

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 11.30.16

Application Date: 11.2.16
 Application Accepted: BP-2016-00879
 Old Map Number: 29-10-4
 GPIN: 6749-42-8747

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: 3825 Riddles Bridge Road		District: Linkinghole District	
	Owner: New Ventures Real Estate		Phone #: 804-378-9300	
	Address: 1664 Anderson Hwy, Suite E, Powhatan, VA 23139			
	Proposed Use: Residential	Current Use:	Existing Buildings on Property: N/A	
Proposed Occupant Load (Commercial):	Acreage: 5.38	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: A-1		
Front Setback: 25' 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: * Existing residence must be removed 60 days after CO. issued.

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Planning & Zoning Officer: [Signature] Date: 10/2/16

Applicant/Contact: R. Alan Anderson Phone: 804-839-7201
 Email: sproosescorner@gmail.com 804-814-1955

Contractor: R. Alan Anderson Phone: 804-839-7201
 Address: 1664 Anderson Hwy
 Contractor License Number: 2705106351 Type: Class A Expiration: 5-31-18

Description of Work: Single family dwelling & Attached Garage

SEWER Public/Private	WATER Public/Private	2 # of Bathrooms	
# of Floors: 1	Total Sq. Ft.: 2424	Finished Sq. Ft.: 1608	Unfinished Sq. Ft.: 816
		# 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	\$132.00
Building	160,000		Zoning Fee	\$0.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$15.44
			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: \$1137.44

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 Telephone: 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.

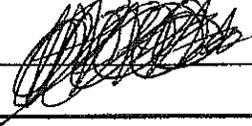
Owner's Signature

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 Louis Beck DATE 11/30/2016
Code Official

Stormwater BP-2016-00741

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: 9/16/16
	Application Accepted: 9/16/16
	GPIN: 64-28-F-17-0/7734-01-438
	Issued: 11.28.16

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 153 Buttonbush Richmond, VA	District	
	Owner Harring Construction Co. 23238	Phone # 739-3405	
	Address 22221 Pear Orchard Rd • Moseley, VA 23120		
	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 West Oak	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 5269.00	Date Paid: DUE	
	New Street Address		Zoning District RPUD		
	Front Setback 30' From Parcels	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 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: David Floyd Date: 9/22/16

Applicant/Contact: Jeremy Harring	Phone: 739-3405
Email: jharring@harringconstruction.com	

CONTRACTOR INFORMATION	Contractor Harring Construction Co.	Phone 739-3405
	Address 22221 Pear Orchard Rd • Moseley, VA 23120	
	Contractor License Number 2705021378	Type CLASS A CONTRACTOR

Description of Work	Scope of Work: Single Family residential dwelling with attached garage				
	SEWER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	WATER <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private			# of Bathrooms 4
	# of Floors 2	Total Sq. Ft. 3462	Finished Sq. Ft. 4350	Unfinished Sq. Ft. 3161	# of Bedrooms 5
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK Building \$305,000 Excludes All Trades Permits		Total \$1742.19	Application Fee \$ 1385.21 Zoning Fee \$ 50.00 Septic Well Fee \$ 200.00 State Levy Fee \$ 27.69 RLD \$ 100.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

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 38-98.01 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: Atlantic Coast Title Settlement Services Telephone: 541-6677

Mailing Address: 206 N. 2nd Avenue • Hopewell, VA 23860

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 11-28-16
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 11-15-16

Application Date: 10/20/16
 Application Accepted: BP-2016-00849
 Old Map Number: 30.8.27
 GPIN: 6759-60-7193

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 2412 Cheney Creek Rd		District	
	Owner Chesterfield Construction Svcs, Inc. T/A Emerald Homes		Phone # 674-0231	
	Address PO Box 4309 Midlothian 23112			
	Proposed Use Single Family Sub.	Current Use Same	Existing Buildings on Property N/A	
Proposed Occupant Load (Commercial) N/A	Acreage 3.31	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 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: Survey locate side 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: Daniel [Signature] Date: 10/20/16

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

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

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

SEWER Public/Private	WATER Public/Private	# of Bathrooms 2 1/2		
# of Floors 2	Total Sq. Ft. 2540	Finished Sq. Ft. 1974	Unfinished Sq. Ft. 566	# of Bedrooms 4

