

**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: 11-15-16  
 Application Accepted: BP-2016-00907  
 GPIN: 28-14-2 / 6739-91-7037  
 Issued: 1-31-17

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 2337 Bexley Wood Run		District		
	Owner Blue Ridge Custom Homes		Phone #		
	Address 1186 Lickinghole Rd				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage 8.64	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Westcliff		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 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 11/15/16

Applicant/Contact: Nathan Sanocka Phone 540-478-3110  
 Email: Nathanbrehe@gmail.com

CONTRACTOR INFORMATION	Contractor Blue Ridge Custom Homes		Phone 804-614-4556	
	Address 1186 Lickinghole Rd			
	Contractor License Number 2705086712	Type A	Expiration	

Description of Work	Scope of Work: w/ partially new single family home with attached garage w/ unfinished basement				
	SEWER Public/Private	WATER Public/Private	2.5		# of Bathrooms
	# of Floors 2	Total Sq. Ft. 5258	Finished Sq. Ft. 3286	Unfinished Sq. Ft. 1972	# of Bedrooms 4
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	<del>250,000</del> \$363,120.00
Excludes All Trades Permits	

Application Fee	\$1646.04
Zoning Fee	\$50.00
Septic/Well Fee	\$40.00
State Levy Fee	\$33.92
RLD	\$100.00

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. total: \$1869.96

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: ~~Title Attorney of Richmond~~ Audra Title Telephone: 804.357.1809

Mailing Address: ~~6600 West Broad Street Richmond Va~~ 10900 Hunting Hollow Ct Glen Allen

23060

**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 Michael R. Brantley 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: 21-1-56-B

Application Date: 11.30.16

Application Accepted: BP-2016-00945

GPIN: 6850-83-3878

Issued: 1-6-17

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: 3152 Three Chopt		District
	Owner: Camelot Lot 2 Rd Gum Spring, VA		Phone #: 804 385-9477
	Address: 1978 Cartersville Rd Goochland Va 23065		
	Proposed Use: Single Fam Res.	Current Use:	Existing Buildings on Property: TRAILER
Proposed Occupant Load (Commercial):	Acreage: 3.41	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: 75' from ROW	Center Line Setback: —	Rear Setback: 25'	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 single wide needs to be removed 60 days after C.O.				

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: 12/1/16

Applicant/Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: 007set007@gmail.com

CONTRACTOR INFORMATION	Contractor: Camelot Homes		Phone:
	Address: 1978 Cartersville Rd. Goochland VA		
	Contractor License Number: 2705051323	Type: A (CBL/RBC)	Expiration: 7-31-17

Description of Work	Scope of Work: Single Family Dwelling				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms: 2.5		
	# of Floors: 2	Total Sq. Ft.: 2562	Finished Sq. Ft.: 2008	Unfinished Sq. Ft.: 554	# of Bedrooms: 3
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK \$148,525.00

Building \$80,000  
 Excludes All Trades Permits

Application Fee	\$680.36
Zoning Fee	\$50.00
Septic/Well Fee	\$25.00
State Levy Fee	\$14.11
<b>RLD Total</b>	<b>\$769.47</b>

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

*[Signature]*

**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: David S. White 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 James Beck DATE 1/7/2017  
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 1-9-16

Application Date: 11/29/16  
 Application Accepted: BP-2016-00951  
 Old Map Number: 43.37.A.2  
 GPIN: 6767-64-1621

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 1715 Cahill Terrace			District CLIFTON	
	Owner Chesterfield Construction Svcs. DBA Emerald Homes			Phone # LOT 2	
	Address PO Box 4309 Midlothian 23112			BLOCK A	
	Proposed Use Single Fam Subdiv	Current Use Same	Existing Buildings on Property N/A		
Proposed Occupant Load (Commercial) N/A	Acresage 2.438 AC	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Subdivision Clifton	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$20,208.00	Date Paid: Due		
New Street Address		Zoning District R-1			
Front Setback 40' from Row	Center Line Setback	Rear Setback 35'	C.U. Permt 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: *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: Daniel Ford Date: 12/1/16

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

CONTRACTOR INFORMATION	Contractor Chesterfield Construction Services, Inc DBA Emerald Homes		Phone
	Address PO Box 4309 Midlothian 23112		
	Contractor License Number 2701 02471A	Type Class A-BLD	Expiration 9/30/17

Description of Work	Scope of Work: Construct single family dwelling w/ attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2/2		
	# of Floors 2	Total Sq. Ft. 2586	Finished Sq. Ft. 2020	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		stormwater \$200.00	Application Fee	\$685.63
Building	149,695		Zoning Fee	\$20.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$14.51
			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, III Total: \$1090.14

