

Issued: 3-30-17

# BUILDING PERMIT APPLICATION

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

**LOT 19-1 PARKSIDE VILLAGE**

Application Date: 03-23-17

Permit Number: BP-2017-00228

Old Map Number: 48.17.0.19.0

GPIN: 7738-10-1827

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 7037 Benhall Circle		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$5989.00	Date Paid: Due
	New Street Address		Zoning District RPUD	
	Front Setback 30' From Paveement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A
	Side Setback 20' B/S	Side Setback 20' B/S	Census Track N/A	Flood Zone N/A
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * Cash Proffer due before C.O. is issued.			

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

Planning & Zoning Officer: David Floyd Date: 3/27/17

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

Email: bjames@eagleofva.com

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

<b>Description of Work</b>	<b>Scope of Work:</b> NEW DWELLING WITH ATTACHED GARAGE AND BASEMENT <i>1 finished</i>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
2	4394	3366	1028	2	

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

<b>VALUE OF WORK</b>	
Building	\$291,000.00
<i>Excludes All Trades Permits</i>	

Application Fee	\$1321.50
Septic/Well Fee	\$
State Levy Fee	\$26.43
Zoning Fee	\$50.00
Total	\$1397.93

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

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

TSSUND: 3-30-17

Application Date: 3-8-17  
 Application Accepted: BP-2017-00186  
 Old Map Number: 43-38-A-5-0  
 GPIN: 6777-48-5157

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 11668 Indy's Run		District Coxinghole	
	Owner Krickovic & Ziegler, LLC		Phone # 804-569-9745	
	Address PO Box 1510 Mechanicsville, VA 23116			
	Proposed Use Residential	Current Use None	Existing Buildings on Property None	
	Proposed Occupant Load (Commercial) N/A	Acreage 3.05	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Breere Hill	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: 19,852.00	Date Paid: Due
	New Street Address		Zoning District RP	
	Front Setback 40' from ROW	Center Line Setback	Rear Setback 25'	C.U. Permit
	Side Setback 35' - 10m Lane Side	Side Setback 10'	COA	Flood Zone
	APPROVED <input checked="" type="checkbox"/>	REJECTED <input type="checkbox"/>	COMMENTS: *Cash Proffer Due before C.O. is issued.	

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.  
 Planning & Zoning Officer: David Floyd Date: 3/14/17

Applicant/Contact: Mike Krickovic Phone: 804-908-2253  
 Email: Mike @ kandz builders.com

CONTRACTOR INFORMATION	Contractor Krickovic & Ziegler, LLC	Phone 804-569-9745
	Address PO BOX 1510 Mechanicsville, VA 23116	
	Contractor License Number 2705100072A	Type A

Description of Work	Scope of Work: <b>Basement</b> Build New single family home w/ attached garage			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 4 Full 2 1/2 - 1 unfinished	
	# of Floors 3	Total Sq. Ft. 65858299	Finished Sq. Ft. 4753	Unfinished Sq. Ft. 18323545

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

VALUE OF WORK		Application Fee	\$ 2,508.00
Building	# 479,000.00 554,667.50	Zoning Fee	\$ 50.00
Excludes All Trades Permits		Septic/Well Fee	\$ 40.00
		State Levy Fee	\$ 50.96
		RLD	\$ 100.00
		Storm	200.00
		<b>Total</b>	<b>2,948.96</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]*

**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: Richmond Settlement Solutions Telephone: (804)968-4882

Mailing Address: 9030 Stony Point Parkway Suite 145  
Richmond, VA 23235

**OWNER'S AFFIDAVIT**

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

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

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

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

RLD \$ 100.00  
Septic & well \$ 40.80 For Commercial & Residential  
Septic only \$ 25.44 for Commercial & Residential  
Zoning Commercial \$ 100.00  
Zoning Residential SFD \$50.00 all other structures are \$ 25.00

**OFFICE USE ONLY**

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

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_  
Code Official

<b>BUILDING PERMIT APPLICATION</b> Goochland County Department Of Building Inspection P O Box 119 Goochland VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 Va Relay TM: 20.1.0.47.0	Application Date: 2-10-17
	Application Accepted: BP-2017-00113
	GPIN: 68 40-48-6306
	Issued: 3.29.17

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: 3783 Harris Lane		District		
	Owner: Alycia Allen Harris		Phone #		
	Address				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage: 14.310	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: None	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	New Street Address		Zoning District: A-1		
	Front Setback: 55' from RUC	Center Line Setback	Rear Setback: 35'	C.U. Permit: N/A	Variance: N/A
	Side Setback: 20'	Side Setback: 20'	COA: N/A	Flood Zone: N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

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

Applicant/Contact: Blue Ridge Custom Homes	Phone: 540-478-3110
Email: Nathanbrack@gmail.com	

CONTRACTOR INFORMATION	Contractor: Blue Ridge Custom Homes	Phone
	Address: 1186 Lickinghole Rd Goochland VA	
	Contractor License Number: 2705086712	Type: A

Description of Work	Scope of Work: New single family home with attached garage				
	SEWER: Public/Private	WATER: Public/Private	3		# of Bathrooms
	# of Floors: 2	Total Sq. Ft.: 4423	Finished Sq. Ft.: 2978	Unfinished Sq. Ft.: 1445	# of Bedrooms: 4

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

VALUE OF WORK \$277,537.50 Building: 250,000 Excludes All Trades Permits	Application Fee: \$260.92 Zoning Fee: \$50.00 Septic/Well Fee: \$40.00 State Levy Fee: \$26.02 RLD: \$100.00
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I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Total: \$1476.94

**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: Aurora Title Telephone: 804.357.1809

Mailing Address: 2203 Pump Rd. Henrico, VA 23233

**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) 556-5215 Fax (804) 556-5651 TDD 711 Va Relay

Issued 3.29.17

Application Date: 2-28-17

Application Accepted: BP-2017-00180

Old Map Number: 3219-020

GPIN: 6779-85-8857

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	2802 Parkinsville Rd lot 2		District	
	Owner	Vertical Builders		Phone #	804 440 6647
	Address	PO Box 4205 Richmond VA			
	Proposed Use	Current Use	Existing Buildings on Property		
Proposed Occupant Load (Commercial)	Acres	Commercial Use			
	2.5789 Acres	<input type="checkbox"/> Yes <input type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer	Amount:	Date Paid:	
	Marshall Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	—	—	
	New Street Address	Zoning District		A-2	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
55' from Row	—	35'	—	—	
Side Setback	Side Setback	COA	Flood Zone		
20'	20'	—	—		
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: 3/13/17

Applicant/Contact: Ryan Sedwick Phone: 804 291 8736

Email: rsedwick@verticalbuilders.com

CONTRACTOR INFORMATION	Contractor	Vertical Builders		Phone	804 440 6647
	Address	PO Box 4205 Richmond VA 23220			
	Contractor License Number	Type	Expiration		
	2705 103062	A - B10	2-28-18		

Description of Work	Scope of Work: Build Single Family home/w attached garage				
	SEWER	WATER	# of Bathrooms		
	Public/Private	Public/Private	2		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
MS 2	3259	2001	1258	3	

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

VALUE OF WORK		Application Fee	\$ 899.00
Building	158,335	Zoning Fee	\$ 50.00
	197,250.00	Septic/Well Fee	\$ 40.00
Excludes All Trades Permits		State Levy Fee	\$ 18.79
		RLD Storm	\$ 200.00
		RTD	100.00
		<b>Total</b>	<b>1,308.42</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]

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 Ryan Sedwick of (address) 2804 Parkinsville Rd 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) 558-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 3-29-17

Application Date: 2-14-17  
 Application Accepted: BP-2017-00138  
 Old Map Number: 32.19.0.3.0  
 GPIN: 6779.96.1041

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 2804 Parkinsville Rd		District	
	Owner Vertical Builders		Phone # 804 440 6647	
	Address PO Box 4205 Richmond VA			
	Proposed Use Single Family dwelly	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage 2.25	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Marshall Run	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
	New Street Address		Zoning District A-2	
	Front Setback 55' from R/W	Center Line Setback	Rear Setback 35'	C.U. Permit N/A
	Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: *Survey located setbacks from easements!			

