

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 3 1 2021

THANKS PALBOY MALE

# **Planning and Inspection Department**

BJ2021-131

PROJECT NAME: Frasca garage

SITE ADDRESS: 419 QUAIL LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/09/2021

EXPIRES: 12/06/2021

APPLICANT:

FRASCA, MICHAEL J

419 Quail Lane

Kill Devil Hills, NC 27948

OWNER:

FRASCA, MICHAEL J

419 Quail Lane

Kill Devil Hills, NC 27948

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

Lot(s):

PARCEL:

PIN:

988316831608

Parcel Number: 004890010

Address:

419 QUAIL LN KILL DEVIL HILLS

Zoning:

Addition:

WHISPERING PINES SEC 2 & 3

Block:

F

10

Legal Description:

FEES:

Paid

Due

**BUILDING AREA:** 

Res. Building Permit Fee

\$600.00

\$0.00

Resdiential Unheated (.40)

1500 Sq. Ft

Totals:

\$600.00

\$0.00

PROJECT DESCRIPTION: Construct 30'x50' tube steel meatal sheathed garage building. SEE CONDITIONS SECTION OF

THIS PERMIT FOR SPECIAL INSPECTIONS REQUIREMENTS.

PROJECT NAME: Frasca garage

SITE ADDRESS: 419 QUAIL LN KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 06/09/2021

EXPIRES: 12/06/2021

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	II
CONSTRUCTION COST	28000.00
GARAGE (SQFT)	1500
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family

#### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling

Final

Rough In

Zoning Final

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* NOTE: On site welding as noted in engineered drawings shall be inspected by a certified welding inspector, OR, by the design engineer of record or their representative. A final letter of acceptance will be required by the engineer of record prior to scheduling of the final inspection. Inspection of all tube steel construction and attachment of metal building panels from the top of the concrete slab and up, is the responsibility of the designer of record.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Zoning Final Inspection is required.



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# **Planning and Inspection Department**

**BJ2021-182** 

**PROJECT NAME: Timothy Mickens** 

SITE ADDRESS: 511 BURNS DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/26/2021

**EXPIRES: 02/22/2022** 

APPLICANT:

Mickens, Timothy

511 Burns Drive

Kill Devil Hills, NC 27948

252-256-3868

OWNER:

Mickens, Timothy

511 Bums Drive

Kill Devil Hills, NC 27948

252-256-3868

CONTRACTOR:

SAME AS OWNER

UNKNOWN

UNKNOWN, XX 00000

License: Same as Owner

Expires: 12/31/2021

PARCEL:

PIN:

988316728860

Parcel Number: 005023000

Address:

511 BURNS DR KILL DEVIL HILLS

Zoning:

Addition:

OCEAN ACRES TRACT 3 SEC 2

Block:

Н

Lot(s): 45

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Proposed office addition and concrete patio

....

PROJECT NAME: Timothy Mickens SITE ADDRESS: 511 BURNS DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/26/2021

EXPIRES: 02/22/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
HEALTH DEPARTMENT PERMIT #	KDHWWTP
CAMA PERMIT	Υ
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	32000.00
LOT COVERAGE	36.40
LIVING SPACE (SQFT)	150
TOTAL SQUARE FOOTAGE	150
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

In-Slab Plumbing Insulation Slab/Foundation/Piling Final Framing Zoning Final Rough In

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Foundation survey will be required prior to rough-in inspection.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.



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# **Planning and Inspection Department**

BJ2021-179

PROJECT NAME: H and K Lots - Frank Soles

SITE ADDRESS: 305 CAMERON ST KILL DEVIL HILLS

**BUILDING JOIN** 

ISSUED: 08/24/2021

**EXPIRES: 02/20/2022** 

APPLICANT:

Sandy Bottom Homes 400 DaVinci Lane

kitty hawk, nc 27949

OWNER:

H & K Lots LLC

400 Da Vinci Lane kitty hawk, nc 27949 757-448-8162

757-448-8162

**GENERAL BUILDING-LIMITED:** 

SANDY BOTTOM HOMES

400 DaVinci Lane kitty hawk, nc 27949 757-448-8162

License: 67524

Expires: 01/01/2022

PARCEL:

PIN:

987516940642

Parcel Number:

000154000

Address:

305 CAMERON ST KILL DEVIL HILLS

Zoning:

Addition:

**ORVILLE BEACH WEST** 

Block:

0

Lot(s): 38

Legal Description:

Totals :	\$1,832.75	\$0.00	Covered Porches/Decks	75 SQFT
Land Disturbing	\$100.00	\$0.00	# of Temporary Poles	1 EA
Res. Building Permit Fee	\$1,476.50	\$0.00	(.75)	
Covered Porch Residential	\$56.25	\$0.00	Residential Heated Space	1910 sq. Ft.
Open Deck Fee	<b>\$150.0</b> 0	\$0.00	Open Decks	1 EA
T-Pole	\$50.00	\$0.00	Resdiential Unheated (.40)	110 Sq. Ft
FEES:	Paid	Due	BUILDING AREA:	

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges

Water Tap #: T24790

PROJECT NAME: H and K Lots - Frank Soles

SITE ADDRESS: 305 CAMERON ST KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/24/2021

EXPIRES: 02/20/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S8-5516
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	225000.00
LOT COVERAGE	32.70
LIVING SPACE (SQFT)	1910
COVERED PORCHES/DECKS (SQFT)	75
STORAGE (SQFT)	110
OPEN DECK (SQFT)	131
TOTAL SQUARE FOOTAGE	2226
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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### **Planning and Inspection Department**

BJ2021-172

PROJECT NAME: RM Saunders 30 Bedroom

SITE ADDRESS: 1305 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/19/202

**EXPIRES: 02/15/2022** 

APPLICANT:

VISION LAND GROUP LLC

907 N VA Dare Trail Kill Devil Hills, NC 27948 OWNER:

VISION LAND GROUP LLC

907 N VA Dare Trail Kill Devil Hills, NC 27948

CONTRACTOR: SAUNDERS, RM / R M SAUNDERS GENERAL

CONTRACTORS INC

PO Box 1922

Kill Devil Hills, NC 27948

252-207-8710

**GENERAL BUILDING - UNLIMITED:** 

SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

License: 32380

Expires: 01/01/2022

PARCEL:

PIN:

989309067689

Parcel Number: 004664000

Address:

1305 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL BEACH SEC 1 REVISED

Block:

В

Lot(s): 3R

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$11,739.00	\$0.00	Residential Heated Space	15652 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)	
Covered Porch Residential	\$108.00	\$0.00	Covered Porches/Decks	1916 SQFT
Covered Porch Residential	\$1,437.00	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	144 SQFT
Totals	: \$13,534.00	\$0.00	Open Decks	1 EA

PROJECT DESCRIPTION: New 30 Bedroom Single Family Dwelling Kill Devil Hills

Water Charges

Water Tap #: 124759

Printed by: Marty Shaw on: 08/23/2021 09:09 AM

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**Permit** 

PROJECT NAME: RM Saunders 30 Bedroom

SITE ADDRESS: 1305 VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/19/2021

EXPIRES: 02/15/2022

#### **DETAILS**

Name	Value
# OF DUMPSTERS	2.00
ZONING DISTRICT	OIR
EDONT VADD CETRACK	20

FRONT YARD SETBACK 30

REAR YARD SETBACK CAMA
# PARKING 30

SPACES/BEDROOM
CAMA PERMIT
Y

CAMA EXEMPTION N

FLOOD ZONE VE BASE FLOOD ELEVATION 10

SUBSTANTIAL

IMPROVEMENT

PURPOSE Residential New

NO

CONSTRUCTION TYPE V

CONSTRUCTION COST 3400000.00

LIVING SPACE (SQFT) 15652 COVERED 1916

PORCHES/DECKS (SQFT)

ENGINEER AND LICENSE NUMBER

ARCHITECT NAME AND

LICENSE NUMBER

CULVERT N
DRIVEWAY INVERT 2 Y

OCCUPANCY TYPE

Slab/Foundation/Piling

Raymond Pate 13018

Michael Florez 14163

One & Two Family

Dwelling

# **REQUIRED INSPECTIONS**

Final

In-Slab Plumbing Insulation

Framing Zoning Final

Rough In



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# Planning and Inspection Department

BJ2021-171

PROJECT NAME: RM Saunders 27 Bedroom

SITE ADDRESS: 1307 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/23/202

**EXPIRES: 08/18/2022** 

APPLICANT:

VISION LAND GROUP LLC

907 N VA Dare Trail Kill Devil Hills, NC 27948 OWNER:

VISION LAND GROUP LLC

907 N VA Dare Trail Kill Devil Hills, NC 27948

CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS

PO Box 1922

Kill Devil Hills, NC 27948

480-9477

**GENERAL BUILDING - UNLIMITED:** 

SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

License: 32380

Expires: 01/01/2022

PARCEL:

PIN:

989309069604

Parcel Number: 004665000

Address:

1307 VA DARE TRL S KILL DEVIL HILLS

Zoning:

В

Addition:

KILL DEVIL BEACH SEC 1 REVISED

Block:

Lot(s): 5R

Legal Description:

Totals:	\$13,625.60	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	(.75)	
Res. Building Permit Fee	\$11,665.60	\$0.00	Residential Heated Space	15520 sq. Ft.
Open Deck Fee	\$150.00	\$0.00	Resdiential Unheated (.40)	64 Sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$1,560.00	\$0.00	Covered Porches/Decks	2080 SQFT
FEES:	Paid	Due	BUILDING AREA:	

PROJECT DESCRIPTION: New 27 Bedroom Single Family Dwelling

Town of Kill Devil Hills Water Charges

Water Tap #: T24156

Printed by : Marty Shaw on: 08/23/2021 08:53 AM

Page 1 of 3

PROJECT NAME: RM Saunders 27 Bedroom SITE ADDRESS: 1307 VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/23/2021

EXPIRES: 08/18/2022

# **DETAILS**

Permit	
Name	Value
# OF DUMPSTERS	2.00
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	15
HEALTH DEPARTMENT PERMIT #	KDHWWTP
# PARKING SPACES/BEDROOM	27
CAMA PERMIT	Υ
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10.0
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3400000.00
LOT COVERAGE	40.10
LIVING SPACE (SQFT)	15520
COVERED PORCHES/DECKS (SQFT)	2080
STORAGE (SQFT)	64
OPEN DECK (SQFT)	240
TOTAL SQUARE FOOTAGE	17904
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Raymond G Pate 13018
CULVERT	N
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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# **Planning and Inspection Department**

BJ2021-177

PROJECT NAME: Benjamin Lusby

SITE ADDRESS: 1800 A2 Saint David Rd Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

APPLICANT:

JETTY CONSTRUCTION

1002 W Dean st

Kill Devil Hills, NC 27948

252-715-1452

OWNER:

LUSBY, BENJAMIN S

1800 St David A2

Kill Devil Hills, NC 27948

**BUILDING LIMITED:** 

JETTY CONSTRUCTION

1002 W Dean st

Kill Devil Hills, NC 27948

252-715-1452

License: 79683

Expires: 01/01/2022

PARCEL:

PIN:

98830927406105

Parcel

Number:

Address:

1800 A2 Saint David Rd Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Hamilton Cay Condo

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION:

Replace flooring in master bedroom and bathroom, living room, dining room, hallway/Update

bathrooms

M 2/19/21 Chul # 3742

PROJECT NAME: Benjamin Lusby

SITE ADDRESS: 1800 A2 Saint David Rd Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	X	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	28000.00	
CULVERT	N	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	Residential	
	REQUIRED INSPECTIONS	
Rough In	Zoning Final	
Final		
	CONDITIONS	

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

Contractor or Authorized Agent: \_

Kyv-Hay-

Date: 08 / 16 / 2021



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### **Planning and Inspection Department**

BJ2021-180

**PROJECT NAME: Collins Addition** 

SITE ADDRESS: 300 CLARK ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/20/2021

EXPIRES: 02/16/2022

APPLICANT:

Collins, Paul

340 Canaan CIR

Suffolk, Va 23435 757-376-2701

OWNER:

Collins, Paul

340 Canaan CIR

Suffolk, Va 23435 757-376-2701

CONTRACTOR: Aria Construction and Development, Inc.

PO Box 321

CRESWELL, NC 27928

252-796-7737

**BUILDING-UNLIMITED:** 

Aria Construction and Development, Inc.

PO Box 321

CRESWELL, NC 27928

252-796-7737

License: 78928

Expires: 01/01/2022

PARCEL:

PIN:

988312870485

Parcel

004402000

Number:

Address:

300 CLARK ST W KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS REALTY CORP

Block:

21

Lot(s): 5

Legal Description:

Res. Building Permit Fee

FEES:

Paid

Due

**BUILDING AREA:** 

(.75)

\$483.00

\$0.00

Residential Heated Space

644 sq. Ft.

Totals:

\$483.00

\$0.00

Covered Porches/Decks

80 SQFT

PROJECT DESCRIPTION: new addition on slab adding 1 bedroom, living room and bath, add gravel driveway

PROJECT NAME: Collins Addition SITE ADDRESS: 300 CLARK ST W KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/20/2021

EXPIRES: 02/16/2022

# **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	29678
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	90000.00
LOT COVERAGE	25.76
LIVING SPACE (SQFT)	644
COVERED PORCHES/DECKS (SQFT)	80
TOTAL SQUARE FOOTAGE	724
SURVEYOR NAME AND NUMBER	Carlos F Gomez L-5274
ENGINEER AND LICENSE NUMBER	Carlos Gomez 14071
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



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AUG 20 2021

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### **Planning and Inspection Department**

BJ2021-176

**PROJECT NAME:** Green New House

SITE ADDRESS: 318 BURNS DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/19/2021

EXPIRES: 02/15/2022

APPLICANT:

GREEN, ROBERT P

445 Sawgrass Drive

ALLENTOWN, PA 18104

OWNER:

GREEN, ROBERT P

445 Sawgrass Drive ALLENTOWN, PA 18104

CONTRACTOR: LOWE CUSTOM BUILDERS

4705 SOUTH PAMLICO WAY KILL DEVIL HILLS, NC 27948

252-202-6452

GENERAL:

LOWE CUSTOM BUILDERS

4705 SOUTH PAMLICO WAY

KILL DEVIL HILLS, NC 27948

252-202-6452

License: 55620

Expires: 01/01/2022

PARCEL:

PIN:

988316837946

Parcel Number: 008457000

E

Address:

318 BURNS DR KILL DEVIL HILLS

Zoning:

Addition:

OCEAN ACRES TRACT 3 SEC 1

Block:

Lot(s):

10

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Pool/Hot Tub	\$200.00	\$0.00	Covered Porches/Decks	120 SQFT
Covered Porch Residential	\$90.00	\$0.00	Residential Heated Space	1288 sq. Ft.
Res. Building Permit Fee	\$966.00	\$0.00	(.75)	1200 041111
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$1,306.00	\$0.00		

PROJECT DESCRIPTION: New 2 Bedroom Single Family Dwelling

**PROJECT NAME:** Green New House

SITE ADDRESS: 318 BURNS DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/19/2021

EXPIRES: 02/15/2022

### **DETAILS**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	12.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	220000.00
LOT COVERAGE	38.70
LIVING SPACE (SQFT)	1288
COVERED PORCHES/DECKS (SQFT)	120
TOTAL SQUARE FOOTAGE	1408
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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# **Planning and Inspection Department**

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BJ2021-175

PROJECT NAME: Belcher Elevator

SITE ADDRESS: 408 ARCH ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/18/2021

**EXPIRES: 02/14/2022** 

APPLICANT:

BELCHER, TONY W

5561 N Croatan Highway

Kitty Hawk, NC 27949

OWNER:

BELCHER, TONY W

5561 N Croatan Highway

#185

Kitty Hawk, NC 27949

CONTRACTOR: Gibson, William

PO Box 2622

kitty hawk, nc 27949 252-207-2700

BUILDING:

Gibson, William

PO Box 2622

kitty hawk, nc 27949 252-207-2700

License: 81900

Expires: 09/30/2021

Lot(s):

PARCEL:

PIN:

987516834914

Parcel Number: 000207000

Address:

408 ARCH ST W KILL DEVIL HILLS

Zoning:

Addition:

ORVILLE BEACH WEST

Block:

0

105

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: add elevator shaft and elevator into existing footprint of deck

PROJECT NAME: Belcher Elevator

SITE ADDRESS: 408 ARCH ST W KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/18/2021

EXPIRES: 02/14/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	50000.00
LOT COVERAGE	38.00
SURVEYOR NAME AND NUMBER	Donald E Wood L1324
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling Insulation
Framing Final
Rough In Zoning Final

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



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AUG 13 2021

# **Planning and Inspection Department**

BJ2021-178

PROJECT NAME: Bazinet Outdoor Shower

SITE ADDRESS: 320 CAMERON ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

APPLICANT:

Bazinet, Jeffrey

55 M Street NE

WASHINGTON, DC 20002

OWNER:

Bazinet, Jeffrey

55 M Street NE

WASHINGTON, DC 20002

CONTRACTOR: O'Neal Plumbing Co.

1349 #8 Colington Rd

Kill Devil Hills, NC 27948

**PLUMBING CLASS 2:** 

O'Neal Plumbing Co.

1349 #8 Colington Rd Kill Devil Hills, NC 27948 License: 23928

Expires:

PARCEL:

PIN:

987516845684

Parcel Number: 000138000

Address:

320 CAMERON ST KILL DEVIL HILLS

Zoning:

Addition:

**ORVILLE BEACH WEST** 

Block:

Lot(s): 22

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: 4'x8' outdoor shower on NE side of house

女3500

PROJECT NAME: Bazinet Outdoor Shower

SITE ADDRESS: 320 CAMERON ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-5463
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	JH Miller L-4958
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Framing Final Zoning Final

<sup>\*</sup> This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

<sup>\*</sup> Foundation survey will be required prior to rough-in inspection.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 1 2 2021

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### **Planning and Inspection Department**

BJ2021-174

PROJECT NAME: Santasieri Enclosure Rebuild

SITE ADDRESS: 1705 WYANDOTTE ST KILL DEVIL HILLS

BUILDING JOIN

ISSUED: 08/10/2021

EXPIRES: 02/06/2022

APPLICANT:

Santasieri, Paul

1705 Wyandotte Street

Kill Devil Hills, NC 27948

252-557-5678

OWNER:

Santasieri. Paul

1705 Wyandotte Street Kill Devil Hills, NC 27948

252-557-5678

CONTRACTOR: Shane Clark Construction, LLC

607 Indian Dr.

Kill Devil Hills, NC 27948

252-305-2477

BUILDING:

Shane Clark Construction, LLC

607 Indian Dr.

Kill Devil Hills, NC 27948

252-305-2477

License: 1234567

Expires: 01/31/2022

PARCEL:

PIN:

988409263251

Parcel

002694000

D

Number:

Address:

1705 WYANDOTTE ST KILL DEVIL HILLS

Zoning:

Addition:

HIGH VIEW - HEDRICKS ADD

Block:

Lot(s): 11

Legal Description:

FEES:

**Pald** 

**BUILDING AREA:** Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Resdiential Unheated (.40)

288 Sq. Ft

**Driveway Permit Fee** 

\$50.00

\$0.00

Totals:

\$200.00

\$0.00

PROJECT DESCRIPTION:

reframe 24'14' downstairs storage room, add concrete to existing slab and re pour existing

driveway

PROJECT NAME: Santasieri Enclosure Rebuild

SITE ADDRESS: 1705 WYANDOTTE ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/10/2021

EXPIRES: 02/06/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	23500.00
LOT COVERAGE	31.40
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Slab/Foundation/Piling Final
Framing Zoning Final
Rough In

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Foundation survey will be required prior to rough-in inspection.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



PO BOX 1719 Kill Devil Hills, NC 27948

Phone: 252-449-5318 Fax: 252-441-4102

AUG - 9 2021

# **Planning and Inspection Department**

BJ2021-173

PROJECT NAME: CHILI PEPPERS WALK IN COOLERS AND SHED

ROOF

SITE ADDRESS: 3001 CROATAN HWY N KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/09/2021

**EXPIRES: 02/05/2022** 

APPLICANT:

**CHILI PEPPERS** 

P O BOX 429

KITTY HAWK, NC 27949

OWNER:

CHILI PEPPERS

P O BOX 429

KITTY HAWK, NC 27949

**GENERAL:** 

Self

**UNKNOWN** 

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

988513028956

Parcel Number: 002996000

Address:

3001 CROATAN HWY N KILL DEVIL HILLS

\$450.00

Zoning:

Addition:

VIRGINIA DARE SHORES

Block:

16

Lot(s): 25-30 PT 31

Legal Description:

FEES:	Paid	Due
Accessory Commercial (MIN)	\$150.00	\$0.00
Accessory Commercial (MIN)	\$150.00	\$0.00
Building Permit Fee - Minimum Fee	\$150.00	\$0.00

Totals:

PROJECT DESCRIPTION:

INSTALL 2 WALK IN COOLERS IN REAR YARD, CONSTRUCT SHED ROOF STRUCTURE IN

REAR YARD, REMOVE 329 SQFT OF LOT COVERAGE

\$0.00

PROJECT NAME: CHILI PEPPERS WALK IN COOLERS AND SHED

ROOF

SITE ADDRESS: 3001 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/09/2021

EXPIRES: 02/05/2022

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	7000.00
ACCESSORY STRUCTURE (SQFT)	173
SURVEYOR NAME AND NUMBER	MARTIN BARNETTE L- 3740
ENGINEER AND LICENSE NUMBER	RICK HOUSE C-1955
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly

#### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling Final
Rough In Zoning Final

- \* Foundation survey will be required prior to rough-in inspection.
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Zoning Final Inspection is required.



