

**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: July 28, 2016  
 Application Accepted: BP-20110-00575  
 Old Map Number: 7713-97-5415  
 GPIN: TM #63-1-0-78-0

*Issued 8-17-2016*

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 <u>301 Flag Station Road</u>		District		
	Owner <u>Mr. and Mrs James Brody</u>		Phone # <u>804-513-3264</u>		
	Address <u>8901 Ginger Way Court Henrico, Va. 23229</u>				
	Proposed Use <u>Single family residence</u>	Current Use	Existing Buildings on Property <u>existing house to be demolished</u>		
	Proposed Occupant Load (Commercial)	Acreeage <u>9.645 acres</u>	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 <u>A2</u>	
	Front Setback <u>75' from Road</u>	Center Line Setback	Rear Setback <u>35'</u>	C.U. Permit <u>N/A</u>	Variance <u>N/A</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>* Existing residence must be removed within 60 day of C.O.</u>		
	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: 7/28/16

Applicant/Contact: Rick Kartelberg Phone: 804-350-3951  
 Email: wfkberg@gmail.com

CONTRACTOR INFORMATION	Contractor <u>MARCO Builders Inc</u>	Phone <u>804-350-3951</u>
	Address <u>7677 Hill Drive Richmond, VA 23225</u>	
	Contractor License Number <u>2701016164</u>	Type <u>Class A Contractor</u>

Description of Work	Scope of Work: <u>Construction of new single family residence attached garage unfinished basement</u>				
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms <u>4</u>		
	# of Floors <u>2</u>	Total Sq. Ft. <u>6375</u>	Finished Sq. Ft. <u>4833</u>	Unfinished Sq. Ft. <u>1542</u>	# of Bedrooms <u>5</u>

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

VALUE OF WORK	
Building	<u>\$ 600,000.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>2712.00</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ <u>40.00</u>
State Levy Fee	\$ <u>55.04</u>
RLD	<u>2857.04</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.

Signature of Applicant: William F. Kartelberg IV President

# 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: 8-1-2016

Application Date: 1/18/16

Application Accepted: BP 2016-00112

Old Map Number: 9-1-0-65-0

GPIN: 5892-51-6096

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 3841 Shannon Hill Road Columbia VA 23038		District	
	Owner Allison Washington Miles		Phone # 804-305-9498	
	Address 6306 Community House Rd Columbia VA 23038			
	Proposed Use Residence	Current Use Lot	Existing Buildings on Property NO	
	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 NO	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address 3841 SHANNON HILL RD.		Zoning District A-1	
	Front Setback 55.000	Center Line Setback ROW	Rear Setback 35	C.U. Permit
	Side Setback 20	Side Setback 20	C O A	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: [Signature] Date: 7-11-2016

Applicant/Contact: Allison Miles Phone: 3059498  
 Email:

CONTRACTOR INFORMATION	Contractor OWNER/ALLISON MILES	Phone 804-3059498
	Address	
	Contractor License Number	Type

Description of Work	Scope of Work: Single-Family Dwelling Per Plans				
	SEWER Public/Private	WATER Public/Private	2 Full		# of Bathrooms
	# of Floors 1	Total Sq. Ft. 1500	Finished Sq. Ft. 1500	Unfinished Sq. Ft. 320	# of Bedrooms 3

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

VALUE OF WORK	1820
Building	\$107,900.00
Excludes All Trades Permits	

Application Fee	\$ 307.50
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 1.80
<b>Total</b>	<b>\$ 599.30</b>

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: Allison Miles

Apartment

**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: 38-1-39-A

Application Date:

6/28/16

Application Accepted:

BP-2016-00506

GPIN:

6707-53-0878

Issued:

8-2-2016

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. 23063

OWNER INFORMATION

Site Address

5750 Jabez Lane Goochland, VA

District

Owner

H. Gray Broughton

Phone #

804 551-3408

Address

6802 Patterson Ave

Proposed Use

garage/apt / agricult / enterprise

Current Use

undeveloped

Existing Buildings on Property

N/A

Proposed Occupant Load (Commercial)

Acreage

64.4

Commercial Use

Yes

No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision

Proffer

Amount:

Date Paid:

Yes  No

New Street Address

5750 Jabez Lane

Zoning District

A1

Front Setback

100' at low

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

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:

7/1/16

Applicant/Contact:

Henry Shield

Phone

804 370-1865

Email:

stew@stewhaas-mushrooms.com

CONTRACTOR INFORMATION

Contractor

Henry A. Shield

Phone

370-1865

Address

St. 210 4900 Augusta Ave. 23235

Contractor License Number

2701034086

Type

class A

Expiration

3/17

Description of Work

Scope of Work:

single family dwelling w/ garage below

SEWER Public/Private

WATER Public/Private

# of Bathrooms

1

# of Floors

2

Total Sq. Ft.

1800

Finished Sq. Ft.

912

Unfinished Sq. Ft.