**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 \$60.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

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

APPROVAL Michael R. Bushong DATE 1.9.16.  
Code Official

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23083  
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 1-26-17

Application Date: 12.9.16

Application Accepted: BP-2016-00983

Old Map Number: 11-4-5

GPIN: 6021-57-9637

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 3917 Pace Rd. Goochland, VA		District	
	Owner Commolisa Pace & Michael Alexander		Phone # 804-402-1314 (804) 245-4282	
	Address 8808 Three Chopt Rd. Apt. 106 Henrico, VA 23229			
	Proposed Use Residential	Current Use	Existing Buildings on Property none	
	Proposed Occupant Load (Commercial)	Acreage 3	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	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 Rds	Center Line Setback	Rear Setback 35'	C.U. Permit 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: 12/13/16

Applicant/Contact: Michael Alexander & Commolisa Pace Phone: (804) 245-4282 804-402-1314  
 Email: cpaces005@gmail.com

CONTRACTOR INFORMATION	Contractor owner	Phone
	Address	
	Contractor License Number	Type
		Expiration

Description of Work	Scope of Work: SFD				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
	# of Floors 1	Total Sq. Ft. 2536	Finished Sq. Ft. 2016	Unfinished Sq. Ft. 520	# of Bedrooms 3
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	\$ 147,940.00
Excludes All Trades Permits	

Application Fee	\$ 677.73
Zoning Fee	\$ 0.00
Septic/Well Fee	\$
State Levy Fee	\$ 13.55
RLD Total	\$ 711.28

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: Commolisa Pace

**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 1-17-17

Application Date: 12-8-2014  
 Application Accepted: BP-2016-00984  
 Old Map Number: 43-39-10  
 GPIN: 60777-16-9539

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 2309 Lanes End Place		District		
	Owner Main Street Homes		Phone # 423-0314		
	Address PO BOX 461 Middlethorpe VA 23113				
	Proposed Use Residential	Current Use	Existing Buildings on Property <input type="checkbox"/>		
	Proposed Occupant Load (Commercial)	Acreage 2.01	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Lanes End	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 19,847.00	Date Paid: Due	
	New Street Address		Zoning District RP		
	Front Setback 40' from ROW	Center Line Setback -	Rear Setback 25'	C.U. Permit N/A	Variance N/A
	Side Setback 10' per	Side Setback 10' per	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: [Signature] Date 12/12/16

Applicant/Contact: Marian Tessier Main Street Homes Phone 423-0314  
 Email: miester@gomsh.com

CONTRACTOR INFORMATION	Contractor Main Street Homes		Phone 423-0314	
	Address PO BOX 461 Middlethorpe VA 23113			
	Contractor License Number 2705039441	Type A	Expiration 5-31-2017	

Description of Work	Scope of Work: New Single Family Dwelling w/ Attached GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3		
	# of Floors 2	Total Sq. Ft. 3897	Finished Sq. Ft. 3105	Unfinished Sq. Ft. 792	# of Bedrooms 4

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

VALUE OF WORK	\$262,575.00	Storm water \$200.00	Application Fee	\$193.59
Building	246,460		Zoning Fee	\$50.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$24.10
			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 \$1608.20  
 Signature of Applicant: Marian Tessier

**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: Bon Air Title Telephone: 320-1336  
Mailing Address: 9211 Forest Hill Ave 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 Michael R. [Signature] DATE 1-17-17.  
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 1-24-17

Application Date: 12.12.16  
 Application Accepted: BP-2016-00985  
 Old Map Number: 43-39-24  
 GPIN: 6777-18-0233

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 1988 Lanes End Dr		District		
	Owner Main Street Homes		Phone # (804) 423-0314		
	Address PO BOX 461 Midlothian VA 23113				
	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 Lanes End	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$19,847.00	Date Paid: Due	
	New Street Address		Zoning District RP		
	Front Setback 40' From Row	Center Line Setback	Rear Setback 25'	C.U. Permit N/A	Variance N/A
	Side Setback 10'/20'	Side Setback 10'/20'	C.O.A. 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 Pugh Date: 12/12/16

Applicant/Contact: Marian Tessier Phone: 423-0314 (804)

Email: mtessier@gomsh.com

CONTRACTOR INFORMATION	Contractor Main Street Homes	Phone 423-0314
	Address PO BOX 461 Midlothian VA 23113	
	Contractor License Number 2705039441	Type A

Description of Work	Scope of Work: New Single Family Dwelling w/ Attached GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3		
	# of Floors 2	Total Sq. Ft. 3230	Finished Sq. Ft. 2587	Unfinished Sq. Ft. 643	# of Bedrooms 4
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	
Building	221,512
Excludes All Trades Permits	

