

**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 2.3.17

Application Date: 1-3-17  
 Application Accepted: 1/5/17  
 Old Map Number: BP-2017-00009  
 GPIN: 7716-36-7256

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<br>1410 GRAND DRIVE   |  | District  |                    |                 |
|                                      | Owner<br>DANIEL & LINDA WILSON   |  | Phone #<br>804-282-4299   |                    |                 |
|                                      | Address<br>1401 GRAND DRIVE MANAKIN SARBOT, VA 23103                                     |  |   |                    |                 |
|                                      | Proposed Use<br>A2 RESIDENTIAL   | Current Use<br>A2 RESIDENTIAL  | Existing Buildings on Property<br>NONE  |                    |                 |
|                                      | Proposed Occupant Load (Commercial)  | Acreeage<br>2.753  | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                    |                 |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>Grand Ridge   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A  | Date Paid:<br>N/A  |                 |
|                                      | New Street Address   |  | Zoning District<br>A-2  |                    |                 |
|                                      | Front Setback<br>55' From R/W  | Center Line Setback<br>-   | Rear Setback<br>35'   | C.U. Permit<br>N/A | Variance<br>N/A |
|                                      | Side Setback<br>20'  | Side Setback<br>20'  | COA<br>N/A  | Flood Zone<br>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: 1/6/17

Applicant/Contact: DANIEL WILSON Phone: 804-282-4299

Email: DWILSON@STARWOODLORD.COM

|                        |  |      |                       |  |
|------------------------|--|------|-----------------------|--|
| CONTRACTOR INFORMATION | Contractor<br>DANIEL WILSON/owner                    |      | Phone<br>804-282-4299 |  |
|                        | Address<br>1401 GRAND DRIVE MANAKIN SARBOT, VA 23103 |      |                       |  |
|                        | Contractor License Number                            | Type | Expiration            |  |

|                     |   |                         |                          |                            |                    |
|---------------------|---|-------------------------|--------------------------|----------------------------|--------------------|
| Description of Work | Scope of Work: CONSTRUCTION OF A SINGLE FAMILY RESIDENCE w/ a WALK OUT BASEMENT w/ attached Garage 21,780 Sq Ft Ashbone |                         |                          |                            |                    |
|                     | SEWER<br>Public/Private   | WATER<br>Public/Private | # of Bathrooms<br>5.5    |                            |                    |
|                     | # of Floors<br>3  | Total Sq. Ft.<br>6464   | Finished Sq. Ft.<br>5229 | Unfinished Sq. Ft.<br>1235 | # of Bedrooms<br>4 |

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

|                             |                                 |                    |                 |           |
|-----------------------------|---------------------------------|--------------------|-----------------|-----------|
| VALUE OF WORK               |                                 | Total<br>\$248,050 | Application Fee | \$ 248.28 |
| Building                    | <del>328,000</del> / 496,952.50 |                    | Zoning Fee      | \$ 50.00  |
| Excludes All Trades Permits |                                 |                    | Septic/Well Fee | \$ 40.80  |
|                             |                                 |                    | State Levy Fee  | \$ 44.97  |
|                             |                                 |                    | RLD             | \$ 100.00 |

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

\* Signature of Applicant: [Signature]

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: COMMONWEALTH ESCROW Telephone: 804-359-2382

Mailing Address: 5609 PATTERSON AVE RICHMOND, VA 23226

**OWNER'S AFFIDAVIT**

I DANIEL WILSON of (address) 1401 GRAND DRIVE affirm that I am the owner of a certain tract of parcel of land located at 1401 GRAND DR and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

Signed and acknowledged by Daniel Wilson in the city or county of Henrico Virginia on the 5 Day of January, 2017 in the presence of the undersigned notary. My Commission expires 4/15/17

[Signature] (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 N/A

**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 2.3.17  
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 (804) 556-5317

Issued 2-9-17

Application Date: 1-9-17  
 Permit Number: BP-2017-00010  
 Old Map Number: 63-40-6  
 GPIN: 7714-39-6446

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<br>830 Running Cedar Court                                    |  | District   |                            |
|   | Owner<br>Doris + Anne Tate   |  | Phone #<br>804-833-9750  |                            |
|   | Address<br>11811 Britan Way Richmond, VA 23238                             |  |  |                            |
|   | Proposed Use   | Current Use  | Existing Buildings on Property   |                            |
|   | Proposed Occupant Load (Commercial)  | Lot Size   | Commercial Use<br><input type="checkbox"/> Yes <input type="checkbox"/> No |                            |
| TO BE COMPLETED BY ZONING DEPARTMENT  | Subdivision<br>Running Cedar Pl.   | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount:<br>\$20,196.00   | Date Paid:<br>Done         |
|   | New Street Address   |  | Zoning District<br>RR  |                            |
|   | Front Setback<br>55' from ROW  | Center Line Setback  | Rear Setback<br>35'  | C.U. Permit<br>N/A         |
|   | Side Setback<br>15'/35'  | Side Setback,<br>15'/35'   | Census Track<br>N/A  | Flood Zone<br>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: <u>Doreen Floyd</u> Date: <u>1/10/17</u>   |  |  |  |                            |
| Applicant/Contact:<br>Jeremy Harring  |  |  | Phone<br>804-677-8577  |                            |
| Email:<br>jharring@harringconstruction.com  |  |  |  |                            |
| CONTRACTOR INFORMATION  | Contractor<br>Harring Construction Co.                                     |  | Phone<br>804-739-3405  |                            |
|   | Address<br>22221 Pear Orchard Rd Moseley, VA 23120                         |  |  |                            |
|   | Contractor License Number<br>2705021378                                    | Type<br>CLASS A  | Expiration<br>7/31/2017  |                            |
| Description of Work   | Scope of Work: <u>Single Family residential dwelling + attached garage</u> |  |  |                            |
|   | SEWER<br>Public/Private  | WATER<br>Public/Private  | # of Bathrooms   |                            |
|   | # of Floors<br>2   | Total Sq. Ft.<br>4,514   | Finished Sq. Ft.<br>3404   | Unfinished Sq. Ft.<br>1110 |
|   |  |  | # of Bedrooms<br>5   |                            |

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

|                             |         |
|-----------------------------|---------|
| VALUE OF WORK               |         |
| Building                    | 360,000 |
| Excludes All Trades Permits |         |

Zoning - \$50.00  
 Stormwater  
 \$200.00

|                 |           |
|-----------------|-----------|
| Application Fee | \$1632.00 |
| Septic/Well Fee | \$40.00   |
| State Levy Fee  | \$33.44   |
| RLD             | \$100.00  |
| Total           | \$2005.44 |

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: Insight Title + Settlement Services LLC Telephone: 804-747-4476

Mailing Address: 11549 IS Nuckols Rd  
Glen Allen, VA 23059

**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

OWNERS 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.

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_

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 2-3-17

Application Date: 1-10-17  
 Application Accepted: BP-2017-00024  
 Old Map Number: 32-18-8  
 GPIN: 6788-04-1986

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<br>2425 GAMMANS CREEK DRIVE   |   | District                             |                    |
|                                      | Owner<br>Carter Home Builders  |   | Phone #<br>804 241 6507              |                    |
|                                      | Address<br>611 Joe Brooke Lane Manakin Sabot, VA 23103   |   |                                      |                    |
|                                      | Proposed Use<br>NEW HOME   | Current Use   | Existing Buildings on Property<br>NO |                    |
| Proposed Occupant Load (Commercial)  | Acreage<br>8.419 AC  | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                      |                    |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>BRIDGEWATER   | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No        | Amount:<br>\$16,175.00               | Date Paid:<br>Due  |
|                                      | New Street Address   |   | Zoning District<br>RR                |                    |
|                                      | Front Setback<br>55' from ROW  | Center Line Setback   | Rear Setback<br>35'                  | C.U. Permit<br>N/A |
|                                      | Side Setback<br>15' / 35'  | Side Setback<br>15' / 35'   | COA<br>N/A                           | Variance<br>N/A    |
|                                      | Flood Zone<br>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 Boyd Date 1/12/17

Applicant/Contact: Gary Carter Phone 241-6507

Email: carterhomebuilders@gmail.com

|                        |  |                   |
|------------------------|--|-------------------|
| CONTRACTOR INFORMATION | Contractor<br>Carter home builders                 | Phone<br>241-6507 |
|                        | Address<br>611 Joe Brook Ln Manakin Sabot VA 23103 |                   |
|                        | Contractor License Number<br>2705678604            | Type<br>CLASS A   |

|                     |   |                         |                          |                           |                    |
|---------------------|---|-------------------------|--------------------------|---------------------------|--------------------|
| Description of Work | Scope of Work:<br>Build New Home attached garage by breezeway |                         |                          |                           |                    |
|                     | SEWER<br>Public/Private                                       | WATER<br>Public/Private | # of Bathrooms<br>3 1/2  |                           |                    |
|                     | # of Floors<br>1  | Total Sq. Ft.<br>3990   | Finished Sq. Ft.<br>2930 | Unfinished Sq. Ft.<br>596 | # of Bedrooms<br>4 |

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 | \$1226.00 |
| Building                    | 270,000 |                      | Zoning Fee      | \$50.00   |
| Excludes All Trades Permits |         |                      | Septic/Well Fee | \$40.00   |
|                             |         |                      | State Levy Fee  | \$25.34   |
|                             |         |                      | RLD             | \$100.00  |

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. total \$1642.34

\* 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: John Williamson, Atty Telephone: 804 556-3914

Mailing Address: PO Box 294 3063 River Road West Goodland, 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<br>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<br>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 1/2/2017  
Code Official

**received**  
1-17-17

**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: 01/05/2017  
 Application Accepted: BP-2017-00029  
 Old Map Number: 27-4-0-2-0  
 GPIN: 6728-48-5924

*Issued 2.15.17*

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<br><u>4720 River Rd Goochland VA 23063</u> |   | District<br><u>Licking hole</u>                                       |                           |
|  | Owner<br><u>Richmond Advertising Consortium LLC</u>     |   | Phone #   |                           |
|  | Address<br><u>816 Kline Court</u>                       |   |   |                           |
|  | Proposed Use<br><u>Resident</u>                         | Current Use<br><u>Forestry</u>  | Existing Buildings on Property<br><input checked="" type="checkbox"/> |                           |
| Proposed Occupant Load (Commercial)  | Acreage<br><u>30.173</u>                                | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |                           |
| TO BE COMPLETED BY ZONING DEPARTMENT   | Subdivision<br><u>N/A</u>                               | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        | Amount:<br><u>N/A</u>   | Date Paid:<br><u>N/A</u>  |
|  | New Street Address<br><u>---</u>                        |   | Zoning District<br><u>A-1</u>   |                           |
|  | Front Setback<br><u>100 from ROW</u>                    | Center Line Setback<br><u>---</u>   | Rear Setback<br><u>35'</u>  | C.U. Permit<br><u>N/A</u> |
|  | Side Setback<br><u>20'</u>                              | Side Setback<br><u>20'</u>  | COA<br><u>N/A</u>   | Variance<br><u>N/A</u>    |
|  | Flood Zone<br><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: 1/17/17

