



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

BJ2021-203	BUILDING JOINT
PROJECT NAME: Phelps conversion of storage to living space	ISSUED: 09/20/2021
SITE ADDRESS: 305 FRESH POND DR E KILL DEVIL HILLS	EXPIRES: 03/19/2022

APPLICANT: PHELPS, TIMOTHY PO BOX 804 Edenton, NC 27932	OWNER: PHELPS, TIMOTHY PO BOX 804 Edenton, NC 27932
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GENERAL - LIMITED:	TIM PHELPS & CO PO BOX 804 Edenton, NC 27932 252-337-5995	License: 44743 Expires:
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PARCEL:

PIN: 989313144206	Parcel Number: 004940000
Address: 305 FRESH POND DR E KILL DEVIL HILLS	Zoning:
Addition: LAKE DRIVE DEVELOPMENT SEC 2	Block: 0 Lot(s): 7
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$219.00	\$0.00	Residential Heated Space (.75)	292 sq. Ft.
Totals :	\$219.00	\$0.00		

PROJECT DESCRIPTION: convert storage area under construction on sfd to living space

PAID
OCT - 1 2021

BJ2021-203

PROJECT NAME: Phelps conversion of storage to living space
SITE ADDRESS: 305 FRESH POND DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/20/2021

EXPIRES: 03/19/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.10
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	8000.00
LOT COVERAGE	34.70
LIVING SPACE (SQFT)	292
TOTAL SQUARE FOOTAGE	292
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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



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Planning and Inspection Department

BJ2021-206	BUILDING JOINT
PROJECT NAME: Lisa Pitt	ISSUED: 09/30/2021
SITE ADDRESS: 430 West Walker Street Kill Devil Hills	EXPIRES: 03/29/2022

APPLICANT: FORREST SEAL LLC PO Box 2333 KITTY HAWK, NC 27949 252-599-2521	OWNER: Pitt, Lisa 103 St. Francis Ct. SEVERNA PARK, MD 21146 410-440-6591
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GENERAL, UNLIMITED:	FORREST SEAL LLC PO Box 2333 KITTY HAWK, NC 27949 252-599-2521	License: 57289 Expires: 12/31/2021
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PARCEL:

PIN: 987520917160	Parcel Number:
Address: 430 West Walker Street Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lots 34-36, Block 54, Virginia Dare Shores Subdivision	

FEES:	Paid	Due	BUILDING AREA:	
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	269 Sq. Ft
Res. Building Permit Fee	\$1,162.85	\$0.00	Residential Heated Space	1407 sq. Ft.
Covered Porch Residential	\$275.25	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	367 SQFT
Totals :	\$1,588.10	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T24853

SEP 30 2021

BJ2021-206

PROJECT NAME: Lisa Pitt

SITE ADDRESS: 430 West Walker Street Kill Devil Hills

BUILDING JOINT

ISSUED: 09/30/2021

EXPIRES: 03/29/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	30152
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	300000.00
LOT COVERAGE	35.60
LIVING SPACE (SQFT)	1407
COVERED PORCHES/DECKS (SQFT)	367
STORAGE (SQFT)	269
TOTAL SQUARE FOOTAGE	2043
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



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OCT - 4 2021

Planning and Inspection Department

BJ2021-214

PROJECT NAME: Byrum interior remodel
SITE ADDRESS: 906 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

APPLICANT: BYRUM, LLOYD EUGENE SR
4159 THREE BRIDGE RD
POWHATAN, VA23139

OWNER: BYRUM, LLOYD EUGENE SR
4159 THREE BRIDGE RD
POWHATAN, VA23139

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 987408998768

Parcel Number: 001623000

Address: 906 SPORTSMAN DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 268

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: remodel kitchen, bathroom, upgrade electrical, replace siding and windows, meterbase and panel changeout, install tankless water heater, smoke detectors and kitchen receptacles

BJ2021-214

PROJECT NAME: Byrum interior remodel
SITE ADDRESS: 906 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	40000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In	Final
Insulation	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.



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Planning and Inspection Department

BJ2021-209

PROJECT NAME: Tortelli Addition
SITE ADDRESS: 1513 VILLAGE LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

APPLICANT: TORTELLI, JOSEPH
 1513 VILLAGE LN
 Kill Devil Hills, NC 27948
 252-455-3261

OWNER: TORTELLI, JOSEPH
 1513 VILLAGE LN
 Kill Devil Hills, NC 27948
 252-455-3261

CONTRACTOR: B&B Contractors
 P. O. Box 2998
 Kitty Hawk, NC 27949
 252-489-9551

GENERAL BUILDING - LIMITED: B&B Contractors
 P. O. Box 2998
 Kitty Hawk, NC 27949
 252-489-9551

License: 85388
Expires: 01/01/2022

PARCEL:

PIN: 988414246978

Parcel Number: 003384000

Address: 1513 VILLAGE LN KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 1

