



# Town of Kill Devil Hills

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

SEP - 3 2021

## Planning and Inspection Department

**BJ2021-187**

**PROJECT NAME:** Lenz Properties, LLC  
**SITE ADDRESS:** 103 East Palmetto Street Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 09/02/2021

**EXPIRES:** 03/01/2022

**APPLICANT:** Lenz Homes Inc.  
PO BOX 74  
Point Harbor, NC 27964  
252-207-2637

**OWNER:** Lenz, Edward  
20564 Captains Walk  
SMITHVILLE, VA 23430  
757-287-4474

**GENERAL BUILDING - LIMITED:** Lenz Homes Inc.  
PO BOX 74  
Point Harbor, NC 27964  
252-207-2637

**License:** 80731  
**Expires:**

**PARCEL:**

**PIN:** 988517118240

**Parcel Number:**

000814001

**Address:** 103 East Palmetto Street Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 7R, Block 24, Virginia Dare Shores Subdivision

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	107 SQFT
Res. Building Permit Fee	\$1,911.75	\$0.00	Open Decks	1 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	2549 sq. Ft.
Land Disturbing	\$100.00	\$0.00	(.75)	
Covered Porch Residential	\$80.25	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00		
<b>Totals :</b>				
	<b>\$2,492.00</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T24792

**BJ2021-187****PROJECT NAME:** Lenz Properties, LLC  
**SITE ADDRESS:** 103 East Palmetto Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/02/2021**EXPIRES:** 03/01/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	30890
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	400000.00
LOT COVERAGE	46.70
LIVING SPACE (SQFT)	2549
COVERED PORCHES/DECKS (SQFT)	107
OPEN DECK (SQFT)	270
TOTAL SQUARE FOOTAGE	2926
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

PO BOX 1719  
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Phone: 252-449-5318 Fax: 252-441-4102

SEP - 7 2021

## Planning and Inspection Department

**BJ2021-188**

**PROJECT NAME:** Jose Flores  
**SITE ADDRESS:** 108 Colington Road KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/03/2021

**EXPIRES:** 03/02/2022

**APPLICANT:** GARLAND DUNSTAN  
P.O. Box 402  
Kitty Hawk, NC 27949  
252-202-1100

**OWNER:** Flores, Jose  
1103 Swan St.  
KILL DEVIL HILLS, NC 27948  
252-256-0460

**GENERAL BUILDING, UNLIMITED:** GARLAND DUNSTAN  
P.O. Box 402  
Kitty Hawk, NC 27949  
252-202-1100

**License:** 19436  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988419700320

**Parcel Number:** 008152000

**Address:** 108 Colington Road KILL DEVIL HILLS

**Zoning:**

**Addition:** BAUM BAY SHORES - REVISED

**Block:** A **Lot(s):** 5

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$1,721.35	\$0.00	Covered Porches/Decks	108 SQFT
Covered Porch Residential	\$81.00	\$0.00	Residential Unheated (.40)	484 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	2037 sq. Ft.
<b>Totals :</b>	<b>\$1,852.35</b>	<b>\$0.00</b>	# of Temporary Poles	1 EA

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: 724795

**BJ2021-188****PROJECT NAME:** Jose Flores**SITE ADDRESS:** 108 Colington Road KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/03/2021**EXPIRES:** 03/02/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	30998
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	220000.00
LOT COVERAGE	30.00
LIVING SPACE (SQFT)	2037
COVERED PORCHES/DECKS (SQFT)	108
GARAGE (SQFT)	484
TOTAL SQUARE FOOTAGE	2629
SURVEYOR NAME AND NUMBER	Styons Surveying Services
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

PO BOX 1719  
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Phone: 252-449-5318 Fax: 252-441-4102

SEP 13 2021

## Planning and Inspection Department

**BJ2021-161**

**PROJECT NAME:** Bob Hoy New House  
**SITE ADDRESS:** 410 PETER LN KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 08/03/2021

**EXPIRES:** 01/30/2022

**APPLICANT:** HOY, ROBERT  
4205 Ivy Lane  
kitty hawk, nc 27949

**OWNER:** HOY, ROBERT  
4205 Ivy Lane  
kitty hawk, nc 27949

**CONTRACTOR:** HOY CONSTRUCTION LLC  
4205 Ivy Lane  
Kitty Hawk, NC 27949  
982-6337

**GENERAL:** HOY CONSTRUCTION LLC  
4205 Ivy Lane  
Kitty Hawk, NC 27949  
982-6337

**License:** 18132  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988405280139

**Parcel Number:** 002238126

**Address:** 410 PETER LN KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES SEC 2

**Zoning:**

**Block:** 0 **Lot(s):** 126

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$117.00	\$0.00	Covered Porches/Decks	156 SQFT
Res. Building Permit Fee	\$1,291.50	\$0.00	# of Temporary Poles	116 1 EA
T-Pole	\$50.00	\$0.00	Residential Heated Space	1722 sq. Ft.
<b>Totals :</b>	<b>\$1,458.50</b>	<b>\$0.00</b>	(.75)	

**PROJECT DESCRIPTION:** New 3 Bedroom Single Family Dwelling

Town of Kill Devil Hills

Water Charges

**PAID**

Water Tap #: T24750

**BJ2021-161****PROJECT NAME:** Bob Hoy New House  
**SITE ADDRESS:** 410 PETER LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 08/03/2021**EXPIRES:** 01/30/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30844
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	10.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	33.10
LIVING SPACE (SQFT)	1722
COVERED PORCHES/DECKS (SQFT)	156
TOTAL SQUARE FOOTAGE	1878
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

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

SEP 13 2021

## Planning and Inspection Department

### BUILDING JOINT

ISSUED: 09/03/2021

EXPIRES: 03/02/2022

**BJ2021-186**

**PROJECT NAME:** Jeffrey Bower  
**SITE ADDRESS:** 412 PETER LN KILL DEVIL HILLS

**APPLICANT:** Simple Side Construction  
308 W. Helga St.  
Kill Devil Hills, NC 27948  
252-564-8307

**OWNER:** Bower, Jeffrey  
4453 Joppa Mill Rd  
MONETA, VA 24121

**BUILDING LIMITED:** Simple Side Construction  
308 W. Helga St.  
Kill Devil Hills, NC 27948  
252-564-8307

**License:** 78583  
**Expires:**

#### PARCEL:

**PIN:** 988405280142

**Parcel Number:** 002238000

**Address:** 412 PETER LN KILL DEVIL HILLS

**Zoning:**

**Addition:** WRIGHT'S SHORES SEC 2

**Block:** 0 **Lot(s):** 125

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$76.50	\$0.00	Residential Unheated (.40)	124 Sq. Ft
Res. Building Permit Fee	\$1,303.60	\$0.00	Residential Heated Space (.75)	1672 sq. Ft.
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	102 SQFT
Land Disturbing	\$100.00	\$0.00	# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$1,530.10</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

159

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T54793

**BJ2021-186****PROJECT NAME:** Jeffrey Bower  
**SITE ADDRESS:** 412 PETER LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/03/2021**EXPIRES:** 03/02/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30959
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	266000.00
LIVING SPACE (SQFT)	1672
COVERED PORCHES/DECKS (SQFT)	102
STORAGE (SQFT)	124
TOTAL SQUARE FOOTAGE	1898
SURVEYOR NAME AND NUMBER	JH Miller
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14163
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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SEP 29 2021

## Planning and Inspection Department

**BJ2021-205**

**PROJECT NAME:** East Coast Construction New House  
**SITE ADDRESS:** 906 CARDINAL ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/24/2021

**EXPIRES:** 03/23/2022

**APPLICANT:** Lane Investment Properties LLC  
PO Box 329  
Kill Devil Hills, NC 27948  
252-441-9442

**OWNER:** Lane Investment Properties LLC  
PO Box 329  
Kill Devil Hills, NC 27948  
252-441-9442

**CONTRACTOR:** 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

**PARCEL:**

**PIN:** 988312778213

**Parcel Number:** 004443000

**Address:** 906 CARDINAL ST KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 27 **Lot(s):** 4

**Legal Description:**

213

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,604.40	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$83.25	\$0.00	Covered Porches/Decks	111 SQFT
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	261 Sq. Ft
Fence	\$100.00	\$0.00	Residential Heated Space	2000 sq. Ft.
Land Disturbing	\$100.00	\$0.00	(.75)	
<b>Totals :</b>	<b>\$1,937.65</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** New 4 Bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

**PAID**

Water Tap #: T24852

**BJ2021-205****PROJECT NAME:** East Coast Construction New House  
**SITE ADDRESS:** 906 CARDINAL ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/24/2021**EXPIRES:** 03/23/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-5634
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	425000.00
LOT COVERAGE	29.40
LIVING SPACE (SQFT)	2000
COVERED PORCHES/DECKS (SQFT)	111
GARAGE (SQFT)	261
TOTAL SQUARE FOOTAGE	2372
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ARCHITECT NAME AND LICENSE NUMBER	Melissa McAllister 028946
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

PO BOX 1719  
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Phone: 252-449-5318 Fax: 252-441-4102

## Planning and Inspection Department

<b>BJ2021-194</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> East Coast Construction New House	<b>ISSUED:</b> 09/17/2021
<b>SITE ADDRESS:</b> 703 Sixth Ave Kill Devil Hills	<b>EXPIRES:</b> 03/16/2022

**APPLICANT:** LANE INVESTMENT PROPERTIES NC LLC  
P.O. Box 329  
KDH, NC 27948

**OWNER:** LANE INVESTMENT PROPERTIES NC LLC  
P.O. Box 329  
KDH, NC 27948

**CONTRACTOR:** 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

**PARCEL:**

**PIN:** 988307770731      **Parcel Number:** 004631036

**Address:** 703 Sixth Ave Kill Devil Hills

**Addition:**      **Zoning:**      **Block:**      **Lot(s):**

**Legal Description:** Vacant land

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$83.25	\$0.00	Residential Heated Space	2000 sq. Ft.
Res. Building Permit Fee	\$1,604.40	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	261 Sq. Ft
Fence	\$100.00	\$0.00	# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$1,837.65</b>	<b>\$0.00</b>	Covered Porches/Decks	111 SQFT

**PROJECT DESCRIPTION:** New 4 Bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges  
**PAID**

SEP 17 2021

**BJ2021-194****PROJECT NAME:** East Coast Construction New House  
**SITE ADDRESS:** 703 Sixth Ave Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/17/2021**EXPIRES:** 03/16/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S8-5867
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	425000.00
LOT COVERAGE	32.20
LIVING SPACE (SQFT)	2000
COVERED PORCHES/DECKS (SQFT)	111
GARAGE (SQFT)	261
TOTAL SQUARE FOOTAGE	2372
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Melissa McAllister 028946
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

PO BOX 1719  
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Phone: 252-449-5318 Fax: 252-441-4102

## Planning and Inspection Department

<b>BJ2021-196</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Lane Investment Properties NC, LLC	<b>ISSUED:</b> 09/17/2021
<b>SITE ADDRESS:</b> 705 Sixth Ave Kill Devil Hills	<b>EXPIRES:</b> 03/16/2022

**APPLICANT:** EAST COAST CONSTRUCTION GROUP  
PO Box 329  
KILL DEVIL HILLS, NC 27948  
252-202-1600

**OWNER:** LANE INVESTMENT PROPERTIES NC LLC  
P.O. Box 329  
KDH, NC 27948

**GENERAL:** EAST COAST CONSTRUCTION GROUP  
PO Box 329  
KILL DEVIL HILLS, NC 27948  
252-202-1600

**License:** 34495  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988307770685      **Parcel Number:** 004631037

**Address:** 705 Sixth Ave Kill Devil Hills

**Addition:**      **Zoning:**      **Block:**      **Lot(s):**

**Legal Description:** Vacant land

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	261 Sq. Ft
Res. Building Permit Fee	\$1,604.40	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$83.25	\$0.00	Covered Porches/Decks	111 SQFT
Fence	\$100.00	\$0.00	Residential Heated Space (.75)	2000 sq. Ft.
<b>Totals :</b>	<b>\$1,837.65</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T24797