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: 2/28/17

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

CONTRACTOR INFORMATION	Contractor Vertical Builders	Phone 804 440 6647
	Address PO Box 4205 Richmond VA 23220	
	Contractor License Number 2705 103062	Type A - B10

Description of Work	Scope of Work: Build New single family house with <del>double well</del> Attached garage			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	
	# of Floors 1	Total Sq. Ft. 1826	Finished Sq. Ft. 1826	Unfinished Sq. Ft. 7540
			# of Bedrooms 3	

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

VALUE OF WORK	2580	Storm Water \$200.00	Application Fee	\$656.38
Building	143,100 \$143,195.00		Zoning Fee	\$50.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$13.93
			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:  
1060.31

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, Ryan Sedwick of (address) 2804 Parkinsville Rd affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

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

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

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

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

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

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

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

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

Code Official

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

Issued: 3.22.17

Application Date: 2-2-17  
 Application Accepted: BP-2017-00083  
 Old Map Number: 18-1-0-22-0-1  
 GPIN: 6719-69-3999

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 2840 DAVIS Mill Rd Goochland, VA		District		
	Owner JARED + JERI PARKS 23063		Phone # 804-426-6119		
	Address 2830 DAVIS MILL RD GOOCHLAND, VA 23063				
	Proposed Use RESIDENTIAL	Current Use RESIDENTIAL	Existing Buildings on Property NONE		
	Proposed Occupant Load (Commercial) N/A	Acreage 5	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	New Street Address		Zoning District A-1		
	Front Setback 75' from ROW	Center Line Setback —	Rear Setback 35'	C.U. Permit N/A	Variance N/A
	Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Taylor Date: 2/13/17

Applicant/Contact: JARED C PARKS Phone: 804-426-6119  
 Email: PARKSJAR@GMAIL.COM

CONTRACTOR INFORMATION	Contractor GRIFFITH ENTERPRISES LLL	Phone 804-598-3389
	Address 3791 MAIDENS RD POWHATAN, VA 23139	
	Contractor License Number 2705139386	Type CLASS A CBC PLB RBC PLB

Description of Work	Scope of Work: CONSTRUCTION OF SINGLE FAMILY DWELLING, ATTACHED GARAGE, UNFINISHED BASEMENT				
	SEWER Public/Private	WATER Public/Private	4 1/2		# of Bathrooms
	# of Floors 3	Total Sq. Ft. 5605	Finished Sq. Ft. 2344	Unfinished Sq. Ft. 3261	# of Bedrooms 4

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

VALUE OF WORK	
Building	\$ 379,377.49
Excludes All Trades Permits	

Application Fee	\$ 1119.20
Zoning Fee	\$ 50.00
Septic/Well Fee	\$ 40.00
State Levy Fee	\$ 35.18
<b>Total</b>	<b>\$ 1844.38</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 of Applicant: [Signature]

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

Name: DARVIN E. SATTERWHITE Telephone: 804-556-4012

Mailing Address: P.O. BOX 325, GOOCHLAND, VA 23063

**OWNER'S AFFIDAVIT**

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

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

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

**OFFICE USE ONLY**

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

APPROVAL  DATE 3-22-17  
Code Official

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 558-5815 Fax (804) 556-5651 TDD 711 Va Relay

Issued 3.22.17

Application Date: 3.7.17

Application Accepted: 2017-00181

Old Map Number: 32-19-040

GPIN: 6779-86-9117

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 2808 Parkinsville Rd Lot 4		District	
	Owner Vertical Builders		Phone # 804 440 6647	
	Address PO Box 4205 Richmond VA			
	Proposed Use Single Fam. House	Current Use Vacant	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage 2.3982 Acres	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subdivision Marshall	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: —	Date Paid: —	
New Street Address		Zoning District A-2		
Front Setback 55' From POU	Center Line Setback	Rear Setback 35'	C.U. Permit	Variance
Side Setback 20'	Side Setback 20.1'	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: 3/15/17

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

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

Description of Work	Scope of Work: Build Single Fam home/with attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
	# of Floors 2	Total Sq. Ft. 3259	Finished Sq. Ft. 2001	Unfinished Sq. Ft. 1258	# of Bedrooms 3

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

VALUE OF WORK		Application Fee	\$ 899.63
Building	158 335 197,250.00	Zoning Fee	\$ 50.00
Excludes All Trades Permits		Septic/Well Fee	\$ 40.00
Total 1,308.42		State Levy Fee	\$ 18.79
		RLB Storm	\$ 200.00
		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: Harvey E Williams PLC Telephone: 804 396-3580

Mailing Address: 7516 Right Flank Road Mechanicsville VA 23116

OWNER'S AFFIDAVIT

Ryan Sedwick of (address) 2804 Parkinsville Rd affirm that I am the owner of a certain tract of parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

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

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

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

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

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

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

PERMIT FEE SCHEDULE

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

OFFICE USE ONLY

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

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

Code Official

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

Application Date: 3-7-17  
 Application Accepted: BP-2017-00183  
 GPIN: 6718-00-5471  
 Issued: 3-21-17

Tax Map # 39-2-0-5-0

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

OWNER INFORMATION	Site Address <u>1873 CARTERSVILLE Rd 23063</u>		District <u>B4RD</u>
	Owner <u>HABITAT FOR HUMANITY OF GOOCHLAND</u>		Phone #
	Address <u>PO BOX 1016 GOOCHLAND VA 23063</u>		
	Proposed Use <u>Home</u>	Current Use <u>VACANT</u>	Existing Buildings on Property <u>NONE</u>
	Proposed Occupant Load (Commercial)	Acreeage <u>1.19 ACRES</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>—</u>	Date Paid: <u>—</u>	
	New Street Address <u>—</u>		Zoning District <u>A-1</u>		
	Front Setback <u>100' from ROW</u>	Center Line Setback <u>—</u>	Rear Setback <u>35'</u>	C.U. Permit <u>—</u>	Variance <u>—</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	COA <u>—</u>	Flood Zone <u>—</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Taylor Date 3/13/17

Applicant/Contact: KNIGHT BOWLES Phone 84-513-3330

Email: JAMER@HUMANITYOF308@COMCAST.NET

CONTRACTOR INFORMATION	Contractor <u>HABITAT FOR HUMANITY OF GOOCHLAND</u>	Phone <u>804-704-2635</u>
	Address <u>PO BOX 1016 GOOCHLAND VA 23</u>	
	Contractor License Number <u>2705047138</u>	Type <u>CLASS B</u>

Description of Work	Scope of Work: <u>SINGLE FAMILY HOME</u>				
	SEWER Public/Private	WATER Public/Private			# of Bathrooms
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	<u>1 FLOOR</u>	<u>1040 1065</u>	<u>1040</u>	<u>25 sq. ft.</u>	<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>\$75,000</u>
Excludes All Trades Permits	

Application Fee	\$ <u>349.50</u>
Zoning Fee	\$ <u>50.00</u>
Septic/Well Fee	\$ <u>40.00</u>
State Levy Fee	\$ <u>7.79</u>
<b>R&amp;D Total</b>	<b>\$ <u>447.29</u></b>

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

# BUILDING PERMIT APPLICATION

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

TM: 30.1.0.99.0

Application Date: 3-2-17

Application Accepted: BP-2017-00169

GPIN: 6758-52-4956

Issued: 3.21.17

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. Goochland, VA 23063

OWNER INFORMATION

Site Address: 2014 Steeplechase Pkwy		District
Owner: Blue Ridge Custom Homes		Phone #: 804-614-4556
Address: 1186 Lickinghole Rd Goochland VA		
Proposed Use	Current Use	Existing Buildings on Property
Proposed Occupant Load (Commercial)	Acreage: 5.994	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision: None	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
New Street Address: _____		Zoning District: A2	
Front Setback: 75' From R/W	Center Line Setback: _____	Rear Setback: 35'	C.U. Permit: N/A
Side Setback: 20'	Side Setback: 20'	COA: N/A	Flood Zone: N/A
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer: *[Signature]* Date: 3/3/17

Applicant/Contact: Nathan Sanocka Phone: 540-478-3110

Email: Nathanbrch@gmail.com

Contractor: Blue Ridge Custom Homes	Phone
Address: 1186 Lickinghole Rd Goochland VA	
Contractor License Number: 2705086712	Type: A
Expiration: 7-31-18	

Description of Work: New single family with attach garage Partial unfinished Basement				
SEWER: Public/Private	WATER: Public/Private	# of Bathrooms: 4		
# of Floors: 2	Total Sq. Ft.: 6043	Finished Sq. Ft.: 4028	Unfinished Sq. Ft.: 2015	# of Bedrooms: 5

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

Building	VALUE OF WORK: \$428,017.50
	275,000
Excludes All Trades Permits	

Application Fee	\$1938.08
Zoning Fee	\$50.00
Septic/Well Fee	\$40.00
State Levy Fee	\$39.56
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]* total: \$2169.64