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

VALUE OF WORK	
Building	\$ 146,705
Excludes All Trades Permits	

Total: \$5876.42

Application Fee	\$ 612.18
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 14.24
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, II

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
Hidlothian 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 + \$ 4.60 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 + \$ 9.60 per \$ 1000 above \$ 4000

Add 2% State Levy to fee

RLD \$ 100.00

Septic & well \$ 40.80 For Commercial & Residential

Septic only \$ 25.44 for Commercial & Residential

Zoning Commercial \$ 100.00

Zoning Residential SFD \$50.00 all other structures are \$ 25.00

OFFICE USE ONLY

USE _____ # STORIES _____ CONSTRUCTION TYPE _____ OCCUPANY LOAD _____ CODE EDITION _____

FIRE SPRINKLER _____ FIRE ALARM _____

APPROVAL Michael R. Bowling DATE 11.15.16
Code Official

Issued 11.7.16

BUILDING PERMIT APPLICATION

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

LOT 27-2 PARKSIDE VILLAGE

Application Date: 10-26-16

Permit Number: DP-2016-00862

Old Map Number: 48-18-0-27-0

GPIN: 7738-21-0852

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 7058 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 <u>Parkside Village</u>	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 Paemans</u>	Center Line Setback <u> </u>	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: David Floyd Date: 10/28/16

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 8-31-2017	

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
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <u>705.00</u>
Septic/Well Fee	\$ <u> </u>
State Levy Fee	\$ <u>14.07</u>
Zoning Fee	\$ <u>5000</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 11.18.16

Application Date: 5-25-2016 **received**
 Application Accepted: BP-2016-00477
 Old Map Number: 67-2-E-5
 GPIN: 7723-65-2490

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 E. Brook Run Drive		District		
	Owner Brook Run LLC		Phone # 804-640-1294		
	Address 301 Sweetbriar Dr. Richmond, VA 23238				
	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 James River Est.		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District R1		
	Front Setback 40' off ROW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variance N/A
	Side Setback 15'	Side Setback 15'	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: 6/24/16

Applicant/Contact: Arthur McGurn Phone: 804-640-1294
 Email: artie.mcgurn@gmail.com

CONTRACTOR INFORMATION	Contractor The McGurn Co Inc.		Phone	
	Address P.O. Box 8 Manakin Sabot, VA 23103			
	Contractor License Number		Type CLASS A Res + Com	Expiration

Description of Work	Scope of Work: Construct single family home attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors 3	Total Sq. Ft. 3423	Finished Sq. Ft. 2640	Unfinished Sq. Ft. 783	# of Bedrooms 4 (max 6.0cc)
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

Building	VALUE OF WORK \$227,362.50	PLD \$100.00	Application Fee \$1035.13
	\$135,000 -	Stormwater \$200.00	Zoning Fee \$50.00
Excludes All Trades Permits			Septic/Well Fee \$25.50
			State Levy Fee \$20.90
			PLD Total \$1431.33

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]

per VDH
A.C.

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: Michael J. Williams Telephone: 320-7835 X 103

Mailing Address: 701 Twin Ridge LA., 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 Department Of Building Inspection
 P O Box 119
 Goochland VA 23063
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 10-5-16 Oct. 4, 2016
 Application Accepted: 10-2016-00805
 GFIN: 6822-25-4436
 Issued: 11-3-16

TM# 11-13-0-50-0

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 <u>4234 Hickory Hill Road</u>		District	
	Owner <u>Robert & Elizabeth Chatham</u>		Phone #	
	Address			
	Proposed Use <u>Single Family</u>	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage <u>23.5</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>ESTATES AT ROYAL VA.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District <u>RR</u>	
	Front Setback <u>75' from ROW</u>	Center Line Setback	Rear Setback <u>35' 35'</u>	C.U. Permit <u>N/A</u>
	Side Setback <u>15' / 35'</u>	Side Setback <u>15' / 35'</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 Allen Date 10/5/16

Applicant/Contact: Michael Turner Phone 804 467 8666

Email: naturner2@yahoo.com

CONTRACTOR INFORMATION	Contractor <u>Michael Alan Turner</u>		Phone <u>804 467 8666</u>	
	Address <u>198 SPAINVILLE RD. BLACKSTONE VA 23824</u>			
	Contractor License Number <u>2705092166</u>	Type <u>CBCRBC</u>	Expiration <u>6-30-2017</u>	