Applicant/Contact: Warren M Wheat Phone: 804 221 4304  
 Email: TECHMANWARRER@GMAIL.COM

|                        |  |      |                              |
|------------------------|--|------|------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><u>Warren M Wheat/owner</u>            |      | Phone<br><u>804 221 4304</u> |
|                        | Address<br><u>816 Kline Court Goochland VA 23063</u> |      |                              |
|                        | Contractor License Number<br><u>Owner - B010</u>     | Type | Expiration                   |

|                     |   |   |                                 |                                |                           |
|---------------------|---|---|---------------------------------|--------------------------------|---------------------------|
| Description of Work | Scope of Work:<br><u>Build a single family Dwelling <del>with</del> attached garage</u> |   |                                 |                                |                           |
|                     | SEWER<br>Public/Private<br><u>Private</u>   | WATER<br>Public/Private<br><u>Private</u> | # of Bathrooms<br><u>4</u>      |                                |                           |
|                     | # of Floors<br><u>2</u>   | Total Sq. Ft.<br><u>4600</u>              | Finished Sq. Ft.<br><u>4600</u> | Unfinished Sq. Ft.<br><u>0</u> | # of Bedrooms<br><u>5</u> |
|                     |   |   | <u>4263</u>                     | <u>02046</u>                   |                           |

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

VALUE OF WORK 6309  
 Building 350,000 ~~00~~ 449,310.00  
 Excludes All Trades Permits

|                      |                   |
|----------------------|-------------------|
| Application Fee      | \$ <u>2033.89</u> |
| Zoning Fee           | \$ <u>50.00</u>   |
| Septic/Well Fee      | \$ <u>40.00</u>   |
| State Levy Fee       | \$ <u>4148</u>    |
| <del>PLD</del> Total | \$ <u>2115.39</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) 556-5851 TDD 711 Va Relay

Issued 2.9.17

Application Date: 1-18-17  
 Application Accepted: BR-2017-00036  
 Old Map Number: 41-1-0-1-A  
 GPIN: 6748-21-7414

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<br>2348 Rock Castle Road (Lot 2 Castle Rocks) |                     | District  |
| Owner<br>Emerald Custom Homes, LLC                         |                     | Phone #   |
| Address<br>PO Box 4309 Midlothian 23112                    |                     |   |
| Proposed Use<br>Single Fam Sub                             | Current Use<br>Same | Existing Buildings on Property<br>N/A   |
| Proposed Occupant Load (Commercial)<br>N/A                 | Acreage<br>6.374 AC | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

TO BE COMPLETED BY ZONING DEPARTMENT

|                              |  |                        |                    |
|------------------------------|--|------------------------|--------------------|
| Subdivision<br>N/A           | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A         | Date Paid:<br>N/A  |
| New Street Address           |  | Zoning District<br>A-1 |                    |
| Front Setback<br>75' From Rd | Center Line Setback  | Rear Setback<br>35'    | C.U. Permit<br>N/A |
| Side Setback<br>20'          | Side Setback<br>20'  | COA<br>N/A             | Flood Zone<br>N/A  |

APPROVED  REJECTED  COMMENTS:

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

Planning & Zoning Officer: [Signature] Date: 1/18/17

Applicant/Contact: Ray Avery, IV, Pres., Emerald Custom Homes, LLC Phone: 674-0231 ext. 16  
 Email: ray@emerald-homes.com

Contractor: Emerald Custom Homes, LLC Phone: 674-0231  
 Address: PO Box 4309 Midlothian 23112  
 Contractor License Number: 2705161550 Type: Class A - RBC Expiration: 12/31/18

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

|                         |                         |                  |                    |
|-------------------------|-------------------------|------------------|--------------------|
| SEWER<br>Public/Private | WATER<br>Public/Private | # of Bathrooms   |                    |
| # of Floors             | Total Sq. Ft.           | Finished Sq. Ft. | Unfinished Sq. Ft. |
| 2                       | 3326                    | 2398             | 928                |
|                         |                         | # of Bedrooms    |                    |
|                         |                         | 4                |                    |

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

|                             |           |                         |                 |          |
|-----------------------------|-----------|-------------------------|-----------------|----------|
| VALUE OF WORK               |           | Storm Water<br>\$200.00 | Application Fee | \$977.92 |
| Building                    | \$214,650 |                         | Zoning Fee      | \$50.00  |
| Excludes All Trades Permits |           |                         | Septic/Well Fee | \$40.00  |
|                             |           |                         | State Levy Fee  | \$20.36  |
|                             |           |                         | 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 \$1388.28

Signature of Applicant: Ray Avery, IV

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: Philip L. McDaniel, Attorney Telephone: 379-0380

Mailing Address: PO Box 353  
Midlothian 23113

**OWNER'S AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

\_\_\_\_\_  
Owner's Signature

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

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

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

RLD \$ 100.00

Septic & well \$ 40.80 For Commercial & Residential

Septic only \$ 25.44 for Commercial & Residential

Zoning Commercial \$ 100.00

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

**OFFICE USE ONLY**

USE \_\_\_\_\_ # STORIES \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_ OCCUPANY LOAD \_\_\_\_\_ CODE EDITION \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ FIRE ALARM \_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

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

Application Date: 1-17-17  
 Application Accepted: BP-2017-00038  
 Old Map Number: 26-2-0-2-B2  
 GPIN: 6718-09-0968

*Issued 2.10.17*

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<br><del>5381</del> River Road West  |  | District<br>Byrd  |  |
|                   | Owner<br>Michael And Melissa Sherman   |  | Phone #<br>540-479-0354   |  |
|                   | Address<br>5381 River Road West, Goochland, VA 23063                                     |  |   |  |
|                   | Proposed Use<br>Single Family Home   | Current Use<br>None  | Existing Buildings on Property<br>None  |  |
|                   | Proposed Occupant Load (Commercial)  | Acreage<br>5 acres   | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
|                   | Subdivision<br><u>No</u>   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br><u>N/A</u>   | Date Paid:<br><u>N/A</u>                       |
|                   | New Street Address   |  | Zoning District<br><u>A-1</u>   |  |
|                   | Front Setback<br><u>100' from ROW</u>  | Center Line Setback  | Rear Setback<br><u>35'</u>  | C.U. Permit/<br><u>N/A</u> Variance <u>N/A</u> |
|                   | Side Setback<br><u>20'</u>   | Side Setback<br><u>20'</u>   | COA<br><u>N/A</u>   | Flood Zone<br><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 1/18/17

Applicant/Contact: Bethel Builders, LLC (Makenna Robbins) Phone: 540-603-8300  
 Email: Makennar@bethelbuilders-va.com

|                        |   |  |                         |                      |
|------------------------|---|--|-------------------------|----------------------|
| CONTRACTOR INFORMATION | Contractor<br>Bethel Builders, LLC                  |  | Phone<br>540-603-8300   |                      |
|                        | Address<br>100 Fredericksburg Ave, Louisa, VA 23093 |  |                         |                      |
|                        | Contractor License Number<br>2705148374             |  | Type<br>Class A CBC RBC | Expiration<br>9/2018 |

|                     |  |                             |  |                                   |                       |
|---------------------|--|-----------------------------|--|-----------------------------------|-----------------------|
| Description of Work | Scope of Work:<br>Single Family New Residential Construction                         |                             |  |                                   |                       |
|                     | SEWER<br>Public <input type="checkbox"/> Private <input checked="" type="checkbox"/> |                             | WATER<br>Public <input type="checkbox"/> Private <input checked="" type="checkbox"/> |                                   | # of Bathrooms<br>3.5 |
|                     | # of Floors<br>2   | Total Sq. Ft.<br>2726 sq ft | Finished Sq. Ft.<br>2726 sq ft   | Unfinished Sq. Ft.<br><u>8504</u> | # of Bedrooms<br>4    |
|                     | <i>with porch</i>  |                             |  |                                   |                       |

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

|                             |   |                 |                   |
|-----------------------------|---|-----------------|-------------------|
| VALUE OF WORK               |   | Application Fee | \$ <u>1130.69</u> |
| Building                    | \$ <u>270,645.00</u> <i>#248,590.00</i> | Zoning Fee      | \$ <u>50.00</u>   |
| Excludes All Trades Permits |   | Septic/Well Fee | \$ <u>40.00</u>   |
|                             |   | State Levy Fee  | \$ <u>23.41</u>   |
|                             |   | RLD             | \$ <u>100.00</u>  |

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. *total*  
 Signature of Applicant Makenna Robbins *#154410*  
 1344.10

**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: Louisa Title Agency, Inc Telephone: 540-967-1650

Mailing Address: P.O. Box 276 Louisa, VA 23093

**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

Application Date: 1-19-17

Application Accepted:

EP-2017-00042

Old Map Number:

58.44.0.1.0

GPIN:

7716-46-0929

Issued 2.22.17

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<br>1419 GRAND DRIVE         | District                |   |
| Owner<br>STARWOOD CORPORATION            | Phone #<br>804-282-4299 |   |
| Address<br>1407 GRAND DRIVE, MANAKIN GAP |                         |   |
| Proposed Use<br>A2                       | Current Use<br>A2       | Existing Buildings on Property<br>NONE  |
| Proposed Occupant Load (Commercial)      | Acres<br>3.569          | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

TO BE COMPLETED BY ZONING DEPARTMENT

|  |  |                        |                    |
|--|--|------------------------|--------------------|
| Subdivision<br>Grand Ridge   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A         | Date Paid:<br>N/A  |
| New Street Address<br>-  |  | Zoning District<br>A-2 |                    |
| Front Setback<br>55' from ROW  | Center Line Setback<br>-   | Rear Setback<br>35'    | C.U. Permit<br>N/A |
| Side Setback<br>20'  | Side Setback<br>20'  | COA<br>N/A             | Flood Zone<br>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 1/20/17

Applicant/Contact:

DANIEL BYRNES

Phone

804-615-7842

Email:

DBYRNES@STARWOODCORP.COM

CONTRACTOR INFORMATION

|  |            |
|--|------------|
| Contractor<br>DANIEL BYRNES / OWNER                | Phone<br>" |
| Address<br>1407 GRAND DRIVE, MANAKIN GAP, VA 23103 |            |
| Contractor License Number                          | Expiration |

Description of Work

Scope of Work: SINGLE FAMILY RESIDENCE BUILT ON A CRAWL FOUNDATION W/ AN ATTACHED GARAGE

|  |  |                           |                             |
|--|--|---------------------------|-----------------------------|
| SEWER<br>Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> | WATER<br>Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> | # of Bathrooms<br>4       |                             |
| # of Floors<br>2   | Total Sq. Ft.<br>6244  | Finished Sq. Ft.<br>4,926 | Unfinished Sq. Ft.<br>1,318 |
|  |  | # of Bedrooms<br>4        |                             |

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

VALUE OF WORK \$474,725.00

|                             |         |
|-----------------------------|---------|
| Building                    | 255,560 |
| Excludes All Trades Permits |         |

|                 |           |
|-----------------|-----------|
| Application Fee | \$2148.26 |
| Zoning Fee      | \$0.00    |
| Septic/Well Fee | \$40.00   |
| State Levy Fee  | \$43.77   |
| 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:

\* Signature of Applicant

*[Signature]*

\$2382.03

**LIEN AGENT INFORMATION**

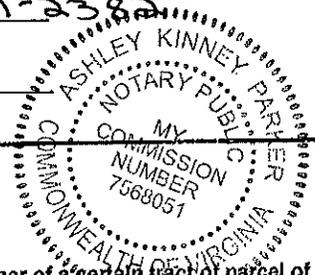
Please check one of the following:

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 Telephone: 804-359-2382  
\* TITLE

Mailing Address: 5609 PARKERSON AVE, STE C  
RICHMOND, VA 23226



**OWNER'S AFFIDAVIT**

I, STARWOOD CORP. of (address) 1401 GRAND DR. MANALIN SBOOT affirm that I am the owner of a certain tract or parcel of land located at 1401 GRAND DR. and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

[Signature] Owner's Signature

Signed and acknowledged by Daniel Byrnes in the city or county of Goochland Virginia on the 19 Day of January, 2017 in the presence of the undersigned notary. My Commission expires 4-30-17

[Signature] (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 2/21/2017  
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: 45.23.0.31.0

Application Date: 1-19-17

Application Accepted: BP-2017-00043

GPIN: 6797-18-8684

Issued: 2.13.17

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<br>1859 Autumn Breeze PL |                       | District   |
|                   | Owner<br>RENOVATE III LLC             |                       | Phone #<br>804 216 7222  |
|                   | Address<br>PO BOX 71595               |                       |  |
|                   | Proposed Use<br>SF                    | Current Use<br>Vacant | Existing Buildings on Property<br>None                                     |
|                   | Proposed Occupant Load (Commercial)   | Acreage               | Commercial Use<br><input type="checkbox"/> Yes <input type="checkbox"/> No |

|                                      |  |  |                        |                     |                 |
|--------------------------------------|--|--|------------------------|---------------------|-----------------|
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>Autumn Breeze   | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount:<br>\$9,974.00  | Date Paid:<br>1 Dec |                 |
|                                      | New Street Address   |  | Zoning District<br>R-1 |                     |                 |
|                                      | Front Setback<br>40' from ROW  | Center Line Setback<br>—   | Rear Setback<br>35'    | C.U. Permit<br>N/A  | Variance<br>N/A |
|                                      | Side Setback<br>15'/30'  | Side Setback<br>15'/30'  | COA<br>N/A             | Flood Zone<br>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 J. Jannett Date: 1/20/17

Applicant/Contact: Wonderview David Jannett Phone: 804-216-7222  
 Email: jannettco@gol.com

|                        |   |                |                         |  |
|------------------------|---|----------------|-------------------------|--|
| CONTRACTOR INFORMATION | Contractor<br>Wonderview LLC            |                | Phone<br>804 216 7222   |  |
|                        | Address<br>PO BOX 71595                 |                |                         |  |
|                        | Contractor License Number<br>2705135088 | Type:<br>A-RBC | Expiration<br>6/30/2018 |  |

|                     |   |                              |  |                                  |                           |
|---------------------|---|------------------------------|--|----------------------------------|---------------------------|
| Description of Work | Scope of Work: <u>NEW construction single family home</u> |                              |  |                                  |                           |
|                     | <u>4565 total sqft attached garage</u>                    |                              |  |                                  |                           |
|                     | SEWER<br>Public/Private                                   | WATER<br>Public/Private      | # of Bathrooms<br><u>3 Full 2 Half</u> |                                  |                           |
|                     | # of Floors<br><u>3</u>                                   | Total Sq. Ft.<br><u>3600</u> | Finished Sq. Ft.<br><u>3621</u>        | Unfinished Sq. Ft.<br><u>944</u> | # of Bedrooms<br><u>4</u> |

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

|                             |                                       |   |
|-----------------------------|---------------------------------------|---|
| Building                    | VALUE OF WORK<br>\$ <u>306,975.00</u> | Application Fee<br><u>\$1393.40</u>           |
|                             | <u>215,000</u>                        | Zoning Fee<br><u>\$50.00</u>                  |
| Excludes All Trades Permits |                                       | Septic/Well Fee<br><u>\$40.00</u>             |
|                             |                                       | State Levy Fee<br><u>\$28.607</u>             |
|                             |                                       | <del>State Levy Fee</del><br><u>\$1512.06</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.

David Jannett

**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: Home Title IAS Agency Telephone: 272-1928  
Mailing Address: 9701 Metropolitan Court, Suite B  
North Chesapeake VA 22728-23236

**OWNER'S AFFIDAVIT**

David Stant <sup>owner</sup> of (address) PO Box 71595 Richmond VA 23255 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.

[Signature] Owner's Signature

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

\_\_\_\_\_  
(Notary)

**ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES**

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

OWNER'S SIGNATURE \_\_\_\_\_

**PERMIT FEE SCHEDULE**

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

**OFFICE USE ONLY**

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

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Code Official

# 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: 43.28.0.2.0

Application Date: 1-19-17

Application Accepted: BP-2017-00044

GPIN: 6767-56-4387

Issued: 2.10.17

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: 1851 Wicker Woods Dr.  |  | District  |                  |               |
|                                      | Owner: Renovatio III LLC   |  | Phone #: 804 216 7222   |                  |               |
|                                      | Address: PO BOX 71595 Rich, VA 23255   |  |   |                  |               |
|                                      | Proposed Use: SF   | Current Use  | Existing Buildings on Property  |                  |               |
|                                      | Proposed Occupant Load (Commercial)  | Acreage  | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                  |               |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision: Greenbriar Estates  | Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount: N/A   | Date Paid: N/A   |               |
|                                      | New Street Address: _____  |  | Zoning District: R-1  |                  |               |
|                                      | Front Setback: 40' from ROW  | Center Line Setback  | Rear Setback: 35'   | C.U. Permit: N/A | Variance: N/A |
|                                      | Side Setback: 15'/30'  | Side Setback: 15'/30'  | 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: 1/20/17

Applicant/Contact: DAVID J. NETT WOODVIEW RENOVATIO Phone: 804 216 7222

Email: jinnettco@aol.com

|                        |  |                       |                        |                         |
|------------------------|--|-----------------------|------------------------|-------------------------|
| CONTRACTOR INFORMATION | Contractor: Woodview LLC   |                       | Phone: 804 216 7222    |                         |
|                        | Address: PO BOX 71595 Rich VA 23255                                |                       |                        |                         |
|                        | Contractor License Number: 270513508E                              | Type: A RBC           | Expiration: 6/30/18    |                         |
| Description of Work    | Scope of Work: New construction single family home attached garage |                       |                        |                         |
|                        | SEWER: Public/Private  | WATER: Public/Private | # of Bathrooms: 2 1/2  |                         |
|                        | # of Floors: 2   | Total Sq. Ft.: 2911   | Finished Sq. Ft.: 2143 | Unfinished Sq. Ft.: 768 |
|                        |  |                       | # of Bedrooms: 3       |                         |

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

VALUE OF WORK \$164,255.00

|          |        |
|----------|--------|
| Building | 152155 |
|----------|--------|

Excludes All Trades Permits

|                      |           |
|----------------------|-----------|
| Application Fee      | \$ 751.5  |
| Zoning Fee           | \$ 50.00  |
| Septic/Well Fee      | \$ 40.00  |
| State Levy Fee       | \$ 15.82  |
| <del>Fee</del> Total | \$ 857.32 |

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 36-98.04 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: Home Title INS Agency Telephone: 272-1828  
Mailing Address: 9701 Metropolitan Court, Suite B - North  
Chesterfield, VA 23236

**OWNER'S AFFIDAVIT**

I David Jimett 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 2.1.17

**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 26-2 PARKSIDE VILLAGE**

Application Date: 01-30-17  
 Permit Number: BP-2017-00073  
 Old Map Number: 48-18-0-26-0  
 GPIN: 7738-21-0735

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<br>7056 Washbrook Terrace  |   | District                          |   |                 |
|   | Owner<br>EAGLE CONSTRUCTION OF VA., LLC   |   | Phone #<br>804-741-4663           |   |                 |
|   | Address<br>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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                   |   |                 |
| <b>TO BE COMPLETED BY ZONING DEPARTMENT</b> | Subdivision<br>Parkside Village   | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No        | Amount:<br>\$5987.00              | Date Paid:<br>Due                                   |                 |
|   | New Street Address  |   | Zoning District<br>RPUD           |   |                 |
|   | Front Setback<br>30' from Pavement  | Center Line Setback   | Rear Setback<br>50' B/S           | C.U. Permit<br>N/A                                  | Variance<br>N/A |
|   | Side Setback<br>20' B/S   | Side Setback<br>20' B/S   | Census Track<br>N/A               | Flood Zone<br>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: 1/31/17

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

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

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

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

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

|                 |           |
|-----------------|-----------|
| Application Fee | \$ 105.03 |
| Septic/Well Fee | \$        |
| State Levy Fee  | \$ 14.07  |
| Zoning Fee      | \$ 50.00  |
| Total           | \$ 169.10 |

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

Signature of Applicant: [Signature]

received  
1-31-17 2-2-17

**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

Issued 2-22-17

Application Date: 1-31-17 2-2-17  
 Application Accepted: BP-2017-00081  
 Old Map Number: 32-19-0-1-0  
 GPIN: 6779-95-3739

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<br><del>2806</del> 2806 Parkinsville Rd - Lot 1                          | District<br>Lickinghole |
| Owner<br>Vertical Builders  | Phone #<br>804 440 6647 |
| Address<br>PO Box 4205 Richmond VA  |                         |
| Proposed Use<br>Single Family detached  | Current Use<br>land     |
| Proposed Occupant Load (Commercial)   | Acreage<br>3.0209       |
| Existing Buildings on Property<br>no  |                         |
| Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                         |

TO BE COMPLETED BY ZONING DEPARTMENT

|   |  |                             |             |
|---|--|-----------------------------|-------------|
| Subdivision<br>MARSHALL Run   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:                     | Date Paid:  |
| New Street Address  |  | Zoning District             |             |
| Front Setback<br>55' off Row  | Center Line Setback<br>80' CL  | Rear Setback<br>55' off Row | C.U. Permit |
| Side Setback<br>75' off property line 20'                                     | 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: [Signature] Date: 2-3-2017

Applicant/Contact: Ryan Sedwick Phone: 804 291 8736  
 Email: rsedwick@verticalbuilders.com

CONTRACTOR INFORMATION

|  |                       |
|--|-----------------------|
| Contractor<br>Vertical Builders          | Phone<br>804 440 6647 |
| Address<br>PO Box 4205 Richmond VA 23220 |                       |
| Contractor License Number<br>2765 103062 | Type<br>A - B10       |
| Expiration<br>2-28-18                    |                       |

Description of Work

|   |                         |                          |                            |                    |
|---|-------------------------|--------------------------|----------------------------|--------------------|
| Scope of Work: Construct new single Family house<br>Attached garage |                         |                          |                            |                    |
| SEWER<br>Public/Private   | WATER<br>Public/Private | # of Bathrooms<br>2      |                            |                    |
| # of Floors<br>1  | Total Sq. Ft.<br>1826   | Finished Sq. Ft.<br>1826 | Unfinished Sq. Ft.<br>0754 | # of Bedrooms<br>3 |