**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: Aurora Title Telephone: 804-729-9005

Mailing Address: 2203 Pump Road Henrico Va

**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 3.16.17

# 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 7-3 PARKSIDE VILLAGE

Application Date: 3-10-17

Permit Number: BP-2017-00191

Old Map Number: 48.19.0.7.0

GPIN: 7738-11-4668

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 7293 Ellingham Court		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$ 5987.00	Date Paid: Due
	New Street Address		Zoning District RPUD	
	Front Setback 30' from Pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit
	Side Setback 20' B/S	Side Setback 20' B/S	Census Track	Flood Zone
	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 Lloyd Date: 3/13/17

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

Email: bjames@eagleofva.com

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

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. <del>3226</del> 3291	Finished Sq. Ft. <del>2666</del> 2731	Unfinished Sq. Ft. 560	# of Bedrooms 3

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

VALUE OF WORK	\$ 225,825.00
Building	<del>\$220,950.00</del>
Excludes All Trades Permits	

Application Fee	\$ 1006.27
Septic/Well Fee	\$
State Levy Fee	\$ 20.13
Zoning Fee	\$ 50.00
Total	\$ 1076.40

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

Signature of Applicant: [Signature]

# BUILDING PERMIT APPLICATION

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

Application Date: 2-15-17  
 Application Accepted: BP-2017-00135  
 Old Map Number: 29-10-0-1-0  
 GPIN: 6749-32-7642

Issued: 3-16-17

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

OWNER INFORMATION	Site Address <u>3869</u> <del>AAA/AAA</del> - Riddles Bridge Rd		District <u>Goochland</u>	
	Owner <u>New Ventures Real Estate</u>		Phone # <u>804-839-7201</u>	
	Address <u>11064 Anderson Hwy, Suite F, Powhatan VA 23139</u>			
	Proposed Use <u>N/A</u>	Current Use <u>land</u>	Existing Buildings on Property <u>N/A</u>	
Proposed Occupant Load (Commercial) <u>N/A</u>	Acreage <u>9.18</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Subdivision <u>The Woods at Riddles Bridge</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>	
New Street Address _____		Zoning District <u>A-1</u>		
Front Setback <u>75' from ROW</u>	Center Line Setback _____	Rear Setback <u>35'</u>	C.U. Permit <u>N/A</u>	
Side Setback <u>20'</u>	Side Setback <u>20'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.  
 Planning & Zoning Officer David Floyd Date 2/17/17

Applicant/Contact: R. Alon Anderson Phone 804-839-7201  
 Email: raanderson2080@gmail.com

CONTRACTOR INFORMATION	Contractor <u>Anderson Home Construction</u>	Phone <u>804-839-7201</u>
	Address <u>2080 Cartersville Rd, New Canton, VA 23123</u>	
	Contractor License Number <u>2705106351</u>	Type <u>Class A</u>

Description of Work	Scope of Work: <u>single family dwelling w/ attached garage</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	<u>1</u>	<u>2080</u>	<u>11000</u>	<u>480</u>	<u>3</u>

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

VALUE OF WORK		Total <u>1,321.04</u>	Application Fee \$ <u>913.00</u>
Building	<u>200,000</u>		Zoning Fee \$ <u>50.00</u>
Excludes All Trades Permits			Septic/Well Fee \$ <u>40.00</u>
			State Levy Fee \$ <u>19.04</u>
			RED Storm \$ <u>300.00</u>
			RED 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 R. Alon Anderson

LIEN AGENT INFORMATION

Please check one of the following:

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

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

Name: Powhatan Real Estate Settlements Telephone: 598-7160

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

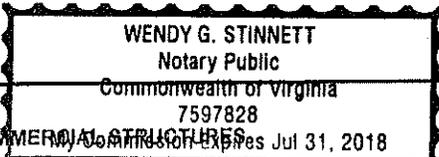
OWNER'S AFFIDAVIT

I, R. Alon Anderson of (address) Lot 1/site E Riddles Bridge Rd affirm that I am the owner of a certain tract of parcel of land located at Goachland 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. Alon Anderson Owner's Signature

Signed and acknowledged by Wendy Stinnett in the city or county of Powhatan Virginia on the 15<sup>th</sup> 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. Alon 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

**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

Application Date: **received** 1-5-17  
 Permit Number: **BP-2017-00010**  
 Old Map Number: **57-1-32-0**  
 GPIN: 7706-12-0643

*Issued 3-14-17*

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 1325 MILLERS LANE, MANAKIN SABOT, VA 23103		District	
	Owner OMAR DANAF		Phone # 804-874-5069	
	Address 1723 FOX CREEK CIRCLE, HENRICO, VA 23238			
	Proposed Use NEW SF DWELLING	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size <b>5 ACRES</b>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>N/A</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <i>N/A</i>	Date Paid: <i>N/A</i>
	New Street Address		Zoning District <i>A-2</i>	
	Front Setback <i>75' from Road</i>	Center Line Setback	Rear Setback <i>35'</i>	C.U. Permit <i>N/A</i>
	Side Setback <i>20'</i>	Side Setback <i>20'</i>	Census Track <i>N/A</i>	Flood Zone <i>N/A</i>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer: *David Floyd* Date: *1/6/17*

Applicant/Contact: OMAR DANAF Phone: 804-874-5069  
 Email: OMAR@FICAPMORTGAGE.COM

CONTRACTOR INFORMATION	Contractor CVA BUILDERS, LLC		Phone 804-358-5768	
	Address 1207 ROSENEATH ROAD, RICHMOND, VA 23230			
	Contractor License Number 2705142334	Type A	Expiration 9/30/2017	

Description of Work	Scope of Work: NEW SINGLE FAMILY DWELLING <i>w/ garage + unfinished basement</i>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 3.5		
	# of Floors 3	Total Sq. Ft. <i>6107 6,316</i>	Finished Sq. Ft. <i>3803 4572</i>	Unfinished Sq. Ft. <i>2304 1744</i>	# of Bedrooms 4
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		Application Fee	\$ <i>190.728</i>
Building	\$280,732 <i>421,175.00</i>	Septic/Well Fee	\$ <i>40.00</i>
<i>Excludes All Trades Permits</i>		State Levy Fee	\$ <i>38.95</i>
		Zoning Fee	\$ <i>50.00</i>
		Total	\$ <i>2,036.23</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]* 2/10/17

**LIEN AGENT INFORMATION**

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 38.88.01 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: L. ANDERSON HUGHES JR. - *Alt* Telephone: 804-794-4300

Mailing Address: 1326 ALVERSER PLAZA, MIDLOTHIAN, VA 23113

**OWNERS 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 §36.99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTIONS 105.10 AND 121.1.1.

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 \_\_\_\_\_ USE TYPE CODE \_\_\_\_\_ 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 3.9.17

Application Date: 2-8-17  
 Application Accepted: BP-2017-00101  
 Old Map Number: 29-10-0-3-0  
 GPIN: 6749-42-4776

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 3845 Riddles Bridge Rd		District Goochland		
	Owner New Ventures Real Estate		Phone # 804-839-7201		
	Address 1664 Anderson Hwy, Suite F, Powhatan				
	Proposed Use Single-family housing	Current Use land	Existing Buildings on Property N/A		
	Proposed Occupant Load (Commercial) N/A	Acreage 5.12	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Woods at Riddle Bridge		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
	New Street Address		Zoning District A-2		
	Front Setback 75' from Row	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variances N/A
	Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Pugh Date: 2/8/17

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

CONTRACTOR INFORMATION	Contractor Anderson Home Construction		Phone 804-839-7201	
	Address 2080 Cartersville Rd, New Canton VA 23123			
	Contractor License Number 2705106351	Type Class A	Expiration 5/31/18	

Description of Work	Scope of Work: Single family housing attached garage				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2		
	# of Floors 1	Total Sq. Ft. 2080	Finished Sq. Ft. 1600	Unfinished Sq. Ft. 480	# of Bedrooms 3

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

VALUE OF WORK		Storm water \$200.00	Application Fee \$ 912.00	
Building	200,000		Zoning Fee \$ 50.00	Septic/Well Fee \$ 40.00
Excludes All Trades Permits			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: R. Alford 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: Powhatan Pool Estate Settlements Telephone: 598-7160

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

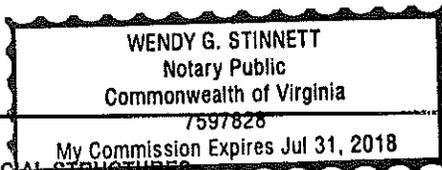
**OWNER'S AFFIDAVIT**

I, R. Alan Anderson of (address) lot 3, Riddles Bridge Rd affirm that I am the owner of a certain tract of parcel of land located at Goodman Ln 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 G. 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 3-8-17*  
**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 37-1 PARKSIDE VILLAGE**