Description of Work	Scope of Work: <u>Build House - construct single family dwelling / unfinished basement w/ front porch + screen porch</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>4</u>		
	# of Floors <u>3</u>	Total Sq. Ft. <u>3,734.</u>	Finished Sq. Ft. <u>2237</u>	Unfinished Sq. Ft. <u>867 1497</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		Total <u>1,135.79</u>	Application Fee \$ <u>1,024.50</u>
Building	<u>225,000</u>		Zoning Fee \$ <u>50.00</u>
Excludes All Trades Permits			Septic/Well Fee \$ <u>40.00</u>
			State Levy Fee \$ <u>21.29</u>
			RLD Total \$ <u>1,135.79</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.

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

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

Name: Darvin Satterwhite Atty Telephone: 556-4012

Mailing Address: 3013 River Road West, 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 \$60.00 all other structures are \$ 25.00

OFFICE USE ONLY

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

APPROVAL _____ DATE _____

received 9-7-16

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: 9-9-16
Application Accepted: 9-20-16-00713
GPIN: 6749-84-9597
Issued: 11-3-16

TM# 29-10-M

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 3515 MEALY Road, Goochland, VA 23063		District Lickynhole		
	Owner PETER Pickering		Phone # 804-241-6080		
	Address 501 Stockton St. Apt 189 Richmond, VA 23224				
	Proposed Use Smile Family	Current Use VACANT	Existing Buildings on Property Shed		
	Proposed Occupant Load (Commercial)	Acreage 9.03	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'	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: 9/9/16

Applicant/Contact: Doug Thompson/Ken Odell Phone: 804-357-1920
Email: OdellKen@Aol.com

CONTRACTOR INFORMATION	Contractor Thompson Builders LLC	Phone 804-357-1920
	Address 1390 Broad Street Rd Olive Va 23103	
	Contractor License Number 2705038854	Type A

Description of Work	Scope of Work: New Home + detached garage w/ deck & screen porch				
	SEWER Public/Private	WATER Public/Private	2 # of Bathrooms		
	# of Floors 1	Total Sq. Ft. 2033	Finished Sq. Ft. 1560	Unfinished Sq. Ft. 463	# of Bedrooms 3

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

VALUE OF WORK	
Building	75,000 55,000 114,790.00
Excludes All Trades Permits	

Application Fee	\$ 528.56
Zoning Fee	\$ 30.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 11.37
RLD Total	\$ 629.93

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.

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 _____

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

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

APPROVAL Michael R. B... DATE 11.3.16.
Code Official

RECEIVED
11-28-16

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 TM# 43-31-0-4-0	Application Date: 11-28-16
	Application Accepted: BP-2016-00933
	GPIN: 6767-96-5450
	Issued: 11.30.16

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 2430 Two Turtles Rd MAIDENS, VA 23102		District	
	Owner CHARLES + FRANCES CARPENTER		Phone # 804-556-6416	
	Address 2430 Two Turtles Rd MAIDENS, VA 23102			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	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		
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: BRENT JOHNSON Phone 804-218-3898

Email: RW JOHNSON 6 @ VERIZON.NET

CONTRACTOR INFORMATION	Contractor BW JOHNSON CONTRACTING		Phone 804-218-3898	
	Address 9515 MEADOWGREEN RD			
	Contractor License Number 2705094270	Type BLD A	Expiration 04-30-2017	

Description of Work	Scope of Work: CONSTRUCT SCREEN PORCH OVER EXISTING DECK 14' x 32'				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 448	Finished Sq. Ft.	Unfinished Sq. Ft. 448	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	\$ 30,000
Excludes All Trades Permits	

Application Fee	\$ 147.00
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 2.94
BLD Total	\$ 149.94

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.

