CONTRACTOR

Name	J.S. Schiess Elec	Phone	784 6774		
Mailing Address	P.O. BOX 231 MANAKIN SABOT	License Type	ELE	Class	B
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2705046710	Expiration	10-31-16

DESCRIPTION OF WORK

16 KW Generator & Automatic Transfer Switch			
# of Baths	Service Size	Power Company	Inquiry #
	200 A	DOMINION	

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.

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

Signed and acknowledged by _____ in the city or county of _____, Virginia on the _____ day of _____, 20____ in the presence of the undersigned notary. _____ (Notary) My commission expires _____

Signature of Applicant: [Signature] Value of work: \$9300

Approval: [Signature] Permit fee: 107.32

Date: 7/28/16 Issue date: 7/28/16

BUILDING 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

Issued: 7/28/2016

Application Date: 7-26-16

Application Accepted: BP-2016-00569

Old Map Number: 32-1-0-49-A

GPIN: 6778-84-5409

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.

OWNER INFORMATION

Site Address 2389 Red Stone Dr.	District
Owner Lorad Aubrey Witt	Phone # 804 556 3211
Address 2389 Red Stone Dr.	
Proposed Use	Current Use
Proposed Occupant Load (Commercial)	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
Side Setback	Side Setback	COA	Flood Zone
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Bryan Speed	Phone 804 495 4646
Email: bspeed@jesnow.com	

Contractor JES Construction	Phone 804 495 4646
Address	
Contractor License Number 2705068655	Type A
Expiration 4-30-18	

Description of Work	Scope of Work: crawl space encapsulation w/ CI Max				
	SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	20149.40
<i>Excludes All Trades Permits</i>	

Application Fee	\$ 105.37
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 2.11
RLD	\$ 107.48

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 B. Speed

BUILDING PERMIT APPLICATION

Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM# 44-1-0-14-F

Application Date: 7-19-2016

Application Accepted: BP-2016-00552

GPIN: 6777-60-7733

Issued: 7/26/2016

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.

OWNER INFORMATION

Site Address 2005 Sheppard Town Rd Crozier	District
Owner Susan Delaney & Steve Delaney	Phone # 804-334-2687
Address 2005 Sheppard Town Rd Crozier VA 23039	23039 804-402-0404
Proposed Use Home	Current Use Home
Proposed Occupant Load (Commercial)	Existing Buildings on Property House, Deck, Garage
Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address	Zoning District A2		
Front Setback 75' from R/W	Center Line Setback	Rear Setback 35'	C.U. Permit None
Side Setback 20'	Side Setback 20'	COA N/A	Variance None
Flood Zone			
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Stop			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: David Ford Date: 7/20/16

Applicant/Contact: Kammie Wilson Phone: 804.539.1169
 Wilson Construction / Douglas Wilson 804.539.1168
 Email: dkwilson5388@aol.com

Contractor: Wilson Construction Phone: 804.539.1169
 Address: 5388 Old Columbia Rd Goochland VA. 23063
 Contractor License Number: 2705030747 Type: Class A Const. Elec. Expiration: 9-30-2017

Description of Work: Add additions on side of house. Plumb enclosure front porch to be new room into living room.

SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
# of Floors 2	Total Sq. Ft. 1,340	Finished Sq. Ft. 834	Unfinished Sq. Ft. 506	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	48000 59,785.00
Excludes All Trades Permits	

Application Fee	\$ 282.09
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 4.56
R&D Total	\$ 311.65

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

BUILDING PERMIT APPLICATION

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

Application Date: 7-22-16
 Application Accepted: BP-2016-00561
 Old Map Number: 1111# 38-22-A-5-0
 GPIN: 7715-26-8993

Issued: 7-25-16

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.

OWNER INFORMATION

Site Address <u>353 Holly Lake Drive</u>	District
Owner <u>Billy & Francine Spradlin</u>	Phone # <u>804-307-0160</u>
Address <u>SAME</u>	
Proposed Use <u>res. bathroom</u>	Current Use <u>same</u>
Proposed Occupant Load (Commercial)	Existing Buildings on Property
Acreeage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
New Street Address		Zoning District	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
Side Setback	Side Setback	COA	Flood Zone
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: BENJAMIN LUTON Phone 804 349 3802

Email: ben@ccrysmill.com

CONTRACTOR INFORMATION

Contractor <u>CARY'S Mill Woodworking Inc.</u>	Phone <u>804 639 2946</u>
Address <u>12742 Specklin Lane Midlothian VA 23112</u>	
Contractor License Number <u>2705139118</u>	Type <u>A - BLD</u>
	Expiration <u>2-28-2017</u>

Description of Work

Scope of Work:
Remodel Existing Master bathroom according to plans

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	<u>\$14,500</u>
Excludes All Trades Permits	

Application Fee	\$ <u>77.26</u>
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>1.54</u>
RLD	\$ <u>78.80</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 _____

BUILDING PERMIT APPLICATION
 Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM: 600.1.S.A

Application Date: 7-21-16
 Application Accepted: BP-2016-00560
 GPIN: 6784-27-1581
 Issued: 7-25-16

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.

OWNER INFORMATION	Site Address 581 LEE ROAD CROZIER VA 23039		District		
	Owner MICHAEL AND JOEY ALLEN		Phone # 804-814-2050		
	Address 581 LEE ROAD				
	Proposed Use SINGLE FAMILY	Current Use SINGLE FAMILY	Existing Buildings on Property HOUSE, BARN		
	Proposed Occupant Load (Commercial)	Acreeage 11.5	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District		
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
	Side Setback	Side Setback	C O A	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	This application requires two copies of a site plan of the property 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.				