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

|                             |         |                          |                 |           |
|-----------------------------|---------|--------------------------|-----------------|-----------|
| VALUE OF WORK               | 2580    | Storm water.<br>\$200.00 | Application Fee | \$ 799.50 |
| Building                    | 175,000 |                          | Zoning Fee      | \$ 50.00  |
| Excludes All Trades Permits |         |                          | Septic/Well Fee | \$ 40.00  |
|                             |         |                          | State Levy Fee  | \$ 16.79  |
|                             |         |                          | 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: \$1206.29

**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: Harvey E Williams PLC Telephone: 804 396-3580

Mailing Address: 7516 Right Flank Road Mechanicsville VA 23116

**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 2-22-17  
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

*TSUND 2.28.17*

Application Date: **received 2-2-17**  
 Application Accepted: *BP-2017-00082*  
 Old Map Number: *1-6-0-12-0*  
 GPIN: *6805-92-3449*

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<br><i>6000 Broad Street</i>   |   | District                                      |             |
|                                      | Owner<br><i>Austin &amp; Tam Williamson</i>  |   | Phone #<br><i>804-301-3859</i>                |             |
|                                      | Address<br><i>6270 Beaver Lane Amelia, Va 23002</i>                                      |   |   |             |
|                                      | Proposed Use<br><i>Single family dwelling</i>  | Current Use   | Existing Buildings on Property<br><i>none</i> |             |
| Proposed Occupant Load (Commercial)  | Acreage<br><i>7.00</i>   | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |             |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><i>Deer Run</i>   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        | Amount:                                       | Date Paid:  |
|                                      | New Street Address<br><i>6040 Broad St Rd</i>  |   | Zoning District<br><i>R-R</i>                 |             |
|                                      | Front Setback<br><i>100' 0" ROW</i>  | Center Line Setback   | Rear Setback<br><i>35</i>                     | C.U. Permit |
|                                      | Side Setback<br><i>15</i>  | Side Setback<br><i>20'</i>  | COA   | Flood Zone  |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: |   |   |             |

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

Planning & Zoning Officer: *[Signature]* Date: *2.3.2017*

Applicant/Contact: *Kenton Moyer* Phone: *804-869-3794*  
 Email: *Kenton@kentonconstruction.com*

|                        |  |                              |
|------------------------|--|------------------------------|
| CONTRACTOR INFORMATION | Contractor<br><i>Kenton Construction Inc</i>             | Phone<br><i>804-869-3794</i> |
|                        | Address<br><i>4303 Old River Trail Powhatan Va 23139</i> |                              |
|                        | Contractor License Number<br><i>2705097394</i>           | Type<br><i>CBC RBC</i>       |

|                     |   |                              |                                 |                                   |                           |
|---------------------|---|------------------------------|---------------------------------|-----------------------------------|---------------------------|
| Description of Work | Scope of Work: <i>single family dwelling with unfinished basement</i> |                              |                                 |                                   |                           |
|                     | SEWER<br>Public/Private   | WATER<br>Public/Private      | # of Bathrooms<br><i>3.5</i>    |                                   |                           |
|                     | # of Floors<br><i>3</i>   | Total Sq. Ft.<br><i>4225</i> | Finished Sq. Ft.<br><i>2474</i> | Unfinished Sq. Ft.<br><i>1751</i> | # of Bedrooms<br><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>1272.00</i>  |
| Building                    | <i>280,000.00</i> | Zoning Fee       | \$ <i>50.00</i>    |
| Excludes All Trades Permits |                   | Septic/Well Fee  | \$ <i>40.00</i>    |
|                             |                   | State Levy Fee   | \$ <i>2624</i>     |
|                             |                   | <b>RLD Total</b> | \$ <i>1,388.24</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]* Signature of Applicant

**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: Patrick D. Carollo P.C Attorney Telephone: 804-288-1672

Mailing Address: 1700 Bayberry Court, Suite 103 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 2-6-17

# 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 20-3 PARKSIDE VILLAGE

Application Date:

01-30-17

Permit Number:

BP-2017-00086

Old Map Number:

48-19-0-20-0

GPIN:

1738-11-3601

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<br>7294 Ellingham Court                           |             | District  |
|                          | Owner<br>EAGLE CONSTRUCTION OF VA., LLC                        |             | Phone #<br>804-741-4663   |
|                          | Address<br>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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

|   |                                   |  |  |                   |          |
|---|-----------------------------------|--|--|-------------------|----------|
| <b>TO BE COMPLETED BY ZONING DEPARTMENT</b> | Subdivision                       | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount:<br>5987. <sup>00</sup>                   | Date Paid:<br>DUE |          |
|   | New Street Address                |  | Zoning District<br>RPUP                          |                   |          |
|   | Front Setback<br>30' off pavement | Center Line Setback  | Rear Setback<br>50' B/S                          | C.U. Permit       | Variance |
|   | Side Setback<br>20' B/S           | Side Setback   | Census Track                                     | Flood Zone<br>C   |          |
|   | APPROVED <input type="checkbox"/> | REJECTED <input type="checkbox"/>  | COMMENTS: Cash Proffer due before C.O. is issued |                   |          |

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

Planning & Zoning Officer: [Signature] Date: 2-3-2017 *Verify setback.*

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

Email: bjames@eagleofva.com

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

|                            |  |                         |                          |                           |                    |
|----------------------------|--|-------------------------|--------------------------|---------------------------|--------------------|
| <b>Description of Work</b> | <b>Scope of Work:</b><br>NEW DWELLING WITH ATTACHED GARAGE |                         |                          |                           |                    |
|                            | SEWER<br>Public/Private                                    | WATER<br>Public/Private | 2.5                      | # of Bathrooms            |                    |
|                            | # of Floors<br>2   | Total Sq. Ft.<br>3551   | Finished Sq. Ft.<br>2656 | Unfinished Sq. Ft.<br>895 | # of Bedrooms<br>3 |

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

|                                    |              |
|------------------------------------|--------------|
| <b>VALUE OF WORK</b>               |              |
| Building                           | \$232,762.50 |
| <i>Excludes All Trades Permits</i> |              |

|                 |           |
|-----------------|-----------|
| Application Fee | \$1060.52 |
| Septic/Well Fee | \$        |
| State Levy Fee  | \$21.19   |
| Zoning Fee      | \$50.00   |
| Total           | \$1131.71 |

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 2.7.17*  
**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 22-2 PARKSIDE VILLAGE**

Application Date: *02-02-17*  
 Permit Number: *BP-2017-00089*  
 Old Map Number: *48-18-0-22-0*  
 GPIN: *7738-22-1032*

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<br>7201 Shenfield Avenue                          |  | District  |                           |
|                                      | Owner<br>EAGLE CONSTRUCTION OF VA., LLC                        |  | Phone #<br>804-741-4663   |                           |
|                                      | Address<br>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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No           |                           |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><i>Parkside Village</i>                         | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount:<br><i>\$5987.00</i>   | Date Paid:<br><i>Due</i>  |
|                                      | New Street Address<br>—  |  | Zoning District<br><i>RPU D</i>   |                           |
|                                      | Front Setback<br><i>30' From Pave ment</i>                     | Center Line Setback  | Rear Setback<br><i>50' 6/5</i>  | C.U. Permit<br><i>N/A</i> |
|                                      | Side Setback<br><i>20' 15/5</i>                                | Side Setback<br><i>15' From Pave ment</i>                                      | Census Track<br><i>N/A</i>  | Variance<br><i>N/A</i>    |
|                                      | APPROVED <input checked="" type="checkbox"/>                   |  | REJECTED <input type="checkbox"/> COMMENTS: <i>* Cash Proffer is due before C.O. is issued.</i> |                           |

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

Planning & Zoning Officer: *[Signature]* Date: *2/6/17*

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

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

|                     |   |                         |                          |                           |                    |
|---------------------|---|-------------------------|--------------------------|---------------------------|--------------------|
| Description of Work | Scope of Work:<br>NEW DWELLING WITH ATTACHED GARAGE |                         |                          |                           |                    |
|                     | SEWER<br>Public/Private                             | WATER<br>Public/Private | 2.5                      | # of Bathrooms            |                    |
|                     | # of Floors<br>1                                    | Total Sq. Ft.<br>3119   | Finished Sq. Ft.<br>2677 | Unfinished Sq. Ft.<br>442 | # of Bedrooms<br>3 |

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

|                             |              |
|-----------------------------|--------------|
| VALUE OF WORK               |              |
| Building                    | \$217,350.00 |
| Excludes All Trades Permits |              |

|                 |           |
|-----------------|-----------|
| Application Fee | \$990.08  |
| Septic/Well Fee | \$        |
| State Levy Fee  | \$19.80   |
| Zoning Fee      | \$50.00   |
| Total           | \$1059.88 |

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 2.28.17

Application Date: 2.7.17  
 Application Accepted: BP-2017-00100  
 Old Map Number: 29-10-0-6-0  
 GPIN: 6749-52-6951

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<br>3797<br><del>6064</del> Riddle Bridge Rd  |  | District  |                    |                 |
|                                      | Owner<br>New Venture Real Estate                          |  | Phone #<br>804-839-7201   |                    |                 |
|                                      | Address<br>1604 Anderson Hwy, Suite F, Powhatan, VA 23139 |  |   |                    |                 |
|                                      | Proposed Use<br>N/A                                       | Current Use<br>Land  | Existing Buildings on Property<br>N/A   |                    |                 |
|                                      | Proposed Occupant Load (Commercial)<br>N/A                | Acreage<br>5.77  | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                    |                 |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>The Woods at Riddle Bridge                 | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A  | Date Paid:<br>N/A  |                 |
|                                      | New Street Address<br>—                                   |  | Zoning District<br>A-2  |                    |                 |
|                                      | Front Setback<br>75' from Row                             | Center Line Setback<br>—   | Rear Setback<br>35'   | C.U. Permit<br>N/A | Variance<br>N/A |
|                                      | Side Setback<br>20'                                       | Side Setback<br>20'  | C O A<br>N/A  | Flood Zone<br>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: 2/13/17

Applicant/Contact: Wendy Stinnett Phone: 804-378-9300  
 Email: spousescorner@gmail.com

Contractor: Anderson Home Construction Phone: 804-839-7201  
 Address: 2000 Cartersville Rd, New Canton, VA 23123  
 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 | # of Bathrooms   |                    |
| # of Floors          | Total Sq. Ft.        | Finished Sq. Ft. | Unfinished Sq. Ft. |
| 1                    | 2080                 | 1600             | 480                |
|                      |                      |                  | # of Bedrooms      |
|                      |                      |                  | 3                  |

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

|                             |         |                         |                 |           |
|-----------------------------|---------|-------------------------|-----------------|-----------|
| Building                    | 200,000 | storm water<br>\$200.00 | Application Fee | \$ 912.00 |
| Excludes All Trades Permits |         |                         | Zoning Fee      | \$ 50.00  |
|                             |         |                         | Septic/Well Fee | \$ 40.00  |
|                             |         |                         | State Levy Fee  | \$ 19.04  |
|                             |         |                         | RLD             | \$ 100.00 |

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

Signature of Applicant: *[Signature]* Total: 1321.04

**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: Roanoke Real Estate Settlements Telephone: 598-7160

Mailing Address: 3887 Old Buckingham Rd, Powhatan, VA 23139

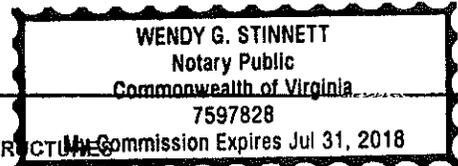
**OWNER'S AFFIDAVIT**

I, R. Alan Anderson of (address) Lot 6, Riddles Bridge Rd affirm that I am the owner of a certain tract of parcel of land located at Coachland Co 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.