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# **Planning and Inspection Department**

BJ2021-169

PROJECT NAME: Eaton laundry

SITE ADDRESS: 204 PINE GROVE TRL KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

APPLICANT:

Eaton, William and Angie 210 Windy Peak Loop

Kill Devil Hills, NC 27948

919-717-0954

OWNER:

Eaton, William and Angie 210 Windy Peak Loop Kill Devil Hills, NC 27948

919-717-0954

PLUMBING:

ACTION PLUMBING, INC. 4885 The Woods Road

Kitty Hawk, NC 27949

License: 19207

Expires: 12/31/2021

PARCEL:

PIN:

988312952238

Parcel Number:

005139000

Address:

204 PINE GROVE TRL KILL DEVIL HILLS

Zoning:

Addition:

WHISPERING PINES SEC 1

Block:

C

Lot(s): 7

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Relocate laundry to original closet on top floor

AUG - 6 2021

PROJECT NAME: Eaton laundry

SITE ADDRESS: 204 PINE GROVE TRL KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	1325.00
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Rough In

Zoning Final

Final

- \* Foundation survey will be required prior to rough-in inspection.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 6 2021

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### **Planning and Inspection Department**

BJ2021-167

PROJECT NAME: Kellogg Storage Room

SITE ADDRESS: 300 ATLANTIC ST E KILL DEVIL HILLS

BUILDING JOIN

ISSUED: 08/05/2021

EXPIRES: 02/01/2022

APPLICANT:

KELLOGG SUPPLY CO

**PO BOX 99** 

MANTEO, NC 27954

OWNER:

KELLOGG SUPPLY CO

PO BOX 99

MANTEO, NC 27954

**CONTRACTOR:** Cornerstone Marine & Remodeling

PO BOX 2371 Manteo, NC 27954 252-455-0960

**BUILDING LIMITED:** 

Comerstone Marine & Remodeling

PO BOX 2371 Manteo, NC 27954 252-455-0960

License: 84441

Expires:

PARCEL:

PIN:

989309063742

Parcel Number:

004681000

C

Address:

300 ATLANTIC ST E KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL BEACH SEC 1 REVISED

Block:

Lot(s):

1-2 & 17-19

& PT

Legal Description:

FEES:

Paid

Due

**BUILDING AREA:** 

Com. Building Permit Fees

\$464.00

\$0.00

Commercial Space

580 Sq. Ft.

Totals:

\$464,00

\$0.00

PROJECT DESCRIPTION: storage room enclosure in existing lumber storage building

PROJECT NAME: Kellogg Storage Room SITE ADDRESS: 300 ATLANTIC ST E KILL DEVIL HILLS

**BUILDING JOIN** 

ISSUED: 08/05/2021

**EXPIRES: 02/01/2022** 

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	С
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Addition
CONSTRUCTION COST	21000.00
STORAGE (SQFT)	580
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

#### REQUIRED INSPECTIONS

Slab/Foundation/Piling	Insulation
Framing	Final
Rough In	Zoning Final

- \* Foundation survey will be required prior to rough-in inspection.
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- Zoning Final Inspection is required.
- Storage shall be 24" from the ceiling and not over 12' if the building can accommodate tall shelving. Fire extinguisher shall be 75' travel distance.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 27.717

AUG - 6 2021

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# **Planning and Inspection Department**

BJ2021-170

**PROJECT NAME: Robert Farmer** 

SITE ADDRESS: 1605 TEAL CT KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

APPLICANT:

Robert Farmer

2013 Yorktown St.

Kill Devil Hillsl, NC 27948

252-267-7575

OWNER:

Robert Farmer

2013 Yorktown St.

Kill Devil Hillsl, NC 27948

252-267-7575

CONTRACTOR:

SAME AS OWNER

**UNKNOWN** 

UNKNOWN, XX 00000

License: Same as Owner

Expires: 12/31/2021

PARCEL:

PIN:

988319722099

Parcel Number: 005086000

Address:

1605 TEAL CT KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

29

Legal Description:

FEES:

Paid

Due

Pool/Hot Tub

\$200.00

\$0.00

Totals:

\$200.00

\$0.00

PROJECT DESCRIPTION:

Install hot tub, re-enforce deck as noted in engineers letter, add disconnect and 50 AMP circuit

for hot tub

**PROJECT NAME: Robert Farmer** 

SITE ADDRESS: 1605 TEAL CT KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/06/2021 EXPIRES: 02/02/2022

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	12000.00
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N

#### **REQUIRED INSPECTIONS**

In-Slab Plumbing Insulation
Slab/Foundation/Piling Final
Framing Zoning Final
Rough In

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



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AUG - 4 2021

**Planning and Inspection Department** 

TO NOT

BJ2021-168

PROJECT NAME: VROHIDIS STORAGE AREA

SITE ADDRESS: 109 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/04/2021

EXPIRES: 01/31/2022

APPLICANT:

VROHIDIS, OLGA

109 W SPORTSMAN DR Kill Devil Hills, NC 27948

OWNER:

VROHIDIS, OLGA

109 W SPORTSMAN DR Kill Devil Hills, NC 27948

**GENERAL:** 

Self

**UNKNOWN** 

UNKNOWN, XX 00000

0000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

988517106612

Parcel Number:

001735000

Address:

109 SPORTSMAN DR W KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH** 

Block:

0

Lot(s): 99

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION:

REVERT UNPERMITTED GROUND FLOOR LIVING SPACE TO STORAGE ONLY, REMOVE

ALL PLUMBING, HVAC, CORRECT ELECTRICAL

PROJECT NAME: VROHIDIS STORAGE AREA

SITE ADDRESS: 109 SPORTSMAN DR W KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/04/2021

EXPIRES: 01/31/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	4000.00
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family

#### REQUIRED INSPECTIONS

In-Slab PlumbingInsulationSlab/Foundation/PilingFinalFramingZoning Final

**Dwelling** 

Rough In

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation
- \* Ground floor approved as storage only. Shall not be used as conditioned space.
- \* No finished materials, mechanical equipment, duct work, plumbing or insulation shall be located in the area.
- \* Area shall not be used for working, sleeping, cooking, or restroom areas and shall not be temperature controlled.
- \* Trade work to be completed by a licensed tradesman.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 3 2021

### **Planning and Inspection Department**

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BJ2021-162

PROJECT NAME: Whelan Pool

SITE ADDRESS: 3109 LEE AVE KILL DEVIL HILLS

**BUILDING JOIN** 

ISSUED: 07/29/2021

EXPIRES: 01/25/2022

APPLICANT:

WHELAN, CHRISTOPHER

13119 Roddington Ct MIDLOTHIAN, VA 23113 OWNER:

WHELAN, CHRISTOPHER

13119 Roddington Ct MIDLOTHIAN, VA 23113

**CONTRACTOR: SOUTHERN SCAPES** 

PO Box 359

Jarvisburg, NC 27947

252-202-1654

**RESIDENTIAL - LIMITED:** 

SOUTHERN SCAPES

PO Box 359

Jarvisburg, NC 27947

252-202-1654

License: 77270

Expires: 12/31/2021

PARCEL:

PIN:

987516923843

Parcel Number: 026688000

Address:

3109 LEE AVE KILL DEVIL HILLS

Zoning:

Addition:

MOOR SHORES

Block:

0

Lot(s): 5

Legal Description:

FEES:

Paid

Due

Pool/Hot Tub

\$200.00

\$0.00

Totals:

\$200.00

\$0.00

PROJECT DESCRIPTION:

pool in rear yard

PROJECT NAME: Whelan Pool

SITE ADDRESS: 3109 LEE AVE KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 07/29/2021

EXPIRES: 01/25/2022

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	15
HEALTH DEPARTMENT PERMIT #	30933
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	33972.00
LOT COVERAGE	36.20
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N

#### REQUIRED INSPECTIONS

Pool Bonding Final
Slab/Foundation/Piling Zoning Final
Rough In

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

# **Planning and Inspection Department**

BJ2021-166

PROJECT NAME: HOLLOMAN UNCONDITIONED SUNROOM/DRY

SITE ADDRESS: 208 BICKETT ST E KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

APPLICANT:

HOLLOMAN, AMMIE RAY

**PO BOX 422** 

LITTLETON, NC 27850

252-532-1752

OWNER:

HOLLOMAN, AMMIE RAY

PO BOX 422

LITTLETON, NC 27850

252-532-1752

**GENERAL:** 

Self

**UNKNOWN** 

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

988517212383

Parcel

000348000

1

Number:

Address:

208 BICKETT ST E KILL DEVIL HILLS

Zoning:

Addition:

VIRGINIA DARE SHORES

Block:

Lot(s):

25-26

Legal Description:

FEES:

**Paid** 

Due

**BUILDING AREA:** 

Res. Building Permit Fee

\$192.00

\$0.00

Resdiential Unheated (.40)

480 Sq. Ft

Totals:

\$192.00

\$0.00

PROJECT DESCRIPTION:

INSTALL WINDOWS ON 2 COVERED PORCH, POUR CONCRETE TO MATCH EXISTING

LIVING SPACE HEIGHT REBUILD STAIR

AUG - 2 2021

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PROJECT NAME: HOLLOMAN UNCONDITIONED SUNROOM/DRY

**ENTRY** 

SITE ADDRESS: 208 BICKETT ST E KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	8000.00
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling Final
Framing Zoning Final

Rough In

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* Floor level to match that of existing adjacent living space.
- \* Space to be used as unconditioned living space/dry entry only, no change to footprint or bedroom count approved
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 2 2021

### **Planning and Inspection Department**

BJ2021-165

PROJECT NAME: Woodard Ground Floor Enclosure SITE ADDRESS: 1635 VILLAGE LN KILL DEVIL HILLS **BUILDING JOINT** 

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

APPLICANT:

WOODARD, JASON 1635 VILLAGE LN

Kill Devil Hills, NC 27948

OWNER:

WOODARD, JASON 1635 VILLAGE LN

Kill Devil Hills, NC 27948

GENERAL:

Self

UNKNOWN

UNKNOWN, XX 00000

UNKNOWN, XX

License: Unlicensed Expires: 12/31/2021

PARCEL:

PIN:

988410361054

Parcel Number: 027169253

0

Address:

1635 VILLAGE LN KILL DEVIL HILLS

Zoning:

Addition:

FIRST FLIGHT VILLAGE SEC 2

Block:

Lot(s):

253

Legal Description:

FEES:

Paid

Due

**BUILDING AREA:** 

Renovation/Remodel/Relocate

\$259.20

\$0.00

Remodel/Renovation

**576 SQFT** 

Totals:

\$259.20

\$0.00

PROJECT DESCRIPTION: enclosure below existing house adding bedroom and bathroom within existing footprint

BJ2021-165

PROJECT NAME: Woodard Ground Floor Enclosure SITE ADDRESS: 1635 VILLAGE LN KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/02/2021

EXPIRES: 01/29/2022

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30468
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.91
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	20000.00
LOT COVERAGE	32.00
LIVING SPACE (SQFT)	576
SURVEYOR NAME AND NUMBER	Carlos F Gomez L-5274
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

In-Slab Plumbing Insulation Slab/Foundation/Piling Final Framing Zoning Final

Rough In

### CONDITIONS



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

JUL 3 0 2021

# **Planning and Inspection Department**

BJ2021-164

PROJECT NAME: Jenkins Shed

SITE ADDRESS: 1806 WYANDOTTE ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 07/30/2021

EXPIRES: 01/26/2022

APPLICANT:

JENKINS, STEPHEN

1306 MARTIN LUTHER KING HWY

WAVERLY, VA23890

804-763-9388

OWNER:

JENKINS, STEPHEN

1306 MARTIN LUTHER KING HWY

WAVERLY, VA23890

804-763-9388

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2021

000-00

PARCEL:

PIN:

988409177011

Parcel

002422000

Number:

Address:

1806 WYANDOTTE ST KILL DEVIL HILLS

Zoning:

Addition:

SEA HOLLY RIDGE

Block:

E

Lot(s): 13

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: 8'x10' shed in rear yard, with electrical coming from house

BJ2021-164

PROJECT NAME: Jenkins Shed

SITE ADDRESS: 1806 WYANDOTTE ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 07/30/2021

EXPIRES: 01/26/2022

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-4993
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3900.00
LOT COVERAGE	32.00
SURVEYOR NAME AND NUMBER	Mark Kohlhafer L-3516
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	Storage

### **REQUIRED INSPECTIONS**

Final Zoning Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 2 4 2021

# **Planning and Inspection Department**

EL2021-064 PROJECT NAME:

SITE ADDRESS: 1006 DEAN ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/23/2021

**EXPIRES: 02/19/2022** 

APPLICANT:

ACE MECHANICAL OBX

P.O. Box 209

Manns Harbor, NC 27953

OWNER:

Crystal, Ashley 51 Lowe RD

Gatesville, NC 27938

ELECTRICAL, PLUMBING AND HEATING: ACE MECHANICAL OBX

P.O. Box 209

Manns Harbor, NC 27953

License: 14118-L, 17603 P, H-3

Expires: 06/30/2022

PARCEL:

PIN:

988315744137

Parcel Number: 004814001

1006 DEAN ST KILL DEVIL HILLS

Zoning:

Addition:

Address:

KILL DEVIL BEACH EXTENDED

Block:

Lot(s):

13

Legal Description:

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Remove circuit to mini split HVAC

**DETAILS** 

REQUIRED INSPECTIONS

Final

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

Printed by: Cray on: 08/23/2021 12:37 PM

Page 1 of 2

PROJECT NAME:

SITE ADDRESS: 1006 DEAN ST KILL DEVIL HILLS

**ELECTRICAL** 

ISSUED: 08/23/2021

EXPIRES: 02/19/2022

\* Ground floor is only approved for the use of "Storage". No habitable space on the ground flood is permitted. Future conversion of this space shall meet all Federal, State, and Local Codes and would require that all wall coverings are removed to allow the building inspector to inspect.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Thomas Twiddy

Contractor or Authorized Agent:

Date:

Date:

-0-0540007005507004-04-



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 3 0 2021

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# **Planning and Inspection Department**

EL2021-067

**PROJECT NAME: Stewart Electric** 

SITE ADDRESS: 504 AVALON DR W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/30/2021

**EXPIRES: 02/26/2022** 

APPLICANT:

Stewart, Eugene 504 W Avalon Dr

Kill Devil Hills, NC 27948

757-615-4991

OWNER:

Stewart, Eugene

504 W Avalon Dr

Kill Devil Hills, NC 27948

757-615-4991

PARCEL:

PIN:

988517008089

Parcel Number:

001532000

Address:

504 AVALON DR W KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH** 

Block:

0

167

Lot(s):

Legal Description:

FEES:

**Paid** 

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Repair weatherhead and C/O meter base

### **DETAILS**

**Permit** 

Name

Value

**ZONING DISTRICT** 

RL

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

600.00

**CONSTRUCTION TYPE** 

V

FLOOD ZONE

**OCCUPANCY TYPE** 

X One & Two Family

Dwelling

**PROJECT NAME: Stewart Electric** 

SITE ADDRESS: 504 AVALON DR W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/30/2021

**EXPIRES: 02/26/2022** 

### **REQUIRED INSPECTIONS**

Final

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

Date: 0



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 27 2021

TOWN OF HEL DEVILLENCE

Planning and Inspection Department

EL2021-066 PROJECT NAME:

SITE ADDRESS: 710 Harmony Lane Kill Devil Hills

ELECTRICAL

ISSUED: 08/26/2021

EXPIRES: 02/22/2022

APPLICANT:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**ELECTRICAL, LIMITED:** 

**LOWIRE** 

PO Box 2751

Kill Devil Hills, NC 27948

252-256-1075

License: 19403

Expires: 10/01/2021

PARCEL:

PIN:

988413129628

Parcel

Number:

Address:

710 Harmony Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 14, Phase 1, Water Oak Residential S/D

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals :

\$150.00

\$0.00

PROJECT DESCRIPTION: Add generator



PROJECT NAME:

SITE ADDRESS: 710 Harmony Lane Kill Devil Hills

ELECTRICAL

ISSUED: 08/26/2021

EXPIRES: 02/22/2022

D	E	Т	Δ	I	L	S
				.,		-

**Permit** 

Name

**Value** 

ZONING DISTRICT

RL

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

6500.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Marty Shaw

**Contractor or Authorized Agent:** 

Daniel Parsons

Date: 08 / 26 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 2 4 2021

TUNICE RELATION TO THE

# **Planning and Inspection Department**

EL2021-060

PROJECT NAME: Lowe's lighting replacement

SITE ADDRESS: 1500 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/12/2021

**EXPIRES: 02/08/2022** 

APPLICANT:

LOWES CORP.

P.O. Box 1111

1605 Curtis Bridge Rd. Wilkesboro, NC 28697

OWNER:

LOWES CORP.

P.O. Box 1111

1605 Curtis Bridge Rd. Wilkesboro, NC 28697

**ELECTRICAL - UNLIMITED:** 

Lin R. Rogers Electrical Contractors Inc.

2050 Marconi DR

ALPHARETTA, GA 30005

770-772-3400

License: 09890

**Expires:** 

PARCEL:

PIN:

988410454012

Parcel Number:

002746000

Address:

1500 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition:

SUBDIVISION - NONE

Block:

Lot(s):

Legal Description:

FEES:

Paid

Due

Electrical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace interior and exterior fluorescent lighting fixtures with new LED fixtures.

PROJECT NAME: Lowe's lighting replacement

SITE ADDRESS: 1500 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/12/2021

EXPIRES: 02/08/2022

D	ET	FA	11	C
U		М	\IL	G.