Brent Johnson 11-28-16

received
11-28-16

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

Application Accepted:
 BP-2016-00935
 Old Map Number:
 21-11-0-82-0
 GPIN:
 6850-24-6925

Issued 11-30-16

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 3069 ROCK CRESS LANE		District		
	Owner DALE ST. CHAIR		Phone #		
	Address 3069 ROCK CRESS LANE SANDY HOOK VA 23153				
	Proposed Use RESIDENCE	Current Use RESIDENCE	Existing Buildings on Property HOUSE		
	Proposed Occupant Load (Commercial)	Acreage 12.574	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Mill Forest II	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	New Street Address		Zoning District RR		
	Front Setback 55' from ROW	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variance N/A
	Side Setback 15'/35'	Side Setback 15'/35'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: None				
	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 11/24/16

Applicant/Contact: HIGHLAND BUILDERS / KEVIN KITEZ Phone 804-387-5707
 Email: KEVIN@HIGHLANDBUILDING.COM

CONTRACTOR INFORMATION	Contractor HIGHLAND BUILDERS		Phone 804-387-5707	
	Address PO BOX 281 ROCKVILLE VA 23146			
Description of Work	Contractor License Number 2705068282		Type CLASS A	Expiration 4-30-2018
	Scope of Work: INSTALL A DIRECT VENT GAS FIREPLACE IN THE FAMILY ROOM			
	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	\$6,000
Excludes All Trades Permits	

Application Fee	\$ 39.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$
State Levy Fee	\$.78
RD Total	\$ 64.78

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.

Kevin Kitez

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: 13-19-5-A

Application Date: 11/29/16

Application Accepted: BP-2016-00936

GPIN: 6851-08-4870

Issued: 11.30.16

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 3711 Clara Hope Lane		District	
	Owner Laura Belcher		Phone # 504 441 1736	
	Address SAME			
	Proposed Use Deck	Current Use	Existing Buildings on Property HOME	
	Proposed Occupant Load (Commercial)	Acreeage	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: N/A		Date Paid: N/A	
	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'	COA N/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 11/29/16

Applicant/Contact: John Tronzone Phone 804-556-4049

Email: Jtronzo@aol.com

CONTRACTOR INFORMATION	Contractor Smallwood Renovation		Phone 804 359-2997	
	Address 17387 Echo Meadows Rd Rockville, VA 23146			
	Contractor License Number CLASSA 2705152796		Type CLASSA	Expiration

Description of Work	Scope of Work: 12x20 Deck @ Exist Deck to replace existing deck			
	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	9500.
Excludes All Trades Permits	

Application Fee	\$54.24
Zoning Fee	\$25.00
Septic/Well Fee	\$
State Levy Fee	\$1.10
Total	\$80.34

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.

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# 43-1-0-86-0

Application Date: 11-18-16

Application Accepted: BP-2016-00921

GPIN: 6776-39-9455

Issued: 11-30-16

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: 2151 Sheppard Town Rd.		District		
	Owner: Beverly Thurston		Phone #: 804-536-3596		
	Address: 2157 Sheppard Town Rd. Madisons VA.				
	Proposed Use: Residence	Current Use: Residence	Existing Buildings on Property: Home, Barn, Stable		
	Proposed Occupant Load (Commercial): NA	Acres: \$31 tax-	Commercial Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address			Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
	Side Setback	Side Setback	C O A	Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.				

Planning & Zoning Officer _____ Date _____

Applicant/Contact: Tom Dunn Phone: 804-380-2879

Email: tomidunn@verizon.net

CONTRACTOR INFORMATION	Contractor: T. Dunn Construction		Phone: 804-380-2879	
	Address: 4901 Riverplace Ct. Glen Allen VA. 23059			
	Contractor License Number: 2701025054	Type: class A	Expiration: 03-31-2017	

Description of Work	Scope of Work: Renovate existing Screen Porch w/ new flooring & Ezy Breeze windows & Add 2nd Floor Sun Room Above with Casements Windows				
	SEWER: Public/Private		WATER: Public/Private		# of Bathrooms
	# of Floors: 2	Total Sq. Ft.: 2493	Finished Sq. Ft.: 293	Unfinished Sq. Ft.: 200	# of Bedrooms: 0
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	50,000
Excludes All Trades Permits	

Application Fee	\$ 237.00
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ 4.74
R/LD Total	\$ 241.74

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

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

42-1-90-F

Application Date: 11-9-16
 Application Accepted: BP-2016-00899
 GPIN: 60767-15-1772
 Issued: 11-30-16

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 3052 River Road west			District	
	Owner Va House Bldg			Phone # 556-5472	
	Address 3052 River Road west				
	Proposed Use	Current Use	Existing Buildings on Property		
Proposed Occupant Load (Commercial)	Acreeage	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		
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: Charles Wright Phone 804-378-7011
 Email: CLwrightroofing@aol.com