R. Alan Anderson Owner's Signature

Signed and acknowledged by Wendy Stinnett in the city or county of Powhatan Virginia on the 6 Day of February, 2017 in the presence of the undersigned notary. My Commission expires 7/31/18

Wendy G. Stinnett (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 R. Alan Anderson

**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 2.15.17

# 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 13-2 PARKSIDE VILLAGE

Application Date:

02-10-2017

Permit Number:

BP-2017-00111

Old Map Number:

48.18.0.B.0

GPIN:

1738-12-4083

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<br>7219 Shenfield Avenue   |  | District  |   |  |
|   | Owner<br>EAGLE CONSTRUCTION OF VA., LLC   |  | Phone #<br>804-741-4663   |   |  |
|   | Address<br>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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |  |
| <b>TO BE COMPLETED BY ZONING DEPARTMENT</b> | Subdivision<br><i>Parkside Village</i>  | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount<br><i>\$5987.00</i>  | Date Paid:<br><i>Due</i>                                  |  |
|   | New Street Address  |  | Zoning District<br><i>RPU D</i>   |   |  |
|   | Front Setback<br><i>30' From Paved</i>  | Center Line Setback  | Rear Setback<br><i>50' B/S</i>  | C.U. Permit<br><i>N/A</i>                                 |  |
|   | Side Setback<br><i>20' B/S</i>  | Side Setback<br><i>20' B/S</i>   | Census Track<br><i>N/A</i>  | Variance<br><i>N/A</i>                                    |  |
|   | APPROVED <input checked="" type="checkbox"/>  |  | REJECTED <input type="checkbox"/>   | COMMENTS: <i>*Cash Proffer Due before C.O. is issued.</i> |  |
|   | This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection. |  |   |   |  |

Planning & Zoning Officer: *David Floyd* Date: *2/10/17*

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

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

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

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

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

|                 |          |
|-----------------|----------|
| Application Fee | \$703.47 |
| Septic/Well Fee | \$       |
| State Levy Fee  | \$14.07  |
| Zoning Fee      | \$50.00  |
| Total           | \$767.54 |

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 2-22-17

# 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 18-2 PARKSIDE VILLAGE

Application Date: 02-15-17

Permit Number: BP-2017-00132

Old Map Number: 48.18.0.18.0

GPIN: 7738-12-8057

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<br>7209 Shenfield Avenue                          |             | District  |
|                          | Owner<br>EAGLE CONSTRUCTION OF VA., LLC                        |             | Phone #<br>804-741-4663   |
|                          | Address<br>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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

Planning & Zoning Officer *Daniel Paul* Date *2/17/17*

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

Email: bjames@eagleofva.com

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

|                            |   |                      |                  |                    |               |
|----------------------------|---|----------------------|------------------|--------------------|---------------|
| <b>Description of Work</b> | Scope of Work:<br>NEW DWELLING WITH ATTACHED GARAGE |                      |                  |                    |               |
|                            | SEWER Public/Private                                | WATER Public/Private | 2.5              | # of Bathrooms     |               |
|                            | # of Floors   | Total Sq. Ft.        | Finished Sq. Ft. | Unfinished Sq. Ft. | # of Bedrooms |
|                            | 2   | 2644                 | 2084             | 560                | 3             |

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

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

|                 |                  |
|-----------------|------------------|
| Application Fee | \$ <i>703.47</i> |
| Septic/Well Fee | \$               |
| State Levy Fee  | \$ <i>14.07</i>  |
| Zoning Fee      | \$ <i>50.00</i>  |
| Total           | \$ <i>767.54</i> |

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

Signature of Applicant *[Signature]*

*Issued 2-22-17*  
**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 14-2 PARKSIDE VILLAGE**

Application Date: *02-15-17*

Permit Number: *BP-2017-00133*

Old Map Number: *48.18.0.14.0*

GPIN: *1738-12-5057*

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<br>7217 Shenfield Avenue   |                                |  | District  |                             |  |
|                                      | Owner<br>EAGLE CONSTRUCTION OF VA., LLC   |                                |  | Phone #<br>804-741-4663   |                             |  |
|                                      | Address<br>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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                             |  |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><i>Parkside Village</i>  |                                | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |   | Amount:<br><i>\$5987.00</i> |  |
|                                      | New Street Address<br>—   |                                | Zoning District<br><i>RPUD</i>   |   | Date Paid:<br><i>Due</i>    |  |
|                                      | Front Setback<br><i>30' from Pavement</i>   | Center Line Setback            | Rear Setback<br><i>50' B/S</i>   | C.U. Permit<br><i>N/A</i>   | Variance<br><i>N/A</i>      |  |
|                                      | Side Setback<br><i>20' B/S</i>  | Side Setback<br><i>20' B/S</i> | Census Tract<br><i>N/A</i>   | Flood Zone<br><i>N/A</i>  |                             |  |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:<br><i>* Cash Proffer Due before C.O. is issued.</i>  |                                |  |   |                             |  |
|                                      | This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection. |                                |  |   |                             |  |

Planning & Zoning Officer: *David Floyd* Date: *2/17/17*

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

Email: *bjames@eagleofva.com*

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

|                     |   |                                |                          |                           |                    |
|---------------------|---|--------------------------------|--------------------------|---------------------------|--------------------|
| Description of Work | Scope of Work:<br>NEW DWELLING WITH ATTACHED GARAGE |                                |                          |                           |                    |
|                     | SEWER<br><i>Public/Private</i>                      | WATER<br><i>Public/Private</i> | # of Bathrooms           |                           |                    |
|                     | # of Floors<br>2                                    | Total Sq. Ft.<br>3441          | Finished Sq. Ft.<br>2883 | Unfinished Sq. Ft.<br>558 | # of Bedrooms<br>3 |

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

|                                    |              |
|------------------------------------|--------------|
| VALUE OF WORK                      |              |
| Building                           | \$237,150.00 |
| <i>Excludes All Trades Permits</i> |              |

|                 |           |
|-----------------|-----------|
| Application Fee | \$1079.18 |
| Septic/Well Fee | \$        |
| State Levy Fee  | \$21.58   |
| Zoning Fee      | \$50.00   |
| Total           | \$1150.76 |

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: 2/15/17

Application Accepted: BP-2017-00134

GPIN: 5538

Issued: 2.28.17

7734-00-5426/(64-28-F-30)™

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<br><u>184 Woodfern</u>   |                                | District<br><u>DOVER</u>  |                             |                          |
|                                      | Owner<br><u>R&amp;N CONSTRUCTION INC</u>  |                                | Phone #<br><u>3067252</u>   |                             |                          |
|                                      | Address<br><u>12564 PATTERSON AVE RICHMOND, VA 23238</u>  |                                |   |                             |                          |
|                                      | Proposed Use<br><u>RESIDENCE</u>  | Current Use<br><u>VACANT</u>   | Existing Buildings on Property<br><u>N/A</u>  |                             |                          |
|                                      | Proposed Occupant Load (Commercial)   | Acreage<br><u>.341</u>         | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                             |                          |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><u>WEST OAK</u>  |                                | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No        | Amount:<br><u>\$5269.00</u> | Date Paid:<br><u>Due</u> |
|                                      | New Street Address<br><u>182 WOODFERN</u>   |                                | Zoning District<br><u>RPUD</u>  |                             |                          |
|                                      | Front Setback<br><u>25' (30' from pavement)</u>   | Center Line Setback            | Rear Setback<br><u>25' 50' B/S</u>  | C.U. Permit<br><u>N/A</u>   | Variance<br><u>N/A</u>   |
|                                      | Side Setback<br><u>10' 20' B/S</u>  | Side Setback<br><u>20' B/S</u> | COA<br><u>N/A</u>   | Flood Zone<br><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 2/17/17

Applicant/Contact: CARL NEISE Phone 3067252

Email: CARLNEISE@VERIZON.NET

|                        |  |                        |                              |  |
|------------------------|--|------------------------|------------------------------|--|
| CONTRACTOR INFORMATION | Contractor<br><u>R&amp;N CONSTRUCTION, INC.</u>          |                        | Phone<br><u>306-7252</u>     |  |
|                        | Address<br><u>12564 PATTERSON AVE RICHMOND, VA 23238</u> |                        |                              |  |
|                        | Contractor License Number<br><u>2701020357</u>           | Type<br><u>CLASS A</u> | Expiration<br><u>8-31-17</u> |  |

|                     |   |                              |                                 |   |                           |
|---------------------|---|------------------------------|---------------------------------|---|---------------------------|
| Description of Work | Scope of Work:<br><u>NEW RESIDENCE attached garage</u>  |                              |                                 |   |                           |
|                     | SEWER<br>Public/Private   | WATER<br>Public/Private      | # of Bathrooms<br><u>2 1/2</u>  |   | <u>858 sq ft</u>          |
|                     | # of Floors<br><u>1</u>   | Total Sq. Ft.<br><u>3734</u> | Finished Sq. Ft.<br><u>2846</u> | Unfinished Sq. Ft.<br><u>1358 sq ft</u> | # of Bedrooms<br><u>4</u> |
|                     | TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION. |                              |                                 |   |                           |

|                             |                |
|-----------------------------|----------------|
| VALUE OF WORK               |                |
| Building                    | <u>450,000</u> |
| Excludes All Trades Permits |                |

|                 |                  |
|-----------------|------------------|
| Application Fee | <u>\$2037.00</u> |
| Zoning Fee      | <u>50.00</u>     |
| Septic/Wall Fee | <u>200.00</u>    |
| State Levy Fee  | <u>\$ 40.04</u>  |
| RLD             | <u>\$100.00</u>  |

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. total 2420.04

**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: BUNAIR TITLE CO. Telephone: \_\_\_\_\_

Mailing Address: 9211 FOREST HILL AVE. SUITE 111  
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.