Application Date: *03-03-17*  
 Permit Number: *BP-2017-00175*  
 Old Map Number: *48-17-0-37-0*  
 GPIN: *7738-10-7698*

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 7167 Yare Street		District
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060		
	Proposed Use	Current Use	Existing Buildings on Property

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>Parkside Village</i>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <i>\$5987.00</i>	Date Paid: <i>Dec</i>	
	New Street Address —		Zoning District <i>R PUD</i>		
	Front Setback <i>30' from Pavement</i>	Center Line Setback —	Rear Setback <i>50' B/S</i>	C.U. Permit —	Variance —
	Side Setback <i>20' B/S</i>	Side Setback <i>20' B/S</i>	Census Tract <i>N/A</i>	Flood Zone —	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.  
 Planning & Zoning Officer *David Floyd* Date *3/6/17*

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

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

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE and UNFINISHED BASEMENT				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors 2	Total Sq. Ft. 4996	Finished Sq. Ft. 2656	Unfinished Sq. Ft. 2340	# of Bedrooms 3

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

VALUE OF WORK		Application Fee \$ <i>1303.27</i>
Building	\$286,950.00	Septic/Well Fee \$
Excludes All Trades Permits		State Levy Fee \$ <i>26.07</i>
		Zoning Fee \$ <i>50.00</i>
		Total \$ <i>1379.34</i>

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

Signature of Applicant *[Signature]*

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

Issued 3.3.17

Application Date: 2-7-2017

Application Accepted: BP-2017-00102

Old Map Number: 43-39-0-3-0

GPIN: 60007-07-4460

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 2331 Lanes End Pl.		District		
	Owner Main Street Homes		Phone # (804) 423-0314		
	Address PO BOX 461 Midlothian VA 23113				
	Proposed Use Residential Single Family Const.	Current Use	Existing Buildings on Property No		
Proposed Occupant Load (Commercial)	Acreage 2 acres	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Lanes End	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$14,179.00	Date Paid: Due	
	New Street Address		Zoning District R-P		
	Front Setback 40' from Row	Center Line Setback	Rear Setback 25'	C.U. Permit N/A	Variance N/A
	Side Setback 10'/30'	Side Setback 10'/30'	COA	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: * Cash Proffer due before C.O. is issued.	

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

Planning & Zoning Officer: Daniel Floyd Date: 2/8/17

Applicant/Contact: Marian Tessler Phone: (804) 423-0314  
 Email: mtessler@gomsh.com

CONTRACTOR INFORMATION	Contractor Main Street Homes		Phone (804) 423-0314	
	Address PO BOX 461 Midlothian VA 23113			
	Contractor License Number	Type	Expiration	

Description of Work	Scope of Work: New Single Family Dwelling w/ Attached GARAGE				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2.5		
	# of Floors 2	Total Sq. Ft. 3614	Finished Sq. Ft. 2925	Unfinished Sq. Ft. 689	# 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 \$200.00	Application Fee	\$115.46
Building	219,146 245,212.50		Zoning Fee	\$50.00
Excludes All Trades Permits			Septic/Well Fee	\$40.00
			State Levy Fee	\$23.11
			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: \$1528.57

Signature of Applicant: Marian Tessler

**LIEN AGENT INFORMATION**

Please check one of the following:

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

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

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

Mailing Address: 9211 Forest Hill Ave Richmond VA 23235

**OWNER'S AFFIDAVIT**

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

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

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

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

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

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

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

**PERMIT FEE SCHEDULE**

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

**OFFICE USE ONLY**

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

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

Code Official

**ISSUED 3.1.17**  
**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 11-3 PARKSIDE VILLAGE**

Application Date: **2-24-17**  
 Permit Number: **BP-2017-00157**  
 Old Map Number: **48-19-0-11-0**  
 GPIN: **7738-11-5450**

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 7285 Ellingham Court		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision <b>Parkside Village</b>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <b>\$5987.00</b>	Date Paid: <b>Dec</b>
	New Street Address		Zoning District <b>RPUD</b>	
	Front Setback <b>30' from Parkway</b>	Center Line Setback	Rear Setback <b>50' B/S</b>	C.U. Permit <b>N/A</b>
	Side Setback <b>20' B/S</b>	Side Setback <b>20' B/S</b>	Census Tract <b>N/A</b>	Flood Zone <b>N/A</b>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <b>*Cash Proffer Due before C.O. is issued.</b>			

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: **2/27/17**

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

Email: **bjames@eagleofva.com**

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

<b>Description of Work</b>	<b>Scope of Work:</b> NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private		WATER Public/Private		# of Bathrooms
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3240	2658	582	3

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

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

Application Fee	\$ <b>1007.28</b>
Septic/Well Fee	\$
State Levy Fee	\$ <b>20.15</b>
Zoning Fee	\$ <b>50.00</b>
<b>Total</b>	\$ <b>1077.43</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 3.1.17**  
**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 6-3 PARKSIDE VILLAGE**

Application Date: **2-24-17**  
 Permit Number: **BP-2017-00158**  
 Old Map Number: **48.19.0.6.0**  
 GPIN: **7738-11-4831**

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 7224 Shenfield Avenue		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision <b>Parkside Village</b>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <b>\$ 5987.00</b>	Date Paid: <b>Due</b>
	New Street Address		Zoning District <b>RPUD</b>	
	Front Setback <b>30' From Pavement</b>	Center Line Setback	Rear Setback <b>57' B/S</b>	C.U. Permit <b>N/A</b>
	Side Setback <b>20' B/S</b>	Side Setback <b>20' B/S</b>	Census Tract <b>N/A</b>	Variance <b>N/A</b>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <b>* Cash Proffer due before C.O. is issued</b>	
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: <b>David Floyd</b>		Date: <b>2/28/17</b>		
Applicant/Contact: BERTON JAMES			Phone (804)217-6910	
Email: <b>bjames@eagleofva.com</b>				
<b>CONTRACTOR INFORMATION</b>	Contractor EAGLE CONSTRUCTION OF VA., LLC		Phone (804)741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Contractor License Number 2705096467A	Type CLASS A	Expiration 3-31-2017	
<b>Description of Work</b>	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.
	2	3651	2881	770
			# of Bedrooms	
			3	

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

VALUE OF WORK	
Building	\$244,950.00
Excludes All Trades Permits	

Application Fee	\$ 114.27
Septic/Well Fee	\$
State Levy Fee	\$ 22.29
Zoning Fee	\$ 50.00
Total	\$ 186.56

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 3.1.17**  
**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 2-3 PARKSIDE VILLAGE**

Application Date: 02-27-17  
 Permit Number: BP-2017-00159  
 Old Map Number: 48.19.0.2.0  
 GPIN: 1738-11-3903

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 7225 Shenfield Avenue		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Parkside Village</u>	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: <u>\$5987.00</u>	Date Paid: <u>Due</u>
	New Street Address		Zoning District <u>RPU D</u>	
	Front Setback <u>20' from Pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	C.U. Permit <u>N/A</u>
	Side Setback <u>20' B/S</u>	Side Setback <u>20' B/S</u>	Census Tract <u>N/A</u>	Flood Zone <u>N/A</u>
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: <u>*Cash Proffer due before C.O. is issued.</u>

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

Planning & Zoning Officer: [Signature] Date 2/28/17

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

Email: bjames@eagleofva.com

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

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

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

VALUE OF WORK		Application Fee	\$ <u>703.47</u>
Building	\$153,660.00	Septic/Well Fee	\$
		State Levy Fee	\$ <u>14.07</u>
Excludes All Trades Permits		Zoning Fee	\$ <u>50.00</u>
		Total	\$ <u>767.54</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]

ISSUED ~~2/23/17~~ 3.1.17  
**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 20-2 PARKSIDE VILLAGE**

Application Date: 2.23.17  
 Permit Number: BP-2017-00149  
 Old Map Number: 48.18.0.20.0  
 GPIN: 7738-12-9095

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 7205 Shenfield Avenue		District	
	Owner EAGLE CONSTRUCTION OF VA., LLC		Phone # 804-741-4663	
	Address 2250 OLD BRICK ROAD, SUITE 220 GLEN ALLEN, VA 23060			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Lot Size	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Parkside Village	Proffer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount: \$ 5987.00	Date Paid: Done
	New Street Address		Zoning District R-PUD	
	Front Setback 30' from Pavement	Center Line Setback	Rear Setback 50' B/S	C.U. Permit N/A
	Side Setback 20' B/S	Side Setback 20' B/S	Census Track N/A	Flood Zone N/A
	APPROVED <input checked="" type="checkbox"/>		REJECTED <input type="checkbox"/>	COMMENTS: Cash Proffer Due before C.O. is issued.

