

Dinwiddie County Building Inspections Commercial/Residential Building Permit

P.O. Drawer 70, 14010 Boydton Plank Rd, Dinwiddie VA 23841
804-469-4500 opt # 6



The undersigned applicant hereby applies for a permit to do the following work in full compliance with the ordinances of the County of Dinwiddie and the Virginia Uniform Statewide Building Code. This permit will be void if work does not commence within six months from the date of issuance. **NO WORK IS AUTHORIZED UNTIL PERMIT HAS BEEN APPROVED AND ISSUED; DOUBLE FEE WILL BE CHARGED IF WORK IS STARTED WITHOUT PERMIT.** Per Code 113.1.2 Virginia Construction Code: DUTY TO NOTIFY - When construction reaches a stage of completion that requires an inspection, the permit holder shall notify the building official.

LOCATION ADDRESS OF WORK 3415 LEONARD'S LANE SUTHERLAND VA 23884
Number Street Name

VA USBC USED: 2015 Sub. Name _____ Sec# _____ Lot# _____ PERMIT # 21-338

Single-family Residential _____ Multi-family Residential _____ Number of units _____ Commercial Ag X

Description of Work Remodel & Addition for winery

ESTIMATED COST OF WORK: 200,000 SQUARE FOOTAGE 1st Floor 2250 2nd Floor 1140

PROPERTY OWNER Thibault Ent. Basement _____ Deck X Porch X Garage _____

Mailing Address 206 BATTERY PLACE Col. Hgts VA 23034 Phone 804-721-3086

CONTRACTOR Over the Edge Ltc Email kthibault1@gmail.com

Mailing Address 14501 Jefferson Davis Hwy Chesapeake VA 23031 Phone 804-721-3086

State Contractor License 2705066016 Expiration Date 12-31-2024 Dinwiddie Business License _____

I hereby certify that I am the owner or that I have the authority of the owner to make application, that the information is correct and that the use and construction shall conform to the County Health, Building and Zoning ordinances which are imposed on the property.

William Kirk Thibault Signature of Owner/Authorized Agent 3-16-2021 Date

PROPERTY OWNER'S WRITTEN STATEMENT:

I certify that I am the owner of the tract or parcel of land indicated above and I have applied for this permit. Also I certify that this is my principal residence and actually live there or will live there when work is complete. I certify that I am familiar with the prerequisites of Section 54.1-1111 of the Code of Virginia and I am not subject to licensure as a contractor.

William Kirk Thibault Signature of Owner 3-16-2021 Date

MECHANICS LIEN AGENT INFORMATION:

NAME _____ CHECK HERE IF NONE DESIGNATED: _____

ADDRESS _____ PHONE _____

ZONING ADMINISTRATOR	PERMIT FEES	BUILDING INSPECTIONS
TAX MAP# <u>7-15 A</u> ZONED <u>R-R, Agriculture</u>	SQ FT x .20 _____	OTHER THAN A STRUCTURE
MINIMUM YARD REQUIREMENTS <u>Existing Bldg.</u>	SQ FT x .15 _____	JOB COST x 1% _____
FRONT <u>80</u> FT FROM CENTERLINE OF ROW	Plus (+) \$75.00 Base Fee <u>\$ 75.00</u>	+BASE FEE <u>\$ 75.00</u>
<u>35</u> FT ONE SIDE AND	Sub Total <u>W/ FEES</u>	SUB TOTAL _____
<u>70</u> FT TOTAL BOTH SIDES	State Tax 2% _____	STATE TAX 2% _____
REAR <u>75</u> FT FROM REAR PROP LINE	FEE PAID _____	TOTAL FEE= _____
APPROVED/DISAPPROVED _____	DATE PAID _____	
FEMA 51053C0 <u>150B</u> DIST# <u>2</u>		
<u>Zone X</u>		

Mark David ZONING ADMINISTRATOR May 21 2021 DATE

[Signature] CERTIFIED BUILDING OFFICIAL 5/25/21 DATE APPROVED

COMMENTS _____