Planning & Zoning Officer _____ Date _____

Applicant/Contact: DOUGLAS MARTIN Phone: 804-363-1693
 Email: martinbuilding@verizon.net

Contractor: D.E. MARTIN & CO. Phone: 804-363-1693
 Address: 2106 STONEHOLLOW ROAD HEVIRICO VA 23238
 Contractor License Number: 2705056259 A Type: CLASS A Expiration: 5-31-18

Description of Work: CONVERT EXISTING SCREENED PORCH INTO SUNROOM

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. 277	Finished Sq. Ft. NEW: 277	Unfinished Sq. Ft.	# of Bedrooms

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK

Building	\$38,000
Excludes All Trades Permits	

Application Fee	\$183.00
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$3.100
Total	\$186.100

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.

small permit

BUILDING PERMIT APPLICATION
 Goochland County Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TMA# 19-5-B1

Application Date: 7/21/16

Application Accepted: DP-2016-00562

GPIN: 6820-40-1026

Issued: 7-25-16

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.

OWNER INFORMATION

Site Address 3216 Davis Mill Road District Goochland

Owner George and Dale Mitchell Phone # 804-357-6731

Address 3216 Davis Mill Road

Proposed Use garage Current Use garage Existing Buildings on Property House Garage

Proposed Occupant Load (Commercial) n/a Acreage Commercial Use Yes No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision Proffer Amount: Date Paid: Yes No

New Street Address Zoning District

Front Setback Center Line Setback Rear Setback C.U. Permit Variance

Side Setback Side Setback C O A Flood Zone

APPROVED REJECTED COMMENTS:

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Archie Gordon Phone (804) 972-3876

Email: gordonbrothersconstruction@yahoo.com

Contractor Gordon Brothers Construction, LLC Phone 804-556-8180

Address 1820 Rock Castle Rd., Goochland, VA 23063

Contractor License Number 2705144137 Type Class A Expiration 12-31-2017

Description of Work: storm damage: Garage roof demolition, cinder block walls demolition, Garage rebuild on same existing footprint, new roof on house

SEWER Public/Private	WATER Public/Private	n/a		# of Bathrooms
# of Floors n/a	Total Sq. Ft. n/a	Finished Sq. Ft. n/a	Unfinished Sq. Ft. n/a	# of Bedrooms n/a

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK		NO Fee Waived to storm damage	Application Fee	\$ _____
Building	\$ 42,000.00		Zoning Fee	\$ _____
Excludes All Trades Permits			Septic/Well Fee	\$ _____
			State Levy Fee	\$ _____
			RLD	\$ _____

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.

Laura Br

BUILDING 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

Issued 7/25/16

Application Date: 7-21-16

Application Accepted: BP-2016-00555

Old Map Number: 44.23.4

GPIN: 6787-19-0238

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.

OWNER INFORMATION	Site Address 1830 Fairgrounds Rd.		District		
	Owner David Perkins		Phone #		
	Address 1830 Fairground Rd.				
	Proposed Use Residential	Current Use Residential	Existing Buildings on Property 2		
	Proposed Occupant Load (Commercial)	Acreage 2.08	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A-2		
	Front Setback 25' from ROW	Center Line Setback	Rear Setback 35'	C.U. Permit None	Variance None
	Side Setback 20'	Side Setback 20'	C O A N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer: [Signature] Date: 7/21/16

Applicant/Contact: _____ Phone: _____

Email: *mail permit*

CONTRACTOR INFORMATION	Contractor Harrington Construction Co. Inc.		Phone 804-741-6772	
	Address 1814 Ryandale Rd. Richmond VA 23238			
	Contractor License Number 2705022365	Type Class A RBC CBC	Expiration 10-31-17	

Description of Work	Scope of Work: Construct a 12x26' utility + Bathroom Addition Remove part of Existing wall to Enlarge the B.R.				
	SEWER Public/Private	WATER Public/Private	/ # of Bathrooms		
	# of Floors 1	Total Sq. Ft. 312	Finished Sq. Ft. 312	Unfinished Sq. Ft. 0	# of Bedrooms 0

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.

VALUE OF WORK	
Building	50,000
Excludes All Trades Permits	

Application Fee	230.00
Zoning Fee	25.00
Septic/Well Fee	\$
State Levy Fee	4.74
RLD Total	260.74

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.

Signature of Applicant: [Signature]

received
10-15-16

BUILDING 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

ISSUED: 7-22-16

Application Date: 4/20/2016
 Application Accepted: BP-2016-00459
 Old Map Number: 18-1-0-64-A
 GPIN: 6820-46-0662

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.

OWNER INFORMATION	Site Address 4707 Whitehall Rd		District		
	Owner 4707 Whitehall LLC		Phone # 8043399363		
	Address 4120 Dominion Blvd Glenn Allen Va 23060				
	Proposed Use Agriculture	Current Use Agriculture	Existing Buildings on Property 2		
	Proposed Occupant Load (Commercial)	Acreage 3.22	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
	Side Setback	Side Setback	C O A	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property 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.

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Ruth Hopkins - OWNER Phone: 8043399363

Email: Ruth.hopkins.339@gmail.com

CONTRACTOR INFORMATION	Contractor N/A		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: Convert 1 Bedroom to Laundry Room, Convert Sunroom to Bedroom Install one bathroom				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3		
	# of Floors 1	Total Sq. Ft. 1956	Finished Sq. Ft. 1956	Unfinished Sq. Ft. 0	# of Bedrooms 3

TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.



Ruth Hopkins

Application Fee	\$ 79.50
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 1.59
RLD Total	\$ 81.09

This application and know the information to be true and agree and State laws regulating building construction and use.

[Signature]