Block: 0 **Lot(s):** 115

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$216.00	\$0.00	Open Decks	1 EA
Renovation/Remodel/Relocate	\$28.80	\$0.00	Remodel/Renovation	64 SQFT
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space	288 sq. Ft.
Totals :	\$394.80	\$0.00	(.75)	

PROJECT DESCRIPTION: addition to existing house, adding 4th bedroom, bringing parking into compliance, reworking existing deck

PAID

OCT - 6 2021

BJ2021-209

PROJECT NAME: Tortelli Addition

SITE ADDRESS: 1513 VILLAGE LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S5-5852
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	40000.00
LOT COVERAGE	27.00
LIVING SPACE (SQFT)	352
OPEN DECK (SQFT)	184
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
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

* 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.



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PAID

OCT - 7 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-216	BUILDING JOINT
PROJECT NAME: Ray Davis	ISSUED: 10/05/2021
SITE ADDRESS: 409 CAMERON ST KILL DEVIL HILLS	EXPIRES: 04/03/2022

APPLICANT: SWIMME & SON 184 Lowes Lane ELIZABETH CITY, NC 27909 252-338-8443	OWNER: DAVIS, RAYMOND LINWARD 409 CAMERON STREET KILL DEVIL HILLS, NC 27948
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GENERAL:	SWIMME & SON 184 Lowes Lane ELIZABETH CITY, NC 27909 252-338-8443	License: 43338 Expires: 01/01/2022
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PARCEL:

PIN: 987516842383	Parcel Number: 000163000
Address: 409 CAMERON ST KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH WEST	Block: 0 Lot(s): 51
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace existing tub with shower, widen door

PAID
10/7/21
by Pa

BJ2021-216**PROJECT NAME:** Ray Davis**SITE ADDRESS:** 409 CAMERON ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/05/2021**EXPIRES:** 04/03/2022**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	24000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

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:  **Date:** 10 / 07 / 2021



Town of Kill Devil Hills

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OCT - 8 2021

Planning and Inspection Department

BJ2021-212

PROJECT NAME: T&B Homes New House
SITE ADDRESS: 3310 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/08/2021

EXPIRES: 04/06/2022

APPLICANT: T and B Homes, Inc.
1706 Virginia Ave.
Kill Devil Hills, NC 27948
252-207-9837

OWNER: T and B Homes, Inc.
1706 Virginia Ave.
Kill Devil Hills, NC 27948
252-207-9837

CONTRACTOR: T and B Homes, Inc.
1706 Virginia Ave.
Kill Devil Hills, NC 27948
252-207-9837

License: 80069
Expires: 12/31/2021

PARCEL:

PIN: 988509054160

Parcel Number: 000063000

Address: 3310 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH BLK 2

Block: 2 **Lot(s):** 6

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$2,675.25	\$0.00	Residential Heated Space	3567 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Land Disturbing	\$100.00	\$0.00	Covered Porches/Decks	695 SQFT
Covered Porch Residential	\$521.25	\$0.00	# of Temporary Poles	1 EA
Totals :	\$3,346.50	\$0.00		

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T21855

BJ2021-212**PROJECT NAME:** T&B Homes New House**SITE ADDRESS:** 3310 VA DARE TRL N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/08/2021**EXPIRES:** 04/06/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	31012
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	12.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	485000.00
LOT COVERAGE	45.70
LIVING SPACE (SQFT)	3567
COVERED PORCHES/DECKS (SQFT)	695
TOTAL SQUARE FOOTAGE	4262
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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OCT - 6 2021

Planning and Inspection Department

BJ2021-211

PROJECT NAME: Joshua West
SITE ADDRESS: 1106 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/06/2021

EXPIRES: 04/04/2022

APPLICANT: West, Joshua
1106 Clamshell Dr.
Kill Devil Hills, NC 27948
757-641-4133

OWNER: West, Joshua
1106 Clamshell Dr.
Kill Devil Hills, NC 27948
757-641-4133

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988409063769

Parcel Number: 002556004

Address: 1106 CLAM SHELL DR KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:
Block: 23 **Lot(s):** 3A

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Enclose under house to extend workshop and add enclosed garage

BJ2021-211**PROJECT NAME:** Joshua West**SITE ADDRESS:** 1106 CLAM SHELL DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/06/2021**EXPIRES:** 04/04/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-6216
# PARKING SPACES/BEDROOM	4
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

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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.