CONTRACTOR INFORMATION	Contractor CL WRIGHT BHT Roofing, Inc	Phone 804-378-7011
	Address 801 Grove Rd Middleburg VA 23114	
	Contractor License Number 2705051350	Type Class B

Description of Work	Scope of Work: re-roofing - remove existing asphalt shingles and install AT Landmark Dimensional shingle Class A color more Black				
	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	10,000.00 -
Excludes All Trades Permits	

Application Fee	\$87.00
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$1.74
Fee Total	\$88.74

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

Issued 11.29.10



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

FAX: (804) 556-5654

Office Use Only

Application File Date: <u>11.29.10</u>	Application No.: <u>AP-2010-00934</u>	Fee: \$25.00
Zoning Approval: Yes <input checked="" type="checkbox"/>	No: <input type="checkbox"/>	Date: <u>11/28/10</u>

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: P. Mason Pollard, Jr
 Address: 425 Shadow Creek Lane
Manakin-Sabot, VA 23103
 E-mail: _____

Telephone: 804-708-0573
 Cell phone: _____
 FAX: _____

Name of Applicant: JOAN ROBERTSON
 Address: 8501 Patterson Avenue
Richmond, VA 23229
 E-mail: JOAN@Homekeepers, LLC

Telephone: 804-750-1948
 Cell phone: 804-310-7465
 FAX: _____

Property Information

Street Address: 839 Running Cedar Court
 GPIN Number: 7715-30-6202
 Existing Use: Residential

Zoning: RR
 Acreage: 5.25

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): 144

2. Written Description of Proposed Physical Improvements:

Garden Shed - WOOD FOUNDATION (movable)

(SEE ATTACHED DRAWING)

The following farm buildings and structures are not exempt from code:

- Farm buildings and structures lying within a flood plain or in a mudslide prone area shall be subject to flood proofing regulations or mudslide regulations, as applicable.
- A building or a portion of a building, located on a farm, that is operated as a restaurant as defined in §35.1-1 of the Code of Virginia and licensed as such by the Board of Health under Chapter 2 (§ 35.1-11 et seq.) of Title 35.1 of the Code of Virginia.

APPLICANT/OWNER AGREEMENT & SIGNATURES

****Applicant/Owner must read and sign****

- Applicant shall submit two (2) sets of sealed surveyed site plans showing proposed location of building on property with setbacks clearly indicated.
- Applicant is responsible for locating, and clearly marking, the property lines to assure that setbacks are not violated.
- Applicant shall complete the attached Farm Use Affidavit if applying for a Farm Use Structure.
- The undersigned Owner authorizes entry onto the property by Goochland County employees during normal discharge of their duties in regard to this request.

In representing the above referenced firm submitting this application for review, I hereby state that the information provided in this application, and all accompanying information, is accurate, true and correct to the best of my knowledge, and that the attached site plan is an accurate depiction of the location of the proposed building. I hereby agree to conform to all terms of permit which may be issued on account of this application.

John T. Robertson
 Signature
 (Applicant/Property Owner/Representative)

11-28-2016
 Date

John T. Robertson
 Printed 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

received
 10-26-16

Application Date:

October 26, 2016

Application Accepted:

PP-2016-00865

Old Map Number:

32-18-0-35-0

GPIN:

6788-24-1383

Issued: 11-28-16

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 1702 Bridgewater Court		District Dover		
	Owner Evan S. Weiner		Phone # 804-285-2222		
	Address 1702 Bridgewater Court, Maidens, VA 23102				
	Proposed Use Single Family Dwelling	Current Use SFD	Existing Buildings on Property Single Family Dwelling		
	Proposed Occupant Load (Commercial)	Acreage 3.604	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Bridgewater		Proffer <input type="checkbox"/> Yes <input checked="" 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	Variance
	Side Setback 5'	Side Setback 5'	COA N/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: David Floyd Date: 10/31/16

Applicant/Contact: Evan S. Weiner Phone: 804-549-4899
 Email: esw@evanweiner.com

CONTRACTOR INFORMATION	Contractor Evan S. Weiner / Owner		Phone 804-549-4899	
	Address 1702 Bridgewater Court, Maidens, VA 23102			
	Contractor License Number N/A - OWNER		Type	Expiration