Application Fee	\$1,008.80
Zoning Fee	\$0.00
Septic/Well Fee	\$40.00
State Levy Fee	\$20.98
RLD	\$100.00
Storm water	\$200.00
<b>Total</b>	<b>\$1,419.78</b>

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

Signature of Applicant: Marian Tessier total \$1,419.78

**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: Bon Air Title Telephone: 320-1336 (804)

Mailing Address: 9211 Forest Hill Ave 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 *Michael Bon...* DATE 1.18.17  
Code Official

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

Application Date: 12-14-16  
 Application Accepted: BP-2016-01000  
 Old Map Number: 30-13-A-16-0  
 GPIN: 6769-22-1342

Issued: 1-20-17

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>-2652 Evershall Drive</u>		District: <u>Lickinghole</u>		
	Owner: <u>Scott and Michelle Powers</u>		Phone #:		
	Address: <u>11984 Grey Oaks Park Rd Glen Allen, Va. 23059</u>				
	Proposed Use:	Current Use:	Existing Buildings on Property: <u>None</u>		
Proposed Occupant Load (Commercial):	Acreage: <u>8.36</u>	Commercial Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: <u>Aldwyck</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: <u>Wincott Drive</u>		Zoning District: <u>Lickinghole A-2</u>		
	Front Setback: <u>55'</u>	Center Line Setback: <u>From R/W</u>	Rear Setback: <u>35'</u>	C.U. Permit: <u>N/A</u>	Variance: <u>N/A</u>
	Side Setback: <u>20'</u>	Side Setback: <u>20'</u>	COA: <u>N/A</u>	Flood Zone: <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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: 12/20/16

Applicant/Contact: Elaine Reeder Phone: 804-516-9908  
 Email: ereeder@southerntraditions.com

CONTRACTOR INFORMATION	Contractor: <u>Southern Traditions</u>	Phone: <u>804-516-9908</u>
	Address: <u>P.O. Box 4314 Glen Allen Va. 23058</u>	
	Contractor License Number: <u>27050821094</u>	Type: <u>A</u>

Description of Work	Scope of Work: <u>New single family dwelling with attached garage</u>				
	SEWER: <u>Public/Private</u>	WATER: <u>Public/Private</u>	# of Bathrooms: <u>3 1/2</u>		
	# of Floors: <u>2</u>	Total Sq. Ft.: <u>5495</u>	Finished Sq. Ft.: <u>3574</u>	Unfinished Sq. Ft.: <u>1921</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		Application Fee \$ <u>2,118.00</u> Zoning Fee \$ <u>50.00</u> Septic/Well Fee \$ <u>40.00</u> State Levy Fee \$ <u>43.16</u> RLD \$ <u>100.00</u>
Building	\$ <u>468,000</u>	
Excludes All Trades Permits		Total Fee: <u>\$2,351.16</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: Elaine Reeder

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: Commonwealth Escrow & Title Telephone: 359-2382

Mailing Address: 5609 Patterson Ave Suite C  
Richmond, Va. 23224

**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 1-12-17

Application Date: 12-20-16

Application Accepted: 12-20-16

Old Map Number: TM# 20-20-014-0

GPIN: 6840-42-2984

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 3867 SAGE ROAD, Willoughby's Bend Sub.		District Lickinghole Dist	
	Owner ENGLAND Homes Inc		Phone # 804-708-9733	
	Address PO Box 29795, Richmond, VA. 23242			
	Proposed Use Single Family Home	Current Use VAC LOT	Existing Buildings on Property None	
Proposed Occupant Load (Commercial) X	Acreage 2,864 Acres	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Subdivision Willoughby's Bend	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 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: 12/21/16

Applicant/Contact: ENGLAND Homes Inc - Bill England & Phone: 804-334-2455

Email: ENGHOMINC@COMCAST.NET

CONTRACTOR INFORMATION	Contractor ENGLAND Homes Inc		Phone 804-708-9733 / 334-2455	
	Address PO Box 29795, Richmond, VA. 23242			
Contractor License Number 2701034798		Type BLD "A"	Expiration 07-31-2017	

Description of Work

Scope of Work:  
CONSTRUCTION - New Home w/attached garage

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors 2	Total Sq. Ft. 2430	Finished Sq. Ft. 2430	Unfinished Sq. Ft. 487 GARAGE	# of Bedrooms 4

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

VALUE OF WORK		Total 1,000.23	Application Fee	\$ 793.56
Building	\$ 173,680 -		Zoning Fee	\$ 50.00
Excludes All Trades Permits			Septic/Well Fee	\$ 40.00
			State Levy Fee	\$ 16.67
			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: WB England

*Issued 1-5-2017*  
**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 17-2 PARKSIDE VILLAGE**