PAID  
SEP 17 2021

**BJ2021-196****PROJECT NAME:** Lane Investment Properties NC, LLC  
**SITE ADDRESS:** 705 Sixth Ave Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/17/2021**EXPIRES:** 03/16/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30628
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	425000.00
LOT COVERAGE	29.80
LIVING SPACE (SQFT)	2000
COVERED PORCHES/DECKS (SQFT)	111
GARAGE (SQFT)	261
TOTAL SQUARE FOOTAGE	2372
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Melissa McAllister 028946
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-201**

**PROJECT NAME:** Group Holdings New House  
**SITE ADDRESS:** 706 Sixth Ave Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 09/24/2021

**EXPIRES:** 09/23/2022

**APPLICANT:** COASTAL CONSTRUCTION of NC  
7013 Martins Pt. Rd.  
kitty hawk, nc 27949  
480-5556

**OWNER:** GROUP HOLDINGS LLC  
353 SOUNDVIEW DR  
Kill Devil Hills, NC 27948  
252-202-1292

**GENERAL, UNLIMITED:** COASTAL CONSTRUCTION of NC  
7013 Martins Pt. Rd.  
kitty hawk, nc 27949  
480-5556

**License:** 25529  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988311679473

**Parcel Number:**

004631031

**Address:** 706 Sixth Ave Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot:1; Blk:37

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	1232 Sq. Ft
Covered Porch Residential	\$468.00	\$0.00	Residential Heated Space (.75)	2940 sq. Ft.
Res. Building Permit Fee	\$2,697.80	\$0.00	Open Decks	143 1 EA
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$3,365.80</b>	<b>\$0.00</b>	Covered Porches/Decks	624 SQFT

**PROJECT DESCRIPTION:** New 6 Bedroom Single Family Dwelling

SEP 29 2021

**BJ2021-201****PROJECT NAME:** Group Holdings New House  
**SITE ADDRESS:** 706 Sixth Ave Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/24/2021**EXPIRES:** 09/23/2022

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**DETAILS****Permit**

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<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30905
# PARKING SPACES/BEDROOM	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	13.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	420000.00
LOT COVERAGE	31.27
LIVING SPACE (SQFT)	2940
COVERED PORCHES/DECKS (SQFT)	624
GARAGE (SQFT)	1232
OPEN DECK (SQFT)	80
TOTAL SQUARE FOOTAGE	4876
SURVEYOR NAME AND NUMBER	Fredrick House
ENGINEER AND LICENSE NUMBER	Frederick House 24740
CULVERT	N
ROLL OUT CAN	3
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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## Planning and Inspection Department

**BJ2021-202**

**PROJECT NAME:** Group Holdings, LLC  
**SITE ADDRESS:** 704 Sixth Ave Kill Devi Hills

**BUILDING JOINT**

**ISSUED:** 09/23/2021

**EXPIRES:** 03/22/2022

**APPLICANT:** COASTAL CONSTRUCTION of NC  
7013 Martins Pt. Rd.  
kitty hawk, nc 27949  
480-5556

**OWNER:** GROUP HOLDINGS LLC  
353 SOUNDVIEW DR  
Kill Devil Hills, NC 27948  
252-202-1292

**GENERAL, UNLIMITED:** COASTAL CONSTRUCTION of NC  
7013 Martins Pt. Rd.  
kitty hawk, nc 27949  
480-5556

**License:** 25529  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988311679449

**Parcel Number:**

004631032

**Address:** 704 Sixth Ave Kill Devi Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 2 Blk: 37  
Subdivision: Kill Devil Hills Realty Group

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$468.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	624 SQFT
Res. Building Permit Fee	\$2,697.80	\$0.00	Residential Unheated (.40)	1232 Sq. Ft
<b>Totals :</b>	<b>\$3,315.80</b>	<b>\$0.00</b>	Residential Heated Space (.75)	2940 sq. Ft.

143

**PROJECT DESCRIPTION:** Proposed 6 bedroom single family dwelling

SEP 29 2021

**BJ2021-202****PROJECT NAME:** Group Holdings, LLC  
**SITE ADDRESS:** 704 Sixth Ave Kill Devi Hills**BUILDING JOINT****ISSUED:** 09/23/2021**EXPIRES:** 03/22/2022

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**DETAILS****Permit**

---

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30904
# PARKING SPACES/BEDROOM	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	420000.00
LOT COVERAGE	31.27
LIVING SPACE (SQFT)	2940
COVERED PORCHES/DECKS (SQFT)	624
GARAGE (SQFT)	1232
OPEN DECK (SQFT)	80
TOTAL SQUARE FOOTAGE	4876
SURVEYOR NAME AND NUMBER	House Engineering
ENGINEER AND LICENSE NUMBER	Frederick House 24740
CULVERT	N
ROLL OUT CAN	3
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-210**

**PROJECT NAME:** Leary Bathroom Remodel  
**SITE ADDRESS:** 802 SPORTSMAN DR W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/28/2021

**EXPIRES:** 03/27/2022

**APPLICANT:** LEARY, PAUL H  
802 SPORTSMAN DRIVE  
KILL DEVIL HILLS, NC 27948-8160  
561-236-8883

**OWNER:** LEARY, PAUL H  
802 SPORTSMAN DRIVE  
KILL DEVIL HILLS, NC 27948-8160  
561-236-8883

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988405092907

**Parcel Number:** 001588000

**Address:** 802 SPORTSMAN DR W KILL DEVIL HILLS

**Addition:** AVALON BEACH

**Zoning:**  
**Block:** 0 **Lot(s):** 230&231

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** remove fiberglass tub and replace with tile shower

SEP 28 2021

**BJ2021-210**

**PROJECT NAME:** Leary Bathroom Remodel  
**SITE ADDRESS:** 802 SPORTSMAN DR W KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 09/28/2021

EXPIRES: 03/27/2022

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

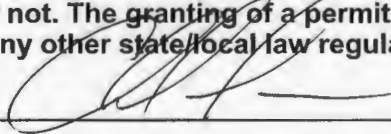
**REQUIRED INSPECTIONS**

Framing	Final
Rough In	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.

**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: 28 Sep 21



# Town of Kill Devil Hills

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

SEP 27 2021

## Planning and Inspection Department

**BJ2021-207**

**PROJECT NAME:** OUTER BANKS PRESBYTERIAN WINDOWS AND LIGHTING

**SITE ADDRESS:** 907 CROATAN HWY S KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/22/2021

**EXPIRES:** 03/21/2022

**APPLICANT:** OUTER BANKS PRESBYTERIAN  
PO BOX 2199  
KILL DEVIL HILLS, NC 27948

**OWNER:** OUTER BANKS PRESBYTERIAN  
PO BOX 2199  
KILL DEVIL HILLS, NC 27948

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988308886310

**Parcel Number:** 008529000

**Address:** 907 CROATAN HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 3

**Lot(s):** 1-4 & 7-10  
PT OF 5

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPLACE 5 WINDOWS IN SAME LOCATION OF FELLOWSHIP AREA, REPLACE EXISTING FLOURESCENT LIGHTING OF FELLOWSHIP AREA WITH LED LIGHTING

**BJ2021-207**

**PROJECT NAME:** OUTER BANKS PRESBYTERIAN WINDOWS AND LIGHTING  
**SITE ADDRESS:** 907 CROATAN HWY S KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 09/22/2021

EXPIRES: 03/21/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	22500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly

**REQUIRED INSPECTIONS**

Framing	Insulation
Rough In	Final

**CONDITIONS**

- \* 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.



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-208**

**PROJECT NAME:** MCVEARY POOL AND STAIR  
**SITE ADDRESS:** 906 SIXTH AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/23/2021

**EXPIRES:** 03/22/2022

**APPLICANT:** MICHAEL MCVEARRY  
2508 Virginia Dare Trail  
Kill Devil Hills, NC 27948  
252-573-8644

**OWNER:** MICHAEL MCVEARRY  
2508 Virginia Dare Trail  
Kill Devil Hills, NC 27948  
252-573-8644

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988311763740

**Parcel Number:** 004506004

**Address:** 906 SIXTH AVE KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 39 **Lot(s):** 4

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>	
Pool/Hot Tub	\$200.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00		
<b>Totals :</b>	<b>\$350.00</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** REMOVE AND RELOCATE EXTERIOR STAIR, INSTALL IN-GROUND POOL IN REAR YARD

**PAID**  
**SEP 23 2021**

**BJ2021-208**PROJECT NAME: MCVEARY POOL AND STAIR  
SITE ADDRESS: 906 SIXTH AVE KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 09/23/2021

EXPIRES: 03/22/2022

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Pool Bonding	Rough In
In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	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.
- \* 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.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.





# Town of Kill Devil Hills

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

PAID

SEP 21 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### BJ2021-193

**PROJECT NAME:** Albrecht Repair  
**SITE ADDRESS:** 1729 CROATAN HWY N KILL DEVIL HILLS

### BUILDING JOINT

**ISSUED:** 09/08/2021

**EXPIRES:** 03/07/2022

**APPLICANT:** Albrecht, Chris  
131 S Dogwood Trail  
kitty hawk, nc 27949

**OWNER:** Albrecht, Chris  
131 S Dogwood Trail  
kitty hawk, nc 27949

**ELECTRICAL - UNLIMITED:** Bear Rock Electrical  
131 S. Dogwood Tr.  
kitty hawk, nc 27949  
240-439-5278

**License:** 30667-U  
**Expires:**

#### PARCEL:

**PIN:** 988410378386

**Parcel Number:** 002945000

**Address:** 1729 CROATAN HWY N KILL DEVIL HILLS

**Addition:** LONG LAKE

**Zoning:**

**Block:** 0

**Lot(s):** 13 & PT 12  
& 14

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>
Renovation/Remodel/Relocate	\$279.90	\$0.00	Remodel/Renovation 622 SQFT
<b>Totals :</b>	<b>\$279.90</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** replace electrical and plumbing systems, interior drywall, insulate interior walls, replace flooring, replace front doors, hvac and add generator

**BJ2021-193**

**PROJECT NAME:** Albrecht Repair  
**SITE ADDRESS:** 1729 CROATAN HWY N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/08/2021

**EXPIRES:** 03/07/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
LOT COVERAGE	12.50
LIVING SPACE (SQFT)	622
TOTAL SQUARE FOOTAGE	622
SURVEYOR NAME AND NUMBER	Carlos F Gomez L-5274
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Insulation
Framing	Final
Rough In	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.

\* Energy code and Existing Building Code requires that all new insulation be to current code requirements for R-values.



# Town of Kill Devil Hills

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

PAID

SEP 20 2021

## Planning and Inspection Department

<b>BJ2021-204</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 09/20/2021</b>
<b>SITE ADDRESS: 1724 UPPER DUNE RD KILL DEVIL HILLS</b>	<b>EXPIRES: 03/19/2022</b>

<b>APPLICANT:</b> Paul & Mary Stea 6537 Seapearl Ln. Columbia, MD 21045-4634 252-449-4423	<b>OWNER:</b> Paul & Mary Stea 6537 Seapearl Ln. Columbia, MD 21045-4634 252-449-4423
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<b>GENERAL BUILDING, LIMITED:</b>	Pitts, Adrian/ADP Swimming Pools & Construction 801 Indian DR Kill Devil Hills, NC 27948 305-8088	<b>License:</b> 53785 <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988409164318	<b>Parcel Number:</b> 002565000
<b>Address:</b> 1724 UPPER DUNE RD KILL DEVIL HILLS	
<b>Addition:</b> CROATAN SHORES SUBDIV	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 14 <b>Lot(s):</b> 5

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Add window in master bedroom. Replace tub/shower with tile shower.