888

# of Bedrooms

1

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

VALUE OF WORK

Building

120,000

Excludes All Trades Permits

Total:

\$753.84

Application Fee	\$ 552.00
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 11.84
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]*

**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: 8-5-2010*

Application Date: 6/24/16  
 Application Accepted: 2016-00507  
 Old Map Number: 43-18-0-3-A  
 GPIN: 6777-39-7010

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>2160 Fairgrounds Rd</u>		District		
	Owner <u>Renovatio III LLC</u>		Phone # <u>804 216 7222</u>		
	Address <u>Po Box 71595 Richmond, VA 23255</u>				
	Proposed Use <u>single family</u>	Current Use <u>single family</u>	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage <u>3</u>	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 <u>A2</u>	
	Front Setback <u>75' off Row</u>	Center Line Setback	Rear Setback <u>35'</u>	C.U. Permit <u>None</u>	Variance <u>None</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	C O A <u>N/A</u>	Flood Zone <u>N/A</u>	
	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: Dennis Floyd Date: 7/5/16

Applicant/Contact: DAVID JINNETT Phone: 804 216 7222  
 Email: jinnetteo@aol.com

CONTRACTOR INFORMATION	Contractor <u>Wanderview LLC</u>		Phone <u>804-216 7222</u>	
	Address <u>Po Box 71595 Richmond VA 23255</u>			
	Contractor License Number <u>2705135088 A</u>	Type <u>RBC CBC HIC</u>	Expiration <u>6/30/18</u>	

Description of Work	Scope of Work: <u>new single family dwelling/w attached garage</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2.5</u>		
	# of Floors <u>2</u>	Total Sq. Ft. <u>2558</u>	Finished Sq. Ft. <u>2074</u>	Unfinished Sq. Ft. <u>484</u>	# of Bedrooms <u>3</u>

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

VALUE OF WORK	<u>150,540.</u>
Building	<u>\$91,764</u> <u>58,810.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>689.43</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ <u>25.00</u>
State Levy Fee	\$ <u>14.29</u>
RLD Total	\$ <u>778.72</u>

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

Signature of Applicant: [Signature]

**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: Commonwealth Escrow Title Service Inc. Telephone: 804-359-2382

Mailing Address: 5609 Patterson Rd suite C, Richmond, VA 23226

**OWNER'S AFFIDAVIT**

I David J. Mett, president of (address) Renovate It LLC PO Box 71595 RICH VA 23255 affirm that I am the owner of a certain tract of parcel of land located at 2160 Fairgrounds 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.

[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 \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

# Alternative System 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 8-1-2016

Application Date: 5-25-16  
 Application Accepted: BP-2016-00508  
 Old Map Number: 64-12-B-14  
 GPIN: 7723-59-9907

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 403 BRANWOOD Circle		District		
	Owner The McGowan Co Inc.		Phone #		
	Address P.O. Box 8 MANAKIN SPRING, VA 23103.				
	Proposed Use Single Family	Current Use Lot	Existing Buildings on Property N/A		
	Proposed Occupant Load (Commercial)	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 R-1		
	Front Setback 40' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit None	Variance None
	Side Setback 15' / 30' B.T.U. SET.	Side Setback 15' / 30' B.T.U. SET.	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: 7/7/16

Applicant/Contact: Arthur McGowan Phone: 804-640-1294  
 Email: artemcgowan@gmail.com

Contractor: The McGowan Co Inc. Phone: 804-640-1294  
 Address: P.O. Box 8 MANAKIN SPRING, VA 23103  
 Contractor License Number: 2701021780 Type: A; Res. Comm Expiration: 10-31-2016

Description of Work:  
 Single Family Residential 1 floor construction  
 attached garage New home  
 SEWER: Public/Private # of Floors: 1  
 WATER: Public/Private # of Bathrooms: 2  
 Total Sq. Ft.: 1862 Finished Sq. Ft.: 1348 Unfinished Sq. Ft.: 320 GARAGE # of Bedrooms: 3

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

VALUE OF WORK		514	Application Fee	\$ 481.40
Building	\$ 95,000		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 25.00
		Total:	State Levy Fee	\$ 10.13
		\$1066.59	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: Arthur McGowan

**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: Mike Williams Telephone: 1-800-320-7835

Mailing Address: 701 Twin Ridge Ln. Richmond VA 23235

**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 8-25-16*

Application Date: *7.12.16*  
 Application Accepted: *BP-2016-00531*  
 Old Map Number: 26-1-0-28-E  
 GPIN: 6718-09-8698

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 5200 Fox Field Farm Ct.			District Byrd		
	Owner Billy L. Llewellyn Sr.			Phone # 804-389-6643		
	Address 2480 Old Time Rd. Powhatan, Va. 23139					
	Proposed Use New Home		Current Use Vacant Lot	Existing Buildings on Property NONE		
	Proposed Occupant Load (Commercial)		Acreage 6.9	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 <i>A1</i>		
	Front Setback <i>55' off Row</i>	Center Line Setback —	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 Boyd* Date: *7/13/16*

Applicant/Contact: B. Lee Llewellyn Jr. Phone: 804-350-9327  
 Email: otblee@msn.com