Permit Name

Value

ZONING DISTRICT

C

**PURPOSE** 

Commercial

Repair/Remodel

CONSTRUCTION COST

107506.35

CONSTRUCTION TYPE

**OCCUPANCY TYPE** 

I X

FLOOD ZONE

Business

REQUIRED INSPECTIONS

Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Per 153.074(E)(3) All light produced on-site shall be contained within the perimeter of the site by design, orientation or shielding of the light source.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Warty Shaw

**Contractor or Authorized Agent:** 

Lin Rogers

Date: 08 / 13 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 23 2021

### **Planning and Inspection Department**

EL2021-061

PROJECT NAME: Pyle Electric

SITE ADDRESS: 1506 WRIGHTSVILLE BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/16/2021

EXPIRES: 02/12/2022

APPLICANT:

Pyle, Steven

6086 Martins Point Rd kitty hawk, nc 27949

OWNER:

Pyle, Steven

6086 Martins Point Rd kitty hawk, nc 27949

**CONTRACTOR: BREDELL ELECTRICAL SYSTEMS** 

100 S Dogwood Trail Southern Shores, nc 27949

313-938-6585

**ELECTRICAL:** 

**BREDELL ELECTRICAL SYSTEMS** 

100 S Dogwood Trail

Southern Shores, nc 27949

313-938-6585

License: L-20220

Expires: 03/30/2022

PARCEL:

PIN:

989309053401

Parcel Number:

004865000

Address:

1506 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL BEACH SEC 1 AMENDED

Block:

L

Lot(s): 8

- ID. -0000E0740--4EEL00-4000E0E44-EE7000040E

Legal Description:

FEES:

Paid

Due

Electrical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace 200amp meter base

PROJECT NAME: Pyle Electric

SITE ADDRESS: 1506 WRIGHTSVILLE BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/16/2021

EXPIRES: 02/12/2022

n	E	FA	П	S
u				

**Permit** 

Name

Value

ZONING DISTRICT

C

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

500.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

**Dwelling** 

### **REQUIRED INSPECTIONS**

Final

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

**Contractor or Authorized Agent:** 

Part Pal

Date: 08 / 20 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 17 2021



# Planning and Inspection Department

EL2021-063

PROJECT NAME: Meekins Field Electrical Repair/Installation Phase 2

SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/17/2021

**EXPIRES: 02/13/2022** 

APPLICANT:

TOWN OF KILL DEVIL HILLS

P O BOX 1719 102 Town Hall Drive

KILL DEVIL HILLS, NC 27948

OWNER:

TOWN OF KILL DEVIL HILLS

P O BOX 1719

102 Town Hall Drive

KILL DEVIL HILLS, NC 27948

**ELECTRICAL - UNLIMITED:** 

Branham Electrical Corp.

4113 s. Military Hwy CHESAPEAKE, VÁ 23321

757-487-6024

License: 24959 U

**Expires:** 

PARCEL:

PIN:

988410369451

Parcel Number:

008129000

Address:

1634 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition:

SUBDIVISION - NONE

Block:

0

Lot(s):

Legal Description:

FEES:

**Paid** 

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

TOWN Permit No Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Meekins Field Electrical. Repair lights and stub up conduit for phase 2

PROJECT NAME: Meekins Field Electrical Repair/Installation Phase 2

SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/17/2021

EXPIRES: 02/13/2022

### **DETAILS**

**Permit** 

Name

**Value** 

**ZONING DISTRICT** 

C

**PURPOSE** 

Commercial

Repair/Remodel

CONSTRUCTION COST

28700.00

CONSTRUCTION TYPE

IV

FLOOD ZONE

X

**BASE FLOOD ELEVATION** 

8

OCCUPANCY TYPE

Assembly

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date:



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 16 2021

1 20

# **Planning and Inspection Department**

EL2021-062

PROJECT NAME: Edens Electrical

SITE ADDRESS: 2908 RAYMOND AVE KILL DEVIL HILLS

**ELECTRICAL** 

ISSUED: 08/16/2021

**EXPIRES: 02/12/2022** 

APPLICANT:

Virginia Darling, LLC 520 Cypress Cove Lane

SUFFOLK, VA 23434

OWNER:

Virginia Darling, LLC

520 Cypress Cove Lane

SUFFOLK, VA 23434

**ELECTRICAL - LIMITED:** 

Cabe & Son Electric

207 S. Lost Colony Dr.

nags head, nc 27959 252-996-0338 License: SP-SFD-32136

Expires: 07/22/2022

PARCEL:

PIN:

988513120856

Parcel Number:

000427000

Address:

2908 RAYMOND AVE KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

Block:

17

Lot(s): 19-20

Legal Description:

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace meter base and overhead service entrance cables

Parpa 8/14/21

PROJECT NAME: Edens Electrical

SITE ADDRESS: 2908 RAYMOND AVE KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/16/2021

EXPIRES: 02/12/2022

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ET	_	

**Permit** 

Name

Value

**ZONING DISTRICT** 

C

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

1000.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### **REQUIRED INSPECTIONS**

**Final** 

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

**Contractor or Authorized Agent:** 

A. Cole

Date: 08 / 16 / 2021





# TOWN OF KILL DEVIL HILLS

PHONE: 252-449-5318 EMAIL: Permits@kdhnc.com FAX: 252-441-4102				
TRADE:	PLUMBING	MECHANICAL	ELECTRICAL	GAS PIPING
(CHECK ALL THAT API	PLY)	*	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
OWNER INF	Mary Ede	MS DATE	8/16/202	1
MAILING ADD	RESS 2908 R	aumand own	ER PHONE (757 3	77-9201
CITY_KD	+ STATE NC	ZIP 2 7948 EMAIL	mdebeav	77-9201 le @ aol.com
CITY Kit	ry Hawk	STATE NC ZIPAT	1949 PHONE 25	tric, LLC 2-996-0338
LICENSE NO.	# 32136	EMAIL	cabeards	melectric @
SIGNATURE	Ma	Oe		
PROJECT NAM	FO 2918 E	lectric Ec	en Sbuilding perm	IIT#
PROJECT ADD	RESS 2909 R	aymond Ai	len Sbuilding perm ve KDH,	27948
SUBDIVISION			BLOCK _	SEC
PROJECT DESC	CRIPTION Replac	e meter b	ox and o	ie bead
servi	ce entra,	nce cable	ox and o	
		000		
PROJECT COST	T (INCLUDING MATERIA	LIS & LABOR) \$ 1	00.00	
STAP USE ONLY RECEIVED BY:	DATE:	FEE:	PERMIT #:	FLOOD ZONE:



# TOWN OF KILL DEVIL HILLS, NORTH CAROLINA OWNER AUTHORIZATION

I Mary Edens , authorize Justin Call
(Owner) (Agent/ Contractor)
to act as my agent for replacing Service meter box + cable (Description)
located at 2908 Raymond Ave KDH 27948 (Address)
I understand and accept responsibility to comply with all regulations and required inspections.
I further understand and acknowledge that until a final inspection has been performed and approved and the project has received a Certificate of Occupancy/Completion (CO), no portion of this project is authorize for use or occupancy.    Mark Eding   Signature of Owner   Signature of Agent   Signature of Agent     Date   Date

OWNER AUTHORIZATION IS REQUIRED AT INITIAL SUBMITTAL

Please check with you Insurance Agent prior to construction. Your project may affect your flood insurance rates!

PO Box 1719 • Kill Devil Hills, NC 27948 252-449-5318 • 252-441-4102 (fax) • www.kdhnc.com



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

PAID

AUG 1 1 2021

TORM OF

**Planning and Inspection Department** 

EL2021-059

**PROJECT NAME:** Dowless Electric

SITE ADDRESS: 207 QUAIL LN KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/10/2021

**EXPIRES: 02/06/2022** 

APPLICANT:

Dowless, Elizabeth

PO Box 1769

kitty hawk, nc 27949

OWNER:

Dowless, Elizabeth

PO Box 1769

kitty hawk, nc 27949

**ELECTRICAL - LIMITED:** 

Cabe & Son Electric

207 S. Lost Colony Dr.

nags head, nc 27959 252-996-0338 License: SP-SFD-32136

Expires: 07/22/2022

PARCEL:

PIN:

988316945726

Parcel Number:

005106000

Address:

207 QUAIL LN KILL DEVIL HILLS

**Zoning**:

Addition:

WHISPERING PINES SEC 1

Block:

A

Lot(s):

Legal Description:

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION:

Rewire ground floor, new 200amp panel, new devices including smoke detectors



**PROJECT NAME:** Dowless Electric

SITE ADDRESS: 207 QUAIL LN KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/10/2021

EXPIRES: 02/06/2022

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**Permit** 

Name

Value

ZONING DISTRICT

RL

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

20000.00

**CONSTRUCTION TYPE** 

V

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Rough In

Final

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Contractor or Authorized Agent: \_

A Colle

Date: 08 / 10 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 1 1 2021

TOWN OF MILL DEVIL NO - T

**Planning and Inspection Department** 

EL2021-057 PROJECT NAME:

SITE ADDRESS: 2029 Va. Dare Tr. S. Kill Devil Hills

ELECTRICAL

ISSUED: 08/09/2021

EXPIRES: 02/05/2022

APPLICANT:

First Flight Hotel, LLC

1880 Richmond Road WILLIAMSBURG, VA 23185

757-218-3888

OWNER:

First Flight Hotel, LLC 1880 Richmond Road

WILLIAMSBURG, VA 23185

757-218-3888

**ELECTRICAL-UNLIMITED:** 

SUBURBAN ELECTRIC CONTRACTORS OF NC INC. License: 30633-U

PO Box 925

Manteo, NC 27954 252-475-1372

Expires: 08/06/2022

PARCEL:

PIN:

989313140750-7532

Parcel

Number:

Address:

2029 Va. Dare Tr. S. Kill Devil Hills

Zoning:

Addition:

Nags Head Shores

Block:

Lot(s): 6

Legal Description:

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION:

Inspect fire damaged electrical system & determent extent of damage, de-energize damaged circuits and re-energize un-damaged portions of the electrical system. This permit DOES NOT include new construction or repairs from fire damage. All repairs to be part of the re-construction

permit.



PROJECT NAME:

SITE ADDRESS: 2029 Va. Dare Tr. S. Kill Devil Hills

ELECTRICAL

ISSUED: 08/09/2021

**EXPIRES: 02/05/2022** 

DETA	ILS
------	-----

**Permit** 

Name

Value

**ZONING DISTRICT** 

OIR

**PURPOSE** 

Commercial

Repair/Remodel

**CONSTRUCTION COST** 

1000.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

**OCCUPANCY TYPE** 

**Business** 

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Julia Hudson

08 / 09 / 2021

Printed by: Marty Shaw on: 08/09/2021 08:43 AM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 9 2021

# **Planning and Inspection Department**

EL2021-058

**PROJECT NAME: Clay Electric** 

SITE ADDRESS: 2038 BAY DR KILL DEVIL HILLS

**ELECTRICA** 

ISSUED: 08/09/2021

EXPIRES: 02/05/2022

APPLICANT:

CLAY, Frankie

900 Fleet Dr #898

VIRGINIA BEACH, VA 23454

757-681-4018

OWNER:

CLAY, Frankie

900 Fleet Dr #898

VIRGINIA BEACH, VA23454

757-681-4018

**ELECTRICAL - UNLIMITED:** 

KREISER ELECTRIC INC

3847 IVY LN

kitty hawk, nc 27949 252-564-2367

License: 31684

**Expires:** 

PARCEL:

PIN:

987408984479

Parcel Number:

001993000

Address:

2038 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

1018 & 1020 Lot(s):

Legal Description:

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace service entrance cable

**PROJECT NAME:** Clay Electric

SITE ADDRESS: 2038 BAY DR KILL DEVIL HILLS

**ELECTRIC** 

ISSUED: 08/09/2021

**EXPIRES: 02/05/2022** 

#### **DETAILS**

Permit

Name

Value

ZONING DISTRICT

RL

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

650.00

CONSTRUCTION TYPE

FLOOD ZONE

AE

BASE FLOOD ELEVATION OCCUPANCY TYPE

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: 8-9-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 4 2021

Tuesda " WILLIAM KING

# **Planning and Inspection Department**

EL2021-056

**PROJECT NAME:** 

SITE ADDRESS: 1705 SIOUX ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 08/03/2021

EXPIRES: 01/30/2022

APPLICANT:

Owens, Brett & Amber

1731 Bay DR

Kill Devil Hillsl, NC 27948

OWNER:

Owens, Brett & Amber

1731 Bay DR

Kill Devil Hillsl, NC 27948

**ELECTRICAL - LIMITED:** 

Coastal Mechanical and Electric Services

151 Savannah Ave

JARVISBURG, NC 27947

252-453-2765

License: 29815-L

Expires: 01/21/2022

PARCEL:

PIN:

988410266314

Parcel Number:

002678000

Address:

1705 SIOUX ST KILL DEVIL HILLS

Zoning:

Addition:

HIGH VIEW - HEDRICKS ADD

Block:

C

Lot(s):

11

Legal Description:

FEES:

Paid

Due

**Electrical Permit Fee** 

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Install 5 new recessed lights and associated circuit in lower level room.

PROJECT NAME:

SITE ADDRESS: 1705 SIOUX ST KILL DEVIL HILLS

**ELECTRICAL** 

ISSUED: 08/03/2021

EXPIRES: 01/30/2022

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	600.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	X	

### **REQUIRED INSPECTIONS**

One & Two Family

**Dwelling** 

Final

**OCCUPANCY TYPE** 

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and example All provisions of Laws and Ordinances of specified herein or not. The granting of the provisions of any other state/local laws and Darty Shaws Issued By:	governing this type of work a permit does not presume	will be complied with whether to give authority to violate or cancel
Contractor or Authorized Agent:	John pugh	Date: 08 / 03 / 2021

D-- ID. 6000-LL-4004-E0Lf4044E0ff00060-40-40E00



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 2 2021

3 

# **Planning and Inspection Department**

EL2021-055

PROJECT NAME:

SITE ADDRESS: 1705 SIOUX ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/30/2021

EXPIRES: 01/26/2022

APPLICANT:

Owens, Brett & Amber

1731 Bay DR

Kill Devil Hillsl, NC 27948

OWNER:

Owens, Brett & Amber

1731 Bay DR

Kill Devil Hillsl, NC 27948

**ELECTRICAL - LIMITED:** 

Coastal Mechanical and Electric Services

151 Savannah Ave

JARVISBURG, NC 27947

252-453-2765

License: 29815-L

Expires: 01/21/2022

PARCEL:

PIN:

988410266314

Parcel Number: 002678000

Address:

1705 SIOUX ST KILL DEVIL HILLS

Zoning:

Addition:

HIGH VIEW - HEDRICKS ADD

Block:

C

Lot(s):

11

Legal Description:

FEES:

Due

**Electrical Permit Fee** 

\$150.00

Paid

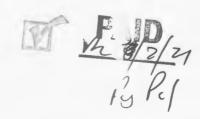
\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace 200 amp panel



5

PROJECT NAME:

SITE ADDRESS: 1705 SIOUX ST KILL DEVIL HILLS

**ELECTRICA** 

ISSUED: 07/30/2021

EXPIRES: 01/26/2022

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**Permit** 

Value Name

ZONING DISTRICT

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

2500.00

**CONSTRUCTION TYPE** 

V

RL

**FLOOD ZONE** 

X

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

### CONDITIONS

This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Date: 07 / 30 / 2021

- ID. FOROTE-E-14040-E-10070-0--0-404000-L0.

Printed by : Marty Shaw on: 07/30/2021 01:24 PM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

# **Planning and Inspection Department**

SG2021-021

SIGN

PROJECT NAME:

SITE ADDRESS: 3118 N Croatan Hwy Kill Devil Hills

ISSUED: 08/24/2021

**EXPIRES: 02/20/2022** 

APPLICANT:

**ADLIGHT SIGNS** 

600 West Boundry Street

Kill Devil Hills, NC 27948

252-449-2800

OWNER:

Head, John

3118 N. Croatan Hwy. Kill Devil Hills, NC 27948

252-441-3051

CONTRACTOR:

**ADLIGHT SIGNS** 

600 West Boundry Street

Kill Devil Hills, NC 27948

252-449-2800

License: LEGACY UNKNOWN

Expires: 12/31/2030

PARCEL:

PIN:

98751693976803

Parcel Number:

000332003

55

Address:

3118 N Croatan Hwy Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

UNIT 1 BLDG A

Legal Description:

FEES:

Paid

Due

Sign Permit Fee

\$200.00

\$0.00

Totals :

\$200.00

\$0.00

PROJECT DESCRIPTION:

AUG 27 2021

to see you

Printed by: CTHUMAN on: 08/24/2021 08:35 AM

Page 1 of 3

SG2021-021

PROJECT NAME:

SITE ADDRESS: 3118 N Croatan Hwy Kill Devil Hills

SIGN

ISSUED: 08/24/2021

EXPIRES: 02/20/2022

### **DETAILS**

Permit	
Name	Value
# OF SIGNS	2
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	39.29
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	12.50
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	4085.00
FLOOD ZONE	X

### REQUIRED INSPECTIONS

Final

### CONDITIONS

\* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.

No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Free-standing sign cannot exceed 20 feet in elevation above street grade measured from ground elevation to the top of the sign structure. Sign cannot overhang into the right of way.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Electrical trade affidavit required



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 24 2021

# **Planning and Inspection Department**

TO YES CLIFFYLKILS

**BANNNER2021-004** 

PROJECT NAME: Overrun, LLC

SITE ADDRESS: 109 OCEAN BAY BLVD KILL DEVIL HILLS

BANNER

ISSUED: 08/20/2021

EXPIRES: 11/18/2021

APPLICANT:

**ADLIGHT SIGNS** 

600 West Boundry Street

Kill Devil Hills, NC 27948

252-449-2800

OWNER:

Overrun II. LLC

P.O. Box 389

Kill Devil Hills, NC 27948

**CONTRACTOR:** 

**ADLIGHT SIGNS** 

600 West Boundry Street

Kill Devil Hills, NC 27948 252-449-2800

License: LEGACY UNKNOWN

Expires: 12/31/2030

PARCEL:

PIN:

988420706411

Parcel

003858001

Number:

Address:

109 OCEAN BAY BLVD KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

36

Lot(s): 13-17

Legal Description:

FEES:

**Paid** 

Due

Banner Fee

\$50.00

\$0.00

Totals:

\$50.00

\$0.00

PROJECT DESCRIPTION: Banner on building

**DETAILS** 

Permit

Name Value

**# OF BANNERS** 

1

C

X

**ZONING DISTRICT** 

Commercial Accessory

**CONSTRUCTION COST** 

FLOOD ZONE

**PURPOSE** 

1400.00

Printed by: Donna Elliott on: 08/23/2021 11:33 AM

Page 1 of 2

- ID. -0-07504004700--74--00-E0-0404-0-4400-06



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 18 2021

**Planning and Inspection Department** 

TOWN OF KILL DEWL HALLS

DW2021-006

PROJECT NAME: Duff Driveway

SITE ADDRESS: 313 QUAIL LN KILL DEVIL HILLS

DRIVEWAY

ISSUED: 08/16/2021

**EXPIRES: 02/12/2022** 

APPLICANT:

DUFF, SHANNON

313 QUAIL LN

Kill Devil Hills, NC 27948

410-370-6047

OWNER:

DUFF, SHANNON

313 QUAIL LN

Kill Devil Hills, NC 27948

410-370-6047

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

988316844352

Parcel Number:

027007000

E

Address:

313 QUAIL LN KILL DEVIL HILLS

Zoning:

Addition:

WHISPERING PINES SEC 2 & 3

Block:

Lot(s):

13

Legal Description:

FEES:

Paid

Due

**Driveway Permit Fee** 

\$50.00

\$0.00

Totals:

\$50.00

\$0.00

PROJECT DESCRIPTION: Gravel Driveway on northside of property, concrete in right of way

Des 10: 0-04574--4-47-5754957065740-64499006--0

DW2021-006

**PROJECT NAME:** Duff Driveway

SITE ADDRESS: 313 QUAIL LN KILL DEVIL HILLS

ISSUED: 08/16/2021

EXPIRES: 02/12/2022

n	FI	ΓΔ	I	S
_			-	•

**Permit** 

Name Value

**DRIVEWAY INVERT 2** 

**CULVERT** N

SURVEYOR NAME AND

NUMBER

Doug Styons L-3227

ZONING DISTRICT

RL

Υ

CONSTRUCTION COST

3000.00

FLOOD ZONE

X

LOT COVERAGE

36.00

### REQUIRED INSPECTIONS

**Zoning Final** 

Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- The concrete needs to be a minimum of 6 inches thick at about 2.5 to 3 feet in width. At edge of pavement concrete will need to be 6 inches back 3 feet.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent: Shannon Duff

Date: 08 / 17 / 2021



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

AUG - 5 2021

**Planning and Inspection Department** 

DW2021-005

PROJECT NAME: Buchanan Driveway Addition SITE ADDRESS: 2058 BAY DR KILL DEVIL HILLS

DRIVEWAY

ISSUED: 08/05/2021

**EXPIRES: 02/01/2022** 

APPLICANT:

Buchanan, Howard & Betsy

2058 Bay DR

Kill Devil Hillsl, NC 27948

757-373-1131

OWNER:

Buchanan, Howard & Betsy

2058 Bay DR

Kill Devil Hillsl, NC 27948

757-373-1131

**GENERAL**:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2021

PARCEL:

PIN:

987408982947

Parcel Number:

001674000

Address:

2058 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH** 

Block:

0

Lot(s): 324

Legal Description:

FEES:

Paid

Due

**Driveway Permit Fee** 

\$50.00

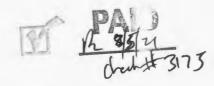
\$0.00

Totals:

\$50.00

\$0.00

PROJECT DESCRIPTION: add onto existing driveway, not into right of way



# DW2021-005

PROJECT NAME: Buchanan Driveway Addition SITE ADDRESS: 2058 BAY DR KILL DEVIL HILLS

DRIVEWAY

ISSUED: 08/05/2021

EXPIRES: 02/01/2022

### **DETAILS**

**Permit** 

Name Value

DRIVEWAY INVERT 2

Ν

CULVERT N

SURVEYOR NAME AND

Wesley Meekin

NUMBER

RL

CONSTRUCTION COST

ZONING DISTRICT

2000.00

FLOOD ZONE

\_\_\_\_\_

----

AE

BASE FLOOD ELEVATION

4

LOT COVERAGE

35.00

#### REQUIRED INSPECTIONS

Zoning Final

Final

#### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: 8-5-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 6 2021

## **Planning and Inspection Department**

DM2021-007

PROJECT NAME: T and B Homes, Inc.