**BJ2021-204**

**PROJECT NAME:**

**SITE ADDRESS:** 1724 UPPER DUNE RD KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/20/2021

**EXPIRES:** 03/19/2022

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	28500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Framing	Final
Rough In	Shower Pan

---

**CONDITIONS**

- \* 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.
- \* Foundation survey will be required prior to rough-in inspection.



# Town of Kill Devil Hills

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

PAID

SEP 22 2021

## Planning and Inspection Department

Town of Kill Devil Hills

**BJ2021-181**

**PROJECT NAME:** Somerset Apartment Building 202  
**SITE ADDRESS:** 1602 Somerset Circle Kill Devil Hills

**BUILDING JOINT**

**ISSUED: 09/03/2021**

**EXPIRES: 03/02/2022**

**APPLICANT:** Somerset Villages, LLC  
PO Box 90  
Kill Devil Hills, NC 27948

**OWNER:** Somerset Villages, LLC  
PO Box 90  
Kill Devil Hills, NC 27948

**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:** 988310371341

**Parcel Number:**

**Address:** 1602 Somerset Circle Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Bermuda Bay

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$33,975.00	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	Residential Heated Space	45300 sq. Ft.
Covered Porch Residential	\$6,075.00	\$0.00	(.75)	
<b>Totals :</b>	<b>\$40,100.00</b>	<b>\$0.00</b>	Covered Porches/Decks	8100 SQFT

**PROJECT DESCRIPTION:** 56 Unit Apartment Building, fully sprinklered, building 202  
Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: T24794

**BJ2021-181****PROJECT NAME:** Somerset Apartment Building 202  
**SITE ADDRESS:** 1602 Somerset Circle Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/03/2021**EXPIRES:** 03/02/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	G&I Private
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	15
# PARKING SPACES/BEDROOM	96
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	4750000.00
LIVING SPACE (SQFT)	44832
COVERED PORCHES/DECKS (SQFT)	8100
STORAGE (SQFT)	896
TOTAL SQUARE FOOTAGE	55968
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Frederick House 24740
ARCHITECT NAME AND LICENSE NUMBER	Richard Webster 5463
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

---



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-200**

**PROJECT NAME:** Craig Byrum  
**SITE ADDRESS:** 3140 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**APPLICANT:** Four Seasons Pools  
One Ocean Blvd.  
Kitty Hawk, NC 27949  
252-207-5001

**OWNER:** JAMES BYRUM  
106 Egret Crt.  
Yorktown, Va 23692  
757-869-4507

**GENERAL BUILDING-LIMITED:** Four Seasons Pools  
One Ocean Blvd.  
Kitty Hawk, NC 27949  
252-207-5001

**License:** 84119  
**Expires:** 03/31/2022

**PARCEL:**

**PIN:** 987516822727

**Parcel Number:** 001065000

**Address:** 3140 BAY DR KILL DEVIL HILLS

**Zoning:**

**Addition:** MOOR SHORES

**Block:** 0 **Lot(s):** 129

**Legal Description:**

FEES:	Paid	Due
Pool/Hot Tub	\$200.00	\$0.00
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Pool, pool deck and fence

PAID

SEP 16 2021

**BJ2021-200**

PROJECT NAME: Craig Byrum

SITE ADDRESS: 3140 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 09/15/2021

EXPIRES: 03/14/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
HEALTH DEPARTMENT PERMIT #	S22-5347
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	56000.00
LOT COVERAGE	40.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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

**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.
- \* 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.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-199**

**PROJECT NAME:** Bill Grogg  
**SITE ADDRESS:** 3142 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**APPLICANT:** Four Seasons Pools  
One Ocean Blvd.  
Kitty Hawk, NC 27949  
252-207-5001

**OWNER:** GROGG, WILLIAM E  
3142 BAY DRIVE  
KILL DEVIL HILLS, NC 27968

**GENERAL BUILDING-LIMITED:** Four Seasons Pools  
One Ocean Blvd.  
Kitty Hawk, NC 27949  
252-207-5001

**License:** 84119  
**Expires:** 03/31/2022

**PARCEL:**

**PIN:** 987516822802

**Parcel Number:** 001064000

**Address:** 3142 BAY DR KILL DEVIL HILLS

**Zoning:**

**Addition:** MOOR SHORES

**Block:** 0 **Lot(s):** 128

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Pool/Hot Tub	\$200.00	\$0.00
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Pool, pool deck and fence

PAID  
SEP 16 2021

**BJ2021-199**

PROJECT NAME: Bill Grogg

SITE ADDRESS: 3142 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 09/15/2021

EXPIRES: 03/14/2022

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
HEALTH DEPARTMENT PERMIT #	S22-5346
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	56000.00
LOT COVERAGE	36.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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

**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.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BJ2021-197</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 09/13/2021</b>
<b>SITE ADDRESS: 201 ORVILLE CT KILL DEVIL HILLS</b>	<b>EXPIRES: 03/12/2022</b>

<b>APPLICANT:</b> Otte, Lloyd 201 Orville Court Kill Devil Hills, NC 27948 320-280-0132	<b>OWNER:</b> Otte, Lloyd 201 Orville Court Kill Devil Hills, NC 27948 320-280-0132
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<b>GENERAL:</b>	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	<b>License:</b> Unlicensed <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988405284856	<b>Parcel Number:</b> 002136000
<b>Address:</b> 201 ORVILLE CT KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> WRIGHT'S SHORES	<b>Block:</b> 0 <b>Lot(s):</b> 178
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Re-energize ground floor, move water from in front of sub panel

**PAID**  
9/14/21  
Payed

**BJ2021-197**

**PROJECT NAME:**

**SITE ADDRESS:** 201 ORVILLE CT KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/13/2021

**EXPIRES:** 03/12/2022

**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	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**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.

\* Plumbing and electrical affidavits required prior to inspection

**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:**  **Date:** 09 / 14 / 2021



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-198**

**PROJECT NAME:** Rose Enclosure  
**SITE ADDRESS:** 808 SIXTH AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/14/2021

**EXPIRES:** 03/13/2022

**APPLICANT:** COASTAL CONSTRUCTION of NC  
7013 Martins Pt. Rd.  
kitty hawk, nc 27949  
480-5556

**OWNER:** Rose, James  
353 Soundview Drive  
Kill Devil Hills, NC 27948

**GENERAL, UNLIMITED:** COASTAL CONSTRUCTION of NC  
7013 Martins Pt. Rd.  
kitty hawk, nc 27949  
480-5556

**License:** 25529  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988311771063

**Parcel Number:** 004503000

**Address:** 808 SIXTH AVE KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 38 **Lot(s):** 5

**Legal Description:**

<b>FEE:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$235.20	\$0.00	Residential Unheated (.40)	588 Sq. Ft
<b>Totals :</b>	<b>\$235.20</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** enclose under existing house for storage

SEP 14 2021

**BJ2021-198****PROJECT NAME:** Rose Enclosure  
**SITE ADDRESS:** 808 SIXTH AVE KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/14/2021**EXPIRES:** 03/13/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S22-5945
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	14500.00
LOT COVERAGE	25.90
GARAGE (SQFT)	336
STORAGE (SQFT)	252
TOTAL SQUARE FOOTAGE	588
SURVEYOR NAME AND NUMBER	Jamie E Furr L-4692
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

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

PAID

SEP - 9 2021

## Planning and Inspection Department

TOWN OF  
 KILL DEVIL HILLS

**BJ2021-192**

**PROJECT NAME:** Scott and Kristine Thomas  
**SITE ADDRESS:** 702 MEMORIAL BLVD N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/08/2021

**EXPIRES:** 03/07/2022

**APPLICANT:** TABB, WILLIAM D  
 PO Box 1077  
 Nags Head, NC 27959  
 252-207-2630

**OWNER:** Thomas, Scott and Kristine  
 3594 Beeler Street  
 DENVER, CO 80238  
 720-298-2540

**GENERAL:** TABB, WILLIAM D  
 PO Box 1077  
 Nags Head, NC 27959  
 252-207-2630

**License:** 18884  
**Expires:**

**PARCEL:**

**PIN:** 988419720184 **Parcel Number:** 027055000

**Address:** 702 MEMORIAL BLVD N KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED **Zoning:**

**Block:** 43 **Lot(s):** 3

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$72.00	\$0.00	Residential Heated Space	96 sq. Ft.
<b>Totals :</b>	<b>\$222.00</b>	<b>\$0.00</b>	(.75)	

**PROJECT DESCRIPTION:** Add bathroom, replace deck and steps, replace window in bedroom, add washer and dryer hookup

**BJ2021-192**

**PROJECT NAME:** Scott and Kristine Thomas  
**SITE ADDRESS:** 702 MEMORIAL BLVD N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/08/2021

**EXPIRES:** 03/07/2022

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**DETAILS**
**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S22-5312
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	50000.00
LOT COVERAGE	29.00
LIVING SPACE (SQFT)	96
OPEN DECK (SQFT)	96
TOTAL SQUARE FOOTAGE	192
SURVEYOR NAME AND NUMBER	JH Miller
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	

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# Town of Kill Devil Hills

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

PAID

SEP - 7 2021

## Planning and Inspection Department

<b>BJ2021-191</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Mosher Back Deck extension with additional driveway	<b>ISSUED:</b> 09/07/2021
<b>SITE ADDRESS:</b> 1502 HEATHER LN KILL DEVIL HILLS	<b>EXPIRES:</b> 03/06/2022

<b>APPLICANT:</b> Mosher, Richard 1694 Woodstock Rd WOODSTOCK, MD 21163	<b>OWNER:</b> Mosher, Richard 1694 Woodstock Rd WOODSTOCK, MD 21163
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**CONTRACTOR:** Awesome Remodeling  
1809 Va. AVE  
Kill Devil Hills, NC 27948  
252-305-0636

<b>GENERAL REMODELING-UNLICENSED:</b> Awesome Remodeling 1809 Va. AVE Kill Devil Hills, NC 27948 252-305-0636	<b>License:</b> 123 <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988316736218	<b>Parcel Number:</b> 004890002
<b>Address:</b> 1502 HEATHER LN KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> WHISPERING PINES SEC 2 & 3	<b>Block:</b> G <b>Lot(s):</b> 2
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>
Open Deck Fee	\$150.00	\$0.00	Open Decks
Driveway Permit Fee	\$50.00	\$0.00	1 EA
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** replace and extend back deck, add new stairs off of back deck, widen driveway

**BJ2021-191****PROJECT NAME:** Mosher Back Deck extension with additional driveway**SITE ADDRESS:** 1502 HEATHER LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/07/2021**EXPIRES:** 03/06/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-5769
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	22455.00
LOT COVERAGE	24.00
SURVEYOR NAME AND NUMBER	Gloria Rogers L-3531
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Final
Framing	Zoning Final

**CONDITIONS**

- \* 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.
- \* 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.