CONTRACTOR INFORMATION	Contractor Old Time Builder Inc.		Phone 804-350-9327	
	Address 2420 Old Time Rd. Powhatan, Va. 23139			
	Contractor License Number 2701019088		Type Class A, CBC RBC	Expiration 1/31/2017

Description of Work	Scope of Work: Construct a new single family dwelling with basement and attached garage <i>unfinished</i>				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. <i>3294</i>	Finished Sq. Ft. <i>2003</i>	Unfinished Sq. Ft. <i>1291</i>	# of Bedrooms 3
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		storm water \$200.00	Application Fee	\$905.87
Building	\$120,000 #198,637.50		Zoning Fee	\$50.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$18.92
			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]* Total: \$1314.79

**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: Hairfield & Morton Telephone: 804-320-6600

Mailing Address: Bon Air Professional Building, 2800 Buford Rd. Suite 201, PO Box 35724, Richmond Va. 23235

**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 8.2.16

Application Date: 7/12/16  
 Application Accepted: BP-2016-00537  
 Old Map Number: 6840-78-2008  
 GPIN: 20-1-0-65-A

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 3035 Rocky Creek Ln.		District LICKINGHOLE		
	Owner John Coleman Martin		Phone # 804-398-9122		
	Address 3035 Rocky Creek Ln, Gum Springs VA 23065				
	Proposed Use New Home	Current Use Existing Home	Existing Buildings on Property Mobile Home		
Proposed Occupant Load (Commercial)	Acreage 12	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 A1		
	Front Setback 55' off Road	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: * Existing single wide must be removed no later than lock keys after 20.		
	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: <u>[Signature]</u> Date: 7/15/16					
Applicant/Contact: Don Trumble			Phone: 804-241-8068		
Email: don@trumblebuildersinc.com					
CONTRACTOR INFORMATION	Contractor Trumble Builders, Inc		Phone 804-241-8068		
	Address 12261 Pinkhook Rd Rockville, VA 23146				
	Contractor License Number 2205014227	Type CLASS A RBCBC	Expiration 9-30-16		
Description of Work	Scope of Work: New <sup>sfd</sup> Home				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1 1/2		
	# of Floors 1	Total Sq. Ft. 1100	Finished Sq. Ft. 1100	Unfinished Sq. Ft. 303	
			# of Bedrooms 2		
TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.					

VALUE OF WORK 1403

Building	86427
Excludes All Trades Permits	

Application Fee	\$ 400.92
Zoning Fee	\$ 50.00
Septic/Well Fee	\$
State Levy Fee	\$ 8.02
<del>REG</del> Total	\$ 458.94

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: POWHATAN REAL ESTATE SETTLEMENTS, LLC Telephone: 804-598-7160

Mailing Address: 3887 Old Buckingham Rd Powhatan, VA 23139

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 [Signature] DATE 8/01/2010
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 8-9-2016

7-14-2016

Application Accepted: BP-2016-00540  
 Old Map Number: DA 201507 46-1-68-C  
 GPIN: 7707-80-900A 7903

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 Parcel split of 511 Broad St. Rd. Manakin Sabot VA 23103			District		
	Owner Michael Higgs / Morgan Legum			Phone # 804 357 7162		
	Address 511 Broad St Rd Manakin Sabot VA 23103					
	Proposed Use Single Family Home		Current Use N/A	Existing Buildings on Property NONE		
	Proposed Occupant Load (Commercial)		Acreage 2.00	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		Date Paid:	
	New Street Address			Zoning District R2		
	Front Setback 100' off Row	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:					
<p>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.</p> <p>Planning &amp; Zoning Officer: <u>David Floyd</u> Date <u>7/15/16</u></p>						
Applicant/Contact: <u>Eric Parr</u>				Phone 804 652 7953		
Email: <u>eric.premier.structures@gmail.com</u>						
CONTRACTOR INFORMATION	Contractor Premier Structures LLC			Phone 804 652-7953		
	Address 14003 Ashland Rd Ashland VA 23005					
	Contractor License Number 2705144553		Type A		Expiration 3-31-2018	
Description of Work	Scope of Work: <u>New Single Family Home w/ Attached Garage</u>					
	SEWER Public/Private	WATER Public/Private	2.5		# of Bathrooms	
	# of Floors 1	Total Sq. Ft. 3204	Finished Sq. Ft. 1902	Unfinished Sq. Ft. 3411302	# of Bedrooms 3	
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.					

VALUE OF WORK \$	
Building	175,000.00
	191,475.00
Excludes All Trades Permits	

Application Fee	\$ 873.64
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 18.27
<del>RLD</del> Total	\$ 1081.91

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.