Town of Kill Devil Hills

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PAID

OCT 19 2021

Planning and Inspection Department

RECEIVED
OCT 22 2021

BJ2021-185	BUILDING JOINT
PROJECT NAME: Stephanie Seay	ISSUED: 10/18/2021
SITE ADDRESS: 2901 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 04/16/2022

APPLICANT: COASTAL CONSTRUCTION of NC 7013 Martins Pt. Rd. kitty hawk, nc 27949 480-5556	OWNER: Seay, Stephanie 1127 Cebada Rd. ATASCADERO, CA93422 805-674-7588
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GENERAL, UNLIMITED:	COASTAL CONSTRUCTION of NC 7013 Martins Pt. Rd. kitty hawk, nc 27949 480-5556	License: 25529 Expires: 01/01/2022
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PARCEL:

PIN: 988513138271	Parcel Number: 000825000
Address: 2901 VA DARE TRL N KILL DEVIL HILLS	
Addition: VIRGINIA DARE SHORES PLAT B	Zoning:
Legal Description:	Block: 0 Lot(s): 19

FEES:	Paid	Due	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Residential Unheated (.40)	112 Sq. Ft
Totals :	\$150.00	\$0.00		

PROJECT DESCRIPTION: Raise house, replace septic system, pilings, decks, steps and driveway within existing footprint.

BJ2021-185

PROJECT NAME: Stephanie Seay

SITE ADDRESS: 2901 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/18/2021

EXPIRES: 04/16/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-5307
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	75000.00
STORAGE (SQFT)	112
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Frederick House 24740
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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



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Planning and Inspection Department

BJ2021-220	BUILDING JOINT
PROJECT NAME: Jason Sheil	ISSUED: 10/11/2021
SITE ADDRESS: 3108 BAY DR KILL DEVIL HILLS	EXPIRES: 04/09/2022

APPLICANT: SHEIL, JASON 3108 BAY DR Kill Devil Hills, NC 27948 757-403-2439	OWNER: SHEIL, JASON 3108 BAY DR Kill Devil Hills, NC 27948 757-403-2439
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CONTRACTOR:	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	License: Same as Owner Expires: 12/31/2021
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PARCEL:

PIN: 987520812719	Parcel Number: 029610012
Address: 3108 BAY DR KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES REVISED	Block: 89 Lot(s): 12-14
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add roof over deck/metal roof/add electrical outlets and fans on porch

OCT 20 2021

BJ2021-220

PROJECT NAME: Jason Sheil

SITE ADDRESS: 3108 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	16000.00
SURVEYOR NAME AND NUMBER	Gloria Rogers
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Final
Framing	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.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.



Town of Kill Devil Hills

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Planning and Inspection Department

BJ2021-219	BUILDING JOINT
PROJECT NAME: SAGA New 4 Bedroom House	ISSUED: 10/19/2021
SITE ADDRESS: 600 HARMONY LN Kill Devil Hills	EXPIRES: 04/17/2022

APPLICANT: SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
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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
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PARCEL:

PIN: 988413223951 Address: 600 HARMONY LN Kill Devil Hills Addition: Legal Description: Lot 22, Water Oak Residential Community	Parcel Number: Zoning: Block: Lot(s):
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FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	38 SQFT
Covered Porch Residential	\$28.50	\$0.00	Residential Heated Space	2346 sq. Ft.
Res. Building Permit Fee	\$1,931.90	\$0.00	(.75)	
Totals :	\$2,010.40	\$0.00	# of Temporary Poles	1 EA
			Residential Unheated (.40)	431 Sq. Ft

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

Town of Kill Devil Hills
 Water Charges

PAID

T-24856

BJ2021-219**PROJECT NAME:** SAGA New 4 Bedroom House
SITE ADDRESS: 600 HARMONY LN Kill Devil Hills**BUILDING JOINT****ISSUED:** 10/19/2021**EXPIRES:** 04/17/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	225000.00
LOT COVERAGE	30.80
LIVING SPACE (SQFT)	2346
COVERED PORCHES/DECKS (SQFT)	38
GARAGE (SQFT)	431
TOTAL SQUARE FOOTAGE	2815
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

OCT 21 2021

Planning and Inspection Department

BJ2021-226

PROJECT NAME: VORASSO PLUMBING AND ELECTRICAL
SITE ADDRESS: 107 FERRIS AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/19/2021

EXPIRES: 04/17/2022

APPLICANT: VORRASO, THOMAS J
43 JARED DRIVE
ROBBINSVILLE, NJ 08691

OWNER: VORRASO, THOMAS J
43 JARED DRIVE
ROBBINSVILLE, NJ 08691

PARCEL:

PIN: 988419626381

Parcel Number: 003989000

Address: 107 FERRIS AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 44 **Lot(s):** 16

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACING ELECTRICAL IN KITCHEN, INSTALLINGS NEW LIGHT FIXTURES AND RECEPTACLES, REPLACING HOUSE PLUMBING

BJ2021-226PROJECT NAME: VORASSO PLUMBING AND ELECTRICAL
SITE ADDRESS: 107 FERRIS AVE KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 10/19/2021

EXPIRES: 04/17/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In	Final
Insulation	

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.