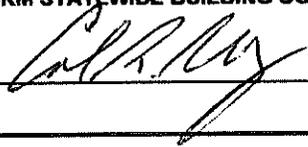
\_\_\_\_\_  
Owner's Signature

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 \$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 \_\_\_\_\_

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 2.27.17

Application Date: 2.22.17

Application Accepted: BP-2017-00146

Old Map Number: 45-1-0-17-0

GPIN: 6797-09-8816

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<br>1345 Broad St. Rd.   |  | District                       |                    |
|                                      | Owner<br>Randolf Garfield  |  | Phone #                        |                    |
|                                      | Address<br>11701 Bosworth Dr. Glen Allen, VA 23059                                       |  |                                |                    |
|                                      | Proposed Use<br>gas station  | Current Use<br>gas station   | Existing Buildings on Property |                    |
| Proposed Occupant Load (Commercial)  | Acreage  | Commercial Use<br><input type="checkbox"/> Yes <input type="checkbox"/> No     |                                |                    |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>None  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A                 | Date Paid:<br>N/A  |
|                                      | New Street Address   |  | Zoning District<br>B-1         |                    |
|                                      | Front Setback<br>5' from ROW   | Center Line Setback  | Rear Setback                   | C.U. Permit<br>N/A |
|                                      | Side Setback   | Side Setback   | COA Required<br>2017-00003     | Variance<br>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: 2/24/17

Applicant/Contact: Tabitha Gaulding Phone: (434) 447-3347  
 Email: Tabitha-tis@outlook.com

Contractor: Total Image Solutions Phone: (434) 447-3347  
 Address: 196 Theater Rd. South Hill, VA 23970  
 Contractor License Number: 2705141592 Type: C Expiration: 6-30-17

Description of Work:  
 - new Citgo signage to go on existing monument foundation + new canopy signs

|                         |                         |                  |                    |
|-------------------------|-------------------------|------------------|--------------------|
| SEWER<br>Public/Private | WATER<br>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                    | - 3,500.00 |
| Excludes All Trades Permits |            |

|                      |          |
|----------------------|----------|
| Application Fee      | \$ 30.00 |
| Zoning Fee           | \$       |
| Septic/Well Fee      | \$       |
| State Levy Fee       | \$ .60   |
| <del>RLD</del> Total | \$ 30.60 |

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.

Signature of Applicant: Tabitha Gaulding

2-27-17

# 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

Application Date: 1-6-17

Application Accepted: BP-2017-00096

GPIN: 724-92-7620

Issued: ISSUED 2-27-17

Tax Map # 64-1-0-50-A

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

|                                      |  |  |   |                    |                   |
|--------------------------------------|--|--|---|--------------------|-------------------|
| OWNER INFORMATION                    | Site Address<br>12513 PATTERSON AVE  |  | District  |                    |                   |
|                                      | Owner<br>JANET WILSON  |  | Phone #<br>804-512-0711   |                    |                   |
|                                      | Address<br>2422 WANSLEAD COURT HENRICO VA. 23238   |  |   |                    |                   |
|                                      | Proposed Use<br>STORAGE BUILDING SALES   | Current Use  | Existing Buildings on Property  |                    |                   |
|                                      | Proposed Occupant Load (Commercial)  | Acreage  | Commercial Use<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                    |                   |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>N/A   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A  | Date Paid:<br>N/A  |                   |
|                                      | New Street Address   |  | Zoning District<br>B-1  |                    |                   |
|                                      | Front Setback<br>75' From Road   | Center Line Setback  | Rear Setback<br>10'   | C.U. Permit<br>N/A | Variance<br>N/A   |
|                                      | Side Setback<br>10'  | Side Setback<br>10'  | COA Approved<br>Requirements  |                    | Flood Zone<br>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: 2/7/17

Applicant/Contact: JESSIE C. PROFITTI - has homeowners permission Phone: 804-551-3269

Email: JESSIEPROFITTI@YAHOO.COM

|                        |                           |       |
|------------------------|---------------------------|-------|
| CONTRACTOR INFORMATION | Contractor<br>OWNER       | Phone |
|                        | Address                   |       |
|                        | Contractor License Number | Type  |

|                     |   |                      |                  |                           |               |
|---------------------|---|----------------------|------------------|---------------------------|---------------|
| Description of Work | Scope of Work: SALES OF PORTABLE STORAGE BUILDINGS<br>12x28 |                      |                  |                           |               |
|                     | SEWER Public/Private  | WATER Public/Private | # of Bathrooms   |                           |               |
|                     | # of Floors   | Total Sq. Ft.<br>336 | Finished Sq. Ft. | Unfinished Sq. Ft.<br>336 | # of Bedrooms |

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

|                             |             |
|-----------------------------|-------------|
| VALUE OF WORK               |             |
| Building                    | \$ 4,700.00 |
| Excludes All Trades Permits |             |

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ 36.60        |
| Zoning Fee      | \$ 50.00        |
| Septic/Well Fee | \$              |
| State Levy Fee  | \$ 73           |
| <b>Total</b>    | <b>\$ 87.38</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]

**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: 2-27-17

Application Date: **received**  
 2-17-17  
 Application Accepted: 2017-00137  
 Old Map Number: 32-4-0-4-0  
 GPIN: 6779-65-6983

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<br>2251 Poney Farm Rd.              | District  |
| Owner<br>Janet Queisser                          | Phone #<br>804-212-6223 cell  |
| Address<br>2251 Poney Farm Rd. Maidens, VA 23102 |   |
| Proposed Use<br>Family Room                      | Current Use<br>Dwelling   |
| Proposed Occupant Load (Commercial)              | Existing Buildings on Property<br>Dwelling  |
| Acreeage<br>7.63                                 | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

TO BE COMPLETED BY ZONING DEPARTMENT

|                                |  |                        |                    |
|--------------------------------|--|------------------------|--------------------|
| Subdivision<br>None            | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A         | Date Paid:<br>N/A  |
| New Street Address             |  | Zoning District<br>A-2 |                    |
| Front Setback<br>75' from Road | Center Line Setback  | Rear Setback<br>35'    | C.U. Permit<br>N/A |
| Side Setback<br>20'            | Side Setback<br>20'  | COA<br>N/A             | Variance<br>N/A    |
| Flood Zone                     |  | N/A                    |                    |

APPROVED  REJECTED  COMMENTS:

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

Planning & Zoning Officer: David Floyd Date: 2/17/17

Applicant/Contact: Tim Siddons Phone: 804-690-1354

Email: TimmySiddons@addadeck.com

Contractor: ADD A DECK, INC. Phone: 804-285-4239

Address: 6408 Mallory Dr Henrico, VA 23226

Contractor License Number: 2701-033201A Additional Type: CLASS A Expiration: 11/30/2018

Scope of Work: Build new Family Room, Deck, and porch on back

|                         |                         |                          |                           |               |
|-------------------------|-------------------------|--------------------------|---------------------------|---------------|
| SEWER<br>Public/Private | WATER<br>Public/Private | # of Bathrooms           |                           |               |
| # of Floors             | Total Sq. Ft.<br>1924   | Finished Sq. Ft.<br>1056 | Unfinished Sq. Ft.<br>868 | # of Bedrooms |

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

VALUE OF WORK

|                             |               |
|-----------------------------|---------------|
| Building                    | \$ 125,000.00 |
| Excludes All Trades Permits |               |

|                 |           |
|-----------------|-----------|
| Application Fee | \$ 574.50 |
| Zoning Fee      | \$ 25.00  |
| Septic/Well Fee | \$        |
| State Levy Fee  | \$ 11.49  |
| RED Total       | \$ 610.99 |

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: [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: 3-17-16*

Application Date: *2-24-16*

Application Accepted: *DP 2016-00111*

Old Map Number: *43-38-0-A9*

GPIN: *6777-48-8882*

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<br><i>2132 Withers Lane Maidens, VA 23102</i>                     |                                   | District  |  |
|  | Owner<br><i>Breeze Hill Inc.</i>   |                                   | Phone #<br><i>347-4763</i>  |  |
|  | Address<br><i>1930 Soldiers Lodge Rd Crozer, VA <del>23039</del></i>           |                                   |   |  |
|  | Proposed Use   | Current Use                       | Existing Buildings on Property<br><i>None</i>   |  |
|  | Proposed Occupant Load (Commercial)  | Acreage<br><i>2.5</i>             | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| Subdivision                                  | Proffer<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Amount:<br><i>19,857.00</i>       | Date Paid:<br><i>DUE</i>  |  |
| New Street Address                           |  | Zoning District                   |   |  |
| Front Setback<br><i>40' <del>20'</del></i>   | Center Line Setback<br><i>ROW</i>  | Rear Setback<br><i>25</i>         | C.U. Permit   | Variance   |
| Side Setback<br><i>10</i>                    | Side Setback<br><i>20</i>  | COA                               |   | Flood Zone   |
| APPROVED <input checked="" type="checkbox"/> |  | REJECTED <input type="checkbox"/> |   | COMMENTS: <i>CASH Proffer Due Before C.O. is issued.</i> |

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

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

Applicant/Contact: *Steve Thompson* Phone: *539-2524*

Email: *Steve.thompson.builder@comcast.net*

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

|                     |   |  |                                 |                                   |                            |
|---------------------|---|--|---------------------------------|-----------------------------------|----------------------------|
| Description of Work | Scope of Work: <i>revised 7/21/16: extend &amp; finish S&amp;SF of mud room</i> |  |                                 |                                   |                            |
|                     | <i>New single family Dwelling with attached Garage Fin both on 2nd level</i>    |  |                                 |                                   |                            |
|                     | SEWER<br>Public/Private<br># of Floors<br><i>2</i>                              | WATER<br>Public/Private<br>Total Sq. Ft.<br><i>5,685</i> | Finished Sq. Ft.<br><i>3439</i> | Unfinished Sq. Ft.<br><i>2246</i> | # of Bathrooms<br><i>3</i> |
|                     |   |  | <i>2585 <del>2639</del></i>     | <i>3100 <del>3000</del></i>       | # of Bedrooms<br><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>1654.50</i> | Zoning Fee \$ <i>50.00</i> | Septic/Well Fee \$ <i>40.00</i> | State Levy Fee \$ <i>33.89</i> | -RLD Storm-water \$ <i>200.00</i> |
| Building                    | <i>365,000</i> |                                   |                            |                                 |                                |                                   |
| Excludes All Trades Permits |                |                                   |                            |                                 |                                |                                   |

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

Signature of Applicant: *Steve Thompson*

Revised 2/21/17 - Finish second level into play room 800 sq. ft.