SITE ADDRESS: 3310 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

APPLICANT:

T and B Homes, Inc.

1706 Virgina Ave.

Kill Devil Hills, NC 27948

252-207-9837

**OWNER:** 

T and B Homes, Inc. 1706 Virgina Ave.

Kill Devil Hills, NC 27948

252-207-9837

CONTRACTOR:

T and B Homes, Inc.

1706 Virgina Ave. Kill Devil Hills, NC 27948

252-207-9837

License: 80069

Expires: 12/31/2021

PARCEL:

PIN:

988509054160

Parcel Number: 000063000

Address:

3310 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

**ORVILLE BEACH BLK 2** 

Block:

2

Lot(s):

Legal Description:

FEES:

Paid

Due

Demolition

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: Demo existing structure

**DETAILS** 

Permit

Name

Value

ZONING DISTRICT

RL

**FLOOD ZONE** 

X

CONSTRUCTION COST

8000.00

DM2021-007

PROJECT NAME: T and B Homes, Inc.

SITE ADDRESS: 3310 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

\* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent#

Date: 08/06/2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 17 2021

## **Planning and Inspection Department**

DM2021-008

374 Q

PROJECT NAME: Demo of Fire Damaged House

SITE ADDRESS: 2031 VA DARE TRLS KILL DEVIL HILLS

DEMOLITION

ISSUED: 08/17/2021

**EXPIRES: 02/13/2022** 

**APPLICANT:** 

2031 Svdt Llc

PO Box 90

Kill Devil Hills, NC 27948

**OWNER:** 

2031 Svdt Llc

PO Box 90

Kill Devil Hills, NC 27948

**CONTRACTOR: SAGA CONSTRUCTION** 

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306 Expires: 12/31/2021

PARCEL:

PIN:

989313231979

Parcel Number:

008505000

Address:

2031 VA DARE TRL S KILL DEVIL HILLS

**Zonin**g:

Addition:

NAGS HEAD SHORES AMENDED SEC 4

20111119

Block:

3

Lot(s): 7

Legal Description:

FEES:

Paid

Due

Demolition

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION:

remove damaged portions of fire damaged 18 Bedroom Single Family Dwelling, some portion

of site to remain per site plan



DM2021-008

PROJECT NAME: Demo of Fire Damaged House

SITE ADDRESS: 2031 VA DARE TRLS KILL DEVIL HILLS

DEMOLITION

ISSUED: 08/17/2021

**EXPIRES: 02/13/2022** 

**DETAILS** 

**Permit** 

Value Name

ZONING DISTRICT

FLOOD ZONE

CONSTRUCTION COST

OIR VΕ

18000.00

REQUIRED INSPECTIONS

Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

murck Date: 8.17.21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 AUG - 5 2021

## **Planning and Inspection Department**

PL2021-007

PROJECT NAME: Mulehide plumbing

SITE ADDRESS: 701 FRESH POND DR W KILL DEVIL HILLS

PLUMBING

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

APPLICANT:

Mulehide LLC

3128 Bay Dr

Kill Devil Hills, NC 27948

OWNER:

Mulehide LLC

3128 Bay Dr

Kill Devil Hills, NC 27948

PLUMBING:

ACTION PLUMBING, INC. 4885 The Woods Road

Kitty Hawk, NC 27949

License: 19207

Expires: 12/31/2021

PARCEL:

PIN:

988316926821

Parcel

004917000

Number:

Address:

701 FRESH POND DR W KILL DEVIL HILLS

Zoning:

Addition:

LAKE DRIVE DEVELOPMENT SEC 2

Block:

0

Lot(s): 63 & 64

Legal Description:

FEES:

Paid

Due

Plumbing Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Install new water service tap and line

**DETAILS** 

**Permit** 

Name

Value

**PURPOSE** 

Commercial

Repair/Remodel

CONSTRUCTION COST

10000.00

FLOOD ZONE

X

**OCCUPANCY TYPE** 

Business

PL2021-007

PROJECT NAME: Mulehide plumbing
SITE ADDRESS: 701 FRESH POND DR W KILL DEVIL HILLS

PLUMBING ISSUED: 08/02/2021

EXPIRES: 01/29/2022

# **REQUIRED INSPECTIONS**

Rough In

Final

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and k	now the same to be true and correct.
All provisions of Laws and Ordinances governing this type of work specified herein or not. The granting of a permit does not presume to	will be complied with whether
the provisions of any other state focal law regulating construction of	
Issued By:	
Contractor or Authorized Agent:	Date:



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 26 2021

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## **Planning and Inspection Department**

PL2021-010

PROJECT NAME: TURNER WATER SERVICE

SITE ADDRESS: 1206A SIXTH AVE KILL DEVIL HILLS

PLUMBING

ISSUED: 08/26/2021

**EXPIRES: 02/22/2022** 

**APPLICANT:** 

TURNER, JANINE

5768 DON DR NORFOLK, VA 23518

757-567-6951

**OWNER:** 

TURNER, JANINE

5768 DON DR NORFOLK, VA 23518

757-567-6951

PLUMBING CLASS I:

DARE COAST SERVICES INCORPORATED

1418 MOLLIE ST

Kill Devil Hills, NC 27948

252-256-0238

License: L.34930

Expires: 12/31/2021

PARCEL:

PIN:

988312759594

Parcel Number:

004530000

42

Address:

1206A SIXTH AVE KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS REALTY CORP

Block:

Lot(s): PT 4-5

Legal Description:

FEES:

Paid

Due

Plumbing Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: INSTALL NEW WATER METER AND SERVICE LINE

Town of Kill Devil Hills Water Charges

PAID
Water Tap #: Ta4791

PL2021-010

**PROJECT NAME: TURNER WATER SERVICE** 

SITE ADDRESS: 1206A SIXTH AVE KILL DEVIL HILLS

PLUMBING

ISSUED: 08/26/2021

EXPIRES: 02/22/2022

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential Repair/Remodel

**CONSTRUCTION COST** 

600.00

**CONSTRUCTION TYPE** 

V

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/locat/law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

Date:



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 26 2021

10 100

# **Planning and Inspection Department**

ZP2021-045

**PROJECT NAME:** James Tucker

SITE ADDRESS: 3138 Raymond Ave. KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 08/26/2021

EXPIRES: 02/22/2022

APPLICANT:

TUCKER, JO

3138 RAYMOND AVE Kill Devil Hillsl, NC 27948 OWNER:

TUCKER, JO

3138 RAYMOND AVE Kill Devil Hillsl, NC 27948

CONTRACTOR:

SAME AS OWNER

UNKNOWN

UNKNOWN, XX 00000

License: Same as Owner

Expires: 12/31/2021

PARCEL:

PIN:

988513046212

Parcel

000027000

Number:

Address:

3138 Raymond Ave. KILL DEVIL HILLS

Zoning:

Addition:

Block:

9

Lot(s): 1

Legal Description:

FEES:

Paid

Due

**Fence** 

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: Fence

ZP2021-045

**PROJECT NAME:** James Tucker

SITE ADDRESS: 3138 Raymond Ave. KILL DEVIL HILLS

**ZONING PERMIT** 

ISSUED: 08/26/2021

EXPIRES: 02/22/2022

DETAILS
---------

Permit	
Name	Value
ZONING DISTRICT	С
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	2500.00
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N

#### REQUIRED INSPECTIONS

Final Zoning Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Call the Building Inspector for a string line inspection before installing the fence.

I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

\_ wate.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 2 0 2021

## **Planning and Inspection Department**

ZP2021-044

PROJECT NAME: John and Pam Burton

SITE ADDRESS: 2027 YORKTOWN KILL DEVIL HILLS

**ZONING PERMIT** 

ISSUED: 08/18/2021

**EXPIRES: 02/14/2022** 

APPLICANT:

Sam Wright and Sons Fence Co

1103 Boundary Street Kill Devil Hills, NC 27948 OWNER:

BURTON, JOHN M

1604 EAGLE HILL DRIVE CHESAPEAKE, VA 23321

**UNLICENSED BUILDER:** 

Sam Wright and Sons Fence Co

1103 Boundary Street Kill Devil Hills, NC 27948 License: 12345

**Expires:** 

PARCEL:

PIN:

988405190254

Parcel Number:

001464000

Address:

2027 YORKTOWN KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

Lot(s): 1336

Legal Description:

FEES:

**Paid** 

Due

**Fence** 

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

**PROJECT DESCRIPTION:** Fence



ZP2021-044

PROJECT NAME: John and Pam Burton

SITE ADDRESS: 2027 YORKTOWN KILL DEVIL HILLS

**ZONING PERMIT** 

ISSUED: 08/18/2021 EXPIRES: 02/14/2022

**DETAILS** 

**Permit** 

Name Value
ZONING DISTRICT RL
CAMA PERMIT N

CAMA EXEMPTION N FLOOD ZONE X

PURPOSE Residential Accessory

N

CONSTRUCTION COST 4950.00
CULVERT N

**DRIVEWAY INVERT 2** 

**REQUIRED INSPECTIONS** 

Stringline Zoning Final

Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

D-- ID: 004E704E4-007E-04004449-4-00L9E-44E-



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 1 6 2021

TO MOP MILES

## **Planning and Inspection Department**

ZP2021-043

**PROJECT NAME:** Lee Fence

SITE ADDRESS: 306 FRESH POND DR E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

APPLICANT:

Peggy Lee

451 Honey Locust Way

CHESAPEAKE, VA 23320

757-436-8308

OWNER:

Peggy Lee

451 Honey Locust Way CHESAPEAKE, VA 23320

757-436-8308

**CONTRACTOR:** Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

**BUILDING LIMITED:** 

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

License: 78583

**Expires:** 

PARCEL:

PIN:

989313143442

Parcel Number:

004959000

Address:

306 FRESH POND DR E KILL DEVIL HILLS

Zoning:

Addition:

LAKE DRIVE DEVELOPMENT SEC 2

Block:

0

Lot(s): 33

Legal Description:

FEES:

Paid

Due

Fence

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: fence along south property line



Dec ID. 24405-b--b4b44005200042-22402502-80205-0

ZP2021-043

**PROJECT NAME:** Lee Fence

SITE ADDRESS: 306 FRESH POND DR E KILL DEVIL HILLS

**ZONING PERMIT** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	С	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	8	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	X	
PURPOSE	Residential Accessory	
CONSTRUCTION COST	3500.00	
SURVEYOR NAME AND NUMBER	Doug Styons L-3227	
CULVERT	N	111
DRIVEWAY INVERT 2	N	
	REQUIRED INSPECTIONS	
Stringline	Final	
	CONDITIONS	
This permit becomes null an	d void if work or construction authorized is not commend	ed within 6 months or if construction
r work is suspended for a per	iod of 12 months at any time after work has started.	



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 13 2021

**Planning and Inspection Department** 

EG2021-012

PROJECT NAME: Moody Land Disturbance

SITE ADDRESS: 2056 VA DARE TRAIL NORTH KILL DEVIL HILLS

**EXCAVATION AND GRADING** 

ISSUED: 08/13/2021

**EXPIRES: 02/09/2022** 

APPLICANT:

MOODY, WILLARD J

120 RIVERPOINT CRESCENT PORTSMOUTH, VA 23707

OWNER:

MOODY, WILLARD J

120 RIVERPOINT CRESCENT PORTSMOUTH, VA23707

CONTRACTOR: HUDDLESTON, ALLEN CLAY

30 Tenth Ave.

Southern Shores, NC 27949

252-256-1976

**GENERAL**:

HUDDLESTON, ALLEN CLAY

30 Tenth Ave.

Southern Shores, NC 27949

252-256-1976

License: 69034

**Expires:** 

PARCEL:

PIN:

988518208856

Parcel

Number:

Address:

2056 VA DARE TRAIL NORTH KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 16A

FEES:

Paid

Due

Land Disturbing

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: adding fill for future sfd

Flood 20 re

EG2021-012

PROJECT NAME: Moody Land Disturbance

SITE ADDRESS: 2056 VA DARE TRAIL NORTH KILL DEVIL HILLS

**EXCAVATION AND GRADING** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

### **DETAILS**

Permit Name

Value

**ESTIMATED** 

10000.00

C

**CONSTRUCTION COST** 

ZONING DISTRICT

CAMA PERMIT N

FLOOD ZONE AO

BASE FLOOD ELEVATION 12

SURVEYOR NAME AND

NUMBER

Doug Styons L-3227

### REQUIRED INSPECTIONS

Final

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: (4) 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 3 0 2021

### **Planning and Inspection Department**

MC2021-253

**PROJECT NAME: UNIT #2** 

SITE ADDRESS: 214 QUAIL LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/30/2021

**EXPIRES: 02/26/2022** 

APPLICANT:

Nancy, Mair

11808 Crown Prince Cir Richmond, Va 23238

804-741-3233

OWNER:

Nancy, Mair

11808 Crown Prince Cir Richmond, Va 23238

804-741-3233

MECHANICAL, H-3, 1:

AIR HANDLERS OBX 8788 Caratoke Hwy

Harbinger, NC 27941 252-216-8945

License: 23577

Expires: 12/31/2021

PARCEL:

PIN:

988316942727

Parcel Number:

005118000

Address:

214 QUAIL LN KILL DEVIL HILLS

Zoning:

Addition:

WHISPERING PINES SEC 1

Block:

B

Lot(s): 7&8

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

MC2021-253

**PROJECT NAME: UNIT #2** 

SITE ADDRESS: 214 QUAIL LN KILL DEVIL HILLS

**MECHANICA** 

ISSUED: 08/30/2021

EXPIRES: 02/26/2022

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Permit

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

4886.00

CONSTRUCTION TYPE

N

FLOOD ZONE

X

NATURAL GAS SIGNOFF OCCUPANCY TYPE

Residential

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent: LINDA G BURGESS

Date: 08 / 30 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 3 0 2021

Planning and Inspection Department

TU HIT - LL DEVAL

MC2021-251 PROJECT NAME:

SITE ADDRESS: 1623 PRINCESS ANNE DR KILL DEVIL HILLS

MECHANICAL ISSUED: 08/27/2021

**EXPIRES: 02/23/2022** 

APPLICANT:

GREENE, CAROL J 14 S ADDISON STREET RICHMOND, VA 00000

OWNER:

GREENE, CAROL J 14 S ADDISON STREET RICHMOND, VA00000

**MECHANICAL:** 

RAHOY PO Box 265

Kitty Hawk, NC 27949 252-261-2008

License: 13056

Expires: 12/31/2021

PARCEL:

PIN:

988410465628

Parcel Number:

003100000

1

Address:

1623 PRINCESS ANNE DR KILL DEVIL HILLS

Zoning:

Addition:

WR DEATON - DELRAY BEACH

Block:

PT 13 & 14 Lot(s):

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

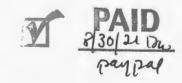
\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement



MC2021-251 PROJECT NAME:

SITE ADDRESS: 1623 PRINCESS ANNE DR KILL DEVIL HILLS

**MECHANICAI** 

ISSUED: 08/27/2021

EXPIRES: 02/23/2022

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**Permit** 

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

7812.38

**CONSTRUCTION TYPE** 

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

One & Two Family

Dwelling

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By:

Contractor or Authorized Agent: Paxton Nix

Date: 08 / 27 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## Planning and Inspection Department

MC2021-250

PROJECT NAME: Maull HVAC

SITE ADDRESS: 200 FIRST ST E KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/25/2021

**EXPIRES: 02/21/2022** 

APPLICANT:

Maull, Donald

2726 Deer Valley Rd

MILFORD, DE 19963

OWNER:

Maull, Donald

2726 Deer Valley Rd

MILFORD, DE 19963

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988411561145

Parcel Number:

003172000

Address:

200 FIRST ST E KILL DEVIL HILLS

Zoning:

Addition:

W R DEATON - DELRAY BEACH

Block:

C

Lot(s): PT 37 & 38

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O 3 ton HVAC system

AUG 25 2021

MC2021-250

F - - -

**PROJECT NAME: Mauli HVAC** 

SITE ADDRESS: 200 FIRST ST E KILL DEVIL HILLS

**MECHANICA** 

ISSUED: 08/25/202

**EXPIRES: 02/21/2022** 

#### DETAILS

**Permit** 

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

7008.00

CONSTRUCTION TYPE

FLOOD ZONE

NATURAL GAS SIGNOFF

X N

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The grapting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Took m

Issued By:

Contractor or Authorized Agent:

Date: 8.25-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 25 2021

W. CELLINES

## **Planning and Inspection Department**

MC2021-246

PROJECT NAME:

SITE ADDRESS: 208 TRUXTON ST KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/19/2021

**EXPIRES: 02/15/2022** 

APPLICANT:

TICE, ROMONA MARIE

P O BOX 305

KITTY HAWK, NC 27949

OWNER:

208 TRUXTON STREET LLC 2420 SOUTH CROATAN HWY

Kill Devil Hillsl, NC 27948

**MECHANICAL:** 

RAHOY

PO Box 265

Kitty Hawk, NC 27949 252-261-2008

License: 13056 Expires: 12/31/2021

PARCEL:

PIN:

987516938544

Parcel Number:

010242000

Address:

208 TRUXTON ST KILL DEVIL HILLS

Zoning:

Addition:

MOOR SHORES TWO

Block:

0

168

Lot(s):

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

Totals:

MC2021-246 PROJECT NAME:

Final

SITE ADDRESS: 208 TRUXTON ST KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/19/2021

EXPIRES: 02/15/2022

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6768.70	
CONSTRUCTION TYPE	V	
FLOOD ZONE	X	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

### CONDITIONS

**REQUIRED INSPECTIONS** 

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct.  All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.  Issued By:			
Contractor or Authorized Agent:	Paxton Nix	Date: 08 / 19 / 2021	



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 25 2021

PENCHUS

## **Planning and Inspection Department**

MC2021-249

PROJECT NAME: Dollar Tree HVAC

SITE ADDRESS: 2014 Croatan HWY S. Kill Devil Hills

MECHANICAL

ISSUED: 08/24/2021

**EXPIRES: 02/20/2022** 

APPLICANT:

Simon Property Group

225 W. Washiington St. Indianapolis, IN 46204

757-488-9639

OWNER:

Simon Property Group

225 W. Washlington St. Indianapolis, IN 46204

757-488-9639

HVAC:

Brines Refrigeration Heating and Cooling

Lathrup Village

SOUTHFIELD, MI 48076

248-423-9680

License: 33707

Expires: 06/30/2022

PARCEL:

PIN:

989313039007

Parcel Number:

028829001

3

Address:

2014 Croatan HWY S. Kill Devil Hills

Zoning:

Addition:

Fresh Pond Beaches

Block:

Lot(s):

Tract A

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace two roof top package units like for like

MC2021-249

PROJECT NAME: Dollar Tree HVAC

SITE ADDRESS: 2014 Croatan HWY S. Kill Devil Hills

MECHANICAL

ISSUED: 08/24/2021

EXPIRES: 02/20/2022

**Permit** 

Name

Value

**PURPOSE** 

Commercial Repair/Remodel

**CONSTRUCTION COST** 

14000.00

**CONSTRUCTION TYPE** 

III

FLOOD ZONE

X

NATURAL GAS SIGNOFF

**OCCUPANCY TYPE** 

Merchantile

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

Contractor or Authorized Agent:

Jake Cahan

Date: 08 / 24 / 2021

Printed by: CTHUMAN on: 08/24/2021 04:41 PM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 2 4 2021

### **Planning and Inspection Department**

BP2021-178

PROJECT NAME: William Schlachter

SITE ADDRESS: 2042 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/24/2021

EXPIRES: 02/20/2022

APPLICANT:

Albert L Thomas III P.O. Box 1772

153 Old NC 345 Manteo, NC 27954 252-473-7943 OWNER:

SCHLACHTER, WILLIAM J

310 BELL ROAD

CINNAMONSON, NJ 08077

**GENERAL - LIMITED:** 

Albert L Thomas III P.O. Box 1772 153 Old NC 345 Manteo, NC 27954 252-473-7943 License: 73267 Expires: 01/01/2022

PARCEL:

PIN:

989313230516

Totals:

Parcel Number:

008513001

Address:

2042 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

NAGS HEAD SHORES AMENDED SEC 4

Block:

4

Lot(s): 1

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: Repair and replace deck and steps within existing footprint, pilings and girders to remain

BP2021-178

PROJECT NAME: William Schlachter

SITE ADDRESS: 2042 VA DARE TRL S KILL DEVIL HILLS

ISSUED: 08/24/202

EXPIRES: 02/20/2022

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	9000.00
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Zoning Final

Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- Zoning Final Inspection is required.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 24 2021

## **Planning and Inspection Department**

MC2021-248

PROJECT NAME: Czamski HVAC

SITE ADDRESS: 2053 NEW BERN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/23/2021

EXPIRES: 02/19/2022

APPLICANT:

Kim Czarnaski

10834 Woodhaven Dr Fairfax, VA 22030

OWNER:

Kim Czarnaski

10834 Woodhaven Dr Fairfax, VA 22030

**CONTRACTOR:** One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988518207767

Parcel Number:

001782000

Address:

2053 NEW BERN ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 1** 

Block:

0

Lot(s): 333

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

Dan ID. - 40444 4 4-704 - 40040074- 4 44051- 41-44-40-77-

PROJECT DESCRIPTION: hvac changeout

MC2021-248

PROJECT NAME: Czamski HVAC

SITE ADDRESS: 2053 NEW BERN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/23/2021

**EXPIRES: 02/19/2022** 

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**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

7130.00

FLOOD ZONE

X

NATURAL GAS SIGNOFF

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Marty Shaw Issued By:

Contractor or Authorized Agent: Tom McDonald Date: 08/23/2021

Printed by: Ryan Lang on: 08/23/2021 02:52 PM

Page 2 of 2

Dec ID. - 404444-704-49040074-44495141-44-46-77-



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 23 202

## **Planning and Inspection Department**

MC2021-238

PROJECT NAME: Anukash, LLC

SITE ADDRESS: 1407 North Virginia Dare Trail Kill Devil Hills

ISSUED: 08/12/2021

**EXPIRES: 02/08/2022** 

APPLICANT:

**OBX Air Pro's Heating and Cooling** 

197 WEST MOBILE HARBINGER, NC 27941

252-435-8782

OWNER:

Anukash, LLC 4003 River Park DR

suffolk, va 23435

H-3, CLASS 2:

**OBX Air Pro's Heating and Cooling** 

197 WEST MOBILE HARBINGER, NC 27941

252-435-8782

License: 29480

Expires: 12/31/2021

PARCEL:

PIN:

988411653314

Parcel Number:

002757001

Address:

1407 North Virginia Dare Trail Kill Devil Hills

Zoning:

Addition:

Birdsong Subdivision

Block:

Lot(s): 2A

Legal Description:

2A, The Birdsong Subdivision

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC

The stay as

MC2021-238

PROJECT NAME: Anukash, LLC

SITE ADDRESS: 1407 North Virginia Dare Trail Kill Devil Hills

MECHANICA

ISSUED: 08/12/2021

EXPIRES: 02/08/2022

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

8000.00

FLOOD ZONE

VE

BASE FLOOD ELEVATION

11

NATURAL GAS SIGNOFF

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Charles Thuman Issued By:

Contractor or Authorized Agent: Lee Guthrie

Date: 08 / 13 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 PAID

AUG 23 2021

TO THOS

## **Planning and Inspection Department**

MC2021-247

PROJECT NAME: SITE ADDRESS: 208 HAYMAN BLVD E KILL DEVIL HILLS MECHANICAL

ISSUED: 08/20/2021

EXPIRES: 02/16/2022

APPLICANT:

SALP, THOMAS F 614 BUTLER AVE

suffolk, VA 23434 757-946-3016 OWNER:

SALP, THOMAS F 614 BUTLER AVE suffolk, VA23434

757-946-3016

MECHANICAL:

ALL SEASONS HEATING & COOLING

P.O. Box 244

Point Harbor, NC 27964

491-9232

License: 19091

Expires: 12/31/2021

PARCEL:

PIN:

988513124792

Parcel Number: 000397000

Address:

208 HAYMAN BLVD E KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

Block:

7

Lot(s): 25 & 26

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

M helety

MC2021-247 PROJECT NAME:

SITE ADDRESS: 208 HAYMAN BLVD E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/20/2021

EXPIRES: 02/16/2022

D	E1	FA	IL	S

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

6100.00

CONSTRUCTION TYPE

V

FLOOD ZONE

. .

NATURAL GAS SIGNOFF

X

OCCUPANCY TYPE

One & Two Family

Dwelling

### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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Issued By:

Marty Shaw

Contractor or Authorized Agent:

See See

Date: 08 / 20 / 2021

Printed by: Marty Shaw on: 08/20/2021 04:32 PM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

MC2021-245

**PROJECT NAME:** 

SITE ADDRESS: 2005 HAMPTON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/19/2021

**EXPIRES: 02/15/2022** 

APPLICANT:

Stubbings, John

123 Dogwood CIR

Manteo, NC 27954

OWNER:

Stubbings, John

123 Dogwood CIR Manteo, NC 27954

**MECHANICAL H-3, CLASS 1:** 

Anderson Heating and Cooling Co., LLC

PO Box 396

Kitty Hawk, NC 27949

252-619-3105

License: 31438

Expires: 12/31/2021

PARCEL:

PIN:

988405086368

Parcel Number: 002027000

Address:

2005 HAMPTON ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

1102 Lot(s):

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION:

**HVAC** replacement

PROJECT NAME:

SITE ADDRESS: 2005 HAMPTON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/19/2021

EXPIRES: 02/15/2022

	ET	FA	11	C
U		A	ВL	.3

**Permit** 

Name

PURPOSE

Residential

Repair/Remodel

**CONSTRUCTION COST** 

7940.00

Value

CONSTRUCTION TYPE

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

One & Two Family

**Dwelling** 

## REQUIRED INSPECTIONS

Final

#### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Marty Shaw

Contractor or Authorized Agent:

Gil Anderson

Date: 08 / 19 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 18 2021

## **Planning and Inspection Department**

MC2021-244

PROJECT NAME:

SITE ADDRESS: 2022 SMITHFIELD ST KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/18/2021

**EXPIRES: 02/14/2022** 

APPLICANT:

SCOTTO, JOSEPH A

2730 WREXHAM COURT

HERNDON, VA 22071

OWNER:

SCOTTO, JOSEPH A

2730 WREXHAM COURT

HERNDON, VA 22071

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West

Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988405194302

Parcel Number: 001429000

Address:

2022 SMITHFIELD ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

1295 Lot(s):

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

PROJECT NAME:

SITE ADDRESS: 2022 SMITHFIELD ST KILL DEVIL HILLS

**MECHANICA** 

ISSUED: 08/18/2021

EXPIRES: 02/14/2022

### **DETAILS**

Permit

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

3222.00

**CONSTRUCTION TYPE** 

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By:

Contractor or Authorized Agent: Ton UM

Date: 8-18-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

MC2021-242

**PROJECT NAME: Lane HVAC** 

SITE ADDRESS: 302 HELGA ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/17/2021

EXPIRES: 02/13/2022

APPLICANT:

Lane, Eric

1695 Foxtail Pines

CHARLOTTESVILLE, VA 22911

**OWNER:** 

Lane, Eric

1695 Foxtail Pines

CHARLOTTESVILLE, VA 22911

**MECHANICAL:** 

**DELTA T** 

162 Yaupon Tr.

Kitty Hawk, NC 27949

252-261-0404

License: 23299

Expires: 12/31/2021

PARCEL:

PIN:

988513046457

Parcel Number:

000087000

5

Address:

302 HELGA ST E KILL DEVIL HILLS

Zoning:

Addition:

**ORVILLE BEACH BLK 5** 

Block:

Lot(s):

10

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system



**PROJECT NAME: Lane HVAC** 

SITE ADDRESS: 302 HELGA ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/17/2021

EXPIRES: 02/13/2022

### **DETAILS**

**Permit** 

Name Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST 6100.00

CONSTRUCTION TYPE

V

FLOOD ZONE

AO

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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Issued By: Charles Thuman

**Contractor or Authorized Agent:** 

2 Some

\_ Date: 08 / 18 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 18 2021

## **Planning and Inspection Department**

MC2021-243

PROJECT NAME:

SITE ADDRESS: 1700 Paget RD 111-B3 Kill Devil Hills

MECHANICAL

ISSUED: 08/18/2021

**EXPIRES: 02/14/2022** 

APPLICANT:

Drzewcki, Michael & Gretchen

3870 Appaloosa DR **WOODBRIDGE, VA 22191** 

716-512-0661

OWNER:

Drzewcki, Michael & Gretchen

3870 Appaloosa DR WOODBRIDGE, VA 22191

716-512-0661

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West

Kill Devil Hills, NC 27948 441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

98830927406122

Parcel

Number:

Address:

1700 Paget RD 111-B3 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

98830927406122

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

PROJECT NAME:

SITE ADDRESS: 1700 Paget RD 111-B3 Kill Devil Hills

**MECHANICA** 

ISSUED: 08/18/2021

EXPIRES: 02/14/2022

### **DETAILS**

Permit

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

6180.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

Residential

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By:

**Contractor or Authorized Agent:** 

Date: 8-18-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 17 2021

# **Planning and Inspection Department**

MC2021-241

PROJECT NAME: Amandola HVAC

SITE ADDRESS: 1541 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/17/2021

**EXPIRES: 02/13/2022** 

**APPLICANT:** 

Ti Property Llc

2032 Pole Bridge Rd

MIDDLETOWN, DE 19709

OWNER:

Ti Property Llc

2032 Pole Bridge Rd

MIDDLETOWN, DE 19709

CONTRACTOR: AIR HANDLERS OBX

8788 Caratoke Hwy Harbinger, NC 27941

252-216-8945

MECHANICAL, H-3, I:

AIR HANDLERS OBX

8788 Caratoke Hwy

Harbinger, NC 27941

252-216-8945

License: 23577

Expires: 12/31/2021

PARCEL:

PIN:

98841156728617

Parcel Number: 028060000

Address:

1541 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

**GOLDEN STRAND CONDOS** 

Block:

Lot(s):

1-5 - UNIT F-

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150,00

\$0.00

PROJECT DESCRIPTION: hvac changeout

PROJECT NAME: Amandola HVAC

SITE ADDRESS: 1541 VA DARE TRL N KILL DEVIL HILLS

MECHANICA

ISSUED: 08/17/2021

**EXPIRES: 02/13/2022** 

### **DETAILS**

Permit

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

3600.00

FLOOD ZONE

VE

**BASE FLOOD ELEVATION** 

12 N

NATURAL GAS SIGNOFF

**OCCUPANCY TYPE** 

Residential

### REQUIRED INSPECTIONS

Final

## CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Claude Morris

Date: 08 / 17 / 2021

Printed by: Ryan Lang on: 08/17/2021 10:34 AM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 1 3 2021

## **Planning and Inspection Department**

MC2021-240

PROJECT NAME: OBHB HVAC

SITE ADDRESS: 105 AIRSTRIP RD W KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/13/2021

**EXPIRES: 02/09/2022** 

APPLICANT:

**OUTER BANKS HOME BUILDERS** 

P O BOX 398

KITTY HAWK, NC 27949

OWNER:

**OUTER BANKS HOME BUILDERS** 

P O BOX 398

KITTY HAWK, NC 27949

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988312877258

Parcel Number:

009166000

Address:

105 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS REALTY CORP

Block:

8

Lot(s): 6-7

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals :

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O 2.5 Ton Heat pump

**PROJECT NAME: OBHB HVAC** 

SITE ADDRESS: 105 AIRSTRIP RD W KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

**CONSTRUCTION COST** 

3800.00

**CONSTRUCTION TYPE** 

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

**Business** 

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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G. Mala

Issued By:

**Contractor or Authorized Agent:** 

Date:

ate:

<sup>\*</sup> This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

MC2021-237

PROJECT NAME:

SITE ADDRESS: 118 AVALON DR E KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

APPLICANT:

MARGARET A STRANG & SANDRA BALCIK

1513 ABERS CREEK ROAD PITTSBURG, PA 15239 OWNER:

MARGARET A STRANG & SANDRA BALCIK

1513 ABERS CREEK ROAD PITTSBURG, PA 15239

**MECHANICAL:** 

R A HOY

PO Box 265

Kitty Hawk, NC 27949

252-261-2008

License: 13056

Expires: 12/31/2021

PARCEL:

PIN:

988517204905

Parcel Number: 009133000

Address:

118 AVALON DR E KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH** 

Block:

0

Lot(s):

42, PT OF

43

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals :

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement



MC2021-237 PROJECT NAME:

SITE ADDRESS: 118 AVALON DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

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$\boldsymbol{\nu}$			16	·O

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

3749.03

CONSTRUCTION TYPE

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

OCCUPANCY TYPE

One & Two Family

Dwelling

### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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Issued By: Marty Shaw

**Contractor or Authorized Agent:** 

Paxton Nix

Date: 08 / 11 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 1 0 2021

## **Planning and Inspection Department**

MC2021-236

PROJECT NAME: Silk HVAC

SITE ADDRESS: 117 ARCHDALE ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/10/2021

EXPIRES: 02/06/2022

APPLICANT:

Silk, Thomas

30 Raymond St

TEWKSBURY, MA01876

OWNER:

Silk, Thomas

30 Raymond St

TEWKSBURY, MA01876

**ELECTRICAL - UNLIMITED:** 

Comfort First Heating & Cooling

148 IRIE LANE

Powels Point, NC 27966

License: 21474

Expires: 06/30/2022

MECHANICAL:

Comfort First Heating & Cooling

148 IRIE LANE

Powels Point, NC 27966

License: 33486

Expires: 12/31/2021

PARCEL:

PIN:

988517124168

Parcel

000441000

Number:

Address:

117 ARCHDALE ST E KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

Block: 20

Lot(s): PT 17-20

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

PROJECT NAME: Silk HVAC

SITE ADDRESS: 117 ARCHDALE ST E KILL DEVIL HILLS

MECHANIC

ISSUED: 08/10/2021

**EXPIRES: 02/06/2022** 

### **DETAILS**

**Permit** 

Name

**PURPOSE** 

Residential Repair/Remodel

Value

**CONSTRUCTION COST** 

7564.00

**CONSTRUCTION TYPE** 

FLOOD ZONE

X

NATURAL GAS SIGNOFF OCCUPANCY TYPE

One & Two Family

**Dwelling** 

### REQUIRED INSPECTIONS

**Final** 

#### CONDITIONS

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Issued By:

**Contractor or Authorized Agent:** 

Date: 8.10-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 1 0 202

## **Planning and Inspection Department**

MC2021-235

PROJECT NAME: MAIR HVAC CHANGE OUT UNIT #2 SITE ADDRESS: 214 QUAIL LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/10/2021

EXPIRES: 02/06/2022

APPLICANT:

Nancy, Mair

11808 Crown Prince Cir Richmond, Va 23238 804-741-3233

OWNER:

Nancy, Mair

11808 Crown Prince Cir Richmond, Va 23238

804-741-3233

MECHANICAL, H-3, I:

AIR HANDLERS OBX 8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945

License: 23577

Expires: 12/31/2021

PARCEL:

PIN:

988316942727

Parcel Number:

005118000

Address:

214 QUAIL LN KILL DEVIL HILLS

Zoning:

Addition:

WHISPERING PINES SEC 1

Block:

В

7&8 Lot(s):

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: CHANGE OUT 1.5 TON HVAC

PROJECT NAME: MAIR HVAC CHANGE OUT UNIT #2 SITE ADDRESS: 214 QUAIL LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/10/2021

EXPIRES: 02/06/2022

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

5000.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

**OCCUPANCY TYPE** 

Residential

### **REQUIRED INSPECTIONS**

Final

### CONDITIONS

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Issued By:

**Contractor or Authorized Agent:** 

\_\_\_ Da



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 9 2021

TOTAL OF PULLEY DEVELOUS

**Planning and Inspection Department** 

MC2021-206

**PROJECT NAME: Hopkins HVAC** 

SITE ADDRESS: 808 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/12/2021

**EXPIRES: 01/08/2022** 

APPLICANT:

HOPKINS, BENJAMIN J JR

119 Sunrise

Kill Devil Hills, NC 27948

252-207-1329

OWNER:

HOPKINS, BENJAMIN J JR

119 Sunrise

Kill Devil Hills, NC 27948

252-207-1329

**CONTRACTOR:** North Carolina Air Conditioning

PO Box 2209

kitty hawk, nc 27949

261-3013

**MECHANICAL:** 

North Carolina Air Cond.

PO Box 2209

kitty hawk, nc 27949

261-3013

License: 19037

Expires: 12/31/2021

PARCEL:

PIN:

988405091647

Parcel Number: 001600000

808 AVALON DR W KILL DEVIL HILLS

Zoning:

Addition:

Address:

**AVALON BEACH** 

Block:

0

Lot(s): 244

ID TO 1000 10001 10040 171 0 1 1001 1-71 000F F40-7

Legal Description:

FEES:

**Paid** 

**Due** 

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: replace whole house hvac system

**PROJECT NAME: Hopkins HVAC** 

SITE ADDRESS: 808 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/12/2021

EXPIRES: 01/08/2022

ET		
 _		
_	_	

**Permit** 

Name Value

CONSTRUCTION COST

10055.00

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

One & Two Family

Dwelling

## REQUIRED INSPECTIONS

Final

### CONDITIONS

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Issued By:

Contractor or Authorized Agent: Jamie Kennedy

Date: 07 / 12 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 9 2021

## **Planning and Inspection Department**

MC2021-233

PROJECT NAME: Michael HVAC

SITE ADDRESS: 805 THIRD ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/09/2021

**EXPIRES: 02/05/2022** 

APPLICANT:

Michael, Cristelle

13722 Cabells Mill Dr centreville, va 20120

703-314-3355

OWNER:

Michael, Cristelle

13722 Cabells Mill Dr centreville, va 20120

703-314-3355

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988409165545

Parcel Number: 002502003

Address:

805 THIRD ST W KILL DEVIL HILLS

Zoning:

Addition:

**CROATAN SHORES INC SEC 1** 

Block:

12

Lot(s): 3

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

**PROJECT NAME: Michael HVAC** 

SITE ADDRESS: 805 THIRD ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/09/2021

EXPIRES: 02/05/2022

### **DETAILS**

**Permit** 

Name

**Value** 

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

5524.00

CONSTRUCTION TYPE

V

FLOOD ZONE

Χ

NATURAL GAS SIGNOFF

**OCCUPANCY TYPE** 

N One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By:

**Contractor or Authorized Agent:** 

Porlin-

Date:

Printed by: CTHUMAN on: 08/09/2021 08:59 AM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 9 2021

**Planning and Inspection Department** 

MC2021-234 PROJECT NAME:

SITE ADDRESS: 700 G1 FIRST ST W KILL DEVIL HILLS

MECHANICA

ISSUED: 08/09/2021

**EXPIRES: 02/05/2022** 

**APPLICANT:** 

Niepling, Wilbur & Amy 4729 Vista LN

kitty hawk, nc 27949

703-861-3373

OWNER:

Niepling, Wilbur & Amy

4729 Vista LN kitty hawk, nc 27949

703-861-3373

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West

Kill Devil Hills, NC 27948 441-1740

License: 12643

Expires: 12/31/2021

Lot(s):

PARCEL:

PIN:

98841314042695

Parcel Number:

008075613

Address:

700 G1 FIRST ST W KILL DEVIL HILLS

Zoning:

0

Addition:

Block:

UT 1 BLDG

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

**PROJECT NAME:** 

SITE ADDRESS: 700 G1 FIRST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/09/2021

**EXPIRES: 02/05/2022** 

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential

5133.00

Repair/Remodel

**CONSTRUCTION COST** 

V

CONSTRUCTION TYPE

FLOOD ZONE

AE

BASE FLOOD ELEVATION

4

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

Residential

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By:

**Contractor or Authorized Agent:** 

Date:

: \_\_\_\_



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 2 2021

MII , .