X [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: Old Republic National Title Ins Company Telephone: 804-281-7490

Mailing Address: 1800 Bayberry Court, Suite 104 Richmond VA 23226  
attn: Melinda Lopez

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: 8-1-2010

Application Date: 7-19-16  
 Application Accepted: BP-2016-00550  
 Old Map Number: 21-5-0-1-0  
 GPIN: 6850-32-9737

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 3094 Sandy Hook Road Mill Trace Lane		District Lickinghole		
	Owner SAPRINA HENRY		Phone # 804-678-9940		
	Address 17071 Will James Lane Montpelier VA, 23192				
	Proposed Use SFH	Current Use	Existing Buildings on Property NONE		
	Proposed Occupant Load (Commercial)	Acreage 3.463	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District Lickinghole A-2		
	Front Setback 75' from ROW	Center Line Setback	Rear Setback 35'	C.U. Permit	Variance
	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: David Taylor Date: 7/20/16

Applicant/Contact: KEN Broadwater Phone: 804-375-3044  
 Email: Ken@KenBroadwaterHomes.com

CONTRACTOR INFORMATION	Contractor Ken Broadwater Homes, LLC		Phone 804-375-3044	
	Address 99 Rhodes Lane Cartersville, VA, 23027			
	Contractor License Number 2705-100355	Type BLD-HIC-CIC	Expiration 11-17	

Description of Work	Scope of Work: Single Family Home w/attached garage			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2.5	
	# of Floors 1	Total Sq. Ft. 2256	Finished Sq. Ft. <del>1020</del> 924	# of Bedrooms 3

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

VALUE OF WORK	Application Fee \$ 871.50
Building # 191,000.00	Zoning Fee \$ 50.00
Excludes All Trades Permits	Septic/Well Fee \$ 40.00
Total 1,079.73	State Levy Fee \$ 17.43 + .80
	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]*

**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 E Satterwhite Telephone: 804-556-4012

Mailing Address: P.O. Box 325 Goochland, VA. 23063

**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 Laurie Beck DATE 08/01/2016  
Code Official

*ISSUED 8-18-16*  
**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 10-2 PARKSIDE VILLAGE**

Application Date: *08-11-16*

Permit Number: *BP-20110-00624*

Old Map Number: *48-18-10*

GPIN: *57738-11-5852*

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.

<b>OWNER INFORMATION</b>	Site Address 7198 Yare Street		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	

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <i>5,987.00</i>	Date Paid: <i>Due</i>	
	New Street Address		Zoning District <i>R PUD</i>		
	Front Setback <i>30' From Pavement</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit <i>N/A</i>	Variance <i>N/A</i>
	Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	Census Track	Flood Zone <i>N/A</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>Cash Proffer is due before C.O. is issued.</i>				

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: **BERTON JAMES** Phone: (804)217-6910

Email: *bjames@eagleofva.com*

<b>CONTRACTOR INFORMATION</b>	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

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
1	2644	2084	560	3	

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

<b>VALUE OF WORK</b>	
Building	\$153,660.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>705.21</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>14.07</i>
Zoning Fee	\$ <i>50.00</i>
Total	\$ <i>769.28</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 *Berton James*

*Issued 8-24-16*

Application Date: *8-18-16*  
*08-18-16*  
 Permit Number: *BP-2016-00644*  
 Old Map Number: *48.18.12*  
 GPIN: *7738-12-4020*

**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 12-2 PARKSIDE VILLAGE**

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.

<b>OWNER INFORMATION</b>	Site Address 7221 Shenfield Avenue		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

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <i>\$ 5987.00</i>	Date Paid: <i>Due</i>	
	New Street Address		Zoning District <i>RPU1D</i>		
	Front Setback <i>30' From Pavement</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit <i>N/A</i>	Variance <i>N/A</i>
	Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	Census Track <i>N/A</i>	Flood Zone <i>N/A</i>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <i>Cash Proffer Due before C.O. is issued.</i>		

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: *8/19/16*

Applicant/Contact: BERTON JAMES Phone: (804)217-6910

Email: *bjames@eagleofva.com*

<b>CONTRACTOR INFORMATION</b>	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

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3653	2881	772	3

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

VALUE OF WORK	
Building	\$245,025.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>1,114.61</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>23.29</i>
Zoning Fee	\$ <i>50.00</i>
Total	\$ <i>1186.90</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]*



**ZONING COMPLIANCE APPLICATION**  
**COUNTY OF GOOCHLAND, VIRGINIA**

Planning and Zoning Office  
P.O. Box 103

Goochland, VA 22063

Phone: (804) 556-5860

Web: [www.co.goochland.va.us](http://www.co.goochland.va.us)

FAX: (804) 556-5654

**Office Use Only**

Application File Date: \_\_\_\_\_

Application No.: \_\_\_\_\_

Fee: \$25.00

Zoning Approval: Yes

\_\_\_\_\_

No: \_\_\_\_\_

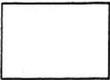
AP-2016-00653

Date: 8/22/16

**Zoning Application Type:** Please appropriate check box



**Residential Accessory Structure** – 256 sq. feet or less – structures over 256 sq. feet require a building permit



**Farm Use Structure** – Attached Farm Use Affidavit shall be completed and signed by property owner

**Application Requirements**

- Applicant shall submit two (2) sets of sealed surveyed site plans showing proposed location of building on property with setbacks clearly marked
- Applicant is responsible for locating the property lines and clearly marking them for inspection purposes and to assure setbacks are not violated

**Applicant/Owner Information**

Name of Property Owner: Howard F. Simmons

Telephone: 804-489-3260

Address: 11400 Brickview Lane  
Oilville, VA 23129

Cell phone: 757-291-3165

FAX: \_\_\_\_\_

E-mail: HOWEMAX2@GMAIL.COM

Name of Applicant: same

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Cell phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

FAX: \_\_\_\_\_

**Property Information**

Street Address: 7140 Brickview Ln.