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

Planning & Zoning Officer: [Signature] Date: 2/23/17

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

Email: bjames@eagleofva.com

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

Description of Work	Scope of Work: NEW DWELLING WITH ATTACHED GARAGE				
	SEWER Public/Private	WATER Public/Private	2.5	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	2	3240	2658	582	3

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

VALUE OF WORK		Application Fee	\$ 1007.28
Building	\$221,175.00	Septic/Well Fee	\$
Excludes All Trades Permits		State Levy Fee	\$ 20.15
		Zoning Fee	\$ 58.00
		Total	\$ 1077.43

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]

OK For Stormwater  
12/27/16

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

Application Date: 12.14.16  
 Application Accepted: BP-2016-01007  
 Old Map Number: 63-41-0-2-0  
 GPIN: 7724-23-0314

Issued 3.29.17

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: 270 Creekmore Pl. A,B,C		District		
	Owner: LeGault Homes LLC		Phone #: 804-747-1943		
	Address: PO BOX 5575, Glen Allen VA 23058				
	Proposed Use: Dwelling	Current Use: NA	Existing Buildings on Property: NONE		
Proposed Occupant Load (Commercial): NA	Acreeage: .821	Commercial Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: Creekmore Place	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A	
	New Street Address		Zoning District: R-3		
	Front Setback: 40' from ROW	Center Line Setback: -	Rear Setback: 25'	C.U. Permit: N/A	Variance: N/A
	Side Setback: 10'/25'	Side Setback: 10'/25'	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: 12/20/16

Applicant/Contact: \* Casey Agee Phone: 804-874-6646  
 Email: Casey@LeGaultHomes.com

CONTRACTOR INFORMATION	Contractor: LeGault Homes	Phone: 804-747-1943
	Address: PO BOX 5575 Glen Allen VA 23058	
	Contractor License Number: 2705133306	Type: CONTRACTORS

Description of Work	Scope of Work: 3 attached single family condos				
	SEWER: Public/Private	WATER: Public/Private	# of Bathrooms: 9		
	# of Floors: 2	Total Sq. Ft.: 7300 approx	Finished Sq. Ft.: 6110 approx	Unfinished Sq. Ft.: 1190 approx	# of Bedrooms: 9

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

Building	300,000	storm water \$200.00 RLD	Application Fee	\$499.74
Excludes All Trades Permits			Zoning Fee	\$100.00
			Public Well Fee	\$100.00
			State Levy Fee	\$90.00
			<del>RLD</del> Total	\$499.74

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

Signature of Applicant: Casey Agee

**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: Banker's Title, LLC Telephone: \_\_\_\_\_

Mailing Address: 9011 Arboretum Parkway Suite 110  
Richmond VA 23236

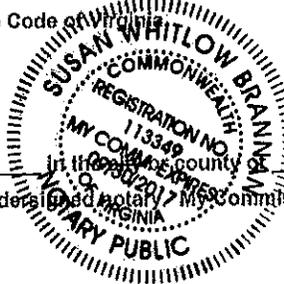
**OWNER'S AFFIDAVIT**

I, CREEKMOOR PLACE LLC of (address) 12283 FIELD CREST LANE ARLINGTON, VA 22205 affirm that I am the owner of a certain tract of parcel of land located at CREEKMOOR FOND 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.

By: G. Edmond Massie, IV Owner's Signature  
Manager

Signed and acknowledged by G. Edmond Massie, IV in the County of Henrico Virginia on the 6<sup>th</sup> Day of December, 2016. In the presence of the undersigned notary, My Commission expires 9/30/17.

Susan Whitlow Brannan (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 atructures are \$ 25.00

**OFFICE USE ONLY**

USE R-5 # STORIES 2 CONSTRUCTION TYPE VB OCCUPANY LOAD 30 CODE EDITION 12  
FIRE SPRINKLER N FIRE ALARM N 10/T.H.

APPROVAL [Signature] DATE 03-24-17  
Code Official

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

ISSUED 3.29.17

Application Date: 3.24.17

Application Accepted: BP-2017-00232

Old Map Number: 64.22.B.4.0

GPIN: M33-18-7700

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	13295 Beckford Ln.		District
Owner	M. John P. Hs		Phone # 225 603-0992
Address			
Proposed Use	Current Use	Existing Buildings on Property	
residential	residential		
Proposed Occupant Load (Commercial)	Acreage	Commercial Use	
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision	Proffer	Amount:	Date Paid:
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
New Street Address		Zoning District	
Front Setback	Center Line Setback	Rear Setback	C.U. Permit
			Variance
Side Setback	Side Setback	C O A	Flood Zone
APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

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

Applicant/Contact: David Payne Phone 804-398-0175

Email: payneandsonhlc@aol.com

CONTRACTOR INFORMATION	Contractor	Phone
	Payne and Son Home Improvements Inc.	804-398-0175
	Address 12218 Devette Terrace Chesterfield Va. 23838	
Contractor License Number	Type	Expiration
2705112681	(BC RBC HIC)	1-31-19

Description of Work	Scope of Work: <del>Frame</del> Construct an elevator shaft from basement to 1st Floor bedroom			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.
			# of Bedrooms	

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

VALUE OF WORK

Building	13,000
Excludes All Trades Permits	

Application Fee	\$ 70.50
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 1.41
<del>Sub</del> Total	\$ 71.91

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

Signature of Applicant \_\_\_\_\_

**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: 3/17/2017  
 Application Accepted: BP-2017-00212  
 Old Map Number: A-3-D-20-0  
 GPIN: 6803-92-6940

Issued: 3-28-17

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

OWNER INFORMATION	Site Address <u>4599 SLIPPERY ROCK LN.</u>		District	
	Owner <u>MR. STEVE QUASKA</u>		Phone # <u>903-395-6075</u>	
	Address <u>same</u>			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acres	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Tobacco Est.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>
	New Street Address <u>---</u>		Zoning District <u>A-1</u>	
	Front Setback <u>55' from Row</u>	Center Line Setback <u>---</u>	Rear Setback <u>35'</u>	C.U. Permit <u>N/A</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	C.O.A. <u>N/A</u>	Flood Zone <u>N/A</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* For Deck work only.</u>			

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

Planning & Zoning Officer [Signature] Date 3/27/17

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

CONTRACTOR INFORMATION	Contractor <u>BLANCHARD &amp; ASSOCIATES RESIDENTIAL CONTRACTORS, INC.</u>	Phone <u>604-457-9426</u>
	Address <u>6020 Community Home Rd. Courtona, VA 23038</u>	
	Contractor License Number <u>2705073745</u>	Type <u>A BLD</u>

Description of Work	Scope of Work: <u>A 16' x 24' DECK STEPPING DOWN TO 384+ 240</u> <u>A 12' x 20' DECK</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. <u>624</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>624</u>
			# of Bedrooms	

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

VALUE OF WORK	
Building	<u>\$6,280.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>40.26</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>.81</u>
RLD Total	\$ <u>66.07</u>

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

Signature of Applicant [Signature]

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

Application Date: 3-13-17 **received** 3-13-17  
 Application Accepted: BP-2017-00194  
 GPIN: 6798-84-0299  
 Issued: 3-28-17

Tax Map# 33-9-0-10-0

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 2301 Temple Lane Rockville <sup>23146</sup> District  
 Owner Kelly Moore Phone #  
 Address 2301 Temple Lane Rockville VA 23146  
 Proposed Use Current Use Existing Buildings on Property  
 Proposed Occupant Load (Commercial) Acreage Commercial Use  
 Yes  No

**TO BE COMPLETED BY ZONING DEPARTMENT**

Subdivision Temple Heights Proffer  Yes  No Amount: — Date Paid: —  
 New Street Address — Zoning District RR  
 Front Setback 55' from ROW Center Line Setback — Rear Setback 5' C.U. Permit — Variance —  
 Side Setback 5' Side Setback 35' 0" with COA Flood Zone —  
 APPROVED  REJECTED  COMMENTS: 35' from Property line on oil well rd. side.

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 Floyd Date 3/13/17

Applicant/Contact: OWNER Phone 804-441-1012

Email: DG11261126@aol.com

**CONTRACTOR INFORMATION**

Contractor Address Phone  
 Contractor License Number Type Expiration

**Description of Work**

Scope of Work: DETACHED GARAGE 32' x 40'

SEWER Public/Private	WATER Public/Private	# of Bathrooms		
# of Floors	Total Sq. Ft. <u>1,280</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>1,280</u>	# of Bedrooms

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

VALUE OF WORK <u>35,200</u>	YUSI LIN Notary Public Commonwealth of Virginia Registration No. 7196409 My Commission Expires Dec 31, 2020	Application Fee \$ <u>110.40</u>
Building <u>15,000</u>		Zoning Fee \$ <u>25.00</u>
<u>Excludes All Trades Permits</u>		Septic/Well Fee \$ <u>—</u>
		State Levy Fee \$ <u>3.41</u>
		RLD Total \$ <u>198.81</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.