Application Date: 12-20-16  
 Permit Number: BP 2016-01014  
 Old Map Number: 7138-12-7088  
 GPIN: 48-18-17

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

<b>OWNER INFORMATION</b>	Site Address 7211 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

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Subdivision <u>Parkside Village</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$5981.00</u>	Date Paid: <u>Due</u>
	New Street Address		Zoning District <u>RPU1D</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>

APPROVED  REJECTED  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: 12/21/16

Applicant/Contact:  
 BERTON JAMES Phone (804)217-6910  
 Email: bjames@eagleofva.com

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

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3438	2881	557	4

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

<b>VALUE OF WORK</b>	
Building	\$236,962.50
<i>Excludes All Trades Permits</i>	

Application Fee	\$128.50
Septic/Well Fee	\$
State Levy Fee	\$21.57
Zoning Fee	\$50.00
Total	\$150.07

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 1-12-17

**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 31-2 PARKSIDE VILLAGE**

Application Date: 01-06-17  
 Permit Number: BP-2017-00011  
 Old Map Number: 48-18-31  
 GPIN: 7738-11-8911

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

<b>OWNER INFORMATION</b>	Site Address 7210 Shenfield Avenue		District		
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663		
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision Parkside Village, Sect. 2	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$ 5987.00	Date Paid: Due	
	New Street Address		Zoning District RPU D		
	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	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: Dunstan Floyd Date: 1/9/17

Applicant/Contact: BERTON JAMES Phone: (804)217-6910  
 Email: bjames@eagleofva.com

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

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. 3099	Finished Sq. Ft. 2656	Unfinished Sq. Ft. 443	# of Bedrooms 3

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

<b>VALUE OF WORK</b>		Application Fee	\$ 984.02
Building	\$215,812.50	Septic/Well Fee	\$
Excludes All Trades Permits		State Levy Fee	\$ 19.16
		Zoning Fee	\$ 50.00
		Total	\$ 1053.18

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: January 5, 2017

Application Accepted:

BP-2017-00015

Old Map Number:

58-48-8-43

GPIN:

7715-57-0903

Issued 1-18-17

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 890 Kempston 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			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Kinloch	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	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	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: 1/10/17

Applicant/Contact: David Owen Phone: 804-708-5120  
 Email: downen@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

Description of Work: New Single family home with attached Garage

SEWER Public <input checked="" type="checkbox"/>	WATER Public <input checked="" type="checkbox"/>	2.5	# of Bathrooms	
# of Floors 2	Total Sq. Ft. 3480	Finished Sq. Ft. 2938	Unfinished Sq. Ft. 542	# of Bedrooms 3

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

VALUE OF WORK		Application Fee \$ 1095.04
Building	\$240,675	Zoning Fee \$ 50.00
Excludes All Trades Permits		Septic/Well Fee \$
		State Levy Fee \$ 21.90
		<del>BLD</del> Total \$ 1116.94

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

Signature of Applicant: [Signature]

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

Issued 1-20-17

**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 19-2 PARKSIDE VILLAGE**

Application Date: 01-10-17  
 Permit Number: BP-2017-00025  
 Old Map Number: 48-18-19  
 GPIN: 7738-12-9026

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 7207 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 Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$5,987.00	Date Paid: Due	
	New Street Address		Zoning District RPLD		
	Front Setback 30' from driveway	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 Track 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: *[Signature]* Date: 1/12/17

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. 3575	Finished Sq. Ft. 2656	Unfinished Sq. Ft. 919	# of Bedrooms 3

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

VALUE OF WORK	
Building	\$233,662.50
Excludes All Trades Permits	

Application Fee	\$ 1118.03
Septic/Well Fee	\$
State Levy Fee	\$ 21.27
Zoning Fee	\$ 50.00
Total	\$ 1189.30

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.

Signature of Applicant *[Signature]*

*ISSUED 1-30-17*  
**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 39-2 PARKSIDE VILLAGE**

Application Date: *01-20-17*  
 Permit Number: *BP-2017-00049*  
 Old Map Number: *48-18-39*  
 GPIN: *7738-11-8460*

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

<b>OWNER INFORMATION</b>	Site Address 7185 Yare Street		District
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
	Proposed Use	Current Use	Existing Buildings on Property
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision <i>Parkside Village</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <i>5987.00</i>	Date Paid: <i>1/23/17</i>	
	New Street Address	Zoning District <i>RPU1D</i>			
	Front Setback <i>30' from Pavement</i>	Center Line Setback	Rear Setback <i>50' B/S</i>	C.U. Permit <i>N/A</i>	Variance <i>N/A</i>
	Side Setback <i>15' from Pavement North</i>	Side Setback <i>20' B/S</i>	Census Track <i>N/A</i>	Flood Zone <i>N/A</i>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>Northern side setback is 15' from Pavement</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 *1/23/17*

Applicant/Contact: **BERTON JAMES** Phone: **(804)217-6910**  
 Email: **bjames@eagleofva.com**

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

<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	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.