# Town of Kill Devil Hills

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

# PAID

SEP - 7 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### BJ2021-190

**PROJECT NAME:** Todd Hazelwonder  
**SITE ADDRESS:** 509 Holly St. Kill Devil Hills

### BUILDING JOINT

**ISSUED:** 09/02/2021

**EXPIRES:** 03/01/2022

**APPLICANT:** Hazelwonder, Todd  
509 Holly St.  
Kill Devil Hills, NC 27948  
252-256-1255

**OWNER:** Hazelwonder, Todd  
509 Holly St.  
Kill Devil Hills, NC 27948  
252-256-1255

**CONTRACTOR:** SAME AS OWNER  
UNKNOWN  
UNKNOWN, XX 00000

**License:** Same as Owner  
**Expires:** 12/31/2021

#### PARCEL:

**PIN:** 988312855099

**Parcel Number:** 008223004

**Address:** 509 Holly St. Kill Devil Hills

**Zoning:**

**Addition:** KILL DEVIL BEACH EXTENDED

**Block:** Z **Lot(s):** 5

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$45.00	\$0.00	Covered Porches/Decks	60 SQFT
Res. Building Permit Fee	\$316.50	\$0.00	Residential Heated Space	422 sq. Ft.
<b>Totals :</b>	<b>\$361.50</b>	<b>\$0.00</b>	(.75)	

**PROJECT DESCRIPTION:** Addition of bedroom, bathroom, living area under house within footprint

**BJ2021-190**

**PROJECT NAME:** Todd Hazelwonder  
**SITE ADDRESS:** 509 Holly St. Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 09/02/2021

**EXPIRES:** 03/01/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	27016
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
LIVING SPACE (SQFT)	422
COVERED PORCHES/DECKS (SQFT)	60
TOTAL SQUARE FOOTAGE	482
SURVEYOR NAME AND NUMBER	William S. Jones
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	



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-185**

**PROJECT NAME:** Linda Melson  
**SITE ADDRESS:** 701 EIGHTH AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/01/2021

**EXPIRES:** 02/28/2022

**APPLICANT:** MELSON, LINDA  
P O BOX 1414  
KILL DEVIL HILLS, NC 27948

**OWNER:** MELSON, LINDA  
P O BOX 1414  
KILL DEVIL HILLS, NC 27948

**CONTRACTOR:** SAME AS OWNER  
UNKNOWN  
UNKNOWN, XX 00000

**License:** Same as Owner  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988311675214

**Parcel Number:** 030498002

**Address:** 701 EIGHTH AVE KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS RLTY CORP ADD

**Zoning:**  
**Block:** 43      **Lot(s):** 5

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace two sets of steps and handrails

SEP - 1 2021

**BP2021-185**

**PROJECT NAME:** Linda Melson

**SITE ADDRESS:** 701 EIGHTH AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/01/2021

**EXPIRES:** 02/28/2022

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5600.00
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: \_\_\_\_\_

9/1/2021



**Town of Kill Devil Hills**

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

PAID  
SEP - 9 2021

**Planning and Inspection Department**

<b>BP2021-186</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> WHITLEY DECK REBUILD	<b>ISSUED:</b> 09/08/2021
<b>SITE ADDRESS:</b> 809 SPORTSMAN DR W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/07/2022

<b>APPLICANT:</b> WHITLEY, HERBERT W 2307 LECKIE ST PORTSMOUTH, VA23704	<b>OWNER:</b> WHITLEY, HERBERT W 2307 LECKIE ST PORTSMOUTH, VA23704
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<b>UNLICENSED - REMODELING:</b> Andy's Painting 2035 Portsmouth St Kill Devil Hills, NC 27948	<b>License:</b> xxxxxxxx <b>Expires:</b> 12/31/2022
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**PARCEL:**

<b>PIN:</b> 988405091705	<b>Parcel Number:</b> 001610000
<b>Address:</b> 809 SPORTSMAN DR W KILL DEVIL HILLS	
<b>Addition:</b> AVALON BEACH	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 254

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REBUILD FRONT DECK IN SAME FOOTPRINT

**BP2021-186**

**PROJECT NAME:** WHITLEY DECK REBUILD  
**SITE ADDRESS:** 809 SPORTSMAN DR W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/08/2021

**EXPIRES:** 03/07/2022

**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
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3550.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

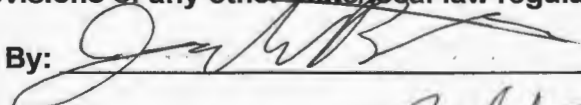
Zoning Final

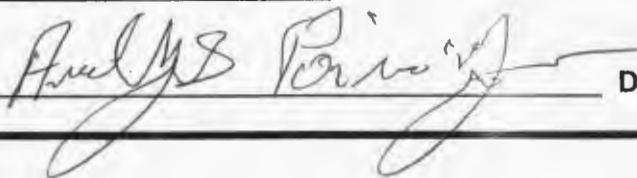
Final

**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: \_\_\_\_\_





# Town of Kill Devil Hills

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

PAID

SEP 10 2021

## Planning and Inspection Department

**BP2021-188**

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

**BUILDING**

**ISSUED:** 09/09/2021

**EXPIRES:** 03/08/2022

**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 Number:** 003867000

**Address:** 100 MEMORIAL BLVD N KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 37 **Lot(s):** 4

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Open Decks 1 EA Covered Porches/Decks 209 SQFT
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** Add one sister piling per engineered drawing.

**BP2021-188****PROJECT NAME:** CHRISTENSEN STACKED DECK REBUILD**SITE ADDRESS:** 100 MEMORIAL BLVD N KILL DEVIL HILLS**BUILDING****ISSUED:** 09/09/2021**EXPIRES:** 03/08/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
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 Dwelling

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

- \* 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.
- \* 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.



# Town of Kill Devil Hills

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

SEP 13 2021

## Planning and Inspection Department

### BP2021-190

**PROJECT NAME:** Banks Phase 2  
**SITE ADDRESS:** 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

### BUILDING

**ISSUED:** 09/13/2021  
**EXPIRES:** 03/12/2022

**APPLICANT:** BANKS PHASE 2  
N/A  
KILL DEVIL HILLS, NC 27948

**OWNER:** BANKS PHASE 2  
N/A  
KILL DEVIL HILLS, NC 27948

**BUILDING LIMITED:** H & W SERVICES GROUP  
1053 MARTINS POINT RD.  
kitty hawk, nc 27949  
252-423-0744

**License:** 81536  
**Expires:** 12/01/2022

#### PARCEL:

**PIN:** 98931313596800

**Parcel Number:** 029017999

**Address:** 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** 0

**Lot(s):** COMMON PROPERTY

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$136.22	\$0.00	Covered Porches/Decks	181 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
<b>Totals :</b>	<b>\$286.22</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** replace existing decks for units 3c and 3g, pilings to remain

**BP2021-190**

PROJECT NAME: Banks Phase 2

SITE ADDRESS: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/13/2021

EXPIRES: 03/12/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	HF Pyatt L-1508
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Zoning Final

Floor box

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.



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-191**

**PROJECT NAME:** JANICKI DECKING AND RAILING  
**SITE ADDRESS:** 2300 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/14/2021

**EXPIRES:** 03/13/2022

**APPLICANT:** JANICKI, EDWARD J  
CAROL ANN ANGELOS  
2300 N CROATAN HWY  
KILL DEVIL HILLS, NC 27948

**OWNER:** JANICKI, EDWARD J  
CAROL ANN ANGELOS  
2300 N CROATAN HWY  
KILL DEVIL HILLS, NC 27948

**GENERAL:** CAROLINA BEACH BUILDERS  
2300 North Croatan Highway  
Kill Devil Hills, NC 27948  
256-1521

**License:** 27951  
**Expires:**

**PARCEL:**

**PIN:** 988517115109

**Parcel Number:** 000795000

**Address:** 2300 CROATAN HWY N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORE AMD BLK 23

**Zoning:**

**Block:** 23 **Lot(s):** 13-14

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPLACE DECKING AND RAILING ON OPEN DECK

SEP 14 2021

**BP2021-191**

**PROJECT NAME:** JANICKI DECKING AND RAILING  
**SITE ADDRESS:** 2300 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/14/2021

**EXPIRES:** 03/13/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial 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	3500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

**REQUIRED INSPECTIONS**

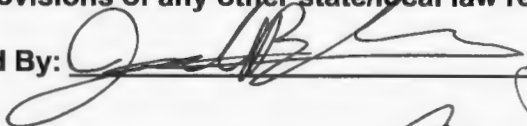
Zoning Final

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: 9/14/21



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BP2021-179</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Perry deck	<b>ISSUED:</b> 08/25/2021
<b>SITE ADDRESS:</b> 1411 PIRATES LOOP KILL DEVIL HILLS	<b>EXPIRES:</b> 02/21/2022

<b>APPLICANT:</b> Perry, Ronald 1411 Pirates Loop Kill Devil Hills, NC 27948 252-202-3635	<b>OWNER:</b> Perry, Ronald 1411 Pirates Loop Kill Devil Hills, NC 27948 252-202-3635
--	--

<b>GENERAL:</b>	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	<b>License:</b> Unlicensed <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988414430984	<b>Parcel Number:</b> 003559000
<b>Address:</b> 1411 PIRATES LOOP KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> LANDING SECTION 2, THE	<b>Block:</b> 0 <b>Lot(s):</b> 54
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Rebuild steps, decking and handrail

**PAID**  
9/14/21 dg  
pay pay

**BP2021-179**

**PROJECT NAME:** Perry deck

**SITE ADDRESS:** 1411 PIRATES LOOP KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 08/25/2021

**EXPIRES:** 02/21/2022

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
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.

\* 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

**Contractor or Authorized Agent:** Ronald L Perry **Date:** 08 / 25 / 2021





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-192**

**PROJECT NAME:** GOLDEN STRAND STAIR TOWER REPAIR  
**SITE ADDRESS:** 1541 VA DARE TRL N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/16/2021

**EXPIRES:** 03/15/2022

**APPLICANT:** GOLDEN STRAND INTERVAL  
P O BOX 1917  
1529 N VA DARE TRAIL  
KILL DEVIL HILLS, NC 27948

**OWNER:** GOLDEN STRAND INTERVAL  
P O BOX 1917  
1529 N VA DARE TRAIL  
KILL DEVIL HILLS, NC 27948

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98841156728600

**Parcel Number:** 028041999

**Address:** 1541 VA DARE TRL N KILL DEVIL HILLS

**Addition:** GOLDEN STRAND CONDOS

**Zoning:**

**Block:** A

**Lot(s):** 1-5  
COMMON  
PROPERTY

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>
Open Deck Fee	\$300.00	\$0.00	Open Decks 2 EA
<b>Totals :</b>	<b>\$300.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** REPAIR NORTH AND CENTRAL STAIR TOWER

SEP 16 2021

**BP2021-192****PROJECT NAME:** GOLDEN STRAND STAIR TOWER REPAIR  
**SITE ADDRESS:** 1541 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 09/16/2021**EXPIRES:** 03/15/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	15
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	23646.03
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 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:** \_\_\_\_\_



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**OP2021-058**

**PROJECT NAME:** Van Edwards  
**SITE ADDRESS:** 1905 GEORGIA LN KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 09/15/2021

**EXPIRES:**

**PARENT PERMIT #:** BJ2021-051

**APPLICANT:** Sandy Bottom Homes  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**OWNER:** Edwards, Van  
243 Memory Lane  
DOVER, DE 19901

**GENERAL BUILDING-LIMITED:** SANDY BOTTOM HOMES  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**License:** 67524  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988405174872

**Parcel Number:** 002222000

**Address:** 1905 GEORGIA LN KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES SEC 2

**Zoning:**  
**Block:** 0      **Lot(s):** 103

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

PAID

SEP 16 2021

TOWN OF  
KILL DEVIL HILLS

**OP2021-058**

**PROJECT NAME:** Van Edwards  
**SITE ADDRESS:** 1905 GEORGIA LN KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 09/15/2021

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# 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: 9-16-21