**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 3.28.17*

Application Date: *1-27-17*  
 Permit Number: *BP-2017-00240*  
 Old Map Number: *S8-32-3-A-0*  
 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.

<b>OWNER INFORMATION</b>	Site Address 15060 Capital One Drive, WC6 Richmond, VA 23238		District
	Owner Capital One - Ted Tremain		Phone # 855-375-0822
	Address 15050 Capital One Drive, WC1 Richmond, VA 23238		
	Proposed Use Business, B (No Change)	Current Use Business, B	Existing Buildings on Property Interior Demolition of Existing Building
Proposed Occupant Load (Commercial) 1914	Lot Size	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District		
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance
	Side Setback	Side Setback	Census Track	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: Howard Dunn Phone 610-368-5402

Email: hdunn@gilbaneco.com

<b>CONTRACTOR INFORMATION</b>	Contractor Gilbane Building Co.	Phone (804) 782-6518
	Address 1001 Boulders Parkway, Suite 101, Richmond, VA 23225	
	Contractor License Number	Type

<b>Description of Work</b>	<b>Scope of Work:</b> Demolition of existing interior partitions 4 floor, 150,000sf office building, including removal of four(4) roof top units and demolition of all gang bathrooms.				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	4	150,000	142,000	8,000	N/A

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

<b>VALUE OF WORK</b>		Application Fee \$ <u>TBD</u>
Building	\$719,000 <i>*Cost included in BP-2017-00168**</i>	Septic/Well Fee \$ _____
<i>Excludes All Trades Permits</i>		State Levy Fee \$ _____
		Zoning Fee \$ _____
		Total \$ _____

*fees collected under* →

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 Howard L. Dunn

**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 3.27.17

Application Date: 1/26/17

Application Accepted: BP-2017-00063

Old Map Number: 42-1-0-50-0

GPIN: 6767-03-4917

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 3001 River Rd. W. Goochland, VA 23063	District Goochland, VA 23063
Owner Goochland Free Clinic & Family Services	Phone # 804-556-6260
Address P.O. Box 116, Goochland, VA 23063	
Proposed Use Offices, Family Services	Current Use N/A
Proposed Occupant Load (Commercial) 290	Existing Buildings on Property N/A
Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

TO BE COMPLETED BY ZONING DEPARTMENT

Subdivision None	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: N/A	Date Paid: N/A
New Street Address ---		Zoning District B-2	
Front Setback 55' from Road	Center Line Setback ---	Rear Setback 30'	C.U. Permit N/A
Side Setback 10'	Side Setback 10'	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: 1/31/17

Applicant/Contact: Mike Ferrara Phone: 804-282-5300

Email: mferrara@houriganconstruction.com

Contractor Hourigan Construction	Phone 804-282-5300
Address 411 East Franklin St., Suite 400, Richmond, VA 23219	
Contractor License Number 2701010019A	Type Class A
	Expiration 5/31/18

Description of Work Scope of Work: Goochland Free Clinic & Family Services Construction to consist of construction of a 1-story facility w/ offices, medical offices, clothes closet, food pantry, etc.				
SEWER Public/Private	WATER Public/Private	# of Bathrooms 6		
# of Floors 1	Total Sq. Ft. 19,827	Finished Sq. Ft. 19,827	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	\$2,053,000
Excludes All Trades Permits	

Application Fee	\$ <del>19,495.00</del> 19,495.00
Zoning Fee	\$ 100.00
Septic/Well Fee	\$
State Levy Fee	\$ 389.91
-RED Total	\$ 19,985.41

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

Signature of Applicant: [Signature]

# BUILDING PERMIT APPLICATION

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

TM: 62-32-0-9-0

Application Date: 3/7/17

Application Accepted: BP-2017-00182

GPIN: 7704-57-7074

Issued: 3.23.17

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 608 CROSS RIDGE LANE		District
	Owner WIS: Julie CABRAL		Phone #
	Address 608 CROSS RIDGE LANE		
	Proposed Use	Current Use	Existing Buildings on Property
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Devonshire Monark Woods	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 5'	C.U. Permit N/A	Variance N/A
	Side Setback 5'	Side Setback 5'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Boyd Date: 3/15/17

Applicant/Contact: J. FARRAR PACE Phone: 804-767-0775

Email: FPACE@JPA.COM

CONTRACTOR INFORMATION	Contractor JPA Company		Phone	
	Address 8711 WEST BROAD ST.			
	Contractor License Number 2701005553	Type CLASS A	Expiration 10/31/17	

Description of Work	Scope of Work: GUNITE Swimming Pool - w/ auto. pool cover				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. 896	Finished Sq. Ft.	Unfinished Sq. Ft. 896	# of Bedrooms

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

VALUE OF WORK	
Building	\$45,000
Excludes All Trades Permits	

Application Fee	\$ 214.50
Zoning Fee	\$ 23.00
Septic/Well Fee	\$ —
State Levy Fee	\$ 4.29
RLD	\$ —
<b>Total</b>	<b>\$ 243.79</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.

X

**BUILDING PERMIT APPLICATION**  
 Goochland County Building Inspection Department  
 P O Box 119  
 Goochland VA 23063  
 (804) 656-5815 Fax (804) 556-5651 TDD 711 Va Relay

Application Date: 03/09/17

Application Accepted: *BP-2017-00206*

Old Map Number: *6-4-0-5-0*

GPIN: *6832-88-7192*

*Issued: 3-20-17*

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

<b>OWNER INFORMATION</b>	Site Address 4275 Hadensville Farm Rd, Mineral VA, 23117			District		
	Owner Daniel and Sandra Carlson			Phone # 267-303-6822		
	Address 4275 Hadensville Farm Rd, Mineral VA, 23117					
	Proposed Use Home		Current Use Home	Existing Buildings on Property Single Home		
	Proposed Occupant Load (Commercial) No change (3 bed, 2 bath)		Acreage 5.05	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>TO BE COMPLETED BY ZONING DEPARTMENT</b>	Subdivision		Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Paid:	
	New Street Address			Zoning District		
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit	Variance	
	Side Setback	Side Setback	C O A		Flood Zone	
	APPROVED <input type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:					
	This application requires two copies of a site plan of the property showing the dimensions and shape of parcels, all new work and existing structures and setback distances from the front, sides and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.					

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

Applicant/Contact: Sandra Carlson Phone 267-303-6822

Email: skathleencarlson@gmail.com

<b>CONTRACTOR INFORMATION</b>	Contractor None			Phone	
	Address				
	Contractor License Number			Type	Expiration

<b>Description of Work</b>	<b>Scope of Work:</b> 1) Addition of two new windows into the concrete basement walls. 2) Basement insulation with polystyrene panels. 3) Addition of a non-weight bearing wall in basement to create storage area. 4) Drywall covering of all walls (See attached sheet for additional details) - <i>interior remodel</i>					
	SEWER Public/Private		WATER Public/Private		# of Bathrooms	
	# of Floors 2, No change		Total Sq. Ft. 2424 (incl. main floor/basement/garage)	Finished Sq. Ft. 1808 (1220 main floor+588 basement)	Unfinished Sq. Ft. 616 (garage)	# of Bedrooms 3, No change
	2, No change					

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

<b>VALUE OF WORK</b>		Application Fee \$ 30.00
<b>Building</b>	\$2000	Zoning Fee \$
<i>Excludes All Trades Permits</i>		Septic/Well Fee \$
		State Levy Fee \$ 0.60
		<b>RLB Total \$ 30.60</b>

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

Signature of Applicant *Sandra Carlson*

**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: 3-14-17  
 Application Accepted: BP-2017-00202  
 Old Map Number: 45-1-0-98-A  
 GPIN: 6797-98-4525

~~#~~ Issued: 3-20-17

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

OWNER INFORMATION	Site Address <u>1016 Three Chopt Road</u>		District
	Owner <u>Richard Uber</u>		Phone # <u>804-919-3323</u>
	Address <u>4521 E. Seminary Ave.</u>		
	Proposed Use <u>residential</u>	Current Use <u>residential</u>	Existing Buildings on Property <u>1 house 2 sheds</u>
	Proposed Occupant Load (Commercial)	Acreage <u>4.03</u>	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>	
	New Street Address		Zoning District <u>A-2</u>		
	Front Setback <u>25' from RCL</u>	Center Line Setback	Rear Setback <u>35'</u>	C.U. Permit <u>N/A</u>	Variance <u>N/A</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	COA <u>N/A</u>	Flood Zone <u>N/A</u>	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* Non conforming front setback. Stop work cannot be closer than existing stoop.</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: 3/17/17