Town of Kill Devil Hills

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Planning and Inspection Department

BJ2021-223	BUILDING JOINT
PROJECT NAME: Clifton remodel	ISSUED: 10/15/2021
SITE ADDRESS: 707 SUFFOLK ST KILL DEVIL HILLS	EXPIRES: 04/13/2022

APPLICANT: GOSPEL LEGACY LLC 17991 POSSUM POINT RD DUMFRIES, VA 22026 703-508-9985	OWNER: GOSPEL LEGACY LLC 17991 POSSUM POINT RD DUMFRIES, VA 22026 703-508-9985
----------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------

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

PIN: 988405096407	Parcel Number: 001408000
Address: 707 SUFFOLK ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 938
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: adding supply and drain in closet for laundry, relocating door to porch, add 2 gfi in kitchen

"X" Flood Zone

PAID
10/21/21
lyba

BJ2021-223**PROJECT NAME:** Clifton remodel**SITE ADDRESS:** 707 SUFFOLK ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/15/2021**EXPIRES:** 04/13/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	10000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In	Final
Insulation	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: Marty Shaw

Contractor or Authorized Agent: [Signature] **Date:** 10 / 16 / 2021



Town of Kill Devil Hills

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

OCT 21 2021

TREASURER

Planning and Inspection Department

BJ2021-183	BUILDING JOINT
PROJECT NAME: Target Remodel -- 1901 A	ISSUED: 10/07/2021
SITE ADDRESS: 1901-A CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 04/05/2022

APPLICANT: Target Corporation
1000 Nicollet Mall
MINNEAPOLIS, MN 55403

OWNER: Target Corporation
1000 Nicollet Mall
MINNEAPOLIS, MN 55403

CONTRACTOR: L.F. Jennings, Inc.
7130 Glen Forest Drive, Suite 410
Richmond, Va 23226

BUILDING-UNLIMITED: L.F. Jennings, Inc.
7130 Glen Forest Drive, Suite 410
Richmond, Va 23226

License: 46356
Expires:

PARCEL:

PIN: 988406383994L1

Parcel Number: 029832001

Address: 1901-A CROATAN HWY N KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$34,078.50	\$0.00	Remodel/Renovation	75730 SQFT
Totals :	\$34,078.50	\$0.00		

PROJECT DESCRIPTION: remodel of existing commercial space for Target Corporation Store

BJ2021-183

PROJECT NAME: Target Remodel -- 1901 A
SITE ADDRESS: 1901-A CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/07/2021

EXPIRES: 04/05/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	II
CONSTRUCTION COST	3236000.00
LIVING SPACE (SQFT)	75730
TOTAL SQUARE FOOTAGE	75730
ARCHITECT NAME AND LICENSE NUMBER	Richard Loeschke Jr 11835
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Merchantile

REQUIRED INSPECTIONS

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

* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

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

* 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

OCT 21 2021

Planning and Inspection Department

BJ2021-184

PROJECT NAME: Target Remodel -- 1901 B
SITE ADDRESS: 1901-B CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/07/2021

EXPIRES: 04/05/2022

APPLICANT: Target Corporation
1000 Nicollet Mall
MINNEAPOLIS, MN 55403

OWNER: Target Corporation
1000 Nicollet Mall
MINNEAPOLIS, MN 55403

CONTRACTOR: L.F. Jennings, Inc.
7130 Glen Forest Drive, Suite 410
Richmond, Va 23226

BUILDING-UNLIMITED: L.F. Jennings, Inc.
7130 Glen Forest Drive, Suite 410
Richmond, Va 23226

License: 46356
Expires:

PARCEL:

PIN: 988406383994L1

Parcel Number: 029832001

Address: 1901-B CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$18,365.40	\$0.00	Remodel/Renovation 40812 SQFT
Totals :	\$18,365.40	\$0.00	

PROJECT DESCRIPTION: remodel of existing commercial space for tenant space

BJ2021-184**PROJECT NAME:** Target Remodel -- 1901 B
SITE ADDRESS: 1901-B CROATAN HWY N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/07/2021**EXPIRES:** 04/05/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	II
CONSTRUCTION COST	750000.00
LIVING SPACE (SQFT)	40812
TOTAL SQUARE FOOTAGE	40812
ARCHITECT NAME AND LICENSE NUMBER	Richard Loeschke Jr 11835
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Merchantile

REQUIRED INSPECTIONS

In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	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.
- * 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.



