

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: 8-2-16
 Application Accepted: BY 2016-00593
 Old Map Number: 58-1-0-33-A
 GPIN: 7715-23-6257

Issued: 9.20.16

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>HERMITAGE RD GOOCHLAND VA 23063</u>		District <u>DOVER</u>	
	Owner <u>DOMINION LANDS DEV. COMPANY</u>		Phone # <u>804-385-6472</u>	
	Address <u>1503 SANTA ROSA RD SUITE 103 RICHMOND 23229</u>			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage <u>1.322</u>	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision <u>DOVER BRANCH</u>	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District <u>DOVER A-2</u>		
Front Setback <u>75' FROM ROW</u>	Center Line Setback	Rear Setback <u>45' 35'</u>	C.U. Permit <u>None</u>	Variance <u>None</u>
Side Setback <u>47' 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: [Signature] Date: 8/5/16

Applicant/Contact: PETTON HATCHER Phone: 804-385-6472
 Email: PETTON @ ROUNDOR HOUSES . COM

CONTRACTOR INFORMATION	Contractor <u>ROUND DOMINION HOUSES</u>		Phone <u>804-385-6472</u>	
	Address <u>11357 NICKOLS RD PUB 108 GLEN ALLEN VA 23054</u>			
	Contractor License Number <u>2705118875</u>	Type <u>CLASS A</u>	Expiration <u>12/31/17</u>	

Description of Work	Scope of Work: <u>CONSTRUCTION OF NEW SINGLE FAMILY RESIDENCE</u>				
	<u>SEWER</u> Public/Private	<u>WATER</u> Public/Private	<u>4.5</u>		# of Bathrooms
	# of Floors <u>2</u>	Total Sq. Ft. <u>4887</u>	Finished Sq. Ft. <u>3780</u>	Unfinished Sq. Ft. <u>1107</u>	# of Bedrooms <u>4</u>

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

VALUE OF WORK		Total Fee <u>1,694.85</u>	Application Fee	\$ <u>1,474.56</u>
Building	\$ <u>220,000.00</u> <u>325,012.50</u>		Zoning Fee	\$ <u>50.00</u>
Excludes All Trades Permits			Septic/Well Fee	\$ <u>40.00</u>
			State Levy Fee	\$ <u>30.29</u>
			RLD - RLD	\$ <u>100.00</u>

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

Signature of Applicant: [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: Kimberly S. Wright-Lawyer Telephone: (804) 288-4007

Mailing Address: 1503 Santa Rosa Rd. Suite 109
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 _____ DATE _____
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# 63-1-0-138A

Application Date: 8/15/16

Application Accepted: BP-2016-00630

GPIN: 63-1-0-138-A

Issued: 9-21-16

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	903 Sunset Dr. Parcel A		District	Dover
Owner	Renovato III LLC		Phone #	804 216 7222
Address	PO BOX 71595 Richmond, VA 23255			
Proposed Use	Single Family	Current Use	vacant	
Proposed Occupant Load (Commercial)		Acreage	2.04	
		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		A-2				
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'	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: 8/16/16

Applicant/Contact: David Jinnett president Phone: 804 216 7222

Email: jinnetto@aol.com

CONTRACTOR INFORMATION	Contractor	Walderview Homes	Phone	804-404-2690
	Address	PO BOX 71595 Richmond VA 23255		
	Contractor License Number	2705135088A	Type	CASSA BLD
		Expiration	6/18	

Description of Work	Scope of Work:				
	Build new single family dwelling w/ attached garage				
	SEWER Public/Private	WATER Public/Private	3.5 # of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
2	263,440	2650	790	4	

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

VALUE OF WORK

Building	\$198,750
Excludes All Trades Permits	

Application Fee	\$ 906.37
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 19.93
RLD Total	\$ 1,015.30

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.