Applicant/Contact: Richard Uber Owner Contracting Phone: (804) 929-6059  
 Email:

CONTRACTOR INFORMATION	Contractor	Phone
	Address <u>4521 E. Seminary Ave Richmond, VA. 23227</u>	
	Contractor License Number	Type Expiration

Description of Work	Scope of Work: <u>add rear deck 16' x 28'</u> - repair existing front stoop + extend portico <u>add rear dormer w/in structure 6' x 28'</u> <u>interior remodel of bathroom + kitchen</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>2.5</u>	
	# of Floors <u>2</u>	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft. <u>616</u>
			# of Bedrooms <u>4</u>	

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

VALUE OF WORK		Application Fee	\$ <u>192</u>
Building	\$ <u>4000.00</u>	Zoning Fee	\$ <u>2500.00</u>
Excludes All Trades Permits		Septic/Well Fee	\$
		State Levy Fee	\$ <u>384</u>
		RED	\$ <u>22084</u>

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

Signature of Applicant: [Signature]

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

Issued 3.17.17

Application Date: 3.17.17  
 Application Accepted: BP-2017-00209  
 Old Map Number: 5-22-0-6-0  
 GPIN: 6814-92-5531

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 5400 Broad Street Rd		District	
	Owner Bill - Terri Ervi		Phone # 804-457-2132	
	Address 5400 Broad Street Rd			
	Proposed Use Screen Room to Solid Wall Room	Current Use Screen Room	Existing Buildings on Property	
Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
New Street Address		Zoning District		
Front Setback	Center Line Setback	Rear Setback	C.U. Permit	
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: Joe Henley jenkins@totalremodelingsystems.com Phone: 585-455-2505  
 Email: HenleyJ@totalremodelingsystems.com

CONTRACTOR INFORMATION	Contractor Total Remodeling Systems	Phone 540-678-3700
	Address 118 Creekside Ln, Winchester VA 22601	
	Contractor License Number 2705127901	Type A

Description of Work	Scope of Work: Putting <del>solid walls</del> <sup>windows</sup> in an existing screen room 12x12 convert existing screen porch into sun room # of Bathrooms			
	SEWER Public/Private	WATER Public/Private	Finished Sq. Ft.	Unfinished Sq. Ft.
	# of Floors	Total 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	\$ 25,000
Excludes All Trades Permits	

Application Fee	\$ 124.50
Zoning Fee	\$
Septic/Well Fee	\$
State Levy Fee	\$ 2.99
<del>Fee</del>	\$ 126.99

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 M. Hules

**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: 3-14-17  
 Application Accepted: BP-2017-00204  
 Old Map Number: 60.4.0.6.0  
 GPIN: 6084-28-1551

~~XXXXXX~~ Issued 3-17-17

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

OWNER INFORMATION	Site Address <u>639 Lee Rd</u>		District	
	Owner <u>John + Cabell Gorman</u>		Phone #	
	Address <u>639 Lee Rd.</u>			
	Proposed Use <u>Porch</u>	Current Use <u>-</u>	Existing Buildings on Property <u>House</u>	
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>None</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>N/A</u>	Date Paid: <u>N/A</u>
	New Street Address		Zoning District <u>A-2</u>	
	Front Setback <u>75' From Row</u>	Center Line Setback	Rear Setback <u>35'</u>	C.U. Permt <u>N/A</u> Variance <u>N/A</u>
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	C O A <u>N/A</u>	Flood Zone <u>N/A</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer [Signature] Date 3/15/17

Applicant/Contact: Sycamore Building LLC / David Ziletti Phone (804) 690-7791  
 Email: buena.vista@verizon.net

CONTRACTOR INFORMATION	Contractor <u>Sycamore Building LLC</u>	Phone <u>(804) 359-0111</u>
	Address <u>PO Box 14648 Richmond, VA 23221</u>	
	Contractor License Number <u>2705103513</u>	Type <u>Class A</u> Expiration <u>2/28/18</u>

Description of Work	Scope of Work: <u>Construct covered Front Porch 200 sq ft</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	<u>1</u>	<u>200 sq ft</u>	<u>-</u>	<u>200 sq ft</u>	<u>-</u>

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

VALUE OF WORK Building <u>39,000</u> Excludes All Trades Permits		Application Fee <u>\$187.50</u> Zoning Fee <u>25.00</u> Septic/Well Fee \$ State Levy Fee <u>\$3.75</u> <b>Total: \$216.25</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 Sycamore Building LLC by [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 3.17.17

Application Date: 3.14.17  
 Application Accepted: BP-2017-00203  
 Old Map Number: 4-1-0-25-C  
 GPIN: 6803-62-4075

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: 4551 Pryme Rd		District	
	Owner: Ida Mae Melton		Phone #: 804-457-4001	
	Address: Columbia VA. 23038			
	Proposed Use	Current Use	Existing Buildings on Property: 4	
	Proposed Occupant Load (Commercial)	Acreage: 4.5	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: No		Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	New Street Address		Amount: _____	
	Date Paid: _____		Zoning District: A-1	
	Front Setback: 75' from Row	Center Line Setback: _____	Rear Setback: 35'	C.U. Permit: _____
	Variance: _____	Side Setback: 20'	Side Setback: 20'	Flood Zone: _____
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Floyd Date: 3/15/17

Applicant/Contact: \*\*\* Dale Phone: 399-7733  
 Email:

CONTRACTOR INFORMATION	Contractor: <u>owner</u>		Phone	
	Address			
	Contractor License Number		Type	Expiration

Description of Work	Scope of Work: <u>Family Room Addition</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. <u>108</u>	Finished Sq. Ft. <u>108</u>	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: 18000.00  
 Excludes All Trades Permits

Application Fee	\$ <u>93.00</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$ _____
State Levy Fee	\$ <u>1.86</u>
<b>TOTAL</b>	<b>\$ <u>119.86</u></b>

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

Signature of Applicant: Ida Mae Melton

AP-2017-00210  
Issued 3/17/17



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 FAX: (804) 556-5654

Office Use Only

Application File Date: <u>3/17/17</u>	Application No.: <u>AP-2017-00210</u>	Fee: \$25.00
Zoning Approval: Yes <input checked="" type="checkbox"/>	No: <input type="checkbox"/>	Date: <u>3/17/17</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: Robert A. Jones  
 Address: 4900 Brunel St. Rd  
Louisiana, VA. 23093  
 E-mail: beemanstoyou@aol.com

Telephone: N/A  
 Cell phone: 804-385-7213  
 FAX: N/A

Name of Applicant: Robert A. Jones  
 Address: 4900 Brunel St. Rd  
Louisiana, VA. 23093  
 E-mail: beemanstoyou@aol.com

Telephone: N/A  
 Cell phone: 804-385-7213  
 FAX: NA

Property Information

Street Address: 4900 Brunel St. Rd  
 GPIN Number: 6823-73-1110  
 Existing Use: \_\_\_\_\_

Zoning: \_\_\_\_\_  
 Acreage: 20.56

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): 15310 sq. ft
2. Written Description of Proposed Physical Improvements  
48x32 Barn w/ Loft on 6x4 posts

**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 3.17.17

Application Date: 3.13.17  
 Application Accepted: BP-2017-00195  
 Old Map Number: 42-22-0-5-0  
 GPIN: 6767-13-9163

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: 2938 <sup>E</sup> River Rd West (Old Clerks Office)		District		
	Owner: County of Goochland		Phone #: 556-5800		
	Address: 1800 Sandy Hook Rd, PO Box 100, Goochland, VA 23063				
	Proposed Use	Current Use	Existing Buildings on Property		
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: N/A	Proffer: <input type="checkbox"/> Yes <input 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 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: 3/17/2017

Applicant/Contact: Jim Haskell Sermat Construction Services Phone: 264-4800  
 Email: jhaskell@sermat.com

CONTRACTOR INFORMATION	Contractor: Sermat Construction Svs	Phone: 264-4800
	Address: 2419 Westwood Ave, Richmond, VA 23230	
	Contractor License Number: 2701 0025490 A - BLD	Type: class A

Description of Work	Scope of Work: Insulate, install ceiling framing, install drywall, <del>electrical</del> , <del>plumbing</del> , flooring				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	TWO COPIES OF CONSTRUCTION DRAWINGS AND TWO COPIES OF THE SITE PLAN MUST ACCOMPANY THIS PERMIT APPLICATION.				