Town of Kill Devil Hills

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

PAID

OCT 22 2021

Planning and Inspection Department

TECHNICAL PERMITS

BJ2021-217

PROJECT NAME: Jones Storage Room Under House
SITE ADDRESS: 704 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/12/2021

EXPIRES: 04/10/2022

APPLICANT: MACKO OBX CONSTRUCTION, INC
P.O. BOX 3689
Kill Devil Hills, NC 27948
252-480-6411

OWNER: Jones, Tom
208 Meadow Lane
FRANKLIN, VA 23851
757-641-8321

BUILDING UNLIMITED: MACKO OBX CONSTRUCTION, INC
P.O. BOX 3689
Kill Devil Hills, NC 27948
252-480-6411

License: 81540
Expires: 01/01/2022

PARCEL:

PIN: 988419723385

Parcel Number: 027183000

Address: 704 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 21 **Lot(s):** 3

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: 6'x10' storage room under existing house, flood vents required

BJ2021-217

PROJECT NAME: Jones Storage Room Under House
SITE ADDRESS: 704 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/12/2021

EXPIRES: 04/10/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RH
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.40
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	12000.00
LOT COVERAGE	37.40
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Storage

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.

* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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



Town of Kill Devil Hills

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

PAID

OCT 22 2021

Planning and Inspection Department

BJ2021-227	BUILDING JOINT
PROJECT NAME: Holmes Porch Enclosure	ISSUED: 10/21/2021
SITE ADDRESS: 533 CHOWAN ST W KILL DEVIL HILLS	EXPIRES: 04/19/2022

APPLICANT: STARCO REALTY AND CONSTRUCTION 817 Highway 64 Manteo, NC 27954 473-6300	OWNER: DONALD & CYNTHIA HOLMES 7700 Harewood Ln. RICHMOND, VA 23231
----------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------

GENERAL:	STARCO REALTY AND CONSTRUCTION 817 Highway 64 Manteo, NC 27954 473-6300	License: 46732 Expires: 01/01/2022
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PARCEL:

PIN: 987520817691	Parcel Number: 000703000
Address: 533 CHOWAN ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 68 Lot(s): 4-6
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Residential Heated Space (.75)	104 sq. Ft.
Totals :	\$150.00	\$0.00		

PROJECT DESCRIPTION: enclose existing screen porch convert into living space

BJ2021-227

PROJECT NAME: Holmes Porch Enclosure
SITE ADDRESS: 533 CHOWAN ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-6616
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	21000.00
LOT COVERAGE	31.20
LIVING SPACE (SQFT)	104
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

* 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

Planning and Inspection Department

BJ2021-222

PROJECT NAME: BASNIGHT BATHROOM REMODEL
SITE ADDRESS: 119 CARLTON AVE E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

APPLICANT: BASNIGHT, LESLIE J JR
119 CARLTON AVENUE
KILL DEVIL HILLS, NC 27948

OWNER: BASNIGHT, LESLIE J JR
119 CARLTON AVENUE
KILL DEVIL HILLS, NC 27948

BUILDING LIMITED: DARE REPAIRS
448 Old Wharf Rd
Wanchese, NC 27981
252-423-0837

License: 81517
Expires:

PARCEL:

PIN: 988420800354

Parcel Number: 003830000

Address: 119 CARLTON AVE E KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 35 **Lot(s):** PT 1 & 2

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REMODEL BATHROOM, INSTALL NEW FIXTURES, FLOORING, AND REMOVE CLOSET

OCT 26 2021

BJ2021-222

PROJECT NAME: BASNIGHT BATHROOM REMODEL
SITE ADDRESS: 119 CARLTON AVE E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	6778.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In

Final

CONDITIONS

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

* 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

OCT 25 2021

Planning and Inspection Department

BJ2021-228

PROJECT NAME: LOPEZ REMODEL
SITE ADDRESS: 307 SUFFOLK ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

APPLICANT: LOPEZ, GERARDO
PO BOX 2851
kitty hawk, nc 27949

OWNER: LOPEZ, GERARDO
PO BOX 2851
kitty hawk, nc 27949

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

PARCEL:

PIN: 988405194986

Parcel Number: 001251000

Address: 307 SUFFOLK ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 798

Legal Description:

FEE:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HOUSE REMODEL, WORK IS CUMULITIVE OF ALL PERMITS OPEN, INCLUDES DECKING, STAIRS, SIDIDNG, WINDOWS, AC, ROOF, KITCHEN AND BATH

BJ2021-228**PROJECT NAME:** LOPEZ REMODEL**SITE ADDRESS:** 307 SUFFOLK ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/20/2021**EXPIRES:** 04/18/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	72800.00
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.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * 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.