David Jinnett

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: Commonwealth Escrow + Title Telephone: _____

Mailing Address: 5609 Patterson Ave suite C 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 Louis Beck DATE 9/21/2016

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: 18.14.4

Application Date: 8/10/16

Application Accepted: BP-2016-006410

GPIN: 6820-69-3489

Issued: 9.23.16

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: 3328 Lot 4, Tillar Lane, Goochland, VA 23063 District: _____
 Owner: Charlie Forbes Phone #: (804) 514 4728

Address: _____
 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: A-1

Front Setback: 75' 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 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: David Boyd Date: 8/19/16

Applicant/Contact: Charlie Forbes Phone: (804) 514 4728

Email: Charlieforbes4@gmail.com

Contractor: Charlie Forbes Phone: (804) 514 4728

Address: 12830 West Creek Parkway, Suite G, Richmond, VA 23238

Contractor License Number: 2705159564 Type: Class A, RBC Expiration: 2/28/18

Description of Work: Scope of Work: 2 story house, stick framing with traditional crawl, 4 bedrooms, 2 1/2 bath

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
2	2,636	1,974	662	4

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

VALUE OF WORK	
Building	300,000
Excludes All Trades Permits	

Storm Water \$200.00

Application Fee	\$1362.00
Zoning Fee	\$50.00
Septic/Well Fee	\$40.00
State Levy Fee	\$28.04
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.
 total 1820.04

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# 30-8-0-33-0

Application Date: 8/27/16

Application Accepted: 30-2016-00666

GPIN: 6759-61-3290

Issued: 9.30.2016

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	2436 Cheney Creek Rd, Goochland		District	Lickinghole
Owner	Bull Dogg LLC	VA. 23063	Phone #	
Address	2240 Old Buck Rd, Glen Allen, Va 23060			
Proposed Use	Current Use	Existing Buildings on Property		
Proposed Occupant Load (Commercial)	Acreage	Commercial Use		
	3.18	<input type="checkbox"/> Yes <input type="checkbox"/> No		

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
Cheney Creek	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
New Street Address	Zoning District		
	A-2		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
75' Front		35' Rear	N/A
Side Setback	Side Setback	COA	Flood Zone
20'	20'	N/A	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: David Floyd Date: 8/26/16

Applicant/Contact: Jim Buchanan Phone: 356-4045

Email:

CONTRACTOR INFORMATION	Contractor	J.M. Buchanan, Inc.	Phone	356-4045
	Address	11453 Rockville Rd, Rockville, Va 23146		
	Contractor License Number	Type	Expiration	
	2701028126	A	6/30/18	

Description of Work	Scope of Work: Single family w/ attached garage w/ unfinished basement				
	SEWER Public/Private	WATER Public/Private	2 # of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3747	1548	2199	3

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

VALUE OF WORK

Building	106,000 170,000.00
Excludes All Trades Permits	

Application Fee	\$ 777.00
Zoning Fee	\$ 30.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 16.34
RLD Total	\$ 983.34

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: [Handwritten 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: MG Law Telephone: 288-3600

Mailing Address: 1802 Bayberry Ct, Suite 200
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

Issued 9-1-2016
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 11-2 PARKSIDE VILLAGE

Application Date:
 8-24-2016
 Permit Number: *BP-2016-00669*
 Old Map Number: *48.18.11*
 GPIN: *7738-11-5829*

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 7200 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		
TO BE COMPLETED BY ZONING DEPARTMENT	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>RPUD</i>		
	Front Setback <i>30' From Paved Area</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>15' Western</i>	Census Tract <i>Setback</i>	Flood Zone <i>N/A</i>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <i>Each 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 *David Floyd* Date *8/26/16*

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

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 1	Total Sq. Ft. 3119	Finished Sq. Ft. 2677	Unfinished Sq. Ft. 442	# of Bedrooms 3

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

VALUE OF WORK	
Building	\$217,350.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>993.24</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>19.80</i>
Zoning Fee	\$ <i>50.00</i>
Total	\$ <i>1063.04</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]*

~~ISSUED 9-1-16~~

Issued 9-1-16
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 29-2 PARKSIDE VILLAGE