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-180**

**PROJECT NAME:** Karen Shaud  
**SITE ADDRESS:** 1008 MEMORIAL BLVD S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 08/27/2021

**EXPIRES:** 02/23/2022

**APPLICANT:** BEACH REALTY AND CONSTRUCTION COMPANY  
4826 North Croatan Highway  
Kitty Hawk, NC 27949

**OWNER:** Shaud, Karen  
300 Salisbury ST  
REHOBOTH BEACH, DE 19971  
302-423-3328

**GENERAL:** BEACH REALTY AND CONSTRUCTION COMPANY License: 23201  
4826 North Croatan Highway Expires:  
Kitty Hawk, NC 27949

**PARCEL:**

**PIN:** 988308982130 **Parcel Number:** 027640000  
**Address:** 1008 MEMORIAL BLVD S KILL DEVIL HILLS  
**Addition:** KILL DEVIL HILLS SEC 1 **Zoning:**  
**Block:** 14 **Lot(s):** 7  
**Legal Description:**

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace siding

SEP 17 2021

**BP2021-180**

**PROJECT NAME:** Karen Shaud  
**SITE ADDRESS:** 1008 MEMORIAL BLVD S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 08/27/2021

**EXPIRES:** 02/23/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	40000.00
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:** 9-17-21



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-189**

**PROJECT NAME:** MAYER STAIR REBUILD  
**SITE ADDRESS:** 224 BURNS DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/10/2021

**EXPIRES:** 03/09/2022

**APPLICANT:** MAYER, GREG  
8100 S OLD OREGON INLET RD  
nags head, nc 27959  
252-216-9034

**OWNER:** MAYER, GREG  
8100 S OLD OREGON INLET RD  
nags head, nc 27959  
252-216-9034

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988316943447

**Parcel Number:** 008380000

**Address:** 224 BURNS DR KILL DEVIL HILLS

**Addition:** OCEAN ACRES TRACT 3 SEC 1

**Zoning:**  
**Block:** A **Lot(s):** 13

**Legal Description:**

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REBUILD EXTERIOR STAIR

**PAID**  
9/14/21  
pay bal

**BP2021-189**

**PROJECT NAME:** MAYER STAIR REBUILD  
**SITE ADDRESS:** 224 BURNS DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/10/2021

**EXPIRES:** 03/09/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
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	2000.00
CONSTRUCTION TYPE	V

**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:** Jordan Blythe

**Contractor or Authorized Agent:** Greg Mayer **Date:** 09 / 12 / 2021





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-193**

**PROJECT NAME:** Holman Shed  
**SITE ADDRESS:** 628 FROELICH PL KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/22/2021  
**EXPIRES:** 03/21/2022

**APPLICANT:** RANDALL HOLMAN  
628 FRPELICH PL  
Kill Devil Hills, NC 27948  
252-564-4879

**OWNER:** RANDALL HOLMAN  
628 FRPELICH PL  
Kill Devil Hills, NC 27948  
252-564-4879

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988413241992

**Parcel Number:** 003363000

**Address:** 628 FROELICH PL KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 1

**Zoning:**  
**Block:** 0 **Lot(s):** 90

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Accessory Residential (MIN)	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 10x12 shed in rear yard

PAID  
SEP 22 2021

**BP2021-193****PROJECT NAME:** Holman Shed  
**SITE ADDRESS:** 628 FROELICH PL KILL DEVIL HILLS**BUILDING****ISSUED:** 09/22/2021**EXPIRES:** 03/21/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
HEALTH DEPARTMENT PERMIT #	S22-6066
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
ACCESSORY STRUCTURE (SQFT)	120
SURVEYOR NAME AND NUMBER	JH Miller Jr L-4958
OCCUPANCY TYPE	Storage

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**REQUIRED INSPECTIONS**

Zoning Final

Final

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**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.

\* Hold down anchors required at all four corners.

**BP2021-193**

**PROJECT NAME:** Holman Shed

**SITE ADDRESS:** 628 FROELICH PL KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/22/2021

**EXPIRES:** 03/21/2022

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: \_\_\_\_\_



# Town of Kill Devil Hills

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

PAID

SEP 23 2021

## Planning and Inspection Department

### BP2021-195

**PROJECT NAME:** Lou and Elaine Craig  
**SITE ADDRESS:** 2051 VA DARE TRL N KILL DEVIL HILLS

### BUILDING

**ISSUED:** 09/23/2021  
**EXPIRES:** 03/22/2022

**APPLICANT:** HUDDLESTON, ALLEN CLAY  
30 Tenth Ave.  
Southern Shores, NC 27949  
252-256-1976

**OWNER:** CRAIG, ELAINE JOHNSON  
4106 PRINCESS ANN CIRCLE  
WILSON, NC 27896

**GENERAL:** HUDDLESTON, ALLEN CLAY  
30 Tenth Ave.  
Southern Shores, NC 27949  
252-256-1976

**License:** 69034  
**Expires:**

#### PARCEL:

**PIN:** 988518302906

**Parcel Number:** 002319000

**Address:** 2051 VA DARE TRL N KILL DEVIL HILLS

**Addition:** MILES CLARK

**Zoning:**  
**Block:** 0 **Lot(s):** 7

**Legal Description:**

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Repair and replace deck and steps within existing footprint

**BP2021-195**

**PROJECT NAME:** Lou and Elaine Craig  
**SITE ADDRESS:** 2051 VA DARE TRL N KILL DEVIL HILLS

**BUILDING****ISSUED:** 09/23/2021**EXPIRES:** 03/22/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	Y
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
REAR YARD SETBACK	CAMA
HEALTH DEPARTMENT PERMIT #	S22-6024
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	25000.00
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.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Must be built within existing footprint.

**BP2021-195**

**PROJECT NAME:** Lou and Elaine Craig

**SITE ADDRESS:** 2051 VA DARE TRL N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/23/2021

**EXPIRES:** 03/22/2022

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: \_\_\_\_\_



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2021-198**

**PROJECT NAME:** Ballinger Stair Replacement  
**SITE ADDRESS:** 1003 LISA CT KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/24/2021

**EXPIRES:** 03/23/2022

**APPLICANT:** Ballinger, Robert  
8206 Dove Trail  
Zuni, VA 23898

**OWNER:** Ballinger, Robert  
8206 Dove Trail  
Zuni, VA 23898

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988405075774

**Parcel Number:** 002185000

**Address:** 1003 LISA CT KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 89

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** replace existing stairs to front deck, replace to same existing footprint

*"X" Flood Zone*

SEP 24 2021

**BP2021-198**

**PROJECT NAME:** Ballinger Stair Replacement  
**SITE ADDRESS:** 1003 LISA CT KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/24/2021

**EXPIRES:** 03/23/2022

**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
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1200.00
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.

**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:** 9/24/21





# Town of Kill Devil Hills

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

PAID

SEP 28 2021

## Planning and Inspection Department

<b>BP2021-194</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> CONCH LLC STAIR	<b>ISSUED:</b> 09/22/2021
<b>SITE ADDRESS:</b> 230 WILKINSON ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/21/2022

**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:** 988513020860

**Parcel Number:** 000542000

**Address:** 230 WILKINSON ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 34      **Lot(s):** 35-36

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REBUILD EXTERIOR STAIR IN SAME LOCATION

**BP2021-194**

**PROJECT NAME:** CONCH LLC STAIR

**SITE ADDRESS:** 230 WILKINSON ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/22/2021

**EXPIRES:** 03/21/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
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
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

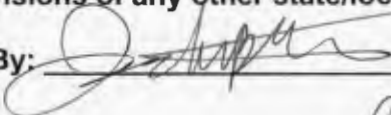
Slab/Foundation/Piling

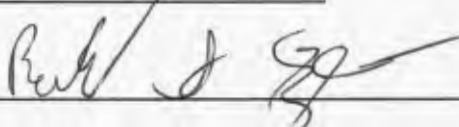
Final

**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.

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: 9-28-21



**Town of Kill Devil Hills**

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

SEP 28 2021

**Planning and Inspection Department**

**BP2021-197**

**PROJECT NAME:** Parr Deck Rebuild  
**SITE ADDRESS:** 802 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/28/2021

**EXPIRES:** 03/27/2022

**APPLICANT:** PARR, RONALD GENE  
111 HIGHWAY 32  
SUNBURY, NC 27979

**OWNER:** PARR, RONALD GENE  
111 HIGHWAY 32  
SUNBURY, NC 27979

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988308884891

**Parcel Number:** 004312000

**Address:** 802 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 2 **Lot(s):** 2

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** replace existing deck and 2 sets of stairs, add 8'x10' corner to existing front deck

**BP2021-197**

PROJECT NAME: Parr Deck Rebuild

SITE ADDRESS: 802 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/28/2021

EXPIRES: 03/27/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
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	12000.00
LOT COVERAGE	18.00
SURVEYOR NAME AND NUMBER	Thomas A. Stokely L- 5216
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.



# Town of Kill Devil Hills

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

SEP 28 2021  
SEP 28 2021

## Planning and Inspection Department

**BP2021-199**

**PROJECT NAME:** Hahs Stair Replacement  
**SITE ADDRESS:** 805 HOLLY ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/24/2021

**EXPIRES:** 03/23/2022

**APPLICANT:** Hahs, Judith  
1407 WEST FIRST ST  
Kill Devil Hills, NC 27948  
630-364-6140

**OWNER:** Hahs, Judith  
1407 WEST FIRST ST  
Kill Devil Hills, NC 27948  
630-364-6140

**CONTRACTOR:** Perry, Ronald  
1411 Pirates Loop  
Kill Devil Hills, NC 27948  
252-202-3635

**UNLICENSED - REMODELING:** Perry, Ronald  
1411 Pirates Loop  
Kill Devil Hills, NC 27948

**License:** 12345  
**Expires:**

**PARCEL:**

**PIN:** 988316748780

**Parcel Number:** 004784000

**Address:** 805 HOLLY ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL BEACH EXTENDED

**Block:** 4 **Lot(s):** 3

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** replace existing front stairs to same footprint

*PAID*  
*9/29/21*  
*Perry*

**BP2021-199**

**PROJECT NAME:** Hahs Stair Replacement  
**SITE ADDRESS:** 805 HOLLY ST W KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/24/2021

EXPIRES: 03/23/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
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	1800.00
LOT COVERAGE	38.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
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.



# Town of Kill Devil Hills

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

SEP 27 2021

## Planning and Inspection Department

**BP2021-201**

**PROJECT NAME:** JORRENS DECK REBUILD  
**SITE ADDRESS:** 111 OREGON AVE E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/27/2021

**EXPIRES:** 03/26/2022

**APPLICANT:** JORRENS, MARC  
135 SUNRISE LANE  
Kill Devil Hills, NC 27948  
203-858-6903

**OWNER:** JORRENS, MARC  
135 SUNRISE LANE  
Kill Devil Hills, NC 27948  
203-858-6903

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988420709091

**Parcel Number:** 027570000

**Address:** 111 OREGON AVE E KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 34 **Lot(s):** 18

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REBUILD REAR DECK AND STAIRS TO SAME FOOTPRINT

**BP2021-201**

**PROJECT NAME:** JORRENS DECK REBUILD  
**SITE ADDRESS:** 111 OREGON AVE E KILL DEVIL HILLS

**BUILDING****ISSUED:** 09/27/2021**EXPIRES:** 03/26/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
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	10000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**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.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.