Zoning: A-1

GPIN Number: 6798-06-7890

Acreage: 3.57

Existing Use: 33-2-0-2-0

Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire: \_\_\_\_\_

**Project Information**

1. Estimated square footage of the building(s): 216

2. Written Description of Proposed Physical Improvements:

Prefab 12'x18' Building used to store Lawn  
Equip + Garden Tools

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-8815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date:

**received**  
 8-23-16

Application Accepted:

BP-2016-00659

Old Map Number:

7724-73-5140

GPIN:

Issued 8-31-16

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 18608 Patterson Ave	District
Owner Pruitt Associates LLC	Phone #
Address 1801 Bayberry Court Suite 100	
Proposed Use	Current Use Residential
Proposed Occupant Load (Commercial)	Existing Buildings on Property Yes
Acreage 3.63	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:	Data 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: Beardon Oakes Phone 804-928-0438

Email: boakes@rsmithcos.com

Contractor: RJ Smith Construction Phone 804-714-3450  
 Address: 1711 Reymet Rd Richmond Va 23237  
 Contractor License Number: 2705067764 Type: A Expiration: 3/31/18

Description of Work: Demolition SFD  
623 landfill C&D  
concrete recycled  
1711 Reymet Rd

SEWER Public/Private	WATER Public/Private	# of Bathrooms	
# of Floors	Total Sq. Ft.	Finished Sq. Ft. 1539	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	\$15,000
Excludes All Trades Permits	

Total 81.09

Application Fee	\$ 79.50
Zoning Fee	\$ -
Septic/Wall Fee	\$ -
State Levy Fee	\$ 1.59
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.

Signature of Applicant [Signature]

BP-2016-00662

**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 8/31/16

Application Date: August 18, 2016

Application Accepted: 8/24/16

Old Map Number: 47.37.17

GPIN: 7716-77-4263

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	1510 Camberley Drive	District	
Owner	Lynden Peter Garland Sr and Olivia J. Garland	Phone #	804.784.2920
Address	1510 Camberley Drive		
Proposed Use	No Change	Current Use	10 Single Family Home
Existing Buildings on Property	10 Single Family Home		
Proposed Occupant Load (Commercial)	Acreeage	Commercial Use	
	.183	<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 <b>RPU D</b>		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
30' From Pavement		50' B/S	N/A
Side Setback	Side Setback	COA	Flood Zone
20' B/S	20' B/S	N/A	N/A

APPROVED  REJECTED  COMMENTS: \* Survey locate set backs. 10' from rear property line, (No Burial Buffer) \* Steps to come off of landing in front of Sun Room

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 Boyd Date: 8/25/16

Applicant/Contact: Jeremy N. Shank Phone: 804.400.3545

Email:

CONTRACTOR INFORMATION

Contractor	Paragon Construction Company LLC	Phone	804.744.8480
Address	12747 Oak Lake Court		
Contractor License Number	2705 079880	Type	Class A
Expiration	4/30/2018		

Description of Work

**Scope of Work:**  
 Where existing stamped concrete patio is located, construct a 19'-6" wide x 12' deep engineered 3 season sunroom on new framed foundation with brick/block piers, including 6' x 6' landing with steps to grade.

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
		n/a		
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
1	270.6	234.6 (under roof)	36 (landing) 234.6	n/a

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

VALUE OF WORK	
Building	19,158
Excludes All Trades Permits	

Total \$125.18

Application Fee	\$ 123.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$ -
State Levy Fee	\$ 1.90
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.

Signature of Applicant: Paragon LLC Member

received  
9-24-16

**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

Application Date: 8-24-16  
 Application Accepted: DP-2016-00665  
 GPIN: 6814-40-0967  
 Issued: 8-31-16

TM# 4-2-0-12-0

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 4625 SHANNON HILL Estates RD, KENNES STORE, VA		District		
	Owner BRIAN K MATTHEWS 23084		Phone # 804-514-9138		
	Address 4625 SHANNON HILL Estates RD				
	Proposed Use Porch	Current Use	Existing Buildings on Property 2		
	Proposed Occupant Load (Commercial)	Acreage 3.295	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-1		
	Front Setback 55' from ROW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variance N/A
	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: 8/26/16

Applicant/Contact: BRIAN K MATTHEWS / OWNER Phone: 804-514-9138

Email: MATTPLUS3@Hotmail.com

CONTRACTOR INFORMATION	Contractor Shackelford Associates owner		Phone 804-457-9426	
	Address 6020 Community House rd			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: construct covered porch 8ft x 18ft				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 144	Finished Sq. Ft. <del>###</del>	Unfinished Sq. Ft. 144	# of Bedrooms

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

VALUE OF WORK		Application Fee \$ 51.42
Building	\$ 8,760.00	Zoning Fee \$ 25.00
Excludes All Trades Permits		Septic/Well Fee \$
		State Levy Fee \$ 1.03
		RLD Total \$ 77.45