Application Date:
 08-29-16
 Permit Number: BP-2016-00678
 Old Map Number: 48-18-29
 GPIN: 7738-11-9858

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 7206 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		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>5987.00</u>	Date Paid: <u>Due</u>	
	New Street Address		Zoning District <u>RPUD</u>		
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit <u>N/A</u>	Variance <u>N/A</u>
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Census Track <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <u>Cash Proffer Due before C.O. is issued</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 8/30/16

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

VALUE OF WORK	
Building	\$153,660.00
Excludes All Trades Permits	

Application Fee	\$ <u>705.03</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>14.07</u>
Zoning Fee	\$ <u>50.00</u>
Total	\$ <u>769.10</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]

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 9.29.16

Application Date: 9/1/16
 Application Accepted: BP-2016-00694
 Old Map Number: 30-8-16
 GPIN: 6759-71-1076

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 2429 Cheney Creek Road		District		
	Owner Emerald Homes		Phone #		
	Address PO Box 4309 Midlothian 23112				
	Proposed Use Single Fam Sub.	Current Use Same	Existing Buildings on Property N/A		
	Proposed Occupant Load (Commercial) N/A	Acreage 3.14 AC	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-2		
	Front Setback 75' 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 1	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 [Signature] Date: 9/2/16

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

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

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

SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2		
# of Floors 2	Total Sq. Ft. 2404	Finished Sq. Ft. 1800	Unfinished Sq. Ft. 604	# of Bedrooms 3

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

VALUE OF WORK		Total: \$830.17	Application Fee	\$626.83
Building	136,630		Zoning Fee	\$50.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$13.34
			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, IV

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) 556-5651 TDD 711 Va Relay

Issued 9-14-16

Application Date: *9-7-16*
 Application Accepted: *BP-2016-00705*
 Old Map Number: *58.48.8.30*
 GPIN: *7715-56-1875*

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 828 Lachlan Road Manakin Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District <i>RPUD</i>		
Front Setback <i>30' from Perimeters</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>30' B/S</i>	C O A	Flood Zone <i>N/A</i>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>* Survey locate front setbacks</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: *David Owen* Date: *9/8/16*

Applicant/Contact: **David Owen** Phone: **804-708-5120**
 Email: **dowen@boonehomes.net**

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.		Phone 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Contractor License Number 2705 022198A		Type BLD	Expiration 3/31/2018

Description of Work	Scope of Work: New Single family home with attached Garage				
	SEWER Public/ Private	WATER Public/ Private	3.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. <i>4936 4946</i>	Finished Sq. Ft. <i>4143 4153</i>	Unfinished Sq. Ft. 793	# 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	Application Fee	\$ <i>1547.46</i>
Building	\$341,000 \$341,212.50		Zoning Fee	\$ <i>50.00</i>
Excludes All Trades Permits			Septic/Well Fee	\$ <i>200.00</i>
			State Levy Fee	\$ <i>30.95</i>
			RLD	\$ <i>100.00</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]* Total: **\$1,928.41**

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 Insurance Co Telephone: 804-281-7484

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 *Lance Beck* DATE 9/13/2016
Code Official

RECEIVED 9-7-16

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

Application Date: 9-8-16
Application Accepted: BP-2016-00711
Old Map Number: 49-1-0-119-B2
GPIN: 6766-39-7213

Permit Issued: 9-27-16

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: 1603 Maidens Road Maidens, VA 23102 District: _____
Owner: Carolyn H. Palmer Phone #: 840-4376
Address: 1603 Maidens Road
Proposed Use: residence Current Use: residence 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: A-2
Front Setback: 55' from PLU Center Line Setback: _____ Rear Setback: 35' C.U. Permit: N/A Variance: N/A
Side Setback: 20' Side Setback: 20' C O 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: Davis Date: 9/9/16

Applicant/Contact: Donald Nunnally or Carolyn Palmer Phone: 339.9106 / 840-4376
Email: _____