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

Application Fee	\$ <i>993.00</i>
Septic/Well Fee	\$
State Levy Fee	\$ <i>19.80</i>
Zoning Fee	\$ <i>50.00</i>
Total	\$ <i>1062.80</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]*

1-3-17 Received

<b>BUILDING PERMIT APPLICATION</b> Goochland County Department Of Building Inspection P O Box 119 Goochland VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay TX MAP# 505-18A	Application Date: 12-27-16
	Application Accepted: <i>BD-2017-00002</i>
	GPIN: 6726-30-1298
	Issued: 1-24-17

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 1164 Lickinghole Rd, Goochland, VA 23063		District Lickinghole		
	Owner <del>TH</del> Crawford, Keith		Phone #		
	Address 1186 Lickinghole Rd				
	Proposed Use	Current Use	Existing Buildings on Property None		
	Proposed Occupant Load (Commercial)	Acreage 2.344	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision James River Landing		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 RWS	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: 1/4/17

Applicant/Contact: Nathan Sano ckg	Phone: 540-478-3110
Email: Nathan.brah@gmail.com	

CONTRACTOR INFORMATION	Contractor: Blue Ridge Custom Homes	Phone: 540-478-3110
	Address: 1186 Lickinghole Rd Goochland Va	
	Contractor License Number: 2705086712	Type: A

Description of Work	Scope of Work: New single family home with attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		3
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	<del>275</del> 275	3113	113	4

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

VALUE OF WORK	4226	Total	Application Fee	\$ 1,137.00
Building	250,000		Zoning Fee	\$ 50.00
Excludes All Trades Permits		275,212.50	Septic/Well Fee	\$ 40.00
		350.54	State Levy Fee	\$ 23.54
			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]*

**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: Shahpen and Shahpen Telephone: 804-285-6406

Mailing Address: 8890 Thrapp Chopt Rd

**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: 1-18-17

Application Date: 11-28-2016

Application Accepted: BP-2016-00927

Old Map Number: 32-18-11

GPIN: 6788-04-9656

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 2428 Bridgewater Dr. Maidens, VA 23102		District	
Owner Nicholas (Nick) Alberti		Phone # 804-513-6756	
Address 12148 Loblolly Ln. Rockville, VA 23146			
Proposed Use One family dwelling	Current Use	Existing Buildings on Property None	
Proposed Occupant Load (Commercial)	Acreage 3.342	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision Bridgewater	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$16,173.00	Date Paid: DUE
New Street Address		Zoning District RR	
Front Setback 55' from ROW	Center Line Setback	Rear Setback 35'	C.U. Permit 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: *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: 11/28/16

Applicant/Contact: Nick Alberti Phone: 804-513-6756

Email: n.alberti@yahoo.com

CONTRACTOR INFORMATION	Contractor Mark Dailey of Dailey Roofing		Phone 804-514-5559	
	Address 12148 Loblolly Ln. Rockville, VA 23146			
	Contractor License Number 2705137623	Type Class A	Expiration 11/30/2016 11/30/2018	

Description of Work	Scope of Work: SFD attached garage & unfinished basement				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3 finished Unfinished		
	# of Floors 3	Total Sq. Ft. 3282 6900	Finished Sq. Ft. 3282	Unfinished Sq. Ft. 2229 3618	# of Bedrooms 4

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

VALUE OF WORK Building: 250,000 432,735.00 Excludes All Trades Permits		Total: \$2189.29	Application Fee \$1958.50 Zoning Fee \$50.00 Septic/Well Fee \$40.00 State Levy Fee \$39.99 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.

Signature of Applicant: N. Alberti

*Issued 1-26-17*  
**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 6-2 PARKSIDE VILLAGE**

Application Date: 01-18-17  
 Permit Number: BP-2017-00046  
 Old Map Number: 77 0738-11-6537  
 GPIN: 48.18.0.6.0

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.