**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: Darwin E Scherwhite Telephone: 556-4012

Mailing Address: 3013 River Rd West Coochland, 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 N/A

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

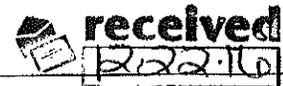
Code Official

# 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 2.27.17**

Application Date:  
12/19/2016



Application Accepted:  
BP-2010-01017

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 Capital One/ the Village-Knuckle 3-4<br>15035 Capital One Drive, Richmond, VA 23238 |             | District  |  |
| Owner<br>Deidre O'Conner / Capital One   |             | Phone #<br>(571) 449-0727   |  |
| Address<br>15000 Capital One Drive, Richmond, VA 23238   |             |   |  |
| Proposed Use   | Current Use | Existing Buildings on Property  |  |
| Proposed Occupant Load<br>(Commercial)   | Acreage     | Commercial Use<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |

TO BE COMPLETED BY ZONING DEPARTMENT

|   |   |                 |             |
|---|---|-----------------|-------------|
| Subdivision   | Proffer<br><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: Emily Covey Phone (804) 433-4160

Email: emilyc@dpr.com / Michaelwi@dpr.com

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

|                     |  |                         |                            |                           |
|---------------------|--|-------------------------|----------------------------|---------------------------|
| Description of Work | <b>Scope of Work:</b><br>Kitchen and Food Service renovation to replace interior and exterior patio finishes and to include pavers, drywall, ceilings, floor, millwork, <del>mechanical, electrical, and plumbing work</del> |                         |                            |                           |
|                     | SEWER<br>Public/Private  | WATER<br>Public/Private | N/A                        | # of Bathrooms<br>2       |
|                     | # of Floors<br>1   | Total Sq. Ft.<br>17,200 | Finished Sq. Ft.<br>17,200 | Unfinished Sq. Ft.<br>N/A |

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

|                             |             |                       |                 |           |
|-----------------------------|-------------|-----------------------|-----------------|-----------|
| VALUE OF WORK               |             | Total:<br>\$38,809.98 | Application Fee | \$ 38,049 |
| Building                    | \$4,006,000 |                       | Zoning Fee      | \$ N/A    |
| Excludes All Trades Permits |             |                       | Septic/Well Fee | \$ N/A    |
|                             |             |                       | State Levy Fee  | \$ 760.98 |
|                             |             |                       | RLD             | \$ N/A    |

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 2.24.17

Application Date: 11.4.15  
 Application Accepted: 2015.00787  
 Old Map Number: 47.1.44  
 GPIN: 7727.00.7328

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<br><br>TO BE COMPLETED BY ZONING DEPARTMENT | Site Address<br>1706 St. Matthew's Lane, Richmond VA 23233                |   | District<br>Dover   |                         |
|   | Owner<br>St. Matthew's UMC  |   | Phone #<br>784-3176   |                         |
|   | Address<br>1706 St. Matthew's Lane, Richmond VA 23233                     |   |   |                         |
|   | Proposed Use<br>Preschool daycare   | Current Use<br>Church activities                                    | Existing Buildings on Property<br>Yes - Church facility                               |                         |
|   | Proposed Occupant Load (Commercial)<br>92 TOTAL<br>76 children / 16 staff | Acreage<br>2 parcels:<br>2.75 + 8.06 acres                          | Commercial Use<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                         |
|   | Subdivision   | Proffer<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Amount:   | Date Paid:              |
|   | New Street Address  |   | Zoning District<br>A-2  |                         |
|   | Front Setback   | Center Line Setback   | Rear Setback  | C.U. Permit<br>Variance |
|   | Side Setback  | Side Setback  | COA   | Flood Zone              |
|   | APPROVED <input checked="" type="checkbox"/>                              |   | REJECTED <input type="checkbox"/>   |                         |
| COMMENTS: Allows daycare within Church                        |   |   |   |                         |

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: 11-5-2015

Applicant/Contact: Theresa Hanner Phone: 363-9915  
 Email: hanner.theresa@gmail.com

|                        |                           |  |       |            |
|------------------------|---------------------------|--|-------|------------|
| CONTRACTOR INFORMATION | Contractor                |  | Phone |            |
|                        | Address                   |  |       |            |
|                        | Contractor License Number |  | Type  | Expiration |

|                     |                              |                         |                  |                                  |
|---------------------|------------------------------|-------------------------|------------------|----------------------------------|
| Description of Work | Scope of Work: Change in Use |                         |                  |                                  |
|                     | SEWER<br>Public/Private      | WATER<br>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               |          | Application Fee | \$30.00        |
| Building                    | \$100.00 | Zoning Fee      | \$             |
| Excludes All Trades Permits |          | Septic/Well Fee | \$             |
|                             |          | State Levy Fee  | \$ .00         |
|                             |          | <b>Total</b>    | <b>\$30.00</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: [Signature]

ISSUED: 2-24-17



# 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

|                        |                                       |                 |                      |
|------------------------|---------------------------------------|-----------------|----------------------|
| Application File Date: |                                       | Office Use Only |                      |
| Zoning Approval: Yes   | Application No.: <u>AP-2011-00154</u> | Fee: \$25.00    | Date: <u>2/24/17</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: MITT BUILDERS INC Telephone: 804-641-4200  
 Address: 8527 Mayland DR STE 106 Cell phone: SAME  
Richmond, VA, 23294 FAX: \_\_\_\_\_  
 E-mail: volmillican@aol.com

Name of Applicant: SAME Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ FAX: \_\_\_\_\_

### Property Information

Street Address: D MANAKIN RD Zoning: A2  
 GPIN Number: 7717-24-3303 Acreage: 20.386  
 Existing Use: \_\_\_\_\_

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): 864
2. Written Description of Proposed Physical Improvements  
BARN FOR EQUIPMENT STORAGE

# 31.86

received 2-17

**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: 2/8/2017  
Application Accepted: BP-2017-00142  
Old Map Number: 45-18-0-35-0  
GPIN: 6797-55-4038

Issued: 2-22-17

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<br>1783 FOX DOWNS LANE   |   | District  |             |          |
|                                      | Owner<br>ETHAN SELTZER  |   | Phone #<br>804-307-8909   |             |          |
|                                      | Address<br>1783 FOX DOWNS LANE OILVILLE, VA 23129   |   |   |             |          |
|                                      | Proposed Use  | Current Use   | Existing Buildings on Property  |             |          |
|                                      | Proposed Occupant Load (Commercial)   | Acreage<br>2.539  | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |             |          |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision   | Proffer<br><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  | COA   | Flood Zone  |          |
|                                      | APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:   |   |   |             |          |
|                                      | This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection. |   |   |             |          |

Planning & Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

Applicant/Contact: JUSTIN STORY Phone 804-495-4646  
Email: JSTORY@JESNOW.COM

CONTRACTOR INFORMATION  
Contractor JES CONSTRUCTION Phone 804-495-4646  
Address 2410 SOUTHLAND DRIVE  
Contractor License Number 270-506-8655 Type A Expiration 4-30-2018

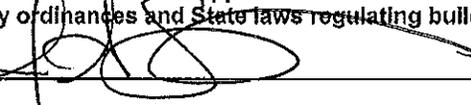
Description of Work  
Scope of Work: THREE (3) SMART JACKS ON MAIN BEAM  
SEWER Public/Private # of Floors  
WATER Public/Private Total Sq. Ft. 1232  
# of Bathrooms  
Finished Sq. Ft. Unfinished Sq. Ft. # of Bedrooms

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

|                             |         |
|-----------------------------|---------|
| VALUE OF WORK               |         |
| Building                    | 4275.00 |
| Excludes All Trades Permits |         |

|                      |          |
|----------------------|----------|
| Application Fee      | \$ 31.24 |
| Zoning Fee           | \$       |
| Septic/Well Fee      | \$       |
| State Levy Fee       | \$ 62    |
| <del>REB</del> Total | 31.86    |

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 

\$33.56

**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: 2/8/2017 **received 2-17**  
 Application Accepted: **BP-2017-00141**  
 Old Map Number: **49-2-1-8-0**  
 GPIN: 7726-67-2997

*Issued: 2-22-17*

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<br>12661 FAWN LANE   |   | District  |             |
|                                      | Owner<br>MARY ARCHER LEWIS  |   | Phone #<br>913-660-3082   |             |
|                                      | Address<br>12661 FAWN LANE RICHMOND, VA 23233                                 |   |   |             |
|                                      | Proposed Use  | Current Use   | Existing Buildings on Property  |             |
|                                      | Proposed Occupant Load (Commercial)   | Acreage<br>.567   | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |             |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision   | Proffer<br><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: JUSTIN STORY Phone 804-495-4646  
 Email: JSTORY@JESNOW.COM

Contractor Information  
 Contractor: JES CONSTRUCTION Phone: 804-495-4646  
 Address: 2410 SOUTHLAND DRIVE  
 Contractor License Number: 270-506-8655 Type: A Expiration: 4-30-2018

Description of Work  
 Scope of Work: THREE (3) SMART JACKS ON MAIN BEAM

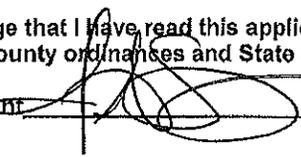
|                      |                       |                  |                    |               |
|----------------------|-----------------------|------------------|--------------------|---------------|
| SEWER Public/Private | WATER Public/Private  | # of Bathrooms   |                    |               |
| # of Floors          | Total Sq. Ft.<br>1054 | 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                    | 4645.00 |
| Excludes All Trades Permits |         |

|                  |                 |
|------------------|-----------------|
| Application Fee  | \$ 32.90        |
| Zoning Fee       | \$ -----        |
| Septic/Well Fee  | \$ -----        |
| State Levy Fee   | \$ .66          |
| <b>BLD Total</b> | <b>\$ 33.56</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: 

\$ 46.89

**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: 2-22-17

Application Date: 2-17-17  
 Application Accepted: 2-22-17  
 Old Map Number: 2017-00140  
 GPIN: 7726-36-1043

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<br>1560 WHIPPOORWILL ROAD                   |                     | District<br>SAMARY FOREST   |                         |
|   | Owner<br>SAMUEL BLACK                                    |                     | Phone #<br>804-683-1355   |                         |
|   | Address<br>1560 WHIPPOORWILL ROAD RICHMOND, VA 23233     |                     |   |                         |
|   | Proposed Use   | Current Use         | Existing Buildings on Property  |                         |
|   | Proposed Occupant Load (Commercial)                      | Acreage<br>.00001   | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                         |
| TO BE COMPLETED BY ZONING DEPARTMENT  | Subdivision<br>Proffer                                   |                     | Amount:   | Date Paid:              |
|   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                     |   |                         |
|   | New Street Address                                       |                     | Zoning District   |                         |
|   | Front Setback  | Center Line Setback | Rear Setback  | C.U. Permit<br>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: JUSTIN STORY Phone 804-495-4646

Email: JSTORY@JESNOW.COM

|                        |   |           |                         |  |
|------------------------|---|-----------|-------------------------|--|
| CONTRACTOR INFORMATION | Contractor JES CONSTRUCTION               |           | Phone 804-495-4646      |  |
|                        | Address<br>2410 SOUTHLAND DRIVE           |           |                         |  |
|                        | Contractor License Number<br>270-506-8655 | Type<br>A | Expiration<br>4-30-2018 |  |

|                     |   |                         |                  |                    |
|---------------------|---|-------------------------|------------------|--------------------|
| Description of Work | Scope of Work: SIX (6) SLAB PIERS IN BASEMENT |                         |                  |                    |
|                     | SEWER<br>Public/Private                       | WATER<br>Public/Private | # of Bathrooms   |                    |
|                     | # of Floors                                   | Total Sq. Ft.<br>338    | Finished Sq. Ft. | Unfinished Sq. Ft. |

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

|                             |           |
|-----------------------------|-----------|
| VALUE OF WORK               |           |
| Building                    | \$7549.00 |
| Excludes All Trades Permits |           |

|                  |                 |
|------------------|-----------------|
| Application Fee  | \$ 45.97        |
| Zoning Fee       | \$ -            |
| Septic/Well Fee  | \$ -            |
| State Levy Fee   | \$ .92          |
| <b>RLD Total</b> | <b>\$ 46.89</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 \_\_\_\_\_

**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

TX MAP# 66-3-0-1-0

Application Date: **received**  
 Application Accepted: **2-10-17**  
 GPIN: **DP-2017-00115**  
**7723-46-2817**  
 Issued: **2-22-17**