CONTRACTOR INFORMATION

Contractor: DE Nunnally Contractor Inc Phone: 804-339.9106
Address: 3010 Skippers Ridge Pawhatan VA 23137
Contractor License Number: 2705085006 Type: CBC-6FC-DLB-RBC Expiration: 5-31-2013

Description of Work

Scope of Work: Residential sfd w/ attached garage using existing basement
Rebuild House after fire damage.
SEWER: Public/Private _____ # of Floors: 2
WATER: Public/Private _____ Total Sq. Ft.: 1,792 Finished Sq. Ft.: 1456 Unfinished Sq. Ft.: 336
of Bathrooms: 2 # of Bedrooms: 3

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

VALUE OF WORK: 205,000 Excludes All Trades Permits
Application Fee: \$ NO
Zoning Fee: \$ NO
Septic/Well Fee: \$ NO
State Levy Fee: \$ NO
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: Donald E. Nunnally

Issued: 9.23.2016

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 16-2 PARKSIDE VILLAGE

Application Date: 09/12/16 *9-13-16*

Permit Number: *BP 2016-00721*

Old Map Number: *48-18-0-14-0*

GPIN: *7738-12-7100*

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 7213 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		
TO BE COMPLETED BY ZONING DEPARTMENT	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>R PUD</i>		
	Front Setback <i>30' from Property</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 Tract <i>N/A</i>	Flood Zone <i>N/A</i>	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: <i>Call 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: *Darius Tusch* Date: *9/13/16*

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

Email: *bjames@eagleofva.com*

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	3.5	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3574	2677	897	3

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

VALUE OF WORK	
Building	\$234,412.50
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <i>1,069.55</i>
Septic/Well Fee	\$ <i>-</i>
State Levy Fee	\$ <i>21.34</i>
Zoning Fee	\$ <i>50.00</i>
Total	\$ <i>1,140.89</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]*

Issued 9.27.16
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 35-1 PARKSIDE VILLAGE

Application Date: **9.21.16**
 Permit Number: **BP-2016-00757**
 Old Map Number: **48.17.35**
 GPIN: **7738-10-8842**

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 7171 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		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$ 5987.00	Date Paid: Due	
	New Street Address		Zoning District RPUD		
	Front Setback 30' From Pavement	Center Line Setback —	Rear Setback 50' B/S	C.U. Permit N/A	Variance N/A
	Side Setback 20' B/S	Side Setback 20' B/S	Census Tract N/A	Flood Zone N/A	
	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: **Drew Floyd** Date **9/23/16**

Applicant/Contact: **BERTON JAMES** Phone: **(804)217-6910**
 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 2	Total Sq. Ft. 3238 3240	Finished Sq. Ft. 2658	Unfinished Sq. Ft. 582	# of Bedrooms 3

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

Building	VALUE OF WORK \$221,175.00 \$221,025.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$ 1011.07
Septic/Well Fee	\$
State Levy Fee	\$ 20.15
Zoning Fee	\$ 50.00
Total	\$ 1081.22

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]**

Issued 9.27.16
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 25-2 PARKSIDE VILLAGE

Application Date: *9.21.16*
 Permit Number: *BP-2016-00761*
 Old Map Number: *48.18.25*
 GPIN: *7738-21-0628*

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 7054 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: <i>5987.00</i>	Date Paid: <i>DUE</i>
	New Street Address		Zoning District <i>RPUD</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>
	Side Setback <i>20' B/S</i>	Side Setback <i>30' B/S</i>	Census Tract <i>N/A</i>	Flood Zone <i>N/A</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <i>Cysh Proffer Due before C.U. 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: *David Heyd* Date: *9/23/16*

Applicant/Contact: BERTON JAMES Phone: (804)217-6910
 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	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.
1	2736	2176	560	2

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

VALUE OF WORK		Application Fee	\$ <i>732.03</i>
Building	\$159,640.00	Septic/Well Fee	\$
		State Levy Fee	\$ <i>14.61</i>
		Zoning Fee	\$ <i>50.00</i>
		Total	\$ <i>796.64</i>
<i>Excludes All Trades Permits</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]*