<b>OWNER INFORMATION</b>	Site Address 7190 Yare Street		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision <u>Parkside Village</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$5,987.00</u>	Date Paid: <u>Done</u>
	New Street Address		Zoning District <u>RPLU D</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>
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Census Tract <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: 1/20/17

Applicant/Contact: **BERTON JAMES** Phone: (804)217-6910  
 Email: bjames@eagleofva.com

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

<b>Description of Work</b>	<b>Scope of Work:</b> NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3438	2881	557	3

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

**VALUE OF WORK**  
 Building \$236,962.50  
 Excludes All-Trade Permits

Application Fee	\$ <u>1078.51</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>21.56</u>
Zoning Fee	\$ <u>50.00</u>
<b>Total</b>	\$ <u>1150.07</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 Department Of Building Inspection  
 P O Box 119  
 Goochland VA 23063  
 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay

TM# 32-1-0-27-0

Application Date: 10-6-16

Application Accepted: BP-2016-00810

GPIN: 6778-67-9831

Issued: 1-31-17

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 2030 Broad St Rd, Maidens, VA 23102			District		
	Owner Chris McPherson			Phone # 955-7025		
	Address 3782 Three Chopt Rd Eum Spring, VA 23065					
	Proposed Use Quick Service Restaurant		Current Use NONE	Existing Buildings on Property Yes - main, <del>garage</del>		
	Proposed Occupant Load (Commercial) 14 seats		Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	New Street Address			Zoning District B-1		
	Front Setback 55' from lot line	Center Line Setback	Rear Setback 30'	C.U. Permit	Variance	
	Side Setback 10' West	Side Setback 20' East	C O A		Flood Zone	
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: *May not encroach closer than existing structure.			
	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: 1/9/17

Applicant/Contact: Christopher McPherson Phone: 804-955-7025  
 Email: info@piedmontsmokehouse.com

CONTRACTOR INFORMATION	Contractor FBA owner		Phone 221.6187	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: Add handicap ramp to side of bldg Cm <del>build commercial kitchen</del> for Piedmont Build Handicap Ramp Smokehouse				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1		
	# of Floors 1	Total Sq. Ft. <del>1500</del>	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms 0
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		Application Fee \$ 30.00	
Building - 4,000		Zoning Fee \$ 50.00	
Excludes All Trades Permits		Septic/Well Fee \$	
		State Levy Fee \$ 60	
		RLD Total \$ 80.60	

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

X [Signature]

received  
1-27-17

Application Date: 1-27-17  
 Application Accepted: BP-2017-00069  
 GPIN: 4778-69-7512  
 Issued: 1-31-17

**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

Tax Map # 32-10-1-19-0

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 2462 Shady Oaks Trail, Maidens VA 23102		District MAIDENS	
	Owner Frank Daniel Glick + Gina Parrott Glick		Phone # 804-556-0399	
	Address Same			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acres	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: Gina Glick Phone: 804-556-0399  
 Email: ginaglick@yahoo.com

CONTRACTOR INFORMATION	Contractor owner	Phone
	Address 2462 Shady Oaks Trail, Maidens, VA 23102	
	Contractor License Number	Type

Description of Work	Scope of Work: adding 3 walls to finished basement to include a closet and door in the basement			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft. ~ 605 sq. ft.	# of Bedrooms
	UNFINISHED Sq. Ft.			

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

Building	\$1,000
Excludes All Trades Permits	

Application Fee	\$ 30.00
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ .60
<b>RTD Total</b>	<b>\$ 30.60</b>

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

**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 1-31-17

Application Date: 1-24-17  
 Application Accepted: BP-2017-00053  
 Old Map Number: SS-1-65  
 GPIN: 60786-64-3184

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 1514 CARDWELL ROAD, PROFFER 23039		District		
	Owner E.A. CHAPMAN & CHRISTINE ALLAN		Phone # 804-240-5171		
	Address 1514 CARDWELL ROAD				
	Proposed Use	Current Use	Existing Buildings on Property HOUSE DETACHED GARAGE		
	Proposed Occupant Load (Commercial)	Acreage 1.9	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: N/A	Date Paid: N/A	
	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'	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: 1/25/17

Applicant/Contact: ED CHAPMAN Phone: 804-240-5171  
 Email: ED.CHAP@COMCAST.NET

CONTRACTOR INFORMATION	Contractor owner		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: 2 BEDROOM / 2 BATH & LAUNDRY ADDITION + DECKS				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
	# of Floors 1	Total Sq. Ft. 1275	Finished Sq. Ft. 1275	Unfinished Sq. Ft. 0	# of Bedrooms 2
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK	2050 \$108,062.50	Application Fee	\$498.28
Building	96,000	Zoning Fee	\$25
Excludes All Trades Permits		Septic/Well Fee	\$
		State Levy Fee	\$9.97
		<del>REF</del> Total	\$533.25

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: [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