Town of Kill Devil Hills

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

OCT 27 2021

Planning and Inspection Department

BJ2021-230

PROJECT NAME: Marx Pool
SITE ADDRESS: 803 Sixth Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

APPLICANT: Marx, John
803 Sixth Ave
Kill Devil Hills, NC 27948
757-647-8154

OWNER: Marx, John
803 Sixth Ave
Kill Devil Hills, NC 27948
757-647-8154

CONTRACTOR: SOUNDSIDE POOLS
PO Box 2996
Kill Devil Hills, NC 27948
252-256-2684

GENERAL: SOUNDSIDE POOLS
PO Box 2996
Kill Devil Hills, NC 27948
252-256-2684

License: 61128
Expires: 12/31/2021

PARCEL:

PIN: 988311772319

**Parcel
Number:**

Address: 803 Sixth Avenue Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 9, Block 32 Kill Devil Hills Realty Corp Addition

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

PROJECT DESCRIPTION: install pool on southside of property

BJ2021-230**PROJECT NAME:** Marx Pool**SITE ADDRESS:** 803 Sixth Avenue Kill Devil Hills**BUILDING JOINT****ISSUED:** 10/22/2021**EXPIRES:** 04/20/2022

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
CONSTRUCTION COST	32000.00
LOT COVERAGE	26.73
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Pool Bonding	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.
- * 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.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Trade affidavits are required prior to inspection.



Town of Kill Devil Hills

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

PAID
OCT 27 2021

Planning and Inspection Department

BJ2021-232

PROJECT NAME: Williams Carport Conversion
SITE ADDRESS: 802 Sixth Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 10/26/2021

EXPIRES: 04/24/2022

APPLICANT: Williams, Mike
242 Roanoke Dr.
Kill Devil Hills, NC 27948
252-202-2111

OWNER: Williams, Mike
242 Roanoke Dr.
Kill Devil Hills, NC 27948
252-202-2111

CONTRACTOR: Gregory Butcher
119 Lee Crt
Kill Devil Hills, NC 27948
207-8727

GENERAL - LIMITED: Gregory Butcher
119 Lee Crt
Kill Devil Hills, NC 27948
207-8727

License: 47105
Expires:

PARCEL:

PIN: 988311770274

Parcel Number:

Address: 802 Sixth Avenue Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 2, Block 38, Kill Devil Hills Realty Corp Addition

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$313.60	\$0.00	Residential Unheated (.40)	784 Sq. Ft
Totals :	\$313.60	\$0.00		

PROJECT DESCRIPTION: enclose carport to garage, house currently under construction

BJ2021-232

PROJECT NAME: Williams Carport Conversion
SITE ADDRESS: 802 Sixth Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 10/26/2021

EXPIRES: 04/24/2022

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 Repair/Remodel
CONSTRUCTION COST	40000.00
GARAGE (SQFT)	784
TOTAL SQUARE FOOTAGE	784
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.



Town of Kill Devil Hills

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

Oct 29 2021

Planning and Inspection Department

BJ2021-229

PROJECT NAME: Bakopoulos New 3 Bedroom House
SITE ADDRESS: 216 Archdale St W Kill Devil Hills

BUILDING JOINT

ISSUED: 10/28/2021

EXPIRES: 04/26/2022

APPLICANT: BAKOPOULOS, NICHOLAS
107 ST CLAIR RD
KILL DEVIL HILLS, NC 27948

OWNER: BAKOPOULOS, NICHOLAS
107 ST CLAIR RD
KILL DEVIL HILLS, NC 27948

BUILDING LIMITED: Hughes, Ryland James
3945 Pineway Drive
kitty hawk, nc 27949
252-202-4111

License: 76503
Expires: 01/01/2022

PARCEL:

PIN: 988517018909

Parcel Number:

Address: 216 Archdale St W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 10 & 11, Block 30, Virginia Dare Shores

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	116 SQFT
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space	2050 sq. Ft.
Res. Building Permit Fee	\$1,598.30	\$0.00	(.75)	
Covered Porch Residential	\$87.00	\$0.00	Residential Unheated (.40)	152 Sq. Ft
			Open Decks	1 EA
Totals :	\$1,885.30	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: 724902

BJ2021-229**PROJECT NAME:** Bakopoulos New 3 Bedroom House
SITE ADDRESS: 216 Archdale St W Kill Devil Hills**BUILDING JOINT****ISSUED:** 10/28/2021**EXPIRES:** 04/26/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S8-6624
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.10
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	39.50
LIVING SPACE (SQFT)	2050
COVERED PORCHES/DECKS (SQFT)	116
ACCESSORY STRUCTURE (SQFT)	64
STORAGE (SQFT)	152
TOTAL SQUARE FOOTAGE	2382
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ARCHITECT NAME AND LICENSE NUMBER	John DeLucia 16759
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

OCT 29 2021

Planning and Inspection Department

BJ2021-231	BUILDING JOINT
PROJECT NAME:	ISSUED: 10/22/2021
SITE ADDRESS: 802 FIRST ST W KILL DEVIL HILLS	EXPIRES: 04/20/2022

APPLICANT: PUGH, ANTHONY P O BOX 2889 KILL DEVIL HILLS, NC 27948	OWNER: PUGH, ANTHONY P O BOX 2889 KILL DEVIL HILLS, NC 27948
-------------------------------------------------------------------------------	---------------------------------------------------------------------------

PLUMBING CLASS I:	Hardison Plumbing & Land Development, LLC 8434 NC Hwy 306 SOUTH ARAPAHOE, NC 28510 (252) 745-4545	License: 08996 Expires: 12/31/2021
--------------------------	------------------------------------------------------------------------------------------------------------	-----------------------------------------------------

PARCEL:

PIN: 988413134788	Parcel Number: 027546120
Address: 802 FIRST ST W KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 120
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Install new walk in tub.