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: 9-2-16
 Application Accepted: DP-2016-00698
 Old Map Number: 48-1-0-119-B2
 GPIN: 6766-39-7213

Issued 9-7-16

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>1103 Maidens Road</u>		District	
	Owner <u>Carolyn H. Palmer</u>		Phone # <u>840-4376</u>	
	Address <u>1103 Maidens Rd, maidens, va. 23102</u>			
	Proposed Use <u>residence</u>	Current Use <u>residence</u>	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage	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	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	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: Donald Nunnally or Carolyn Palmer Phone 339-9106 / 840-4376
 Email: _____ Fax # 598-7135

CONTRACTOR INFORMATION	Contractor <u>DE Nunnally Contractors Inc</u>	Phone <u>804-339-9106</u>
	Address <u>3010 Skippers Ridge Powhatan VA 23139</u>	
	Contractor License Number <u>2705085006</u>	Type <u>CBC-GFC-PLB-RBC</u>

Description of Work	Scope of Work: <u>Demo due to house fire</u> <u>Ashcake Rd Landfill</u> <u>Taylor Rd Landfill</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2</u>	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft. # 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		NO fee due for fire	Application Fee	\$ _____
Building <u>Demo</u>	<u>\$ 14,600.00</u>		Zoning Fee	\$ _____
<u>Excludes All Trades Permits</u>			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.

Signature of Applicant: Donald E Nunnally

Revised 8.9.16 finish storage area & 5th bedroom

Revised: 9-6-16 Add planter to back of raised patio

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 4.18.2016

Application Date: 4.14.2016

Application Accepted: BP-2016-00245

Old Map Number: 58.48.8.14

GPIN: 7715-56-5277

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 833 Elmslie Lane, Manakin Sabot, VA 23103		District Dover	
	Owner Boone Homes, Inc.		Phone # 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Proposed Use New Home	Current Use Vacant lot	Existing Buildings on Property None	
Proposed Occupant Load (Commercial) N/A	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District RDUD		
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: Verify front setback				

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: 4-14-2016
 5-19-2016 Revised

Applicant/Contact: David Owen Phone: 804-708-5120
 Email: ddown@boonehomes.net

CONTRACTOR INFORMATION	Contractor Boone Homes, Inc.		Phone 804-784-6192	
	Address 129 Broad Street Road, Manakin Sabot, VA 23103			
	Contractor License Number 2705 022198A		Type BLD	Expiration 3/31/2018

Description of Work	Scope of Work: New Single family home with attached Garage attached garage enlarge Revised 5.17.16 attached patio			
	SEWER Public/Private XXXX	WATER Public/Private XXXX	5.5	# of Bathrooms
	# of Floors 2	Total Sq. Ft. 5467	Finished Sq. Ft. 4643 4987	Unfinished Sq. Ft. 824 480
			# of Bedrooms 5	

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

VALUE OF WORK \$	Application Fee	\$1947.00
Building \$430,000	Zoning Fee	\$50.00
444,295.00	Septic Well Fee	\$200.00
Excludes All Trades Permits	State Levy Fee	\$38.94
	RLD	\$100.00

Storm Water

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. Total: \$2335.94
 Signature of Applicant: [Signature]

45-1-74

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: 5.26.2016
 Application Accepted: BP-2016-00404
 GPIN: 6796-88-1664
 Issued:

Issued 9.12.16

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>1017 Northfield Road</u>		District <u>5</u>	
	Owner <u>Shield Family Limited</u>		Phone # <u>514-4961</u>	
	Address <u>5905 Lowry Street Richmond VA 23226</u>			
	Proposed Use <u>Residential</u>	Current Use	Existing Buildings on Property <u>2 log cabin 1 Trailer</u>	
	Proposed Occupant Load (Commercial)	Acreage <u>314</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 checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address <u>1017 Northfield</u>		Zoning District <u>A-2</u>	
	Front Setback <u>55' off ROW</u>	Center Line Setback	Rear Setback <u>35</u>	C.U. Permit
	Side Setback <u>20</u>	Side Setback <u>20</u>	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 5.26.2016