Description of Work	Scope of Work: CONSTRUCT NEW DETACHED GARAGE with unfinished bonus room above				
	SEWER Public/Private		WATER Public/Private		# of Bathrooms 0
	# of Floors 2	Total Sq. Ft. 3132	Finished Sq. Ft.	Unfinished Sq. Ft. 3132	# of Bedrooms 0

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

VALUE OF WORK	
Building	\$18000 117,450.00
Excludes All Trades Permits	

Application Fee	\$ 540.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$ —
State Levy Fee	\$ 10.81
Per Total	\$ 576.81

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: Evan S. Weiner

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

T/M# 67-11-B-7-0

Application Date: 11/22/16

Application Accepted: DP-2016-00925

GPIN: 7733-26-5114

Issued: 11-23-16

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 14 DAHLGREN ROAD		District	
	Owner DOW PALLAIS		Phone #	
	Address 14 DAHLGREN ROAD, RICHMOND, VA 23238			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreeage	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	
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: Steve Taylor Phone 804-937-1609

Email: JmsRvrHomes@comcast.net

CONTRACTOR INFORMATION	Contractor James River Homes, Inc		Phone	
	Address PO Box 29273 Richmond, VA 23242			
	Contractor License Number 2701039424	Type class A	Expiration 11-17	

Description of Work	Scope of Work: Demo Horse STALL Debris going to Ashcake Rd in Hanover				
	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	316,000
Excludes All Trades Permits	

Application Fee	\$ 39.00
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$.78
RLD	\$ 39.78

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.

received
11.16.16

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: 11/13/16
 Application Accepted: BP-2016-00914
 Old Map Number: 676 8512574
 GPIN: 43-20-27

Issued 11.21.16

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 2120 Old Store Rd		District Lickinghole		
	Owner Brian Jeppson		Phone # (832) 316-4896		
	Address 2120 Old Store Rd				
	Proposed Use Residential	Current Use Residential	Existing Buildings on Property 1		
Proposed Occupant Load (Commercial)	Acres 3.66	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Crossroads West	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A-2		
	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 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: Scott Floyd Date: 11/17/16

Applicant/Contact: Edward Jones Phone: 804-641-7756
 Email: JEL construction@gmail.com

CONTRACTOR INFORMATION	Contractor JEL CONSTRUCTION LLC	Phone (804) 641-7756
	Address 19196 Highlands LN Bumpass VA 23024	
	Contractor License Number 2705-110868	Type Class A Bld

Description of Work	Scope of Work: Build 26x28' Car port				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 728	Finished Sq. Ft. 0	Unfinished Sq. Ft. 728	# of Bedrooms

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

VALUE OF WORK		Application Fee \$ 61.14
Building	\$ 4,800 \$10,920.00	Zoning Fee \$ 25.00
Excludes All Trades Permits		Septic/Well Fee \$
		State Levy Fee \$ 1.22
		TOTAL \$ 87.36

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
9-22-16
9/22/16

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

ISSUED: 11-18-16

Application Date: 9-22-16
 Application Accepted: DP-2016-00766
 Old Map Number: 42-1-12
 GPIN: 6767-31-4448-9999

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 2489 Old Courthouse Rd, Maidens, VA 23102		District		
	Owner Goochland County, of Fire Training Center, Qiana Fode		Phone # 804-556-5834		
	Address 1800 Sandy Hook Rd, Ste 340, Goochland, VA 23063				
	Proposed Use Communication Tower	Current Use Fire Traing	Existing Buildings on Property Several traing buildings		
Proposed Occupant Load (Commercial)	Acreage 17.9	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 A-2		
	Front Setback 55' From Rear	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: David [Signature] Date: 9/22/16

Applicant/Contact: Garry Collins, Project Manager, Technical Partners LLC Phone: 804-405-7805
 Email: Garry@STWConcrete.com

CONTRACTOR INFORMATION	Contractor Technical Partners, LLC		Phone 804-405-7805	
	Address 3002 E. Boundary Ter, Midlothian, VA 23112			
	Contractor License Number 2705159160	Class A	Type H/H	Expiration 3-31-18

Description of Work	Scope of Work: Site development, commercial power, tower & shelter foundations, install shelter & tower, grounding system, conduit, fence & road.				
	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		NO fee county project	Application Fee	\$ _____
Building	\$299,894.00		Zoning Fee	\$ _____
			Septic/Well Fee	\$ _____
Excludes All Trades Permits		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: [Signature]