PAID
10/29/21 Dh
check # 261

BJ2021-231

PROJECT NAME:

SITE ADDRESS: 802 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	V
CONSTRUCTION COST	17991.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

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: Josh Hardison Date: 10/22/2021



Town of Kill Devil Hills

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

OCT 29 2021

Planning and Inspection Department

BUILDING JOINT
ISSUED: 10/28/2021
EXPIRES: 04/26/2022

BJ2021-236

PROJECT NAME: Barnes Carport to Garage Enclosure
SITE ADDRESS: 115 MEADOWLARK ST E KILL DEVIL HILLS

APPLICANT: Barnes, David
741 Virginia Dare Drive
VIRGINIA BEACH, VA 23451

OWNER: Barnes, David
741 Virginia Dare Drive
VIRGINIA BEACH, VA23451

CONTRACTOR: Farrell & Family Construction
113 E Meadowlark St
Kill Devil Hills, NC 27948
252-216-8810

UNLIMITED BUILDING: Farrell & Family Construction
113 E Meadowlark St
Kill Devil Hills, NC 27948
252-216-8810

License: 64271
Expires:

PARCEL:

PIN: 988308892803

Parcel Number: 003817000

Address: 115 MEADOWLARK ST E KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 33 **Lot(s):** 20

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$240.00	\$0.00	Residential Unheated (.40)	600 Sq. Ft
Totals :	\$240.00	\$0.00		

PROJECT DESCRIPTION: convert carport on house under construction to garage

BJ2021-236**PROJECT NAME:** Barnes Carport to Garage Enclosure
SITE ADDRESS: 115 MEADOWLARK ST E KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/28/2021**EXPIRES:** 04/26/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	8.10
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	38100.00
GARAGE (SQFT)	600
TOTAL SQUARE FOOTAGE	600
SURVEYOR NAME AND NUMBER	Rick House
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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



Town of Kill Devil Hills

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

OCT 29 2021

Planning and Inspection Department

BJ2021-237	BUILDING JOINT
PROJECT NAME: Brinn Bathroom Remodel	ISSUED: 10/29/2021
SITE ADDRESS: 909 FIRST ST W KILL DEVIL HILLS	EXPIRES: 04/27/2022

APPLICANT: Brinn, Shane 312 Pine Grove Trail Kill Devil Hills, NC 27948	OWNER: Brinn, Shane 312 Pine Grove Trail Kill Devil Hills, NC 27948
--------------------------------------------------------------------------------------	----------------------------------------------------------------------------------

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

PIN: 988413128882	Parcel Number: 003619000
Address: 909 FIRST ST W KILL DEVIL HILLS	Zoning:
Addition: LANDING SECTION 3, THE	Block: 0 Lot(s): 103
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: adding bathroom into master bedroom, new wall, toilet, shower and lights

BJ2021-237

PROJECT NAME: Brinn Barthroom Remodel
SITE ADDRESS: 909 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/29/2021

EXPIRES: 04/27/2022

DETAILS

Permit

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

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

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

BJ2021-238

PROJECT NAME: Weller Shed and unconditioned enclosure
SITE ADDRESS: 604 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/29/2021

EXPIRES: 04/27/2022

APPLICANT: Weller, Nathan
604 Clam Shell Drive
Kill Devil Hills, NC 27948

OWNER: Weller, Nathan
604 Clam Shell Drive
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988409176458

Parcel Number: 002399000

Address: 604 CLAM SHELL DR KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

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

Legal Description:

FEE:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$112.80	\$0.00	Residential Unheated (.40)	282 Sq. Ft
Accessory Residential (MIN)	\$100.00	\$0.00		
Totals :	\$212.80	\$0.00		

PROJECT DESCRIPTION: shed to rear yard, and unconditioned enclosure below the existing structure

PAID WITH CASH

OCT 29 2021

BJ2021-238

PROJECT NAME: Weller Shed and unconditioned enclosure
SITE ADDRESS: 604 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/29/2021

EXPIRES: 04/27/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2434.00
LOT COVERAGE	33.00
STORAGE (SQFT)	282
TOTAL SQUARE FOOTAGE	282
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.