VALUE OF WORK		fees waived; county project	Application Fee \$ _____
Building	\$26,000		Zoning Fee \$ _____
Excludes All Trades Permits			Septic/Well Fee \$ _____
			State Levy Fee \$ _____
			RLD \$ _____

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

Signature of Applicant: *[Signature]*

# BUILDING PERMIT APPLICATION

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

TM: 31-1-0-53-B

Application Date: 3.13.17

Application Accepted: BP-2017-00196

GPIN: 60769-86-6663

Issued: 3.15.17

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 2549 Broad St., Rd Gum Spring Va 23065		District		
	Owner Larry W. & Kimberly P. Ferrell		Phone # 804-387-7837		
	Address 2549 Broad St., Rd Gum Spring Va 23065				
	Proposed Use Pool house	Current Use	Existing Buildings on Property House & 2 Sheds		
	Proposed Occupant Load (Commercial)	Acreage 2.04	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision None		Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	New Street Address		Zoning District A-2		
	Front Setback 100' From Row	Center Line Setback	Rear Setback 5'	C.U. Permit	Variance
	Side Setback 5'	Side Setback 5'	COA	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David [Signature] Date: 3/14/17

Applicant/Contact: Larry W. Ferrell	Phone 804-387-7837
Email: * N/A Kjpferrell@aol.com	

CONTRACTOR INFORMATION	Contractor Larry W. Ferrell - owner	Phone 804-387-7837
	Address	
	Contractor License Number	Type

Description of Work	Scope of Work: Building pool house / <del>room</del> studio				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.	# of Bedrooms
	1	629	576	53	-

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

VALUE OF WORK	
Building	\$57,600
Excludes All Trades Permits	

Application Fee	\$271.20
Zoning Fee	\$25.00
Septic/Well Fee	\$
State Levy Fee	\$5.42
<del>...</del>	\$
<b>total</b>	<b>\$301.62</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.

**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 3-3-2017*

Application Date: **3.1.17**

Application Accepted: **BP-2017-00167**

Old Map Number: **48.4.0.B.0**

GPIN: **7727-50-9395**

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

OWNER INFORMATION	Site Address <b>1193 Three Chopt Rd. Rich, VA</b>		District	
	Owner <b>Vernelle Burton 23233</b>		Phone # <b>804.784.5288</b>	
	Address			
	Proposed Use	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:
	New Street Address		Zoning District	
	Front Setback	Center Line Setback	Rear Setback	C.U. Permit
	Side Setback	Side Setback	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: \_\_\_\_\_ Phone \_\_\_\_\_

Email: \_\_\_\_\_

CONTRACTOR INFORMATION	Contractor <b>Valentine Construction</b>		Phone <b>804.784.4134</b>	
	Address <b>2055 Valpark Dr. Oilville, VA 23129</b>			
	Contractor License Number <b>2701038490</b>	Type <b>A - H/H</b>	Expiration <b>4.30.17</b>	

Description of Work	Scope of Work: <b>demo SFD -&gt; Ashlake Rd Landfill</b>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft.	Finished Sq. Ft.	Unfinished Sq. Ft.
			# of Bedrooms	

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

VALUE OF WORK	
Building	<b>4000.00</b>
<i>Excludes All Trades Permits</i>	

Application Fee	\$ <b>30.00</b>
Zoning Fee	\$ _____
Septic/Well Fee	\$ _____
State Levy Fee	\$ <b>.600</b>
<b>Total</b>	\$ <b>30.600</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 *Vernelle Burton*

received  
3-6-17

**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: 3-6-17  
Application Accepted: BP-2017-00179  
GPIN: 7707-86-7049  
Issued: 3-14-17

TAX MAP # 46-27-A-7-0

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

OWNER INFORMATION	Site Address <u>2367 Wheatland Dr. Manakin Sabot VA</u>		District <u>23103</u>	
	Owner <u>Lewis C. Nash</u>		Phone # <u>804-338-6692</u>	
	Address <u>2367 Wheatland Dr</u>			
	Proposed Use <u>Pool</u>	Current Use	Existing Buildings on Property	
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Wheatlands</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: <u>—</u>	Date Paid: <u>—</u>
	New Street Address <u>—</u>		Zoning District <u>RR</u>	
	Front Setback <u>55' from ROW</u>	Center Line Setback <u>—</u>	Rear Setback <u>5'</u>	C.U. Permit <u>—</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	C O A <u>—</u>	Flood Zone <u>—</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			

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

Planning & Zoning Officer: David Floyd Date 3/13/17

Applicant/Contact: Lewis C. Nash Owner Phone  
Email:

CONTRACTOR INFORMATION	Contractor <u>Owner</u>	Phone <u>804-338-6692</u>
	Address <u>2367 Wheatland Dr.</u>	
	Contractor License Number	Type Expiration

Description of Work	Scope of Work: <u>Install 30x16' inground swimming pool w/ Fence Barrier</u>			
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	
	# of Floors	Total Sq. Ft. <u>480</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>480</u>

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

VALUE OF WORK	
Building	<u>15,000.<sup>00</sup></u> <del>12,000</del>
Excludes All Trades Permits	

Application Fee	\$ <u>79.50</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$ <u>—</u>
State Levy Fee	\$ <u>1.39</u>
<b>RLD Total</b>	<b>\$ <u>106.09</u></b>

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

24-11 PELLUSAC 10 INCLAVE 12x14 CARRYING AREA BASE

# 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: 12-2-16

Application Accepted: BP-2016-00960

GPIN: 6831-437100

Issued: 12.9.16

TM# 12-1-0-71-E

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 4035 Cedar Plains Rd, Sandy Hook 23153		District 23153
	Owner Joseph Athey		Phone # 804 457-3444
	Address 4035 Cedar Plains Rd		
	Proposed Use	Current Use	Existing Buildings on Property
	Proposed Occupant Load (Commercial)	Acreage	Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	Date Paid:	
	New Street Address		Zoning District A-1		
	Front Setback 75' From ROW -	Center Line Setback	Rear Setback 35'	C.U. Permit N/A	Variance N/A
	Side Setback 20'	Side Setback 20'	COA N/A	Flood Zone N/A	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				

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

Planning & Zoning Officer: David Ford Date: 12/7/16

Applicant/Contact: Joseph Athey Phone: 804) 457-3444  
 Email:

CONTRACTOR INFORMATION	Contractor <u>OWNER</u>	Phone
	Address <u>4035 Cedar Plains Rd, Sandy Hook 23153</u>	
	Contractor License Number	Type

Description of Work	Scope of Work: <u>construct 14' x 16 addition to front of house for sitting room</u>				
	SEWER Public/Private	WATER Public/Private	# of Bathrooms		
	# of Floors	Total Sq. Ft. <u>224392</u>	Finished Sq. Ft. <u>224</u>	Unfinished Sq. Ft. <u>168</u>	# of Bedrooms

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

VALUE OF WORK <u>12,220.00</u>	
Building	<u>5,000</u> <u>16,940.00</u>
Excludes All Trades Permits	

Application Fee	\$ <u>67.44</u>
Zoning Fee	\$ <u>25.00</u>
Septic/Well Fee	\$
State Levy Fee	\$ <u>1.35</u>
<b>R&amp;D Total</b>	\$ <u>93.79</u>

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

Joseph Athey

ISSUED 3/13/17  
AP-2017-00197



### ZONING COMPLIANCE APPLICATION COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office  
P.O. Box 103

Goochland, VA 22063

Phone: (804) 556-5860

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

FAX: (804) 556-5654

#### Office Use Only

Application File Date: <u>3/13/17</u>	Application No.:	Fee: \$25.00
Zoning Approval: Yes <u>[Signature]</u>	No:	Date: <u>3/13/17</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: Charnda Randolph  
 Address: 3467 County Line Rd  
Kents Store VA 23084  
 E-mail: charnda.randolph@gmail.com

Telephone: 804-516-0675  
 Cell phone: 804-516-0675  
 FAX: \_\_\_\_\_

Name of Applicant: Charnda Randolph  
 Address: 3467 County Line Rd  
Kents Store, VA 23084  
 E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_  
 Cell phone: 804-516-0675  
 FAX: \_\_\_\_\_

#### Property Information

Street Address: 3467 County Line Rd  
 GPIN Number: 6822-09-6770  
 Existing Use: Home - Residential

Zoning: A-1  
 Acreage: 2.8

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): 240
2. Written Description of Proposed Physical Improvements  
metal shed 12x20'