Application Date: 1-20-17

Application Accepted: BP-2017-00047

GPIN: 6758-70-7265

Issued: 1-30-17

Tax Map # 42-11-03-0

This application is for 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>3250 RIVER ROAD WEST</u>		District		
	Owner <u>GOOCHLAND COUNTY PUBLIC SCHOOLS</u>		Phone # <u>(804) 556-5360</u>		
	Address <u>P.O. Box 169 Goochland, VA 23063</u>				
	Proposed Use <u>BATTING CAGE</u>	Current Use <u>N/A</u>	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</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 <u>---</u>		Zoning District <u>A-2</u>		
	Front Setback <u>15' from ROW</u>	Center Line Setback <u>-</u>	Rear Setback <u>5'</u>	C.U. Permit <u>N/A</u>	Variance <u>N/A</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Floyd Date: 1/20/17

Applicant/Contact: ROBERT LAWRENCE Phone: (804) 556-5360  
 Email: RLAWRENCE@GUSD.K12.VA.US

CONTRACTOR INFORMATION	Contractor <u>STARKE CONSTRUCTION</u>		Phone <u>(804) 794-5832</u>	
	Address <u>1707 SHALLOW WELL RD, MANASSAS-SABOT, VA 23103</u>			
	Contractor License Number <u>2705038805</u>	Type <u>CBC-2BCL</u>	Expiration <u>04-30-2017</u>	

Description of Work: ERECT STEEL STRUCTURE WITH ROOF OVER 2 BATTING CAGES.

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. <u>1,800</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1,800</u>	# of Bedrooms

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

VALUE OF WORK

Building	<u>\$20,000</u>
Excludes All Trades Permits	

Application Fee	\$ <u>182.00</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>3.64</u>
<b>RTD Total</b>	<b>\$ <u>235.64</u></b>

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

Issued 1-30-17



### ZONING COMPLIANCE APPLICATION COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office  
P.O. Box 103  
Goochland, VA 22063

Phone: (804) 556-5860 Web: [www.co.goochland.va.us](http://www.co.goochland.va.us) FAX: (804) 556-5654

Office Use Only

Application File Date: <u>1-30-17</u>	Application No.: <u>AP-2017-00070</u>	Fee: \$25.00
Zoning Approval: <u>Yes</u>	No: <u>AP-2017-00070</u>	Date: <u>1-27-17</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: <u>Thomas Kateeshock</u>	Telephone: <u>804 556 0495</u>
Address: <u>2828 Sandy Hills Drive</u>	Cell phone: _____
<u>Sandy Hook, VA 23153</u>	FAX: _____
E-mail: <u>tkshock@aol.com</u>	

Name of Applicant: <u>Thomas Kateeshock</u>	Telephone: <u>804 556 0495</u>
Address: <u>2828 Sandy Hills Drive</u>	Cell phone: _____
<u>Sandy Hook VA 23153</u>	FAX: _____
E-mail: <u>tkshock@aol.com</u>	

**Property Information**

Street Address: <u>2828 Sandy Hills Drive</u>	Zoning: <u>A-2</u>
GPIN Number: <u>21-12-0-2-0</u>	Acreage: <u>2.395 AC</u>
Existing Use: <u>Residential</u>	
Are there any deed restrictions? If yes, attach copy of deed restrictions. Date restrictions expire: <u>No</u>	

**Project Information**

1. Estimated square footage of the building(s): 256
2. Written Description of Proposed Physical Improvements  
256 sq ft outdoor storage shed for lawn mower + equipment

**received**  
1-25-17

# 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:

Application Accepted:

Old Map Number:

GPIN:

*Issued: 1-30-17*

*RP-2017-00060*

*67-d-c-16-0*

*7723-55-5093*

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address <i>212 SWEETBRIAR RICHMOND VA 23238</i>			District	
	Owner <i>DEBYA &amp; RANDY DEKUSTER</i>			Phone # <i>(802) 497 7030</i>	
	Address <i>RESIDENTIAL RESIDENTIAL</i>				
	Proposed Use	Current Use	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 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: *GAY IRBY, MIDLOTHIAN, INC* Phone *434 774 8408*  
 Email: *gayirby@midlothianinc.com* *Jessie 434-774-8410*

CONTRACTOR INFORMATION  
 Contractor: *MIDLOTHIAN RENOVATION AND RESTORATION INC* Phone *434 676 2300*  
 Address: *184 SOUTHVIEW FARM RD KENBRIDGE, VA 23944*  
 Contractor License Number: *2701037078* Type: *CLASS A* Expiration: *7-31-2018*

Description of Work:  
**Scope of Work:** KITCHEN: REMOVE (2) WALLS IN KITCHEN AND EXISTING WINDOW. FRAME NEW CASED OPENING BETWEEN FOYER & KITCHEN. INSTALL NEW 4' WINDOW OVER SINK.  
 BASEMENT: ENLARGE CASED OPENING BETWEEN HALL & FAMILY ROOM. RELOCATE DOOR TO BREEZEWAY CLOSET TO POWDER ROOM. IN LAUNDRY, BUILD COAT CLOSET AND FIRE-OUT WALL FOR EXISTING PANEL BOX. Plumbing, AND Dryer Plumbing