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]

**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 8/31/16

Application Date: 8-26-2016  
 Application Accepted: BP-2016-00667  
 Old Map Number:  
 GPIN: 60759-88-7086

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 2693 PARKHOUSE CT SANDY HOOKS		District		
	Owner CARL & CHRISTY CLAU		Phone # 804-971-1213		
	Address 2693 PARKHOUSE COURT SANDY HOOKS, VA 23153				
	Proposed Use RESIDENTIAL CARPORT	Current Use RESIDENTIAL	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	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 RR		
	Front Setback 55' from ROW	Center Line Setback	Rear Setback 5'	C.U. Permit N/A	Variance N/A
	Side Setback 5'	Side Setback 5'	COA	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: [REDACTED]	

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: 8/26/16

Applicant/Contact: CARL CLAU Phone: 804-971-1213

Email: CCCLAUS@COMCAST.NET

CONTRACTOR INFORMATION	Contractor SUPERIOR BUILDINGS, LLC		Phone	
	Address			
Contractor License Number 2705128439		Type CLASS A	Expiration 4/30/2017	

Description of Work	Scope of Work: RESIDENTIAL 3 CAR-CARPORT 24' x 32' x 9' 360			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. 268364	Finished Sq. Ft.	Unfinished Sq. Ft. 268364

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

Building	VALUE OF WORK	\$12,900.00	Application Fee	\$63.84
		<del>\$7,250</del> \$11,520.00	Zoning Fee	\$25.00
	Excludes All Trades Permits		Septic/Well Fee	\$
			State Levy Fee	\$1.28
			<del>RD</del> Total	\$90.12

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: Carl Claus

<b>BUILDING PERMIT APPLICATION</b> 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: <u>UA-1-46</u>	Application Date: <u>8-5-16</u>
	Application Accepted: <u>BP-2016-00600</u>
	GPIN: <u>7734-02-5953</u>
	Issued: <u>8-31-2016</u>

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>12486 PATTERSON AVE - RICHMOND</u>		District <u>DOVER</u>		
	Owner <u>CATHOLIC DIOCESS OF RICHMOND</u>		Phone #		
	Address				
	Proposed Use <u>STORAGE</u>	Current Use <u>STORAGE</u>	Existing Buildings on Property		
Proposed Occupant Load (Commercial)	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 <u>A-2</u>		
	Front Setback <u>100' from ROW</u>	Center Line Setback <u>—</u>	Rear Setback <u>5'</u>	C.U. Permit <u>None</u>	Variance <u>None</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	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 8/5/16

Applicant/Contact: VUONG PHAM Phone 804-290-3365  
804-503-8606

Email:

CONTRACTOR INFORMATION	Contractor <u>VUONG PHAM</u>	Phone
	Address <u>1825 BELLE MEADE RD - BUMPASS VA 23024</u>	
	Contractor License Number <u>2705085571</u>	Type

Description of Work	Scope of Work: <u>PUTTING IN a ground level slab for a metal storage type shed &lt;Prefab&gt;</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. <u>558</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>558</u>
				# of Bedrooms

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

VALUE OF WORK		Application Fee	<u>\$81.05</u>
Building	<u>\$9500</u> <del>\$15,345.00</del>	Zoning Fee	<u>\$25.00</u>
Excludes All Trades Permits		Septic/Well Fee	\$
		State Levy Fee	<u>\$1.62</u>
		<del>RTD</del> Total	<u>\$107.67</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.

Michael



# 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	8/30/16
Permit #	16-6076
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 <b>437 shadow creek lane</b>	District
--	----------

### PROPERTY OWNERSHIP

Name <b>drew aubrey</b>	Phone <b>3477760</b>
Mailing Address 437 shadow creek lane, manakin sabot 23103	

### APPLICANT

Name <b>steve conner</b>	Phone <b>7489875</b>
E-Mail Address <b>connerelec@aol.com</b>	

### CONTRACTOR

Name <b>conner electrical services, inc</b>	Phone <b>7489875</b>
Mailing Address 8005 gates bluff pl. chesterfield va. 23832	
E-mail address: <b>connerelec@aol.com</b>	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number <b>2705082783</b>
Expiration <b>3-31-18</b>	License Type <b>electrical</b>
	Class: <b>a</b>

### DESCRIPTION OF WORK

<b>wire for generator supplied by others. set new emergency panel and transfer switch for 20 kw unit</b>			
# 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.