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<br><b>1 PARTRIDGE HILL ROAD</b>   |   | District  |                           |                          |
|                                      | Owner<br><b>RICHARD SAVAGE</b>   |   | Phone #   |                           |                          |
|                                      | Address<br><b>1 PARTRIDGE HILL RD.</b>   |   |   |                           |                          |
|                                      | Proposed Use<br><b>VEHICLE STORAGE</b>   | Current Use<br><b>SAME</b>                  | Existing Buildings on Property<br><b>YES</b>  |                           |                          |
|                                      | Proposed Occupant Load (Commercial)  | Acreage<br><b>4+2.5</b><br><i>2nd floor</i> | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                           |                          |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br><b>Partridge Hills</b>  |   | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        | Amount:<br><b>N/A</b>     | Date Paid:<br><b>N/A</b> |
|                                      | New Street Address   |   | Zoning District<br><b>R-1</b>   |                           |                          |
|                                      | Front Setback<br><b>75' from ROW</b>   | Center Line Setback                         | Rear Setback<br><b>35'</b>  | C.U. Permit<br><b>N/A</b> | Variance<br><b>N/A</b>   |
|                                      | Side Setback<br><b>20'</b>   | Side Setback<br><b>20'</b>                  | COA<br><b>N/A</b>   | Flood Zone<br><b>N/A</b>  |                          |
|                                      | 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 **2/13/17**

Applicant/Contact: **Rich Savage - OWNER** Phone **804 767 0330**  
 Email: **RICH.SAVAGE3@COMCAST.NET**

|                        |   |                             |                  |                                      |               |
|------------------------|---|-----------------------------|------------------|--------------------------------------|---------------|
| CONTRACTOR INFORMATION | Contractor  |                             | Phone            |                                      |               |
|                        | Address   |                             |                  |                                      |               |
|                        | Contractor License Number   |                             | Type             | Expiration                           |               |
| Description of Work    | Scope of Work: <b>EXTEND EXISTING ROOF TO COVER EXISTING VEHICLE STORAGE AREA AND ENCLOSE -</b> |                             |                  |                                      |               |
|                        | SEWER Public/Private  | WATER Public/Private        | # of Bathrooms   |                                      |               |
|                        | # of Floors   | Total Sq. Ft.<br><b>400</b> | Finished Sq. Ft. | Unfinished Sq. Ft.<br><b>20 x 20</b> | # of Bedrooms |

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

|                             |  |
|-----------------------------|--|
| VALUE OF WORK               |  |
| Building                    | <b>7500.<sup>00</sup> 11,000.<sup>00</sup></b> |
| Excludes All Trades Permits |  |

|                 |                 |
|-----------------|-----------------|
| Application Fee | \$ <b>61.50</b> |
| Zoning Fee      | \$ <b>25.00</b> |
| Septic/Well Fee | \$              |
| State Levy Fee  | \$ <b>1.23</b>  |
| RLD Total       | \$ <b>87.73</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]**

ISSUED: 2-21-17

# 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

**\*SIGN ONLY\***

Application Date: 2/16/17

received  
1-25-17

Application Accepted: BP-2017-00078

Old Map Number: 58-51-0-B-0

GPIN: 7715-79-1933

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<br>TUCKAHOE CREEK PKWY & GETAWAY LANE 1100 getaway lane                     |                            | District   |                    |                   |
|                                      | Owner<br>RIVERSTONE PROPERTIES   |                            | Phone #  |                    |                   |
|                                      | Address<br>800 EAST CANAL STREET Suite 1900 RICHMOND, VA 23219                           |                            |  |                    |                   |
|                                      | Proposed Use<br>NEIGHBORHOOD   | Current Use<br>UNDEVELOPED | Existing Buildings on Property<br>NO   |                    |                   |
|                                      | Proposed Occupant Load<br>(Commercial)   | Acreage                    | Commercial Use<br><input type="checkbox"/> Yes <input type="checkbox"/> No     |                    |                   |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision<br>Tuckahoe Creek  |                            | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount:<br>N/A     | Date Paid:<br>N/A |
|                                      | New Street Address   |                            | Zoning District<br>RPUD  |                    |                   |
|                                      | Front Setback<br>15'   | Center Line Setback        | Rear Setback   | C.U. Permit<br>N/A | Variance<br>N/A   |
|                                      | Side Setback   | Side Setback               | COA<br>N/A   | Flood Zone<br>N/A  |                   |
|                                      | APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: |                            |  |                    |                   |

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

Planning & Zoning Officer: David Taylor Date: 2/17/17

Applicant/Contact: CAROUSEL SIGNS & DESIGNS - JAMES FOLEY Phone: 804.620.3200 x 202

Email: jay@carouselsigns.com

|                        |  |                 |                       |  |
|------------------------|--|-----------------|-----------------------|--|
| CONTRACTOR INFORMATION | Contractor<br>CAROUSEL SIGNS & DESIGNS                 |                 | Phone<br>804.620.3200 |  |
|                        | Address<br>2312 COMMERCE CENTER DR. RICHMOND, VA 23146 |                 |                       |  |
|                        | Contractor License Number<br>2705115473                | Type<br>CLASS A | Expiration<br>6.30.17 |  |

|                     |   |                         |                  |                                  |
|---------------------|---|-------------------------|------------------|----------------------------------|
| Description of Work | Scope of Work:<br>NEIGHBORHOOD SIGNS FOR TUCKAHOE CREEK SUBDIVISION |                         |                  |                                  |
|                     | SEWER<br>Public/Private   | WATER<br>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                    | \$1500.00 |
| Excludes All Trades Permits |           |

|                 |          |
|-----------------|----------|
| Application Fee | \$ 30.00 |
| Zoning Fee      | \$ 50.00 |
| 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.

Signature of Applicant: [Signature]

received

# 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: 2-19-17  
Application Accepted: 2-20-17  
GPIN: 6778-53-8561  
Issued: 2-21-17

Tax Map # 31-6-0-4-0

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<br>2121 Pine Lane Maidens   |   | District<br>Linkinghole                 |                    |
|                                      | Owner<br>James Hawk Jr.  |   | Phone #<br>804-397-9142                 |                    |
|                                      | Address<br>2121 Pine Lane, Maidens VA 23102  |   |   |                    |
|                                      | Proposed Use<br>Garage   | Current Use   | Existing Buildings on Property<br>House |                    |
| Proposed Occupant Load (Commercial)  | Acreage<br>2.0   | Commercial Use<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |                    |
| TO BE COMPLETED BY ZONING DEPARTMENT | Subdivision  | Proffer<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        | Amount:<br>N/A                          | Date Paid:<br>N/A  |
|                                      | New Street Address   |   | Zoning District<br>A-2                  |                    |
|                                      | Front Setback<br>55' from Road   | Center Line Setback   | Rear Setback<br>5'                      | C.U. Permit<br>N/A |
|                                      | Side Setback<br>5'   | Side Setback<br>5'  | COA<br>N/A                              | Variance<br>N/A    |
|                                      | Flood Zone<br>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 Boyd Date: 2/15/17

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

|                        |  |                       |                                     |                            |
|------------------------|--|-----------------------|-------------------------------------|----------------------------|
| CONTRACTOR INFORMATION | Contractor<br>James Hawk / <del>owner</del> OWNER                      |                       | Phone                               |                            |
|                        | Address<br>2121 pine Ln maidens 23102                                  |                       |                                     |                            |
| Description of Work    | Contractor License Number<br>unFinished                                |                       | Type                                | Expiration                 |
|                        | Scope of Work: <u>New 3 BAY Detached garage w/ concrete slab 34x30</u> |                       |                                     |                            |
|                        | SEWER Public/Private   | WATER Public/Private  | # of Bathrooms                      |                            |
|                        | # of Floors  | Total Sq. Ft.<br>1020 | Finished Sq. Ft.<br><del>1020</del> | Unfinished Sq. Ft.<br>1020 |
|                        |  | # of Bedrooms         |                                     |                            |

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

VALUE OF WORK

|                             |                             |
|-----------------------------|-----------------------------|
| Building                    | <del>12,000</del> 28,050.00 |
| Excludes All Trades Permits |                             |

|                  |                  |
|------------------|------------------|
| Application Fee  | \$ 138.25        |
| Zoning Fee       | \$ 25.00         |
| Septic/Well Fee  | \$               |
| State Levy Fee   | \$ 2.76          |
| <b>NET Total</b> | <b>\$ 165.99</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.

James Hawk

**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: 2-1-17

Application Accepted: BP-2017-00080

Old Map Number: B-5-0-4-0

GPIN: 6841-76-7261

Issued: 2-2-17

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

TO BE COMPLETED BY ZONING DEPARTMENT

|  |  |   |             |
|--|--|---|-------------|
| Site Address                                 | <u>3774 Three Chopt Rd</u>                               |   | District    |
| Owner  | <u>Jon + Megan Martin</u>                                |   | Phone #     |
| Address                                      | <u>3774 Three Chopt Rd</u>                               |   |             |
| Proposed Use                                 | Current Use  | Existing Buildings on Property                                      |             |
| Proposed Occupant Load (Commercial)          | Acreage  | Commercial Use  |             |
|  | <u>13.33</u>   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |             |
| Subdivision                                  | Proffer  | Amount:   | Date Paid:  |
|  | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |             |
| New Street Address                           |  | Zoning District   |             |
|  |  | <u>A-1</u>  |             |
| Front Setback                                | Center Line Setback                                      | Rear Setback  | C.U. Permit |
| <u>100' 4"</u>                               | <u>20'</u>   | <u>35'</u>  |             |
| Side Setback                                 | Side Setback   | C O A   | Flood Zone  |
| <u>20'</u>                                   | <u>20'</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: 2-3-2017  
 Phone: 919-695804270-7220

Applicant/Contact: Shane Albertson / Karen Hufford Phone: 804 399 1045

Email: RSALBERTSON@VABUILDINGANDREMODELING.COM

|                        |                           |  |      |                |                     |
|------------------------|---------------------------|--|------|----------------|---------------------|
| CONTRACTOR INFORMATION | Contractor                | <u>Virginia Building and Remodeling</u>  |      | Phone          | <u>804 399 1045</u> |
|                        | Address                   | <u>9608 Boneway Dr Henrico, VA 23238</u> |      |                |                     |
|                        | Contractor License Number | <u>2705112137</u>                        | Type | <u>RBC+CBC</u> | Expiration          |
|                        |                           |  |      |                | <u>1/31/19</u>      |

Description of Work: Master suite addition enlarge existing Back porch addition, relocating septic tank

|                |                 |                  |                    |
|----------------|-----------------|------------------|--------------------|
| SEWER          | WATER           | # of Bathrooms   |                    |
| Public/Private | Public/Private  | <u>2.5</u>       |                    |
| # of Floors    | Total Sq. Ft.   | Finished Sq. Ft. | Unfinished Sq. Ft. |
|                | <u>1,089.00</u> | <u>551</u>       | <u>238</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               |                   |
| Building                    | <u>\$ 180,000</u> |
| Excludes All Trades Permits |                   |

|                  |                  |
|------------------|------------------|
| Application Fee  | \$ <u>828.00</u> |
| Zoning Fee       | \$ <u>25.00</u>  |
| Septic/Well Fee  | \$ <u>25.00</u>  |
| State Levy Fee   | \$ <u>16.94</u>  |
| <b>RED Total</b> | \$ <u>888.94</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]