Applicant/Contact: _____ Phone _____
 Email: _____

CONTRACTOR INFORMATION	Contractor <u>owner</u>	Phone <u>514-4961</u>
	Address	
	Contractor License Number	Type
		Expiration

Description of Work	Scope of Work: <u>mobile Home - Doublewide</u>				
	<u>Replacing mobile home with new. using existing well & septic</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		<u>2</u>
	# of Floors <u>1</u>	Total Sq. Ft. <u>2220</u>	Finished Sq. Ft. <u>2000 1568</u>	Unfinished Sq. Ft. <u>220 250</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 1818

Building	<u>\$25,000.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>124.50</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>2.49</u>
REBF Total	\$ <u>176.99</u>

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

ISSUED: 9-6-16

received 8-24-16

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-2016-00663
GPIN: 6748-97-2250
Issued:

TM# 29-1-0-130-0

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	2451 Dogtown Rd., Goochland, VA 23063		District	Lickinghole
Owner	Vernon & Mindy Daniels		Phone #	(804) 556-3977
Address	2451 Dogtown Rd, Goochland, VA 23063			
Proposed Use	Current Use	Existing Buildings on Property		
Outdoor Porch	N/A	Family Dwelling		
Proposed Occupant Load (Commercial)	Acreage	Commercial Use		
N/A	6.06	<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 A1	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
55' from Row.	-	35'	N/A
Side Setback	Side Setback	COA	Flood Zone
20'	20'	N/A	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 8/25/16

Applicant/Contact: _____ Phone 556-3977

Email: _____

CONTRACTOR INFORMATION	Contractor	owner	Phone
	Address		
	Contractor License Number	Type	Expiration

Description of Work	Scope of Work: <u>wrap around porch on existing house</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
		- 168		- 168	

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

VALUE OF WORK	
Building	- 25,000.
Excludes All Trades Permits	

Application Fee	\$ 124.50
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 2.49
RLD Total	\$ 151.99

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.

Vernon Daniels

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: 8/29/16
 Application Accepted: BP-2016-006077
 Old Map Number: 58-47-2
 GPIN: 77210-05-3652

Issued: 9-6-16

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 1701 Centerville Parke Lane 23103		District		
	Owner MR & MRS. Rich Krieger		Phone #		
	Address 1701 Centerville Parke Lane NANAKIN SAHUT VA 23103				
	Proposed Use Dwelling	Current Use Dwelling	Existing Buildings on Property Dwelling		
	Proposed Occupant Load (Commercial)	Acreage	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 RPD		
	Front Setback 30' From Parkway	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A	Variance N/A
	Side Setback 20' B/S	Side Setback 20' B/S	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 Lynd Date: 8/30/16

Applicant/Contact: STEVE MURPHY Phone 804-285-4239

Email: SMURPHY@addadeck.com

CONTRACTOR INFORMATION	Contractor Add A Deck Inc.		Phone 804-285-4239	
	Address 6408 HALLORY DR. Henrico VA 23236			
	Contractor License Number 2701-033201A	Type CLASS A BLD	Expiration 11/30/2016	

* Please mail

Description of Work	Scope of Work: EXPAND existing 14x14 DECK to 14'x20' PORCH WITH 8'x11' side deck. SCREEN			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. 368	Finished Sq. Ft.	Unfinished Sq. Ft. 368
			# of Bedrooms	

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

VALUE OF WORK	
Building	# 24,500 ⁰⁰
Excludes All Trades Permits	

Application Fee	\$122.25
Zoning Fee	25.00
Septic/Well Fee	\$
State Levy Fee	2.44
BLD Total	\$149.69