# Town of Kill Devil Hills

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

PAID  
SEP 29 2021

## Planning and Inspection Department

<b>BP2021-202</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Partin decking and stair rebuild	<b>ISSUED:</b> 09/29/2021
<b>SITE ADDRESS:</b> 109 GREENSBORO ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/28/2022

<b>APPLICANT:</b> Partin, Thomas 1014 Sound Shore Dr Edenton, NC 27932	<b>OWNER:</b> Partin, Thomas 1014 Sound Shore Dr Edenton, NC 27932
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**CONTRACTOR:** JOE HANTON  
121 White Acres DR  
JARVISBURG, NC 27947  
252-207-3553

<b>UNLICENSED BUILDER:</b>	JOE HANTON 121 White Acres DR JARVISBURG, NC 27947 252-207-3553	<b>License:</b> unlicensed <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988406297856	<b>Parcel Number:</b> 001881000
<b>Address:</b> 109 GREENSBORO ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 1	<b>Block:</b> 0 <b>Lot(s):</b> 437
<b>Legal Description:</b>	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** rebuild existing front stairs to same footprint, replace decking and handrails

**BP2021-202****PROJECT NAME:** Partin decking and stair rebuild  
**SITE ADDRESS:** 109 GREENSBORO ST KILL DEVIL HILLS**BUILDING****ISSUED:** 09/29/2021**EXPIRES:** 03/28/2022

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
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	9800.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Zoning Final

Final

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**CONDITIONS**

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



# Town of Kill Devil Hills

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

**PAID**

SEP - 1 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2021-254**

**PROJECT NAME:**

**SITE ADDRESS:** 504 LAURA LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 08/31/2021

**EXPIRES:** 02/27/2022

**APPLICANT:** Soundside Heating & Air Conditioning, LLC  
106 Robert Bruce DR  
Manteo, NC 27954  
252-216-6866

**OWNER:** Wennersten, Erik  
504 Laura LN  
Kill Devil Hills, NC 27948  
703-350-5786

**H-2, H-3:** Soundside Heating & Air Conditioning, LLC  
106 Robert Bruce DR  
Manteo, NC 27954  
252-216-6866

**License:** 34278  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988405189069

**Parcel Number:** 002234000

**Address:** 504 LAURA LN KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES SEC 2

**Zoning:**  
**Block:** 0 **Lot(s):** 120

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

**PAID**  
8/31/21 09  
paypal

**MC2021-254**

**PROJECT NAME:**

**SITE ADDRESS:** 504 LAURA LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 08/31/2021

**EXPIRES:** 02/27/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5802.74
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: Joseph W. Mabry Date: 08 / 31 / 2021



# Town of Kill Devil Hills

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

PAID

SEP - 2 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2021-256**

**PROJECT NAME:**

**SITE ADDRESS:** 1521 Monument Lane KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/01/2021

**EXPIRES:** 02/28/2022

**APPLICANT:** Rumschlag, William & Elizabeth  
114 Saddle DR  
NEWPORT NEWS, VA 23602  
757-879-5115

**OWNER:** Rumschlag, William & Elizabeth  
114 Saddle DR  
NEWPORT NEWS, VA 23602  
757-879-5115

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988414344666

**Parcel Number:** 003411000

**Address:** 1521 Monument Lane KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 1

**Zoning:**  
**Block:** 0 **Lot(s):** 154

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

PAID

9/2/21

CK# 8764

**MC2021-256**

**PROJECT NAME:**

**SITE ADDRESS:** 1521 Monument Lane KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/01/2021

**EXPIRES:** 02/28/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
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.

\* Self contractor for trade permits and work requires the completion of an OWNER EXEMPT AFFIDAVIT.

**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:** 9/2/21



# Town of Kill Devil Hills

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

**PAID**

SEP - 3 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2021-255**

**PROJECT NAME:** Brad Van Auken  
**SITE ADDRESS:** 3112 BATH ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/01/2021

**EXPIRES:** 02/28/2022

**APPLICANT:** MASTER HEATING AND COOLING  
P.O. Box 707  
Kitty Hawk, NC 27949  
255-0095

**OWNER:** Van Auken, Brad  
109 Queensway Lane  
MOORESVILLE, NC 28115

**MECHANICAL, H-3, I:** MASTER HEATING AND COOLING  
P.O. Box 707  
Kitty Hawk, NC 27949  
255-0095

**License:** 18066  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 987516826579

**Parcel Number:** 003053000

**Address:** 3112 BATH ST KILL DEVIL HILLS

**Addition:** MOOR SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 82

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC

**PAID**  
9/2/21  
pay pd

**MC2021-255**

**PROJECT NAME:** Brad Van Auken  
**SITE ADDRESS:** 3112 BATH ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/01/2021

**EXPIRES:** 02/28/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7100.00
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: H. W. Francis Date: 09/01/2021





# Town of Kill Devil Hills

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

PAID

SEP - 3 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2021-257**

**PROJECT NAME:**

**SITE ADDRESS:** 702 CARDINAL ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/02/2021

**EXPIRES:** 03/01/2022

**APPLICANT:** Heintzinger, Paul  
702 Cardinal Street  
Kill Devil Hills, NC 27948

**OWNER:** Heintzinger, Paul  
702 Cardinal Street  
Kill Devil Hills, NC 27948

**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:** 988307783078

**Parcel Number:** 004430002

**Address:** 702 CARDINAL ST KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 25      **Lot(s):** 2

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC



PAID  
MC 9/3/21  
Pj Pol

**MC2021-257**

**PROJECT NAME:**

**SITE ADDRESS:** 702 CARDINAL ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/02/2021

**EXPIRES:** 03/01/2022

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

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**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: \_\_\_\_\_

*Marty Shaw*

Contractor or Authorized Agent: \_\_\_\_\_

*Gabby Willis*

Date: 09 / 02 / 2021



# Town of Kill Devil Hills

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

PAID

SEP - 8 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2021-258**

**PROJECT NAME:**

**SITE ADDRESS:** 1508 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/03/2021

**EXPIRES:** 03/02/2022

**APPLICANT:** ALL SEASONS HEATING & COOLING  
P.O. Box 244  
Point Harbor, NC 27964  
491-9232

**OWNER:** Brown, William & Donna  
767 Chatsworth DR  
Newport News, VA 23601

**MECHANICAL:** ALL SEASONS HEATING & COOLING  
P.O. Box 244  
Point Harbor, NC 27964  
491-9232

**License:** 19091  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988411557418

**Parcel Number:** 002835016

**Address:** 1508 VA DARE TRL N KILL DEVIL HILLS

**Addition:** CROATAN SHORES

**Zoning:**  
**Block:** D **Lot(s):** 16

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

PAID  
M 9/7/21  
P.P.A

**MC2021-258**

**PROJECT NAME:**

**SITE ADDRESS:** 1508 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/03/2021

**EXPIRES:** 03/02/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	15630.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
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: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 09 / 03 / 2021



# Town of Kill Devil Hills

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

PAID

SEP - 8 2021

## Planning and Inspection Department

### MC2021-260

**PROJECT NAME:** Mccue HVAC  
**SITE ADDRESS:** 1522 Baileys Bay Rd. Kill Devil Hills

### MECHANICAL

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**APPLICANT:** Mccue, Melissa  
4331 Keaton Lane  
Williamsburg, Va 23188

**OWNER:** Mccue, Melissa  
4331 Keaton Lane  
Williamsburg, Va 23188

**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:** 98830637393512

**Parcel  
Number:**

**Address:** 1522 Baileys Bay Rd. Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Residential condo

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 1.5 ton HVAC system

**MC2021-260**

**PROJECT NAME:** Mccue HVAC

**SITE ADDRESS:** 1522 Baileys Bay Rd. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6220.00
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: 9-8-21



# Town of Kill Devil Hills

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

PAID

SEP - 8 2021

## Planning and Inspection Department

Town of

**MC2021-259**

**PROJECT NAME:**

**SITE ADDRESS:** 1511 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**APPLICANT:** One Hour Heating and Air Conditioning  
701 Fresh Pond West  
Kill Devil Hills, NC 27948  
441-1740

**OWNER:** Pinkard, Justin & Alina  
41619 Bostonian PL  
ALDIE, VA 20105  
757-677-6122

**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:** 989309054497

**Parcel Number:** 008253000

**Address:** 1511 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**Zoning:**

**Addition:** OCEAN ACRES INC

**Block:** 0 **Lot(s):** 64

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

**MC2021-259**

**PROJECT NAME:**

**SITE ADDRESS:** 1511 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6705.00
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:  Date: 9.8.21





# Town of Kill Devil Hills

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

SEP - 8 2021

## Planning and Inspection Department

**MC2021-261**

**PROJECT NAME:** SERVIE HVAC  
**SITE ADDRESS:** 514 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**APPLICANT:** SERVIE, DAVID MICHAEL  
514 1ST STREET  
KILL DEVIL HILLS, NC 27948

**OWNER:** SERVIE, DAVID MICHAEL  
514 1ST STREET  
KILL DEVIL HILLS, NC 27948

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000  
000-000-0000

**License:** Unlicensed  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988409159281

**Parcel Number:** 003265000

**Address:** 514 FIRST ST W KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 2

**Zoning:**  
**Block:** 0 **Lot(s):** 298

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

**MC2021-261**

**PROJECT NAME:** SERVIC HVAC  
**SITE ADDRESS:** 514 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9101.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**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: \_\_\_\_\_

9-8-21



# Town of Kill Devil Hills

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

PAID  
SEP - 8 2021

## Planning and Inspection Department

**MC2021-263**

**PROJECT NAME:** Macdonald HVAC  
**SITE ADDRESS:** 1300 Devonshire Rd #55 Kill Devil Hills

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**APPLICANT:** Macdonald, Emilie  
518 Aydlett Dr  
Aydlett, NC 27916

**OWNER:** Macdonald, Emilie  
518 Aydlett Dr  
Aydlett, NC 27916

**MECHANICAL:** Comfort First Heating & Cooling  
148 IRIE LANE  
Powels Point, NC 27966

**License:** 33486  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98830637393555

**Parcel  
Number:**

**Address:** 1300 Devonshire Rd #55 Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Residential condo

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 1.5 ton HVAC system

**MC2021-263**

**PROJECT NAME:** Macdonald HVAC

**SITE ADDRESS:** 1300 Devonshire Rd #55 Kill Devil Hills

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7602.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
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:** \_\_\_\_\_ **Date:** 9-8-21



# Town of Kill Devil Hills

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

PAID

SEP 13 2021

## Planning and Inspection Department

<b>MC2021-265</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 09/10/2021</b>
<b>SITE ADDRESS: 503 N Virginia Dare Trl Kill Devil Hills</b>	<b>EXPIRES: 03/09/2022</b>

**APPLICANT:** SURFSIDE HEATING AND AIR, INC.  
P.O. Box 3057  
Kill Devil Hills, NC 27948  
261-4949

**OWNER:** Saunders, Robert & Terry  
1117 Park DR  
ELIZABETH CITY, NC 27909

**MECHANICAL, H-3:** SURFSIDE HEATING AND AIR, INC.  
P.O. Box 3057  
Kill Devil Hills, NC 27948  
261-4949

**License:** 20077  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98842071999902      **Parcel Number:** 003686002

**Address:** 503 N Virginia Dare Trl Kill Devil Hills

**Addition:**      **Zoning:**      **Block:** 6      **Lot(s):** 1,2 UNIT 2

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

PAID  
*rk 9/17/21*  
*check # 8990*

**MC2021-265**

**PROJECT NAME:**

**SITE ADDRESS:** 503 N Virginia Dare Trl Kill Devil Hills

**MECHANICAL**

**ISSUED:** 09/10/2021

**EXPIRES:** 03/09/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: RLE Date: 09 / 13 / 2021



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2021-266**

**PROJECT NAME:** HALL HVAC  
**SITE ADDRESS:** 410 WILKINSON ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/10/2021