\_\_\_\_\_(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 *Steve Conner*

Value of Work: **2500.00**

Permit fee: **35.19**

Approval *FISHER* Date *8/26/16*

Issue date: *8/30/16*



# RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

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

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	8/30/16
Permit #	16-683
Old Map #	
G-Pin	

## LOCATION

Street Address 1000 The Preserve Dr	District
--	----------

## PROPERTY OWNERSHIP

Name Larry + Pamela Anderson	Phone 757-620-0544
Mailing Address 1000 The Preserve Dr Maidens, VA 23102	

## APPLICANT

Name H.O. Feild Electric	Phone 365-0263
E-Mail Address service@hofec.com	

## CONTRACTOR

Name H.O. Feild Electric	Phone 365-0263
Mailing Address PO Box 6321 Ashland, VA 23005	License Type Ele
Class B	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705123991
Expiration 8/31/18	

## DESCRIPTION OF WORK

Install 22 kW generator w/ 2-150 amp transfer switches			
# of Baths	Service Size 300	Power Company Dominion	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		Value of work:	10,200
Approval	Fisher	Permit fee:	71.91/141
Date	8/30/16	Issue date:	8/30/16

**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 8-29-2010

Application Date: 8/23/10

Permit Number: BP-2016-00650

Old Map Number: 4-2-0-12-0

GPIN: 0814-40-0967

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 4625 Shannon Hill Estates Rd., Kent Store, VA 23084	District Byrd
Owner Brian & Dawn Matthews	Phone # 804-241-0530
Address 4625 Shannon Hill Estates Rd. Kent Store, VA 23084	
Proposed Use sunroom	Current Use deck
Proposed Occupant Load (Commercial)	Existing Buildings on Property 2
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-1	
Front Setback 55' from Row	Center Line Setback —	Rear Setback 35'	C.U. Permit N/A
Side Setback 20'	Side Setback 20'	Census Tract 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: David Floyd Date: 8/24/10

Applicant/Contact: Champion Window of Richmond/Robert Skelly Phone: 804-798-3030

Email: rskelly@getchampion.com

CONTRACTOR INFORMATION	Contractor Champion Window of Richmond	Phone 804-798-3030
	Address 10300 Northlake Park Dr., Ashland VA 23005	
	Contractor License Number 2705132917	Type A HIC RBC CBC

Description of Work	Scope of Work: enclosed Sunroom w/ 12'x3' deck 12'x13'				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0		
	# of Floors 1	Total Sq. Ft. 168	Finished Sq. Ft.	Unfinished Sq. Ft. 168	# of Bedrooms 0

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

VALUE OF WORK	
Building	20,552
Excludes All Trades Permits	

Application Fee	\$ 104.48
Septic/Well Fee	\$ N/A
State Levy Fee	\$ 2.09
Zoning Fee	\$ 25.00
Total	\$ 131.57

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  
8-16-16

# 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

Application Date: 8-16-16  
Application Accepted: DP-2016-00642  
GPIN: 7714-15-1353  
Issued: 8-29-2016

TM# 62-20-B-1-0

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: 302 Hickory Dr. District: \_\_\_\_\_  
Owner: Katherine Davison Phone #: 784-6730  
Address: 302 Hickory Dr. Manakin Sabot  
Proposed Use: \_\_\_\_\_ Current Use: \_\_\_\_\_ Existing Buildings on Property: \_\_\_\_\_  
Proposed Occupant Load (Commercial): \_\_\_\_\_ Acreage: \_\_\_\_\_ Commercial Use:  
 Yes  No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: \_\_\_\_\_ Proffer:  Yes  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  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: Danae Jordan Phone: 804-708-1234

Email: danaejordana@crowroofingva.com

CONTRACTOR INFORMATION  
Contractor: Crown Enterprises LLC Phone: 804-708-1234  
Address: PO Box 1225 Goochland VA 23063  
Contractor License Number: 2705-091277 Type: HIC Expiration: 1-1-2017

Description of Work:  
Remove glass structure (Existing floor, crawl space, & foundation remain)  
Rebuild sunroom with 2x4 stud walls, vinyl windows & sliding door. Roof to be 30x40 dimension shingle roof, e.g. g. walls & existing tile floors

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	260	260		

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

VALUE OF WORK  
Building: 21,500  
Excludes All Trades Permits

Application Fee	\$ 108.15
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 2.18
R&D Total	\$ 110.93

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.

Danae Jordan



# 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	8-29-16
Permit #	2016-674
GPIN	
Tax Map	

Type:

- Electrical
- Mechanical
- Plumbing
- Gas

This application is not authorization to start work. E11  
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	1780 Hawk Tower Rd	District	
----------------	--------------------	----------	--

### PROPERTY OWNERSHIP

Name	<del>Ryan Goodrich</del> Amy Lane	Phone	564-4049
Mailing Address	1780 Hawk Tower Rd		

### APPLICANT

Name		Phone	
E-Mail Address			

### CONTRACTOR

Name	Current Electric Inc	Phone	804-833-7705						
Mailing Address	1618 Beans Rd 23139	E-mail address:	current-electrical@hotmail.com						
Gas Certification	YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705069990	Expiration	7-31-17	License Type:	Ele	Class:	A

### DESCRIPTION OF WORK

Install 22KW Generator			
# of Baths	Service Size	Power Company	Inquiry #
	NA	NA	NA