**Planning and Inspection Department** 

MC2021-230

PROJECT NAME: BEN HVAC

SITE ADDRESS: 1700 PAGET RD III, C-1 Kill Devil Hills

**MECHANICAL** 

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

APPLICANT:

BEN, KEVIN

252 BEAR CREEK RD SARVER, PA 16055 410-629-4123

OWNER:

BEN, KEVIN

252 BEAR CREEK RD SARVER, PA 16055

410-629-4123

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

98830927406115

Parcel

Number:

Address:

1700 PAGET RD III, C-1 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

LOT-III -C-1

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC CHANGE OUT

PROJECT NAME: BEN HVAC

SITE ADDRESS: 1700 PAGET RD III, C-1 Kill Devil Hills

MECHANICAL

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

### **DETAILS**

Permit

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

5666.00

**CONSTRUCTION TYPE** 

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

Residential

## REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By:

**Contractor or Authorized Agent:** 

a. M ele: 5-2-21



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

AUG - 2 2021

## **Planning and Inspection Department**

MC2021-231

PROJECT NAME: ASHLEY HVAC

SITE ADDRESS: 114 WRIGHT AVE E KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

APPLICANT:

MR. STEPHEN H ASHLEY

2903 N Va. Dare Trail Kill Devil Hills, NC 27948 OWNER:

MR. STEPHEN H ASHLEY

2903 N Va. Dare Trail Kill Devil Hills, NC 27948

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West

Kill Devil Hills, NC 27948 441-1740 License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988420706932

Parcel Number: 003886000

38

Address:

114 WRIGHT AVE E KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

Lot(s):

5

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC CHANGE OUT

PROJECT NAME: ASHLEY HVAC

SITE ADDRESS: 114 WRIGHT AVE E KILL DEVIL HILLS

MECHANICA

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

**DETAILS** 

**Permit** 

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

600.00

CONSTRUCTION TYPE

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

One & Two Family

Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent: Vo. 4. Msllc

Date: 8-2-2/



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

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# **Planning and Inspection Department**

MC2021-232 PROJECT NAME:

SITE ADDRESS: 1607 KETCH LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/03/2021

EXPIRES: 01/30/2022

APPLICANT:

LAURA KLINE

1607 Ketch Lane KDH, nc 27948 395-0588 OWNER:

LAURA KLINE

1607 Ketch Lane KDH, nc 27948 395-0588

**MECHANICAL H-3 CLASS 1:** 

NORTH BEACH SERVICES

P.O. Box 181

Kitty Hawk, NC 27949

252-491-2878

License: 22053

Expires: 12/31/2021

PARCEL:

PIN:

988413148546

Parcel

026965032

Number:

Address:

1607 KETCH LN KILL DEVIL HILLS

Zoning:

Addition:

FIRST FLIGHT VLG PH A SEC 3

Block:

0

Lot(s): 32

D-- ID. 004404E464464-0E044-000E0404E40E40-E0-40

Legal Description:

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC replacement

Restriction Py Py

PROJECT NAME:

SITE ADDRESS: 1607 KETCH LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/03/2021

EXPIRES: 01/30/2022

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

6700.00

CONSTRUCTION TYPE

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Contractor or Authorized Agent: \_\_\_\_\_\_ Gobby Willis

Date: 08 / 03 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 2 2021

## **Planning and Inspection Department**

MC2021-204

**PROJECT NAME: Michael Holt** 

SITE ADDRESS: 807 Virginia Dare Tr. S. Kill Devil Hills

**MECHANICAL** 

ISSUED: 07/13/2021

EXPIRES: 01/09/2022

APPLICANT:

AIR HANDLERS OBX

8788 Caratoke Hwy Harbinger, NC 27941 OWNER:

DPP Properties, LLC 702 Paddington Drive

Greenville, NC 27858

252-216-8945

MECHANICAL, H-3, I:

AIR HANDLERS OBX

8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945 License: 23577

Expires: 12/31/2021

PARCEL:

PIN:

988308993371

Parcel

008145004

Number:

140

Zoning: OIR

Addition:

Address:

SUBDIVISION - NONE

Block:

Lot(s): 5

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

807 Virginia Dare Tr. S. Kill Devil Hills

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: HVAC

Checht 110

**PROJECT NAME: Michael Holt** 

SITE ADDRESS: 807 Virginia Dare Tr. S. Kill Devil Hills

MECHANICA

ISSUED: 07/13/2021

EXPIRES: 01/09/2022

### **DETAILS**

Permit

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

CONSTRUCTION COST

3216.00

**CONSTRUCTION TYPE** 

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: \_\_\_\_\_ G BURGESS

Date: 08 / 02 / 2021

D. - ID. 70447-004070740444-40000000-708. E40 0

Printed by: CTHUMAN on: 07/13/2021 04:19 PM

Page 2 of 2



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 2 2021

# **Planning and Inspection Department**

MC2021-228

**PROJECT NAME: Bray HVAC** 

SITE ADDRESS: 105 FIRST ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/29/2021

EXPIRES: 01/25/2022

APPLICANT:

BRAY, MAURICE M

PO BOX 1248

SUFFOLK, VA 23439

OWNER:

BRAY, MAURICE M

PO BOX 1248

SUFFOLK, VA23439

**CONTRACTOR:** One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

**H3, CLASS 1:** 

One Hour Heating and Air Conditioning

701 Fresh Pond West

Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988410458729

Parcel

003137000

Number:

Address:

105 FIRST ST E KILL DEVIL HILLS

Zoning:

Addition:

W R DEATON - DELRAY BEACH

Block:

4

Lot(s):

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150,00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: hvac changeout

PROJECT NAME: Bray HVAC

SITE ADDRESS: 105 FIRST ST E KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 07/29/2021

EXPIRES: 01/25/2022

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

9505.00

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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Jones medde

Issued By:

**Contractor or Authorized Agent:** 

\_ Date: 8-2-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 2 2021

107

## **Planning and Inspection Department**

MC2021-229

**PROJECT NAME: Lancaster HVAC** 

SITE ADDRESS: 536 PARKWOOD DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/29/2021

EXPIRES: 01/25/2022

APPLICANT:

Lancaster, Jackson

536 Parkwood Drive Kill Devil Hills, NC 27948

252-402-9067

OWNER:

Lancaster, Jackson 536 Parkwood Drive

Kill Devil Hills, NC 27948

252-402-9067

H3, CLASS 1:

One Hour Heating and Air Conditioning

701 Fresh Pond West Kill Devil Hills, NC 27948

441-1740

License: 12643

Expires: 12/31/2021

PARCEL:

PIN:

988418225314

Parcel Number: 004046006

Address:

536 PARKWOOD DR KILL DEVIL HILLS

Zoning:

Addition:

WRIGHT WOODS

Block:

0

Lot(s): 6

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O 3.5 Ton heat pump

PROJECT NAME: Lancaster HVAC

SITE ADDRESS: 536 PARKWOOD DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/29/2021

EXPIRES: 01/25/2022

#### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential

Repair/Remodel

**CONSTRUCTION COST** 

4122.00

CONSTRUCTION TYPE

. .

FLOOD ZONE

X N

NATURAL GAS SIGNOFF OCCUPANCY TYPE

One & Two Family

Dwelling

### **REQUIRED INSPECTIONS**

**Final** 

#### CONDITIONS

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Tool has

Issued By:

**Contractor or Authorized Agent:** 

Da

Date. C



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

OP2021-047

**PROJECT NAME:** Drfitwood Family Dental

SITE ADDRESS: 3210 N Croatan Hwy Kill Devil Hills

OCCUPANCY

ISSUED: 08/06/2021

**EXPIRES:** 

PARENT PERMIT #: BJ2020-215

APPLICANT:

724 HOLDINGS LLC

241 Hillcrest Drive kitty hawk, nc 27949

OWNER:

724 HOLDINGS LLC

241 Hillcrest Drive

kitty hawk, nc 27949

CONTRACTOR: Finch & Company, Inc.

116 Sandy Ridge Rd

kitty hawk, nc 27949 252-261-8710

GENERAL, UNLIMITED:

PREMIERE CONTRACTING INC.

PO Box 269

kitty hawk, nc 27949 252-261-7244 License: 58986

Expires: 12/31/2021

PARCEL:

PIN:

98751694619508

Parcel

Number:

Address:

3210 N Croatan Hwy Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Unit 2c Island Land Centre Commercial Condominium

FEES:

Paid

Due

Certificate of Occupancy Fee

\$50.00

\$0.00

Totals:

\$50.00

\$0.00

PROJECT DESCRIPTION: remodel of existing office space to accommodate dentist office

AUG 1 2 2021

TO SEA ST

Page 1 of 2

PROJECT NAME: Drfitwood Family Dental

SITE ADDRESS: 3210 N Croatan Hwy Kill Devil Hills

OCCUPANCY

ISSUED: 08/06/2021

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

**PURPOSE** 

Commercial

Repair/Remodel

ZONING DISTRICT

С

FLOOD ZONE

X

**OCCUPANCY TYPE** 

Business

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By

**Contractor or Authorized Agent:** 

Date: 8-12-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

OP2021-052

PROJECT NAME: Lane Investment Properties NC, LLC SITE ADDRESS: 707 Seventh Ave. Kill Devil Hills

OCCUPANCY

ISSUED: 08/27/2021

**EXPIRES:** 

**PARENT PERMIT #: BJ2021-069** 

APPLICANT:

EAST COAST CONSTRUCTION GROUP

PO Box 329

KILL DEVIL HILLS, NC 27948

252-202-1600

OWNER:

Lane Investment Properties NC, LLC

PO Box 329

Kill Devil Hills, NC 27948

252-202-1600

**GENERAL**:

EAST COAST CONSTRUCTION GROUP

PO Box 329

KILL DEVIL HILLS, NC 27948

252-202-1600

GENERAL:

EAST COAST CONSTRUCTION GROUP

PO Box 329

KILL DEVIL HILLS, NC 27948

252-202-1600

License: 34495

Expires: 01/01/2022

License: 34495

Expires: 01/01/2022

PARCEL:

PIN:

988311678372

Parcel Number:

Address:

707 Seventh Ave. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 8, Block 37, Kill Devil Hill Realty Corp. Addition

FEES:

Certificate of Occupancy Fee

Paid \$50.00

**Due** \$0.00

Residential Trash Can

\$106.75

\$0.00

Totals:

\$156.75

\$0.00

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

....

AUG 27 2021

الأورد

PROJECT NAME: Lane Investment Properties NC, LLC SITE ADDRESS: 707 Seventh Ave. Kill Devil Hills

OCCUPANCY

ISSUED: 08/27/2021

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

# OF TRASH CANS

1

**PURPOSE** 

Residential New

**ZONING DISTRICT** 

RL

FLOOD ZONE

X

OCCUPANCY TYPE

One & Two Family

Dwelling

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: 8/27/21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 24 2021

## **Planning and Inspection Department**

OP2021-051

PROJECT NAME: OBX Cottages LLC

SITE ADDRESS: 605 West Palmetto Street Kill Devil Hills

**OCCUPANCY** 

ISSUED: 08/24/2021

**EXPIRES** 

PARENT PERMIT #: BJ2021-046

APPLICANT:

Sandy Bottom Homes 400 DaVinci Lane

kitty hawk, nc 27949 757-448-8162

OWNER:

**OBX COTTAGES LLC** 

200 EAST BLACKMAN ST

nags head, nc 27959

252-207-5475

**GENERAL BUILDING-LIMITED:** 

SANDY BOTTOM HOMES

400 DaVinci Lane kitty hawk, nc 27949

757-448-8162

License: 67524

Expires: 01/01/2022

PARCEL:

PIN:

987408994897

Parcel

Number:

Address:

605 West Palmetto Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 9R, Block 76, Virginia Dare Shores Recombination

FEES:

Due

Certificate of Occupancy Fee

\$50.00

Paid

\$0.00

Residential Trash Can

\$106.75

\$0.00

Totals:

\$156.75

\$0.00

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

PROJECT NAME: OBX Cottages LLC

SITE ADDRESS: 605 West Palmetto Street Kill Devil Hills

OCCUPANCY

ISSUED: 08/24/2021

EXPIRES:

**DETAILS** 

Permit

Name

Value

# OF TRASH CANS

1

**PURPOSE** 

Residential New

ZONING DISTRICT

RL

FLOOD ZONE

X

OCCUPANCY TYPE

One & Two Family

Dwelling

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

nly mh

Date: 8-24-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

OP2021-050

**PROJECT NAME:** Heather and Anthony Versic

SITE ADDRESS: 203 HAYMAN BLVD E KILL DEVIL HILLS

OCCUPANCY

ISSUED: 08/19/2021

**EXPIRES:** 

PARENT PERMIT #: BJ2021-035

APPLICANT:

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

OWNER:

Versic, Heather

221 E. Chowan Street

Kill Devil Hills, NC 27948

**BUILDING LIMITED:** 

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

**BUILDING LIMITED:** 

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

License: 78583

**Expires:** 

License: 78583

**Expires:** 

PARCEL:

PIN:

988513125500

Parcel Number:

000787000

Address:

203 HAYMAN BLVD E KILL DEVIL HILLS

Zoning:

Addition:

VIRGINIA DARE SHORES AMD BLK 6

Block:

6

Lot(s): PT 10 & 11

Legal Description:

FEES: Certificate of Occupancy Fee Paid \$50.00 <u>Due</u>

Residential Trash Can

\$106.75

\$0.00 \$0.00

Totals:

\$156.75

\$0.00

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

AUG 19 2021

11 :

Printed by: Marty Shaw on: 08/19/2021 02:05 PM

Page 1 of 2

PROJECT NAME: Heather and Anthony Versic

SITE ADDRESS: 203 HAYMAN BLVD E KILL DEVIL HILLS

**OCCUPAN** 

ISSUED: 08/19/202

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

# OF TRASH CANS

1

**PURPOSE** 

Residential New

**ZONING DISTRICT** 

C

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

Dwelling

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: 8-19-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 18 2021

## **Planning and Inspection Department**

OP2021-049

**PROJECT NAME:** Bryan Harvey

SITE ADDRESS: 202 PARK DR KILL DEVIL HILLS

OCCUPANCY

Rulpe CONTRACTOR OF THE PARTY OF THE

ISSUED: 08/18/2021

**EXPIRES:** 

PARENT PERMIT #: BJ2020-177

APPLICANT:

HARVEY, BRYAN

309 W SOUNSIDE RD

nags head, nc 27959

OWNER:

HARVEY, BRYAN

309 W SOUNSIDE RD

nags head, nc 27959

**CONTRACTOR:** Smith Contracting LLC

PO Box 471

Kitty Hawk, NC 27949 252-202-6602

**GENERAL:** 

Smith Contracting LLC

PO Box 471

Kitty Hawk, NC 27949

252-202-6602

License: 79892

Expires: 12/31/2021

PARCEL:

PIN:

988419607560

Totals:

Parcel Number:

008160000

Address:

202 PARK DR KILL DEVIL HILLS

Zoning:

Addition:

BAUM BAY SHORES - REVISED

Block:

C

Lot(s): 6

Legal Description:

Certificate of Occupancy Fee

FEES:

Paid

Due

Residential Trash Can

\$50.00

\$0.00 \$0.00

\$106.75 \$156.75

\$0.00

PROJECT DESCRIPTION: Proposed 1 bedroom single family dwelling

PROJECT NAME: Bryan Harvey

SITE ADDRESS: 202 PARK DR KILL DEVIL HILLS

OCCUPANCY

ISSUED: 08/18/2021

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

# OF TRASH CANS

1

**PURPOSE** 

Residential New

ZONING DISTRICT

RL

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

**Dwelling** 

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

Date: 8/18/2021

Printed by : CTHUMAN on: 08/18/2021 08:54 AM



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

AUG 13 2021

## **Planning and Inspection Department**

MC2021-239

PROJECT NAME: SHEIL HVAC REPLACEMENT SITE ADDRESS: 3108 BAY DR KILL DEVIL HILLS

**MECHANICAL** 

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

APPLICANT:

SHEIL, JASON

3108 BAY DR

Kill Devil Hills, NC 27948

757-403-2439

OWNER:

SHEIL, JASON

31**08 BAY DR** 

Kill Devil Hills, NC 27948

757-403-2439

**MECHANICAL H-3 CLASS 1:** 

CROSSWINDS

UNKNOWN

UNKNOWN, XX 00000

License: 14825

Expires: 12/31/2021

PARCEL:

PIN:

987520812719

Parcel Number: 029610012

Address:

3108 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

VIRGINIA DARE SHORES REVISED

Block:

89

Lot(s): 12-14

Legal Description:

FEES:

**Paid** 

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: CHANE OUT 2ND AND 3RD FLOOR HVAC UNITS

4/13/2/ Paypul 99



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 17 2021

## Planning and Inspection Department

OP2021-048

PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 1305 First St W Kill Devil Hills

**OCCUPANC** 

ISSUED: 08/16/2021

**EXPIRES** 

PARENT PERMIT #: BJ2020-219

APPLICANT:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

CONTRACTOR: SAGA CONSTRUCTION INC.

1314 S Croatan Hwy, Suite 301

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2021

PARCEL:

PIN:

988413129595

Parcel

Number:

Address:

1305 First St W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 65, Water Oak Residential Community

FEES: Certificate of Occupancy Fee

\$50.00

**Paid** 

**Due** \$0.00

Residential Trash Can

\$106.75

\$0.00

Totals:

\$156.75

\$0.00

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling

PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 1305 First St W Kill Devil Hills

OCCUPANCY

ISSUED: 08/16/2021

EXPIRE\$:

**DETAILS** 

**Permit** 

Name

Value

# OF TRASH CANS

1

PURPOSE

Residential New

**ZONING DISTRICT** 

RL

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

**Dwelling** 

#### CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Date:

X



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 5 2021

1

11(152.)

## **Planning and Inspection Department**

OP2021-046

PROJECT NAME: Pencheva New House

SITE ADDRESS: 539 AYCOCK ST W Kill Devil Hills

OCCUPANCY

ISSUED: 08/04/2021

**EXPIRES:** 

PARENT PERMIT #: BJ2021-028

APPLICANT:

PENCHEVA, INNA

2606 Pilot Lane

nags head, nc 27959

OWNER:

PENCHEVA, INNA

2606 Pilot Lane

nags head, nc 27959

**CONTRACTOR: 2 GUYS SERVICES** 

605 W. Archdale St.

Kill Devil Hills, NC 27948

252-489-8753

**GENERAL BUILDING - LIMITED:** 

2 GUYS SERVICES

605 W. Archdale St.

Kill Devil Hills, NC 27948

252-489-8753

License: 75144

Expires: 01/01/2022

PARCEL:

PIN:

987520903480

Parcel

Number:

Address:

539 AYCOCK ST W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lots 1 and 2, Block 73, Virginia Dare Shores

FEES: Certificate of Occupancy Fee

Paid \$50.00

Due \$0.00

Residential Trash Can

\$106.75

\$0.00

Totals:

\$156.75

\$0.00

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

AUG - 5 2021

PROJECT NAME: Pencheva New House

SITE ADDRESS: 539 AYCOCK ST W Kill Devil Hills

**OCCUPANCY** 

ISSUED: 08/04/2021

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

# OF TRASH CANS

1

**PURPOSE** 

Residential New

**ZONING DISTRICT** 

RL

FLOOD ZONE

X

**OCCUPANCY TYPE** 

One & Two Family

**Dwelling** 

### CONDITIONS

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Issued Ry

Contractor or Authorized Agent:

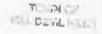
Date:



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG - 3 2021



## Planning and Inspection Department

PL2021-008

PROJECT NAME: Sea Ranch plumbing

SITE ADDRESS: 1731 VA DARE TRL N KILL DEVIL HILLS

PLUMBING

ISSUED: 08/02/2021

**EXPIRES: 01/29/2022** 

APPLICANT:

Sea Ranch Resort, LLC

1731 NORTH Virginia Dare TR

Kill Devil Hills, NC 27948

240-475-9356

OWNER:

Sea Ranch Resort, LLC

1731 NORTH Virginia Dare TR

Kill Devil Hills, NC 27948

240-475-9356

**PLUMBING CLASS I:** 

JYWCO, Inc.