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

Issued 11-18-16

Application Date: 11-8-16
 Application Accepted: BP-2016-00898
 Old Map Number: 64-24-88
 GPIN: 7733-57-0517

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>94 West Square Drive, Richmond Va 23238</u>		District
	Owner <u>Nancy Springman</u>		Phone # <u>(804) 784-2795</u>
	Address <u>94 West Square Drive Richmond Va 23238</u>		
	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 <u>Randolph Sq.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u> Date Paid: <u>N/A</u>
	New Street Address		Zoning District <u>R PUD</u>
	Front Setback <u>30' from pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	C.U. Permit <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 11/8/16

Applicant/Contact: Matt Holicky Phone (804) 285-4239
 Email: Matt@addadeck.com

CONTRACTOR INFORMATION	Contractor <u>ADDADECK, INC.</u>		Phone <u>(804) 285-4239</u>
	Address <u>6408 Mallory Drive Richmond Va 23226</u>		
	Contractor License Number <u>2701033201</u>	Type	Expiration <u>11-30-2016</u>

Description of Work
Scope of Work: Deck renovation, replace all existing decking with composite material and add new steps and rails.

SEWER Public/Private	WATER Public/Private	# of Bathrooms	
# of Floors	Total Sq. Ft. <u>382</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>382</u>
		# of Bedrooms	

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

VALUE OF WORK	
Building	10,500
Excludes All Trades Permits	

Application Fee	\$ <u>59.35</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$ <u>0.00</u>
State Levy Fee	\$ <u>1.19</u>
Total	\$ <u>85.44</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: Matthew Holicky

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: 6-8-16

Application Date: 6/2/2016
 Application Accepted: BP-2016-00403
 Old Map Number: 57-1-41-D
 GPIN: 7715-03-8577

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 1018 MANAKIN ROAD		District DOVER		
	Owner BARBARA HUGHES		Phone # (804) 814-0433		
	Address 1018 MANAKIN ROAD MANAKIN SAULT VA 23103				
	Proposed Use DETACHED GARAGE	Current Use HOUSE	Existing Buildings on Property 1		
Proposed Occupant Load (Commercial)	Acreage 10.66	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 A2		
	Front Setback 100' at 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: 6/15/16

Applicant/Contact: RYAN FERGUSON Phone: (804) 814-0433
 Email: info@fergusongc.com

CONTRACTOR INFORMATION	Contractor FERGUSON GENERAL CONTRACTING LLC		Phone (804) 814-0433	
	Address P.O. BOX 216 MIDLOTHIAN VA 23113			
	Contractor License Number 2705149995	Type BLO - CLASS A	Expiration 2/26/17	

Description of Work	Scope of Work: CONSTRUCT DETACHED GARAGE / FINISHED GAME ROOM Revised: 10-4-16 and single family dwelling on property				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1		
	# of Floors 2	Total Sq. Ft. 2270	Finished Sq. Ft. 376 1490	Unfinished Sq. Ft. 109 1874	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		780	Application Fee	\$1,287.00
Building	\$150,000 -		Zoning Fee	25.00
Excludes All Trades Permits			Septic/Well Fee	\$
			State Levy Fee	\$13.74
			BLD Total	\$1,250.74

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

Signature of Applicant: [Signature]



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

FAX: (804) 556-5654

Issued 11/18/10

Office Use Only

Application File Date: 11-19-10

Application No.: AP-2010-00913

Fee: \$25.00

Zoning Approval: Yes

[Signature]

No: _____

Date: 11/16/10

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: Randy L Huff

Telephone: 8

Address: 3303 Oak Forest Drive

Cell phone: 804-399-9112

Gum Spring, VA 23065

FAX: _____

E-mail: RHUFF@PINE@AOL.COM

Name of Applicant: _____

Telephone: _____

Address: _____

Cell phone: _____

E-mail: _____

FAX: _____

Property Information

Street Address: 3303 OAK FOREST DRIVE

Zoning: A-1

GPIN Number: 6841-93-0591

Acreage: 4.04

Existing Use: Farm Use, Storage for Plants

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): 320 8x40

2. Written Description of Proposed Physical Improvements:

Corner Box Containers on railroad ties
Equipment Storage, Seed, Green House supplies, non commercial
Tractor Equipment + Supplements