**EXPIRES:** 03/09/2022

**APPLICANT:** Hall, Stephanie  
410 WILKINSON ST  
KILL DEVIL HILLS, NC 27948

**OWNER:** Hall, Stephanie  
410 WILKINSON ST  
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:** 987520922366

**Parcel Number:** 000681000

**Address:** 410 WILKINSON ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 59

**Lot(s):** 26-28

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

*Handwritten notes:*  
[initials] P D  
9/14/21  
check # 2571

**MC2021-266**

**PROJECT NAME: HALL HVAC**

**SITE ADDRESS: 410 WILKINSON ST W KILL DEVIL HILLS**

**MECHANICAL**

**ISSUED: 09/10/2021**

**EXPIRES: 03/09/2022**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6301.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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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: \_\_\_\_\_

9-14-21





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**EG2021-016**

**EXCAVATION AND GRADING**

**PROJECT NAME:** Don Jennings Land Clearing  
**SITE ADDRESS:** 404 PETER LN KILL DEVIL HILLS

**ISSUED:** 09/13/2021

**EXPIRES:** 03/12/2022

**APPLICANT:** Jennings, Donald F.  
PO Box 192  
kitty hawk, nc 27949  
252-207-4936

**OWNER:** Jennings, Donald F.  
PO Box 192  
kitty hawk, nc 27949  
252-207-4936

**RESIDENTIAL - INTERMEDIATE:** JENNINGS, DONALD  
P. O. Box 1102  
nags head, nc 27959  
252-207-4936

**License:** 32637  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988405282201

**Parcel Number:** 002238129

**Address:** 404 PETER LN KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES SEC 2

**Zoning:**  
**Block:** 0      **Lot(s):** 129

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** clear and grade lot for new house construction

SEP 13 2021

**EG2021-016**

**PROJECT NAME:** Don Jennings Land Clearing  
**SITE ADDRESS:** 404 PETER LN KILL DEVIL HILLS

**EXCAVATION AND GRADING**

**ISSUED:** 09/13/2021

**EXPIRES:** 03/12/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	4500.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	X
SURVEYOR NAME AND NUMBER	Gloria J. Rogers-3531

**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:** \_\_\_\_\_

8-13-21



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2021-262</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Vann HVAC	<b>ISSUED:</b> 09/07/2021
<b>SITE ADDRESS:</b> 1001 SWAN ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/06/2022

<b>APPLICANT:</b> Vann, Justin 1001 Swan St Kill Devil Hills, NC 27948	<b>OWNER:</b> Vann, Justin 1001 Swan St Kill Devil Hills, NC 27948
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<b>MECHANICAL:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 13056 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988312768922	<b>Parcel Number:</b> 004449001
<b>Address:</b> 1001 SWAN ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 28 <b>Lot(s):</b> 10
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2.5 Ton HVAC system

**PAID**  
9/14/21  
pay pay

**MC2021-262**

**PROJECT NAME:** Vann HVAC

**SITE ADDRESS:** 1001 SWAN ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/07/2021

**EXPIRES:** 03/06/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7935.06
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:** Paxton Nix **Date:** 09 / 08 / 2021



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2021-268</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Standahl HVAC	<b>ISSUED:</b> 09/14/2021
<b>SITE ADDRESS:</b> 1930 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 03/13/2022

<b>APPLICANT:</b> STANDAHL, JERRY J 325 MEADOW LANE FRANKLIN, VA 23851	<b>OWNER:</b> STANDAHL, JERRY J 325 MEADOW LANE FRANKLIN, VA 23851
--	--

<b>MECHANICAL:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 13056 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988406396510	<b>Parcel Number:</b> 002847004
<b>Address:</b> 1930 VA DARE TRL N KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> Croatan Shores Amended	<b>Block:</b> F <b>Lot(s):</b> 4
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 3 Ton heat pump only

*Handwritten:* P/D  
9/15/21  
10/1/21

**MC2021-268**

**PROJECT NAME:** Standahl HVAC

**SITE ADDRESS:** 1930 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/14/2021

**EXPIRES:** 03/13/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4101.28
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: Charles Thuman

Contractor or Authorized Agent: Paxton Nix Date: 09 / 15 / 2021



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2021-264</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 09/09/2021</b>
<b>SITE ADDRESS: 117 MEADOWLARK ST E KILL DEVIL HILLS</b>	<b>EXPIRES: 03/08/2022</b>

<b>APPLICANT:</b> Blount Family Limited Partnership 4811 MARKET DRIVE NEWPORT NEWS, VA 23607 757-328-7379	<b>OWNER:</b> Blount Family Limited Partnership 4811 MARKET DRIVE NEWPORT NEWS, VA 23607 757-328-7379
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<b>MECHANICAL, H-2, H-3:</b>	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	<b>License:</b> 34340 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988308892859	<b>Parcel Number:</b> 012332000
<b>Address:</b> 117 MEADOWLARK ST E KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KITTY HAWK SHORES - REVISED	<b>Block:</b> 33 <b>Lot(s):</b> 1
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2.5 ton HVAC system

 **PAID**  
9/16/21  
pay pal

**MC2021-264**

**PROJECT NAME:**

**SITE ADDRESS:** 117 MEADOWLARK ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/09/2021

**EXPIRES:** 03/08/2022

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6575.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

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**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:** Andrew L Buchanan **Date:** 09 / 15 / 2021





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2021-270**

**PROJECT NAME:** Shelly Yager  
**SITE ADDRESS:** 1629 SIR WALTER RD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**APPLICANT:** MASTER HEATING AND COOLING  
P.O. Box 707  
Kitty Hawk, NC 27949  
255-0095

**OWNER:** JOHN YAGER  
9674 OAK MEADOW LN  
PILOT POINT, TX 76258  
214-641-6156

**MECHANICAL, H-3, I:**

MASTER HEATING AND COOLING  
P.O. Box 707  
Kitty Hawk, NC 27949  
255-0095

**License:** 18066  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988410468767

**Parcel Number:** 003162000

**Address:** 1629 SIR WALTER RD KILL DEVIL HILLS

**Addition:** W R DEATON - DELRAY BEACH

**Zoning:**

**Block:** C **Lot(s):** 24

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC

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9/14/21  
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# Town of Kill Devil Hills

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

PAID  
SEP 16 2021

## Planning and Inspection Department

**MC2021-271**

**PROJECT NAME:** MARTIIN HVAC  
**SITE ADDRESS:** 310 ST LOUIS ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**APPLICANT:** MARTIN, WILLIAM  
310 ST LOUIS ST  
Kill Devil Hills, NC 27948  
252-715-4280

**OWNER:** MARTIN, WILLIAM  
310 ST LOUIS ST  
Kill Devil Hills, NC 27948  
252-715-4280

**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:** 987516849404

**Parcel Number:** 000180000

**Address:** 310 ST LOUIS ST KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**  
**Block:** 0 **Lot(s):** 73

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

SEP 16 2021

**MC2021-271**

**PROJECT NAME:** MARTIIN HVAC  
**SITE ADDRESS:** 310 ST LOUIS ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8170.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

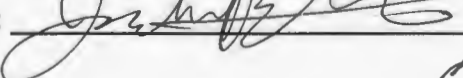
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**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:** 9.16.21



# Town of Kill Devil Hills

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

PAID  
SEP 16 2021

## Planning and Inspection Department

<b>MC2021-269</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> ASHLEY HVAC	<b>ISSUED:</b> 09/14/2021
<b>SITE ADDRESS:</b> 415 MITCHELL CT KILL DEVIL HILLS	<b>EXPIRES:</b> 03/13/2022

<b>APPLICANT:</b> ASHLEY, STEPHEN 174 SAWGRASS DR SAVANNAH, GA31405 912-414-1114	<b>OWNER:</b> ASHLEY, STEPHEN 174 SAWGRASS DR SAVANNAH, GA31405 912-414-1114
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<b>H3, CLASS 1:</b>	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	<b>License:</b> 12643 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988405189341	<b>Parcel Number:</b> 002109000
<b>Address:</b> 415 MITCHELL CT KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> WRIGHT'S SHORES	<b>Block:</b> 0 <b>Lot(s):</b> 149
<b>Legal Description:</b>	

<b>FEE:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

PAID  
SEP 16 2021

**MC2021-269**

**PROJECT NAME:** ASHLEY HVAC  
**SITE ADDRESS:** 415 MITCHELL CT KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/14/2021

**EXPIRES:** 03/13/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3600.00
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: \_\_\_\_\_

Date: \_\_\_\_\_

9-16-21



# Town of Kill Devil Hills

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

PAID  
SEP 16 2021

## Planning and Inspection Department

**MC2021-273**

**PROJECT NAME:** Quigley HVAC  
**SITE ADDRESS:** 2041 ELIZABETH CITY ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**APPLICANT:** Quigley, Michael  
2041 Elizabeth City Street  
Kill Devil Hills, NC 27948  
703-462-3608

**OWNER:** Quigley, Michael  
2041 Elizabeth City Street  
Kill Devil Hills, NC 27948  
703-462-3608

**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:** 988517109165

**Parcel Number:** 001172000

**Address:** 2041 ELIZABETH CITY ST KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 2 & 3

**Zoning:**  
**Block:** 0 **Lot(s):** 712

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 3 Ton HVAC system

**MC2021-273**

**PROJECT NAME:** Quigley HVAC

**SITE ADDRESS:** 2041 ELIZABETH CITY ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12381.00
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: DeAnn

Date: 9-16-21



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2021-272</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Emory Midyette	<b>ISSUED:</b> 09/15/2021
<b>SITE ADDRESS:</b> 334 PALMETTO ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/14/2022

<b>APPLICANT:</b> ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232	<b>OWNER:</b> JAMES EMORY MIDYETTE 334 Palmetto St. KILL DEVIL HILLS, NC 27948
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<b>MECHANICAL:</b>	ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232	<b>License:</b> 19091 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988517005676	<b>Parcel Number:</b> 000627000
<b>Address:</b> 334 PALMETTO ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 48 <b>Lot(s):</b> 37-38
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC

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**MC2021-272**

**PROJECT NAME:** Emory Midyette

**SITE ADDRESS:** 334 PALMETTO ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/15/2021

**EXPIRES:** 03/14/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6565.00
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:  Date: 09 / 16 / 2021



# Town of Kill Devil Hills

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

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SEP 22 2021

## Planning and Inspection Department

### MC2021-267

PROJECT NAME: Mosher HVAC  
SITE ADDRESS: 1502 HEATHER LN KILL DEVIL HILLS

### MECHANICAL

ISSUED: 09/14/2021

EXPIRES: 03/13/2022

APPLICANT: Mosher, Richard  
1694 Woodstock Rd  
WOODSTOCK, MD 21163

OWNER: Mosher, Richard  
1694 Woodstock Rd  
WOODSTOCK, MD 21163

#### MECHANICAL H-3:

ARMSTRONG AND SON  
3978 Albermarle Curch rd.  
Columbia, NC 27925  
252-394-5316

License: 22516  
Expires: 12/31/2021

#### PARCEL:

PIN: 988316736218

Parcel Number: 004890002

Address: 1502 HEATHER LN KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

Zoning: G Lot(s): 2

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

PROJECT DESCRIPTION: C/O Two 2 ton HVAC systems

"X" Flood Zone

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**MC2021-267**

**PROJECT NAME:** Mosher HVAC

**SITE ADDRESS:** 1502 HEATHER LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/14/2021

**EXPIRES:** 03/13/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8000.00
CONSTRUCTION TYPE	V
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: Lori B Armstrong Date: 09 / 14 / 2021

<b>TITLE</b>	1502 Heather Lane: MC2021-267
<b>FILE NAME</b>	1502 Heather Ln permit.pdf
<b>DOCUMENT ID</b>	643e5fcbbdbffbe90031852239cc262d6176eba
<b>AUDIT TRAIL DATE FORMAT</b>	MM / DD / YYYY
<b>STATUS</b>	● Completed

Document History



SENT

**09 / 14 / 2021**  
09:08:15 UTC-4

Sent for signature to Armstrong Heating and Cooling (armstrongheating@yahoo.com) and KDH Permits (permits@kdhnc.com) from permits@kdhnc.com  
IP: 204.84.167.13



VIEWED

**09 / 14 / 2021**  
09:14:25 UTC-4

Viewed by Armstrong Heating and Cooling (armstrongheating@yahoo.com)  
IP: 166.182.248.175



SIGNED

**09 / 14 / 2021**  
09:15:50 UTC-4

Signed by Armstrong Heating and Cooling (armstrongheating@yahoo.com)  
IP: 166.182.248.175



VIEWED

**09 / 21 / 2021**  
12:52:46 UTC-4

Viewed by KDH Permits (permits@kdhnc.com)  
IP: 204.84.167.13



SIGNED

**09 / 21 / 2021**  
12:52:56 UTC-4

Signed by KDH Permits (permits@kdhnc.com)  
IP: 204.84.167.13



COMPLETED

**09 / 21 / 2021**  
12:52:56 UTC-4

The document has been completed.