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

Approval Fisher Date 8/29/16

Value of Work: 8500  
Permit fee: 62.73  
Issue date: 8/29/16

received  
6-20-16

<p align="center"><b>BUILDING PERMIT APPLICATION</b>          Goochland County Department Of Building Inspection          P O Box 119          Goochland VA 23063          (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay</p> <p>TM# 45-5-0-3-0</p>	<p>Application Date: June 20, 2016</p> <p>Application Accepted: <i>BP-2016-00470</i></p> <p>GPIN: <i>6797-78-2013</i></p> <p>Issued: <i>8-29-2016</i></p>
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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 <b>1070 Merchants Lane Oilville, VA 23129</b>		District	
	Owner <b>Strickland Manufacturing / Contact Sean O'Reilly</b>		Phone # <b>(866) 929-3388</b>	
	Address <b>1070 Merchants Lane Oilville, VA 23129</b>			
	Proposed Use <b>Manufacturing</b>	Current Use <b>Manufacturing</b>	Existing Buildings on Property <b>Yes</b>	
Proposed Occupant Load (Commercial) 24 new building. Totaling 58 combined	Acreage <b>5.66</b>	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District <b>M1</b>		
Front Setback <i>20' off ROW</i>	Center Line Setback <b>—</b>	Rear Setback <i>30'</i>	C.U. Permit <i>CU-2018-6</i>	Variance <i>None</i>
Side Setback <i>30'</i>	Side Setback <i>30'</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 Floyd* Date: *6/27/16*

Applicant/Contact: <b>Super Structures GC, Inc. PM Rick Gallier, Jr.</b>	Phone <b>(804) 379-9900</b>
Email: <b>rickjr@superstructuresgc.com</b>	

CONTRACTOR INFORMATION	Contractor <b>Super Structures General Contractors, Inc.</b>		Phone <b>(804) 379-9900</b>	
	Address <b>1417 Anderson Highway Powhatan, VA 23139</b>			
	Contractor License Number <b>2705061308</b>	Type <b>Class A Build</b>	Expiration <b>2017-02-28</b>	

Description of Work	<b>Scope of Work: To add on 10,550 sf addition. This will encompass a new PEMB, Concrete, Masonry, Heat for workers, fire wall separating the two buildings with a 14'x14' fire overhead door, providing additional work in the existing building for employee lounge.</b>				
	<b>SEWER</b> <i>Private</i>	<b>WATER</b> <i>Private</i>	<b># of Bathrooms</b> N/A		
	<b># of Floors</b> <b>1</b>	<b>Total Sq. Ft.</b> <b>10,500</b>	<b>Finished Sq. Ft.</b> <b>350 sf</b>	<b>Unfinished Sq. Ft.</b> <b>12,000</b>	<b># of Bedrooms</b> N/A

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

VALUE OF WORK	
Building	\$680,832
Excludes All Trades Permits	

Application Fee	\$ 6,459.90
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ _____
State Levy Fee	\$ 129.20
<del>RLD</del> Total	\$ 6,639.10

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

Signature of Applicant [Signature]

**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 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 \_\_\_\_\_

**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 AFFIDAVIT**

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\_\_\_\_\_  
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 \$ 40.30 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 B/S-1 # STORIES 1 CONSTRUCTION TYPE UB OCCUPANY LOAD 20<sup>15</sup> CODE EDITION 12  
FIRE SPRINKLER NO FIRE ALARM NO

APPROVAL \_\_\_\_\_ DATE 08-16-16  
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

Issued 8-26-16

Application Date: 7/25/16  
 Application Accepted: BP-2016-00565  
 Old Map Number: 47-33-11-C  
 GPIN: AM3BENA 7727-48-0977

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 2418 <sup>C</sup> Granite Ridge Rd		District Dover District	
	Owner Melbourne Enterprises, LLC./Duane Hawthorne		Phone # (804) 512-4991	
	Address 13077 Toler Lane Rockville, VA 23146			
	Proposed Use office/warehouse Flex space	Current Use N/A	Existing Buildings on Property N/A	
Proposed Occupant Load (Commercial) 26	Acreage 1.0	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District M-2		
Front Setback 20' from ROW	Center Line Setback -	Rear Setback 10'	C.U. Permit N/A	Variance N/A
Side Setback 10'	Side Setback 10'	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: Dwight Floyd Date: 7/29/16

Applicant/Contact: Duane Hawthorne Phone: (804) 512-4991

Email: duane@dehawthorneinc.com

CONTRACTOR INFORMATION	Contractor J. M. Bell, Inc.		Phone (804) 564-1541	
	Address 116194 Wolf Creek Rd Montpelier, VA 23192			
	Contractor License Number 27 01035174	Type Class A	Expiration 9/30/17	

Description of Work	Scope of Work: Construction of 7,500 s.f. office/warehouse Flex space Building				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0		
	# of Floors 1	Total Sq. Ft. 7500	Finished Sq. Ft. 0	Unfinished Sq. Ft. 7500	# of Bedrooms N/A

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

VALUE OF WORK	
Building	410,000 <sup>00</sup>
Excludes All Trades Permits	

Application Fee	\$ 3390.00
Zoning Fee	\$ 100.00
Septic/Well Fee	\$
State Levy Fee	\$ 77.74
<b>TOTAL</b>	<b>\$ 4064.74</b>

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: Duane E. Hawthorne