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. Steve Murphy

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: **received**
 8-23-16

Application Accepted:
 BP-2016-00671

Old Map Number:
 59-3-2-9-A

GPIN: 7726-84-4399

Issued 9-7-2016

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 1000 Wilkes Ridge Place, Richmond VA 23233		District MI	
	Owner Mid America Apartments		Phone #	
	Address 6584 Poplar Ave, Memphis, TN 38138			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input 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 MI	
Front Setback 5'	Center Line Setback	Rear Setback	C.U. Permit N/A	Variance N/A
Side Setback	Side Setback	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 [Signature] Date: 9/1/16

Applicant/Contact: Shane Neitzey Phone: 703-753-3016

Email: shane@shanessigns.com

CONTRACTOR INFORMATION	Contractor Shane's Signs, Inc.		Phone 703-753-3016	
	Address 17015 Gaines Road, Broad Run, VA 20137			
	Contractor License Number 2205007405	Type Class A	Expiration 2-28-2017	

Description of Work	Scope of Work: Sign reface to existing monument structure. Sign area to remain the same. Addition of secondary monument structure at phase II.			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.

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

VALUE OF WORK	
Building	20,166.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$183.58
Zoning Fee	\$50.00
Septic/Well Fee	\$
State Levy Fee	\$3.67
Total	\$237.25

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.

Signature of Applicant: Valerie Neitzey

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: 9-7-16

Application Date: 8/29/16

Application Accepted: BP-2016-006073

Old Map Number: 13-1-44-C

GPIN: 6841-73-4086

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 3691 Broad Street Rd, Gums Spring, VA 23065		District Byrd		
	Owner RAY G. + Wanda B. Clemons		Phone # 804-556-4392		
	Address Same				
	Proposed Use carport	Current Use -	Existing Buildings on Property Farm Building		
Proposed Occupant Load (Commercial) -	Acreage 16	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 100' from Row	Center Line Setback -	Rear Setback 5'	C.U. Permit N/A	Variance N/A
	Side Setback 5'	Side Setback 5'	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: [Signature] Date: 8/29/16

Applicant/Contact: RAY Clemons Phone: 804-390-5065
 Email: wbrgclemons@aol.com

CONTRACTOR INFORMATION	Contractor Carport Inc owner	Phone
	Address	
	Contractor License Number	Type
		Expiration

Description of Work	Scope of Work: put up carport 18x21			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. 378	Finished Sq. Ft.	Unfinished Sq. Ft. 378
				# of Bedrooms

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

VALUE OF WORK

Building	\$ 134 ⁰⁰	\$ 5,670.00
Excludes All Trades Permits		

Application Fee	\$ 37.52
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$.75
RTD Total	\$ 63.27

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 A. Clemons

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: 8/16/16 **received**
 Application Accepted: DP-2016-00633
 Old Map Number: 111# 28-14-010-0
 GPIN: 6739-80-8106

Issued: 9-7-16

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 2310 Bexley Wood Run		District	
	Owner Juanita Mack		Phone # 804 457 9505	
	Address 2310 Bexley Wood Run			
	Proposed Use	Current Use	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	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	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: Bryan Speed Phone 804 495 4646
 Email: bspeed@yesnow.com

CONTRACTOR INFORMATION	Contractor JES Construction	Phone 804 495 4646
	Address 2440 Southland Dr.	
	Contractor License Number 2705068655	Type A

Description of Work	Scope of Work: crawl space encapsulation system			
	<input checked="" type="checkbox"/> SEWER Public/Private	<input checked="" type="checkbox"/> 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	14,740.20
Excludes All Trades Permits	

Application Fee	\$ 79.90
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$
RED Total	\$ 79.90

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

Application Date: 8.4.16 77-68
 Application Accepted: BP-2016-00632
 Old Map Number: TM# 43-340-1-0
 GPIN: 0767-84-8251

Issued: 9-7-16

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		1826 Summer Wind Lane		District	
	Owner		James + Patricia Barden		Phone #	
	Address		1826 Summer Wind Lane		804 337 7224	
	Proposed Use	Current Use	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	Amount:	Date Paid:		
		<input type="checkbox"/> Yes <input type="checkbox"/> 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 <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@jesnew.com