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 11.16.16

Application Date: 11.1.16

Application Accepted: BP-2016-00889

Old Map Number: 58-32-3-A

GPIN: 7725-33-0619

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 15000 Capital One Drive, Richmond, VA 23238 <i>"Knuckle 3"</i>		District	
	Owner Deidre O'Conner / Capital One		Phone # (571) 449-0727	
	Address 15000 Capital One Drive, Richmond, VA 23238			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	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		
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: Emily Covey Phone (804) 433-4160

Email: emilyc@dpr.com

Contractor: DPR Construction, A General Partnership Phone (804) 433-4160
 Address: 5500 Cox Road, Suite M
 Contractor License Number: 2705137646 Type: Class A Expiration: 11-30-2016

Scope of Work:
 Selective demolition with removal of concrete, pavers, patio, and retaining walls.

SEWER Public/Private	WATER Public/Private	N/A	# of Bathrooms	
# of Floors 1	Total Sq. Ft. 2,400	Finished Sq. Ft. 2,400	Unfinished Sq. Ft. N/A	# of Bedrooms N/A

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

VALUE OF WORK	
Building	\$135,000
<i>Excludes All Trades Permits</i>	

Application Fee	\$ 1098.50 1274.50
Zoning Fee	\$ 800
Septic/Well Fee	\$ N/A
State Levy Fee	\$ 25.00 49
Total	\$ 500 1299.99

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.

Signature of Applicant *Emily Covey*

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 11/16/16

Application Date: 10/28/16
 Application Accepted: BP-2016-00869
 Old Map Number: 2-1-1-A
 GPIN: 6814-57-2695-9998

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 5620 THREE CHOPT ROAD		District		
	Owner Crown Communications Inc.		Phone #		
	Address				
	Proposed Use TELECOMMUNICATIONS	Current Use → NO CHANGE	Existing Buildings on Property		
Proposed Occupant Load (Commercial) U	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input 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 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: David Floyd Date: 10/31/16

Applicant/Contact: VERIZON WIRELESS C/O KELSEY CHASE Phone: 804-357-3131
 Email: KCHASE@NBCLLC.COM

CONTRACTOR INFORMATION	Contractor CROWN CASTLE USA INC	Phone
	Address 9011 ARBORETUM PARKWAY SUITE 100 RICHMOND VA 23236	
	Contractor License Number 2705065997	Type CBC

Description of Work	Scope of Work: REPLACE 9 ANTENNAS AND SOME ACCESSORY EQUIPMENT PER THE ATTACHED PLANS				
	SEWER NA Public/Private	WATER NA 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	\$10,000
Excludes All Trades Permits	

Application Fee	\$ 87.00
Zoning Fee	\$ 50.00
Septic/Well Fee	\$
State Levy Fee	\$ 1.74
Total	\$ 138.74

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

Signature of Applicant: Kelsey Chase

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: 26-1-22

Application Date: 9.7.10

Application Accepted: BP-2010-00818

GPIN: 6719-00-9568

Issued: 11.16.10

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 2300 Cartersville Road, Goochland, VA 23063		District	
	Owner James T. Gottwald		Phone # (804) 240-2477	
	Address 3600 River Road west, Goochland, VA 23063			
	Proposed Use Residence	Current Use Residence	Existing Buildings on Property 1	
	Proposed Occupant Load (Commercial) /	Acreage 15 Acres	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 Road	Center Line Setback	Rear Setback 35'	C.U. Permit	Variance			
	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: 10/12/16

Applicant/Contact: Tony Engel Phone: (804) 241-3202

Email: aengel@mindspring.com

CONTRACTOR INFORMATION	Contractor owner		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: - new front porch & new back deck, Add 1/2 bath on 1st Floor Restoration - Add full bath, utility room on 1st Floor. - Add 2 full baths & 2 closets on 2nd Floor.				
	SEWER Public/Private	WATER Public/Private	3.5		# of Bathrooms
	# of Floors 2	Total Sq. Ft. 528	Finished Sq. Ft.	Unfinished Sq. Ft. 528	# of Bedrooms 3

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	

Application Fee	\$ 552.00
Zoning Fee	\$ 25.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 11.84
Total	\$ 628.84

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