830 W 39th St

NORFOLK, VA 23508

757-489-8012

License: L17354

Expires: 12/31/2021

PARCEL:

PIN:

888406479813

Parcel Number: 002783000

C

Address:

1731 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Croatan Shores Amended

Block:

Lot(s):

1-3 & PT 4-8

Legal Description:

FEES:

Paid

Due

Plumbing Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O Water heater like for like

**DETAILS** 

**Permit** 

Name

Value

**PURPOSE** 

Commercial

Repair/Remodel

CONSTRUCTION COST

12000.00

FLOOD ZONE

VE

**BASE FLOOD ELEVATION** 

**OCCUPANCY TYPE** 

12

Residential

Printed by: CTHUMAN on: 08/02/2021 02:49 PM

Page 1 of 2

D-- ID- -- F000L740E4447-4L490-49-E-4-440-4040-4049L

# PL2021-008

PROJECT NAME: Sea Ranch plumbing

SITE ADDRESS: 1731 VA DARE TRL N KILL DEVIL HILLS

PLUMBING

ISSUED: 08/02/2021

EXPIRES: 01/29/2022

## **REQUIRED INSPECTIONS**

Final

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

Contractor or Authorized Agent: Vincent J Obrien

Date: 08 / 03 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## Planning and Inspection Department

OP2021-045

PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 707 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 08/03/2021

**EXPIRES**:

PARENT PERMIT #: BJ2020-222

APPLICANT:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**CONTRACTOR: SAGA CONSTRUCTION** 

UNKNOWN

UNKNOWN, XX 00000

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2021

PARCEL:

PIN:

988417221327

Parcel

Number:

Address:

707 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Certificate of Occupancy Fee

Lot 60. Water Oak Residential Community

FEES:

Due

Residential Trash Can

\$50.00 \$106.75

Paid

\$0.00 \$0.00

Totals:

\$156.75 \$0.00

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling

AIG - 3 2021

Printed by: CTHUMAN on: 08/03/2021 08:58 AM

\* +1 . \*

Page 1 of 2

PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 707 Zen Lane Kill Devil Hills

**OCCUPANCY** 

ISSUED: 08/03/2021

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

# OF TRASH CANS

1

**PURPOSE** 

Residential New

**ZONING DISTRICT** 

RL

FLOOD ZONE

X

OCCUPANCY TYPE

One & Two Family

Dwelling

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

pacifor Muck

Date: 8.3



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

OP2021-044

**PROJECT NAME: Imperial Investments Townhomes** 

SITE ADDRESS: 602 BOUNDARY ST W KILL DEVIL HILLS

OCCUPANCY

ISSUED: 07/27/2021

**EXPIRES:** 

PARENT PERMIT #: BJ2019-139

APPLICANT:

Imperial Investments OBX, LLC

307 woodard drive kitty hawk, nc 27949 OWNER:

Imperial Investments OBX, LLC

307 woodard drive kitty hawk, nc 27949

CONTRACTOR: Neal Contracting/ Matt Neal

P.O. Box 637

Kill Devil Hills, NC 27948

252-599-6232

**GENERAL BUILDING:** 

Neal Contracting/ Matt Neal

P.O. Box 637

Kill Devil Hills, NC 27948

252-599-6232

License: 66561

**Expires:** 

PARCEL:

PIN:

988312759304

Parcel Number:

004533000

42

Address:

602 BOUNDARY ST W KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS REALTY CORP

Block:

Lot(s): 6

Legal Description:

FEES:

**Paid** 

**Due** 

Certificate of Occupancy Fee

\$50.00

\$0.00

Totals:

\$50.00

\$0.00

PROJECT DESCRIPTION: Construct 7 two bedroom townhomes

JUL 3 0 2021

70 467 # 1 E

Printed by: Marty Shaw on: 07/27/2021 04:40 PM

Page 1 of 2

**PROJECT NAME: Imperial Investments Townhomes** 

SITE ADDRESS: 602 BOUNDARY ST W KILL DEVIL HILLS

**OCCUPANO** ISSUED: 07/27/202

EXPIRES:

**DETAILS** 

**Permit** 

Name

Value

**PURPOSE** 

Residential New

ZONING DISTRICT

LI-2

FLOOD ZONE

X

**OCCUPANCY TYPE** 

Residential

### CONDITIONS

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

Date: 7-30-2



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 17 2021

### **Planning and Inspection Department**

BP2021-138

PROJECT NAME:

SITE ADDRESS: 905 SHARON CT KILL DEVIL HILLS

BUILDING

ISSUED: 08/17/2021

**EXPIRES: 02/13/2022** 

APPLICANT:

NEWBERN, KENSTOCK A

403 Westmoreland Ave Portsmouth, VA 23707

OWNER:

NEWBERN, KENSTOCK A

403 Westmoreland Ave Portsmouth, VA23707

CONTRACTOR: Sun Realty of Nags Head

8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945

PARCEL:

PIN:

988405078843

Parcel Number: 002193000

Address:

905 SHARON CT KILL DEVIL HILLS

Zoning:

Addition:

WRIGHT'S SHORES

Block:

0

98 Lot(s):

Legal Description:

FEES:

**Paid** 

**Due** 

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Rebuild deck and stairs

N

Ν

**DETAILS** 

**Permit** 

Name Value **CAMA PERMIT** N

CAMA EXEMPTION

FINAL ELEVATION CERTIFICATE

Cost #5,000.00 Flood Zone X

BP2021-138 PROJECT NAME:

SITE ADDRESS: 905 SHARON CT KILL DEVIL HILLS

BUILDING

ISSUED: 08/17/2021

EXPIRES: 02/13/2022

### REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

**Zoning Final** 

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued By:

Contractor or Authorized Agent:

Date:

Printed by: CTHUMAN on: 08/17/2021 04:54 PM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

# **Planning and Inspection Department**

BP2021-183

PROJECT NAME: CONCH LLC STAIR

SITE ADDRESS: 222 WILKINSON ST W KILL DEVIL HILLS

BUILDING

ISSUED: 08/27/2021

**EXPIRES: 02/23/2022** 

APPLICANT:

Conch II

2-C Fountain Manor Dr Greensboro, NC 27405 OWNER:

Conch II

2-C Fountain Manor Dr Greensboro, NC 27405

**UNLICENSED BUILDER:** 

GEORGE & SONS 182 SCUPPERNONG RD

MANTEO, NC 27954 252-423-1037 License: XXXXXX

**Expires:** 

PARCEL:

PIN:

988513021856

Parcel Number: 004062000

34

Address:

222 WILKINSON ST W KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

Block:

Lot(s):

31-32

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

ree

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR AND LANDING IN THE SAME LOCATION

AUG 30 2021

194 to a

BP2021-183

PROJECT NAME: CONCH LLC STAIR

SITE ADDRESS: 222 WILKINSON ST W KILL DEVIL HILLS

BUILDING

ISSUED: 08/27/2021

EXPIRES: 02/23/2022

### **DETAILS**

-		-	2	•	•	п	•
P	Œ	в.			ш	ı	ш
-	-		-	•	-	٦	-

Name

**CAMA PERMIT** 

N

CAMA EXEMPTION

N

Value

ZONING DISTRICT

RL

**PURPOSE** 

Residential

Repair/Remodel

FRONT YARD SETBACK

15

SIDE YARD SETBACK

6

REAR YARD SETBACK

20% Depth >30

FLOOD ZONE

X

FINAL ELEVATION CERTIFICATE

N

CONSTRUCTION COST

4000.00

**CONSTRUCTION TYPE** 

1/

OCCUPANCY TYPE

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

**Zoning Final** 

Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Approved to repair/replace existing stair/landing "As-is". (See Attached Photos) Any change to stairs/landing, As-built survey required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



**Planning and Inspection Department** 

AUG 3 0 2021

BP2021-184

PROJECT NAME: PATSELL STAIR REBUILD

SITE ADDRESS: 109 MEADOWLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 08/30/2021

EXPIRES: 02/26/2022

APPLICANT:

PATSELL, ROBERT & JILL

22500 BRITT WAY

CARROLLTON, VA 23314

757-287-2947

OWNER:

PATSELL, ROBERT & JILL

22500 BRITT WAY

CARROLLTON, VA23314

757-287-2947

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

988308890776

Parcel

028425000

Number:

Address:

109 MEADOWLARK ST E KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

33

Lot(s): 17

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR IN SAME LOCATION

BP2021-184

PROJECT NAME: PATSELL STAIR REBUILD

SITE ADDRESS: 109 MEADOWLARK ST E KILL DEVIL HILLS

BUILD

ISSUED: 08/30/2021

EXPIRES: 02/26/2022

### **DETAILS**

Permit	P	e	r	ľ	Ĭ	1	ľ	t
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Value Name **CAMA PERMIT** N

CAMA EXEMPTION N

ZONING DISTRICT C

Residential **PURPOSE** Repair/Remodel

15 FRONT YARD SETBACK

SIDE YARD SETBACK

REAR YARD SETBACK 20% Depth >30

FLOOD ZONE X N FINAL ELEVATION

CERTIFICATE

2500.00 CONSTRUCTION COST

CONSTRUCTION TYPE

**OCCUPANCY TYPE** One & Two Family

**Dwelling** 

### REQUIRED INSPECTIONS

Zoning Final

Final

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent: S



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 3 0 2021

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# **Planning and Inspection Department**

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ISSUED: 08/27/2021

BUILDING

**EXPIRES: 02/23/2022** 

BP2021-181

**PROJECT NAME:** Walter Gills

SITE ADDRESS: 116 AVALON DR E KILL DEVIL HILLS

APPLICANT:

GILLS, WILLIAM J JR

116 EAST AVALON DR

KILL DEVIL HILLS, NC 27948

OWNER:

GILLS, WILLIAM J JR

116 EAST AVALON DR KILL DEVIL HILLS, NC 27948

CONTRACTOR:

SAME AS OWNER

UNKNOWN

UNKNOWN, XX 00000

License: Same as Owner

Expires: 12/31/2021

PARCEL:

PIN:

988517203962

Parcel Number: 001697000

Address:

116 AVALON DR E KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH** 

Totals:

Block:

0

Lot(s):

43

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

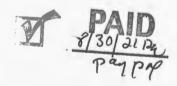
\$0.00

ree

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace front steps



BP2021-181

**PROJECT NAME: Walter Gills** 

SITE ADDRESS: 116 AVALON DR E KILL DEVIL HILLS

BUILDING

ISSUED: 08/27/2021

EXPIRES: 02/23/2022

### **DETAILS**

**Permit** 

Name

Value

**CAMA PERMIT** 

N

CAMA EXEMPTION
ZONING DISTRICT

N

PURPOSE

Residential

Repair/Remodel

FRONT YARD SETBACK

15

SIDE YARD SETBACK

6

REAR YARD SETBACK

20% Depth >30

FLOOD ZONE

X

**FINAL ELEVATION** 

N

CERTIFICATE

CONSTRUCTION COST

500.00

CONSTRUCTION TYPE

V

OCCUPANCY TYPE

One & Two Family

Dwelling

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

## CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

\* Replace within existing footprint.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: Charles Thuman

Contractor or Authorized Agent:

Walter A Bills

Date: 08 / 27 / 2021



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

AUG 3 0 2021

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## Planning and Inspection Department

BP2021-136

PROJECT NAME: NEUGEBAUER STORAGE ENCLOSURE

SITE ADDRESS: 603 KELLY CT KILL DEVIL HILLS

BUILDING

ISSUED: 06/16/2021

EXPIRES: 12/13/2021

APPLICANT:

NEUGEBAUER, RYAN

603 KELLY CT

Kill Devil Hills, NC 27948

516-736-1426

OWNER:

NEUGEBAUER, RYAN

**603 KELLY CT** 

Kill Devil Hills, NC 27948

516-736-1426

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2021

PARCEL:

PIN:

988405185238

Parcel Number: 002095000

Address:

603 KELLY CT KILL DEVIL HILLS

Zoning:

Addition:

WRIGHT'S SHORES

Block:

0

Lot(s): 133

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION:

ENCLOSE 13'X22' SPACE WITH DOUBLE DOOR UNDER EXISITING FOOTPRINT FOR

**UNCONDITIONED STORAGE** 

PAID PHYPO

BP2021-136

**OCCUPANCY TYPE** 

PROJECT NAME: NEUGEBAUER STORAGE ENCLOSURE

SITE ADDRESS: 603 KELLY CT KILL DEVIL HILLS

BUILDING

ISSUED: 06/16/2021

EXPIRES: 12/13/2021

### **DETAILS**

Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	X	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	700.00	
CONSTRUCTION TYPE	V	

### **REQUIRED INSPECTIONS**

Zoning Final Final

Dwelling

One & Two Family

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Space is to be used as unconditioned storage only.

Dan ID. 7-50000057044450744-0-10845700-540504404



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



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Planning and Inspection Department CASH AUG 27 2021

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BP2021-182

PROJECT NAME: BERGMAN POOL BARRIER SITE ADDRESS: 1311 Memorial Blvd. Kill Devil Hills KAL BANK BUILDING

ISSUED: 08/27/2021

EXPIRES: 02/23/2022

APPLICANT:

BERGMAN, JOEL

303 BARRINGER CT

WEST ORANGE, NJ 07052

201-615-0503

OWNER:

BERGMAN, JOEL

303 BARRINGER CT

WEST ORANGE, NJ 07052

201-615-0503

**BUILDER:** 

**ALL ABOUT FENCES TOO** 

989 BURNSIDE RD Manteo, NC 27954 252-377-7379

License: 0000 **Expires:** 

PARCEL:

PIN:

989309063392

Parcel

004701005

Number:

Address:

1311 Memorial Blvd. Kill Devil Hills

Zoning:

Addition:

KILL DEVIL BEACH SEC 1 REVISED

Block:

D

Lot(s): 11

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REMOVE EXISTING POOL BARRIER AND INSTALL NEW PVC POOL BARRIER BP2021-182

PROJECT NAME: BERGMAN POOL BARRIER
SITE ADDRESS: 1311 Memorial Blvd. Kill Devil Hills

BUILDING

ISSUED: 08/27/2021

EXPIRES: 02/23/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Zoning Final

Final

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state local law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date:



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 PAID

AUG 23 2021

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# **Planning and Inspection Department**

BP2021-176

PROJECT NAME: Ann Wooding

SITE ADDRESS: 107 WRIGHT AVE E KILL DEVIL HILLS

BUILDING

ISSUED: 08/20/2021

EXPIRES: 02/16/2022

APPLICANT:

Gibbs, Clarence Po Box 2387

Manteo, NC 27954

OWNER:

Wooding, Ann

107 EAST Wright AVE EAST Kill Devil Hillsl, NC 27948

**BUILDING UNLIMITED:** 

Gibbs, Clarence Po Box 2387

Manteo, NC 27954

License: 76990

Expires: 12/31/2021

PARCEL:

PIN:

988420705730

Parcel Number:

003879000

Address:

107 WRIGHT AVE E KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

37

Lot(s): 16

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Stabilize crows nest, replace rails, stairs and pilings within existing footprint

BP2021-176

PROJECT NAME: Ann Wooding SITE ADDRESS: 107 WRIGHT AVE E KILL DEVIL HILLS

ISSUED: 08/20/2021

EXPIRES: 02/16/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6850.00
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 23 2021

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## **Planning and Inspection Department**

BP2021-175

PROJECT NAME: Ring Deck Rebuild

SITE ADDRESS: 405 ST LOUIS ST KILL DEVIL HILLS

BUILDING

ISSUED: 08/19/2021

**EXPIRES: 02/15/2022** 

APPLICANT:

Ring Family Trust

804 Hope Ct

GAITHERSBURG, MD 20878

OWNER:

Ring Family Trust

804 Hope Ct

GAITHERSBURG, MD 20878

CONTRACTOR: Brad Loy Builder Ltd

5124 Virginia Dare Trail Kitty Hawk, NC 27949

**GENERAL - LIMITED:** 

Brad Loy Builder Ltd

5124 Virginia Dare Trail Kitty Hawk, NC 27949

License: 53000

Expires: 12/31/2021

PARCEL:

PIN:

987516844079

Parcel

000194000

Number:

Address:

405 ST LOUIS ST KILL DEVIL HILLS

Zoning:

Addition:

**ORVILLE BEACH WEST** 

Block:

0

Lot(s):

92

Legal Description:

FEES:

Paid

Due

**Building Permit Fee - Minimum** 

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Rebuild existing deck to same footprint BP2021-175

PROJECT NAME: Ring Deck Rebuild SITE ADDRESS: 405 ST LOUIS ST KILL DEVIL HILLS

ISSUED: 08/19/2021

EXPIRES: 02/15/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S22-5537
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18000.00
LOT COVERAGE	25.90
SURVEYOR NAME AND NUMBER	JH Miller L-4958
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

**Zoning Final** Final

### CONDITIONS

<sup>\*</sup> This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

<sup>\*</sup> Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

AUG 1 3 2021

## **Planning and Inspection Department**

BP2021-173

PROJECT NAME: SHEIL FIREPLACE REMOVAL SITE ADDRESS: 3108 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 08/13/2021

EXPIRES: 02/09/2022

APPLICANT:

SHEIL, JASON

3108 BAY DR

Kill Devil Hills, NC 27948

757-403-2439

OWNER:

SHEIL, JASON

3108 BAY DR

Kill Devil Hills, NC 27948

757-403-2439

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2021

PARCEL:

PIN:

987520812719

Parcel

Number:

029610012

Address:

3108 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

VIRGINIA DARE SHORES REVISED

Block:

89

Lot(s): 12-14

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REMOVE FIREPLACE AND CHIMNEY FROM EXTERIOR WALL, CLOSE IN OPENING

PAID Solisty pay por Mr



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102



AUG 17 2021

## Planning and Inspection Department

TOMOS NO. DEVENUE

BP2021-172

PROJECT NAME: Stassie Deck and Stair Replacement SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 08/16/2021

**EXPIRES: 02/12/2022** 

APPLICANT:

Herb & Mary Stassie

777 Stinchcomb Rd.

SEVERNA PARK, MD 21146

410-703-5366

OWNER:

Herb & Mary Stassie

777 Stinchcomb Rd.

SEVERNA PARK, MD 21146

410-703-5366

CONTRACTOR: MOYE, CHRISTOPHER A

**3923 SMITH ST** kitty hawk, nc 27949 252-216-8155

**GENERAL BUILDING-LIMITED:** 

MOYE, CHRISTOPHER A

**3923 SMITH ST** kitty hawk, nc 27949 252-216-8155

License: 76610

Expires: 12/31/2021

PARCEL:

PIN:

987408984620

Parcel Number: 001989000

Address:

2042 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

1014 Lot(s):

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: replace existing front deck and stairs to same footprint

PROJECT NAME: Stassie Deck and Stair Replacement SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 08/16/2021

EXPIRES: 02/12/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
LOT COVERAGE	28.00
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling

Final

**Zoning Final** 

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-168

PROJECT NAME: Miller Cottages Fire Repair - Unit 1 (oceanside)

SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

**EXPIRES: 02/07/2022** 

APPLICANT:

ALEXANDRA, LLC

1525 EAST OCEAN ACRES DRIVE

KILL DEVIL HILLS, NC 27948

OWNER:

ALEXANDRA, LLC

1525 EAST OCEAN ACRES DRIVE

KILL DEVIL HILLS, NC 27948

CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS

PO Box 1922

Kill Devil Hills, NC 27948

480-9477

**GENERAL BUILDING - UNLIMITED:** 

SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

License: 32380

Expires: 01/01/2022

PARCEL:

PIN:

989313231995

Parcel Number:

008506000

Address:

2033 VA DARE TRL S KILL DEVIL HILLS

Zonina:

Addition:

NAGS HEAD SHORES AMENDED SEC 4

Block:

3

Lot(s):

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: repair siding and roof unit 1, engineered letter

AUG 12 2021

PROJECT NAME: Miller Cottages Fire Repair - Unit 1 (oceanside) SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Υ
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
HEALTH DEPARTMENT PERMIT#	S22-5163
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	20000.00
LOT COVERAGE	44.00
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

Zoning Final Framing
Final Insulation

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-171

PROJECT NAME: KITTY HAWK BAPTIST STAIR REBUILD SITE ADDRESS: 3112 COLUMBIA AVE KILL DEVIL HILLS

BUILDING

ISSUED: 08/12/2021

EXPIRES: 02/08/2022

APPLICANT:

Kitty Hawk Baptist Church, Inc.