# Town of Kill Devil Hills

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

PAID

SEP 22 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2021-275**

**PROJECT NAME:** OCEAN ATLANTIC HVAC  
**SITE ADDRESS:** 2001 CROATAN HWY S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/17/2021

**EXPIRES:** 03/16/2022

**APPLICANT:** MR. GREGORY A HONEYCUTT  
PO Box 838  
Ocracoke, NC 27960

**OWNER:** MR. GREGORY A HONEYCUTT  
PO Box 838  
Ocracoke, NC 27960

**MECHANICAL, H-2, H-3:**

ATLANTIC HEATING AND COOLING  
P.O. Box 132  
Kill Devil Hills, NC 27948  
441-7642

**License:** 34340  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 989313130902

**Parcel Number:** 004946000

**Address:** 2001 CROATAN HWY S KILL DEVIL HILLS

**Addition:** LAKE DRIVE DEVELOPMENT SEC 2

**Zoning:**

**Block:** 0 **Lot(s):** 16-19

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGE OUT 2 UNITS



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**MC2021-275**

**PROJECT NAME:** OCEAN ATLANTIC HVAC  
**SITE ADDRESS:** 2001 CROATAN HWY S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/17/2021

**EXPIRES:** 03/16/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	17800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Jordan Blythe

Contractor or Authorized Agent: Andrew L Buchanan Date: 09 / 17 / 2021



# Town of Kill Devil Hills

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

SEP 23 2021

## Planning and Inspection Department

**MC2021-277**

**PROJECT NAME:** Baber HVAC  
**SITE ADDRESS:** 2006 EDENTON ST ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/23/2021

**EXPIRES:** 03/22/2022

**APPLICANT:** Baber, Leslie  
2006 Edenton St  
Kill Devil Hills, NC 27948

**OWNER:** Baber, Leslie  
2006 Edenton St  
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:** 988405080182

**Parcel Number:** 001290000

**Address:** 2006 EDENTON ST ST KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 2 & 3

**Zoning:**

**Block:** 0 **Lot(s):** 845

**Legal Description:**

<b>FEES:</b>	<b><u>Paid</u></b>	<b><u>Due</u></b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2Ton Heat-pump only

**MC2021-277**

**PROJECT NAME:** Baber HVAC

**SITE ADDRESS:** 2006 EDENTON ST ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/23/2021

**EXPIRES:** 03/22/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

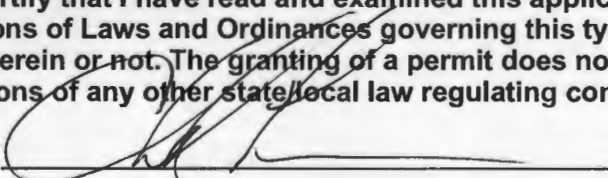
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 9.23.21





# Town of Kill Devil Hills

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

PAID

SEP 23 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### MC2021-276

PROJECT NAME: Doven HVAC  
SITE ADDRESS: 706 DURHAM ST W KILL DEVIL HILLS

### MECHANICAL

ISSUED: 09/23/2021

EXPIRES: 03/22/2022

APPLICANT: Doven, Jacqueline  
7146 Lake Cove Dr  
Alexandria, VA22315

OWNER: Doven, Jacqueline  
7146 Lake Cove Dr  
Alexandria, VA22315

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: 988405181515

Parcel Number: 001372000

Address: 706 DURHAM ST W KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 Lot(s): 663

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

**MC2021-276**

**PROJECT NAME:** Doven HVAC

**SITE ADDRESS:** 706 DURHAM ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/23/2021

**EXPIRES:** 03/22/2022

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8729.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 9.23.21



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

**Planning and Inspection Department**

**PAID**

SEP 27 2021

<b>MC2021-278</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Ashley HVAC	<b>ISSUED:</b> 09/27/2021
<b>SITE ADDRESS:</b> 701 SUFFOLK ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/26/2022

<b>APPLICANT:</b> Ashley, Stephen 174 Sawgrass Dr SAVANNAH, GA31405	<b>OWNER:</b> Ashley, Stephen 174 Sawgrass Dr SAVANNAH, GA31405
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<b>MECHANICAL, H-3, I:</b>	AIR HANDLERS OBX 8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945	<b>License:</b> 23577 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988405097534	<b>Parcel Number:</b> 029988000
<b>Address:</b> 701 SUFFOLK ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 932
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2.5 Ton heat-pump only

**PAID**  
Pd 9/27/21  
Check # 1125

**MC2021-278**

**PROJECT NAME:** Ashley HVAC

**SITE ADDRESS:** 701 SUFFOLK ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/27/2021

**EXPIRES:** 03/26/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3328.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
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:** Charles Thuman

**Contractor or Authorized Agent:** Linda Burgess **Date:** 09 / 27 / 2021



# Town of Kill Devil Hills

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

PAID  
SEP 27 2021

## Planning and Inspection Department

**MC2021-280**

**PROJECT NAME:** Grunewald HVAC  
**SITE ADDRESS:** 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/27/2021

**EXPIRES:** 03/26/2022

**APPLICANT:** Grunewald, Susan  
354 Faire Chase  
chesapeake, va 23322

**OWNER:** Grunewald, Susan  
354 Faire Chase  
chesapeake, va 23322

**H-3, CLASS I:**

CURRITUCK MECHANICAL  
307 Poplar Branch Rd  
POPLAR BRANCH, NC 27965  
252-722-3925

**License:** 24809  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98931313596802

**Parcel Number:** 029013000

**Address:** 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** UNIT 4-A

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 1.5Ton heat-pump and disconnect

✓ **F ID**  
**R 9/27/21**  
**RS PC1**

MC2021-280

PROJECT NAME: Grunewald HVAC

SITE ADDRESS: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/27/2021

EXPIRES: 03/26/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Roger C. Payton Date: 09 / 27 / 2021



# Town of Kill Devil Hills

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

PAID

SEP 27 2021

## Planning and Inspection Department

**MC2021-279**

**PROJECT NAME:** Wayne Hudgins  
**SITE ADDRESS:** 208 THIRD ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/27/2021

**EXPIRES:** 03/26/2022

**APPLICANT:** American Refrigeration Heating Cooling & Electrical LLC  
116 Johy Lloyd RD  
Point Harbor, NC 27964  
252-715-3335

**OWNER:** HUDGINS, WAYNE A II  
208 W 3RD ST  
KILL DEVIL HILLS, NC 27948

**ELECTRICAL - LIMITED:**

American Refrigeration Heating Cooling & Electrical LLC  
116 Johy Lloyd RD  
Point Harbor, NC 27964  
252-715-3335

**License:** 32136  
**Expires:** 01/28/2022

**PARCEL:**

**PIN:** 988406279579

**Parcel Number:** 002764000

**Address:** 208 THIRD ST W KILL DEVIL HILLS

**Addition:** HEDRICKS ADDITION - CROATAN SH

**Zoning:**

**Block:** 0

**Lot(s):** 38A & adj parcel

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC

PAID  
RC 9/27/21  
Pg 1 of 1

**MC2021-279**

**PROJECT NAME:** Wayne Hudgins

**SITE ADDRESS:** 208 THIRD ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/27/2021

**EXPIRES:** 03/26/2022

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6250.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** Donna Chesson **Date:** 09/27/2021





# Town of Kill Devil Hills

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

PAID  
SEP 29 2021

## Planning and Inspection Department

<b>MC2021-282</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Huffman HVAC	<b>ISSUED:</b> 09/29/2021
<b>SITE ADDRESS:</b> 707 S Virginia Dare Trl Kill Devil Hills	<b>EXPIRES:</b> 03/28/2022

<b>APPLICANT:</b> BRAD AND ANDREA HUFFMAN 21 River Rd Newport News, VA 23601 252-473-3312	<b>OWNER:</b> BRAD AND ANDREA HUFFMAN 21 River Rd Newport News, VA 23601 252-473-3312
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**CONTRACTOR:** American Refrigeration  
P.O. Box 835  
nags head, nc 27959  
252-305-5320


<b>MECHANICAL:</b>	American Refrigeration P.O. Box 835 nags head, nc 27959 252-305-5320	<b>License:</b> 15578 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988308992544	<b>Parcel Number:</b> 008144000
<b>Address:</b> 707 S Virginia Dare Trl Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b> SUBDIVISION - NONE	<b>Block:</b> 0 <b>Lot(s):</b> 0
<b>Legal Description:</b>	

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

 **PAID**  
9/29/2021  
pay pup

MC2021-282

PROJECT NAME: Huffman HVAC  
SITE ADDRESS: 707 S Virginia Dare Trl Kill Devil Hills

MECHANICAL

ISSUED: 09/29/2021

EXPIRES: 03/28/2022

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AO
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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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: Donna Chesson Date: 09 / 29 / 2021



# Town of Kill Devil Hills

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

PAID

SEP 29 2021

## Planning and Inspection Department

<b>MC2021-281</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Blum HVAC	<b>ISSUED:</b> 09/28/2021
<b>SITE ADDRESS:</b> 1511 PRINCESS ANNE DR KILL DEVIL HILLS	<b>EXPIRES:</b> 03/27/2022

<b>APPLICANT:</b> BLUM, ROBERT V 219 EAST LAKE AVENUE BALTIMORE, MD 21212-2539	<b>OWNER:</b> BLUM, ROBERT V 219 EAST LAKE AVENUE BALTIMORE, MD 21212-2539
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<b>MECHANICAL H-3, CLASS 1:</b>	Land and Sea Mech Michael Brynteson 128 Oberlin Rd Wanchese, NC 27981 252-473-7585	<b>License:</b> 33550 <b>Expires:</b> 12/31/2021
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**PARCEL:**

<b>PIN:</b> 988411550691	<b>Parcel Number:</b> 003130000
<b>Address:</b> 1511 PRINCESS ANNE DR KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> W R DEATON - DELRAY BEACH	<b>Block:</b> 2 <b>Lot(s):</b> 14
<b>Legal Description:</b>	

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Install 3 Ton HVAC system


P D  
 9/23/21  
 By [Signature]

**MC2021-281**

**PROJECT NAME:** Blum HVAC

**SITE ADDRESS:** 1511 PRINCESS ANNE DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/28/2021

**EXPIRES:** 03/27/2022

### DETAILS

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	11000.00
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: Charles Thuman

Contractor or Authorized Agent: Amyl Boughton Date: 09 / 28 / 2021