SEWER Public/Private	WATER Public/Private	# of Bathrooms <i>2 1/2</i>	
# of Floors <i>3</i>	Total Sq. Ft. <i>384</i>	Finished Sq. Ft. <i>3247 whole house</i>	Unfinished Sq. Ft. <i>4</i>

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

VALUE OF WORK		Application Fee \$ <i>135.76</i>
Building	\$ <i>27,500.00</i>	Zoning Fee \$ <i>0</i>
Excludes All Trades Permits		Septic/Well Fee \$ _____
		State Levy Fee \$ <i>2.71</i>
		RLD Total \$ <i>138.47</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 *Midlothian Inc. by Gay J. Irby*

# Alternative System BUILDING PERMIT APPLICATION

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

Application Date: 5-25-14

Application Accepted: BP-2014-00508

Old Map Number: 64-12-B-14

GPIN: 7723-59-9907

Issued 8-1-2014

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

OWNER INFORMATION	Site Address: 403 BRARWOOD Circle		District	
	Owner: The McGuin Co Inc.		Phone #	
	Address: P.O. Box 8 Manakin Sbor, VA 23103.			
	Proposed Use: Single Family	Current Use: Lot	Existing Buildings on Property: N/A	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision	Proffer	Amount:	Date Paid:	
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
New Street Address		Zoning District: R-1		
Front Setback: 40' off ROW	Center Line Setback: —	Rear Setback: 35'	C.U. Permit: None	
			Variance: None	
Side Setback: 15' / 30' BTU. ST.	Side Setback: 15' / 30' BTU. ST.	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: 7/7/16

Applicant/Contact: Artie McGuin Phone: 804-640-1294

Email: artiemcguin@gmail.com

Contractor: The McGuin Co Inc. Phone: 804-640-1294

Address: P.O. Box 8 Manakin Sbor, VA 23103

Contractor License Number: 2701021780 Type: A: Res. Comm Expiration: 10-31-2016

Description of Work: Single Family Residential 1 floor construction attached garage. New home.

SEWER: Public/Private	WATER: Public/Private	# of Bathrooms: 2
# of Floors: 1	Total Sq. Ft.: 1862	Finished Sq. Ft.: 1348
		Unfinished Sq. Ft.: 320 GARAGE
		# of Bedrooms: 3

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

VALUE OF WORK		514	Application Fee	\$ 481.40
Building	\$ 95,000		Zoning Fee	\$ 50.00
	\$ 104,325.00	Total:	Septic/Well Fee	\$ 25.00
Excludes All Trades Permits		\$104,660.59	State Levy Fee	\$ 10.13
			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: Artie McGuin

Revised 1-28-17 Add screen form over 10x12 deck

SIGN PERMIT

**BUILDING PERMIT APPLICATION**

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

TM: 42-1-119-C

Application Date: 12.12.16

Application Accepted: BP-2016-00986

GPIN: 6766-39-4072

Issued:

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 1581 Maidens Road	District Lickinghole
Owner Eric and Liza Cioffi	Phone # 804 543 3157
Address 1581 Maidens Road	
Proposed Use Farm Winery	Current Use Farm Winery
Existing Buildings on Property Residential home; Pole Barn	Commercial Use Farm winery considered by County to be commercial <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Proposed Occupant Load (Commercial) 39	Acreeage 10

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-2	
Front Setback 15' from Right	Center Line Setback —	Rear Setback 5'	C.U. Permit N/A
Side Setback 5'	Side Setback 5'	COA N/A	Variance N/A
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Front Setback needs to be 15' from Right-of-Way.			

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: 1/23/17

Applicant/Contact: Eric Cioffi Phone: 804 543 3157

Email: ericcioffi@yahoo.com

CONTRACTOR INFORMATION	Contractor OWNER	Phone
	Address	
	Contractor License Number one	Type

Description of Work	Scope of Work: Install two sign by entrance of property in accord with County zoning ordinance. This application seeks permit for sign installation. monument sign				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms N/A		
	# of Floors N/A	Total Sq. Ft. N/A	Finished Sq. Ft. N/A	Unfinished Sq. Ft. N/A	# of Bedrooms N/A

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

VALUE OF WORK

Building	\$400.00
Excludes All Trades Permits	

Application Fee	\$30.00
Zoning Fee	\$50.00
Septic/Well Fee	\$
State Levy Fee	\$100
-RFD Total	\$380.00

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.

X [Signature]