PO BOX 165

kitty hawk, nc 27949

OWNER:

Kitty Hawk Baptist Church, Inc.

PO BOX 165

kitty hawk, nc 27949

**GENERAL**:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

987516937223

Parcel Number: 000335000

Address:

3112 COLUMBIA AVE KILL DEVIL HILLS

Zoning:

Addition:

MOOR SHORES TWO

Block:

Lot(s):

173

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

ree

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REBUILD 2 SETS OF EXTERIOR STAIRS SAME FOOT PRINT

AUG 1 2 2021

PAID

PROJECT NAME: KITTY HAWK BAPTIST STAIR REBUILD SITE ADDRESS: 3112 COLUMBIA AVE KILL DEVIL HILLS

BUILDING

ISSUED: 08/12/2021

EXPIRES: 02/08/2022

## **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1800.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-169

PROJECT NAME: Miller Cottages Fire Repair - Unit 2 (2nd house back

from ocean)

SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

**EXPIRES: 02/07/2022** 

APPLICANT:

ALEXANDRA, LLC

1525 EAST OCEAN ACRES DRIVE

KILL DEVIL HILLS, NC 27948

OWNER:

ALEXANDRA, LLC

1525 EAST OCEAN ACRES DRIVE

KILL DEVIL HILLS, NC 27948

CONTRACTOR: SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

**GENERAL BUILDING - UNLIMITED:** 

SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

License: 32380

Expires: 01/01/2022

PARCEL:

PIN:

989313231995

Parcel Number: 008506000

Address:

2033 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

NAGS HEAD SHORES AMENDED SEC 4

Block:

3

Lot(s):

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: repair siding and roof unit 2, engineered letter

AUG 1 2 2021

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Printed by : Marty Shaw on: 08/11/2021 03:13 PM

Page 1 of 3

PROJECT NAME: Miller Cottages Fire Repair - Unit 2 (2nd house back

from ocean)

SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

### **DETAILS**

P	'e	r	n	1	İ	t
_	_			_		

Name Value

ZONING DISTRICT OIR FRONT YARD SETBACK 30

REAR YARD SETBACK CAMA

SIDE YARD SETBACK 10

HEALTH DEPARTMENT \$22-5163

PERMIT#

CAMA PERMIT N

CAMA EXEMPTION Y

FLOOD ZONE X SUBSTANTIAL NO

IMPROVEMENT

PURPOSE Residential

Repair/Remodel

Marty Barnette L-3740

Raymond G Pate 13018

CONSTRUCTION TYPE V

CONSTRUCTION COST 20000.00

LOT COVERAGE 44.00

SURVEYOR NAME AND NUMBER

**ENGINEER AND LICENSE** 

NUMBER

MOMBER

CULVERT

DRIVEWAY INVERT 2 N

DRIVEWAY INVERT 2

OCCUPANCY TYPE One & Two Family

**Dwelling** 

N

#### REQUIRED INSPECTIONS

Framing Final

Insulation Zoning Final

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-170

PROJECT NAME: Miller Cottages Fire Repair - Unit 3(3rd house back

from ocean)

SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

APPLICANT:

ALEXANDRA, LLC

1525 EAST OCEAN ACRES DRIVE KILL DEVIL HILLS, NC 27948

OWNER:

ALEXANDRA, LLC

1525 EAST OCEAN ACRES DRIVE KILL DEVIL HILLS, NC 27948

CONTRACTOR: SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

**GENERAL BUILDING - UNLIMITED:** 

SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

License: 32380

Expires: 01/01/2022

PARCEL:

PIN:

989313231995

Parcel

008506000

3

Number:

Address:

2033 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

NAGS HEAD SHORES AMENDED SEC 4

Block:

Lot(s): 8

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: repair siding and roof unit 3, engineered letter

AUG 12 2021

FAID

PROJECT NAME: Miller Cottages Fire Repair - Unit 3(3rd house back

from ocean)

**Permit** 

SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

### **DETAILS**

· OIIIII		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Υ	
ZONING DISTRICT	OIR	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	CAMA	
HEALTH DEPARTMENT PERMIT #	S22-5163	
FLOOD ZONE	X	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	20000.00	

CONSTRUCTION TYPE V
SURVEYOR NAME AND Marty Barnette L-3740

NUMBER

LOT COVERAGE

OCCUPANCY TYPE One & Two Family Dwelling

## **REQUIRED INSPECTIONS**

Zoning Final Framing
Final Insulation

44.00

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Zoning Final Inspection is required.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 1 2 2021

## **Planning and Inspection Department**

TOWN CF KULL DEVAL HILLS

BP2021-167

PROJECT NAME: Dolan Covered Deck Repair

SITE ADDRESS: 112 WRIGHT AVE E KILL DEVIL HILLS

BUILDING

ISSUED: 08/11/2021

EXPIRES: 02/07/2022

APPLICANT:

KANE, ROGER

9804 FORT KING ROAD RICHMOND, VA 23229

OWNER:

KANE, ROGER

9804 FORT KING ROAD RICHMOND, VA 23229

CONTRACTOR: ASHTON HARRELL CONSTRUCTION

4144 Poor Ridge Road kitty hawk, nc 27949 252-207-1247

**BUILDING LIMITED:** 

ASHTON HARRELL CONSTRUCTION

4144 Poor Ridge Road kitty hawk, nc 27949 252-207-1247

License: 82429

**Expires:** 

PARCEL:

PIN:

988420705899

Parcel Number:

003887000

Address:

112 WRIGHT AVE E KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

38

Lot(s):

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: replace decking and posts at front covered porch

PROJECT NAME: Dolan Covered Deck Repair

SITE ADDRESS: 112 WRIGHT AVE E KILL DEVIL HILLS

ISSUED: 08/11/202

EXPIRES: 02/07/2022

DE	TA	VIL	S
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Permit	

Value Name

**CAMA PERMIT** N CAMA EXEMPTION N ZONING DISTRICT RL

**PURPOSE** Residential Repair/Remodel

FRONT YARD SETBACK 15

6 SIDE YARD SETBACK

REAR YARD SETBACK 20% Depth >30

FLOOD ZONE X **FINAL ELEVATION** N

CERTIFICATE

CONSTRUCTION COST 10500.00

CONSTRUCTION TYPE

**OCCUPANCY TYPE** One & Two Family

Dwelling

#### REQUIRED INSPECTIONS

Zoning Final

Final

#### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

**Contractor or Authorized Agent:** 

Date: 8-12-21



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-161

PROJECT NAME: Small front stair remodel

SITE ADDRESS: 1700 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 08/03/2021

EXPIRES: 01/30/2022

APPLICANT:

Small, Priscilla E.

P O BOX 426

KILL DEVIL HILLS, NC 27948

252-449-5565

OWNER:

Small, Priscilla E.

P O BOX 426

KILL DEVIL HILLS, NC 27948

252-449-5565

CONTRACTOR: HADDON HOMES, INC.

PO Box 1868

Nags Head, NC 27959

267-2287

CONTRACTOR:

HADDON HOMES, INC.

PO Box 1868

Nags Head, NC 27959

267-2287

License: 55566

Expires: 01/01/2022

PARCEL:

PIN:

988413046916

Parcel Number:

002554000

Address:

1700 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

**CROATAN SHORES INC SEC 1** 

Block:

0

6-7& PT. Lot(s):

**BAY VIEW** 

Legal Description:

FEES:

Building Permit Fee - Minimum

Paid

Due

Fee **Driveway Permit Fee**  \$150.00

\$0.00

Totals:

\$50.00

\$0.00

\$200.00 \$0.00

PROJECT DESCRIPTION: relocate front stair tower on house currently under construction (BJ-2020-, reconfigure driveway

PROJECT NAME: Small front stair remodel

SITE ADDRESS: 1700 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 08/03/2021

EXPIRES: 01/30/2022

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Υ
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
HEALTH DEPARTMENT PERMIT #	30073
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

Zoning Final Final

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance,
- \* Zoning Final Inspection is required.



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102



AUG - 9 2021

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## **Planning and Inspection Department**

BP2021-164

PROJECT NAME: CASA DEL SOL Roof

SITE ADDRESS: 1803 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 08/05/2021

**EXPIRES: 02/01/2022** 

APPLICANT:

CASA DEL SOL PROPERTY

2600 Deerfield Crest CHESAPEAKE, VA 23321 OWNER:

CASA DEL SOL PROPERTY

2600 Deerfield Crest CHESAPEAKE, VA 23321

**GENERAL:** 

**OCEAN BUILDERS LLC** 

PO BOX 160

Manns Harbor, NC 27953

252-480-5514

License: 56420

Expires: 12/31/2021

Lot(s):

PARCEL:

PIN:

98840648548200

Parcel

027988999

D

Number:

Address:

1803 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

CASA DEL SOL CONDOS

Block:

COM. PROP.

LTS 12-1

Legal Description:

FEES:

**Paid** 

Due

**Building Permit Fee - Minimum** 

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Remove and replace asphalt roof shingles, flashing, and boots

M Regard

PROJECT NAME: CASA DEL SOL Roof

SITE ADDRESS: 1803 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 08/05/2021

EXPIRES: 02/01/2022

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	OIR	
PURPOSE	Residential Repair/Remodel	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	12	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	35000.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	Residential	

# REQUIRED INSPECTIONS

Zoning Final Final

## CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and known All provisions of Laws and Ordinances governing this type of work we specified herein or not. The granting of a permit does not presume to the provisions of any other state/local law regulating construction or lissued By:	ill be complied with whether give authority to violate or cancel
Contractor or Authorized Agent:	Date: 08 / 05 / 2021



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-165

PROJECT NAME: Maull Deck and Stair Rebuild

SITE ADDRESS: 200 FIRST ST E KILL DEVIL HILLS

BUILDING

ISSUED: 08/06/2021

**EXPIRES: 02/02/2022** 

APPLICANT:

Maull, Donald

2726 Deer Valley Rd MILFORD, DE 19963 OWNER:

Maull, Donald

2726 Deer Valley Rd MILFORD, DE 19963

CONTRACTOR: Gibbs, Clarence

Po Box 2387 Manteo, NC 27954

**BUILDING UNLIMITED:** 

Gibbs, Clarence

Po Box 2387 Manteo, NC 27954 License: 76990

Expires: 12/31/2021

PARCEL:

PIN:

988411561145

Parcel Number: 003172000

Address:

200 FIRST ST E KILL DEVIL HILLS

Zoning:

Addition:

WR DEATON - DELRAY BEACH

Block:

C

Lot(s): PT 37 & 38

Legal Description:

FEES:

Paid

Due

**BUILDING AREA:** 

Open Deck Fee

\$300.00

\$0.00

**Open Decks** 

2 EA

Totals:

\$300.00

\$0.00

PROJECT DESCRIPTION: rebuild existing front and rear deck and stairs to same footprint

PROJECT NAME: Maull Deck and Stair Rebuild

SITE ADDRESS: 200 FIRST ST E KILL DEVIL HILLS

ISSUED: 08/06/202

EXPIRES: 02/02/2022

### DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	20245.00
LOT COVERAGE	34.60
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
OCCUPANCY TYPE	One & Two Family Dwelling

## **REQUIRED INSPECTIONS**

**Zoning Final** Slab/Foundation/Piling

Final

<sup>\*</sup> This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

<sup>\*</sup> Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AllG - 6 2021

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## **Planning and Inspection Department**

BP2021-166

PROJECT NAME: OVERHEIM STAIR REBUILD SITE ADDRESS: 1917 BAY DR KILL DEVIL HILLS BUILDING

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

APPLICANT:

OVERHEIM, DAVID C

3736 FARNSWORTH DRIVE CHESAPEAKE, VA 23321

OWNER:

OVERHEIM, DAVID C

3736 FARNSWORTH DRIVE CHESAPEAKE, VA 23321

**GENERAL REMODELING-UNLICENSED:** 

**GOMEZ BROTHERS** 

P. O. BOX 1067

Kill Devil Hills, NC 27948

License: XXXXXX

**Expires:** 

PARCEL:

PIN:

988409071269

Parcel Number: 002166000

0

Address:

1917 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

WRIGHT'S SHORES

Block:

Lot(s):

66

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$150.00

\$0.00

\$0.00

Fee

Totals:

PROJECT DESCRIPTION:

REBUILD EXTERIOR STAIR, WIDEN FROM 3' TO 4' TOWARDS HOME, NO CHANGE TO

FOOTPRINT TOWARDS PROPERTY LINE PERMITTED.

PROJECT NAME: OVERHEIM STAIR REBUILD SITE ADDRESS: 1917 BAY DR KILL DEVIL HILLS BUILDING

ISSUED: 08/06/2021

EXPIRES: 02/02/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling

Final

**Zoning Final** 

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Zoning Final Inspection is required.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-151

**PROJECT NAME:** Fountain Shed

SITE ADDRESS: 2002 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 07/13/2021

EXPIRES: 01/09/2022

APPLICANT:

Geoffrey Fountain

2002 Bay Drive

Kill Devil Hills, NC 27948

OWNER:

Geoffrey Fountain

2002 Bay Drive

Kill Devil Hills, NC 27948

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2021

PARCEL:

PIN:

987408977549

Parcel Number:

002022000

0

Address:

2002 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

Lot(s):

1054,PT OF

1052

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: 12'x12' Shed in building setbacks

AUG - 6 2021

**PROJECT NAME:** Fountain Shed

SITE ADDRESS: 2002 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 07/13/2021

EXPIRES: 01/09/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
HEALTH DEPARTMENT PERMIT#	S22-4734
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4500.00
LOT COVERAGE	20.00
ACCESSORY STRUCTURE (SQFT)	144
SURVEYOR NAME AND NUMBER	Kirk Foreman

### REQUIRED INSPECTIONS

Zoning Final Final

Storage

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

**OCCUPANCY TYPE** 



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG - 4 2021

POLICE.

## **Planning and Inspection Department**

BP2021-163

PROJECT NAME: CHRISTENSEN STACKED DECK REBUILD SITE ADDRESS: 100 MEMORIAL BLVD N KILL DEVIL HILLS BUILDING

ISSUED: 08/04/2021

**EXPIRES: 01/31/2022** 

APPLICANT:

CHRISTENSEN, DELIA M

P.O. Box 2295

Kill Devil Hills, NC 27948

OWNER:

CHRISTENSEN, DELIA M

P.O. Box 2295

Kill Devil Hills, NC 27948

**BUILDING UNLIMITED:** 

Gibbs, Clarence Po Box 2387

Manteo, NC 27954

License: 76990

Expires: 12/31/2021

PARCEL:

PIN:

988420708721

Parcel

003867000

Number:

Address:

100 MEMORIAL BLVD N KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

37

Lot(s):

Legal Description:

Totals:	\$306.75	\$0.00			
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	209 SQFT	
Covered Porch Residential	\$156.75	\$0.00	Open Decks	1 EA	
FEES:	Paid	Due	BUILDING AREA:		

PROJECT DESCRIPTION:

REBUILD STACKED DECKS AND STAIRS IN EXISTING FOOTPRINT, REPAIR

SHEATHING/FRAMING AROUND SLIDER FROM WATER DAMAGE

PROJECT NAME: CHRISTENSEN STACKED DECK REBUILD SITE ADDRESS: 100 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING

ISSUED: 08/04/2021

EXPIRES: 01/31/2022

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	19880.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family

#### **REQUIRED INSPECTIONS**

Framing Zoning Final Slab/Foundation/Piling Final

Dwelling

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

PAID WITH CASH

## **Planning and Inspection Department**

BP2021-124

PROJECT NAME: Seward Deck and Stair Repair

SITE ADDRESS: 202 ARCHDALE ST E KILL DEVIL HILLS

BUILDING

ISSUED: 07/15/2021

EXPIRES: 01/11/2022

APPLICANT:

Seward, John

1195 Colonial Trail East

Surry, VA23883 757-880-3798

OWNER:

Seward, John

1195 Colonial Trail East

Surry, VA23883 757-880-3798

**GENERAL**:

Self

**UNKNOWN** 

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2021

PARCEL:

PIN:

988517125452

Parcel Number: 028469000

Address:

202 ARCHDALE ST E KILL DEVIL HILLS

Zoning:

Addition:

VIRGINIA DARE SHORES AMD BLK 6

Block:

6

Lot(s): PT 12 & 13

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: replace and repair existing stairs and deck

PROJECT NAME: Seward Deck and Stair Repair

SITE ADDRESS: 202 ARCHDALE ST E KILL DEVIL HILLS

BUILDING

ISSUED: 07/15/2021

EXPIRES: 01/11/2022

DET	AI	LS	
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Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
LOT COVERAGE	41.10
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	One & Two Family

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Railing system to be attached per engineered plan and manufacturer specifications.

**Dwelling** 



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-441-4102

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## **Planning and Inspection Department**

BP2021-162

**PROJECT NAME: COCHRAN STAIRS** 

SITE ADDRESS: 1636 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 08/04/2021

EXPIRES: 01/31/2022

APPLICANT:

COCHRAN, WILLIAM

4900 MANOR AVE

PORTSMOUTH, VA 23703

757-504-6868

OWNER:

COCHRAN, WILLIAM

4900 MANOR AVE

PORTSMOUTH, VA23703

757-504-6868

GENERAL:

Self

**UNKNOWN** 

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2021

PARCEL:

PIN:

988410479010

Parcel Number: 002818000

C

Address:

1636 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

**CROATAN SHORES** 

Block:

Lot(s):

1 & PT 2

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR IN SAME LOCATION

**PROJECT NAME: COCHRAN STAIRS** 

SITE ADDRESS: 1636 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 08/04/2021

EXPIRES: 01/31/2022

## **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1400.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Zoning Final

**Final** 

<sup>\*</sup> This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

<sup>\*</sup> Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

## **Planning and Inspection Department**

BP2021-159

**PROJECT NAME:** 

SITE ADDRESS: 606 THIRD ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/27/2021

**EXPIRES: 01/23/2022** 

APPLICANT:

BANDMANN, JACOB

606 WEST THIRD ST Kill Devil Hillsl, NC 27948

252-305-7723

OWNER:

BANDMANN, JACOB

606 WEST THIRD ST Kill Devil Hillsl, NC 27948

252-305-7723

CONTRACTOR:

SETH JOHNSON CONSTRUCTION CO., INC.

PO Box 1433

NAGS HEAD, NC 27959

252-216-8853

License: 61904

Expires: 01/01/2022

PARCEL:

PIN:

988409169925

Parcel Number: 002443000

Address:

606 THIRD ST W KILL DEVIL HILLS

Zoning:

Addition:

SEA HOLLY RIDGE

Block:

Lot(s):

18

Legal Description:

FEES:

Paid

Due

**Building Permit Fee - Minimum** 

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Rebuild deck/stairs/retaining wall

9

AUG - 2 2021

lay a

18 200

BP2021-159 PROJECT NAME:

SITE ADDRESS: 606 THIRD ST W KILL DEVIL HILLS

ISSUED: 07/27/2021

EXPIRES: 01/23/2022

### DETAILS

**Permit** 

Name

**CAMA PERMIT** 

CAMA EXEMPTION

ZONING DISTRICT

**PURPOSE** 

FLOOD ZONE

FINAL ELEVATION

CERTIFICATE

CONSTRUCTION COST

CONSTRUCTION TYPE

**OCCUPANCY TYPE** 

Value

N N

RL.

Residential Repair/Remodel

X N

25000.00

One & Two Family

Dwelling

## REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

### CONDITIONS

\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

Date: 8-2-2