CONTRACTOR INFORMATION	Contractor	JES Construction	Phone	804 495 4646
	Address	2410 Southland Dr.		
	Contractor License Number	270 506 8655	Type	A
			Expiration	7-30-18

Description of Work	Scope of Work: Crawl space encapsulation system				
	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	14256.00
Excludes All Trades Permits	

Application Fee	\$ 77.68
Zoning Fee	\$ -----
Septic/Well Fee	\$ -----
State Levy Fee	\$ -----
RLD Total	\$ 77.68

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

ISSUED: 9-7-16

Application Date: 8-30-16
 Application Accepted: BP-2016-00680
 Old Map Number: 57-1-51
 GPIN: 7715-18-2068

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 1233 MANAKIN ROAD		District		
	Owner George Poulos		Phone #		
	Address 1233 MANAKIN ROAD				
	Proposed Use	Current Use	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 A-2		
	Front Setback 15' from 21000'	Center Line Setback	Rear Setback 5' 400'	C.U. Permit N/A	Variance N/A
	Side Setback 5' 210'	Side Setback 5' 100'	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: <u>[Signature]</u> Date: 8/30/16					
Applicant/Contact: Ultimate Pools / Steve Jones			Phone: 749-4706		
Email:					
CONTRACTOR INFORMATION	Contractor: Ultimate Pools		Phone:		
	Address: 2175 Lanyon Ln Rockville, VA 23146				
	Contractor License Number: 2705026339	Type: RPC RBC CB	Expiration: 2-28-17		
Description of Work	Scope of Work: In-ground 18x36 pool with spa + Auto cover				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 1048	Finished Sq. Ft.	Unfinished Sq. Ft. 1048	
			# of Bedrooms		
TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.					

VALUE OF WORK

Building	45,000.00
Excludes All Trades Permits	

Application Fee	\$ 214.50
Zoning Fee	25.00
Septic/Well Fee	\$
State Levy Fee	\$ 4.29
RPD Total	\$ 243.79

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

TM: 17-1-86-J

Application Date: 8/29/2016

Application Accepted: BP-2016-00685

GPIN: 6719-17-1909

Issued: 9-8-2016

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 2657 Hudensville Fife rd		District	
	Owner Floyd Newton		Phone # 804-837-3723	
	Address			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage 10	Commercial Use <input 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 A-1		
Front Setback 75' from Row	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variance N/A
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: [Signature] Date: 9/1/16

Applicant/Contact: Denny Queensberry Phone: 804-241-3920

Email:

CONTRACTOR INFORMATION	Contractor Owner		Phone	
	Address			
	Contractor License Number	Type	Expiration	

Description of Work: 30x10 deck addition to front of house with roof

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. 300	Finished Sq. Ft.	Unfinished Sq. Ft. 300	# of Bedrooms

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

VALUE OF WORK

Building	9,000
Excludes All Trades Permits	

Application Fee	\$ 52.50
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$ 1.05
REB Total	\$ 78.55

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]

T.35Ued: 9-4-16

RECEIVED 9-22-16

Application Date: 8-22-16
 Application Accepted: BP-2016-00661
 GPIN: 6738-56-9625
 Issued:

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# 28-1-0-103-0

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 4274 River Road W.		District		
	Owner Shelby E. Salyer		Phone # (804) 457-9527 / 543-8813		
	Address P.O. Box 413 Goochland, Va. 23063				
	Proposed Use	Current Use	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 A1	
	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'	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 Ford Date: 8/25/16

Applicant/Contact: Shelby E. Salyer/owner contract Phone: (804) 457-9527 - home / 543-8813 - cell

Email:

CONTRACTOR INFORMATION	Contractor OWNER		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: Demo existing deck, construct 20' x 12' covered porch				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 240'	Finished Sq. Ft.	Unfinished Sq. Ft. 240'	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	\$5700.00
Excludes All Trades Permits	

Application Fee	\$ 31.65
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$.75
RTD Total	\$ 63.40

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.

* Shelby E. Salyer