* 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
WITH
CASH

OCT - 1 2021

Planning and Inspection Department

BP2021-196

PROJECT NAME: Carlos Fernandez
SITE ADDRESS: 2109 BAY DR KILL DEVIL HILLS

BUILDING

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

APPLICANT: MR. CARLOS A FERNANDEZ
2109 Bay Drive
Kill Devil Hills, NC 27948

OWNER: MR. CARLOS A FERNANDEZ
2109 Bay Drive
Kill Devil Hills, NC 27948

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 987408992483

Parcel Number: 001666000

Address: 2109 BAY DR KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 313

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace siding and windows

BP2021-196PROJECT NAME: Carlos Fernandez
SITE ADDRESS: 2109 BAY DR KILL DEVIL HILLS**BUILDING**

ISSUED: 09/22/2021

EXPIRES: 03/21/2022

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	20000.00
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.

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: 10-1-2021



Town of Kill Devil Hills

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

OCT - 1 2021

Planning and Inspection Department

BP2021-206

PROJECT NAME: SHIRLEY POOL BARRIER
SITE ADDRESS: 1303 Memorial Blvd. Kill Devil Hills

HSVC
WITH
PAID

BUILDING

ISSUED: 10/01/2021
EXPIRES: 03/30/2022

APPLICANT: SHIRLEY, GEORGE
250 ASPEN LN
Gilbertsville, pa 19525

OWNER: SHIRLEY, GEORGE
250 ASPEN LN
Gilbertsville, pa 19525

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 989309063409

Parcel Number: 004704001

Address: 1303 Memorial Blvd. Kill Devil Hills

Addition: KILL DEVIL BEACH SEC 1 REVISED

Zoning:
Block: D **Lot(s):** 15

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE POOL BARRIER IN EXISTING LOCATION

BP2021-206**PROJECT NAME:** SHIRLEY POOL BARRIER**SITE ADDRESS:** 1303 Memorial Blvd. Kill Devil Hills**BUILDING****ISSUED:** 10/01/2021**EXPIRES:** 03/30/2022**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
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	1000.00
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

PAYD
OCT - 5 2021

Planning and Inspection Department

BP2021-207	BUILDING
PROJECT NAME: MOSELEY DECK AND STAIR	ISSUED: 10/05/2021
SITE ADDRESS: 400 HELGA ST W KILL DEVIL HILLS	EXPIRES: 04/03/2022

APPLICANT: MOSELEY, THEODORE 400 W HELGA ST Kill Devil Hills, NC 27948 252-207-5225	OWNER: MOSELEY, THEODORE 400 W HELGA ST Kill Devil Hills, NC 27948 252-207-5225
-----------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------

UNLICENSED - REMODELING:	GUNS, KENNETH W., JR. 529 Parkwood Drive Kill Devil Hills, NC 27948 252-207-9290	License: 00000 Expires: 07/01/2023
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PARCEL:

PIN: 987516838459	Parcel Number: 000278000
Address: 400 HELGA ST W KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH WEST	Block: 0 Lot(s): 193
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD DECK AND STAIR IN SAME LOCATION, INSTALL NEW PILINGS

BP2021-207**PROJECT NAME:** MOSELEY DECK AND STAIR
SITE ADDRESS: 400 HELGA ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 10/05/2021**EXPIRES:** 04/03/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	7500.00
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.

* 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

OCT - 6 2021

Planning and Inspection Department

BP2021-205

PROJECT NAME: Oyster Point Bldg C reroof
SITE ADDRESS: 700 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

APPLICANT: OYSTER PT. HOME OWNERS ASS.
203 Forest Hill Ave
ROCKY MOUNT, NC 27801
261-1200

OWNER: OYSTER PT. HOME OWNERS ASS.
203 Forest Hill Ave
ROCKY MOUNT, NC 27801
261-1200

CONTRACTOR: Silva Painting Co
PO BOX 2415
Kill Devil Hills, NC 27948

UNLICENSED BUILDER: Silva Painting Co
PO BOX 2415
Kill Devil Hills, NC 27948

License: 12345
Expires:

PARCEL:

PIN: 98841314042600

Parcel Number: 008075999

Address: 700 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): COMMON PROPERTY

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: reroof building C, replace shingles, vents, pipe boots, and flashing

BP2021-205

PROJECT NAME: Oyster Point Bldg C reroof
SITE ADDRESS: 700 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	23351.93

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: _____

10/6/21



Town of Kill Devil Hills

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

PAID

OCT - 7 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-210

PROJECT NAME: Cornerstone Properties, OBX
SITE ADDRESS: 106 AVALON DR E KILL DEVIL HILLS

BUILDING

ISSUED: 10/06/2021

EXPIRES: 04/04/2022

APPLICANT: OUTER BANKS DECK AND FENCE
P.O. Box 1734
Kill Devil Hills, NC 27948
252-261-9888

OWNER: Cornerstone Properties, OBX
208 West Pond Drive Unit 2
Kill Devil Hills, NC 27948
252-305-5338

GENERAL, UNLICENSED: OUTER BANKS DECK AND FENCE
P.O. Box 1734
Kill Devil Hills, NC 27948
252-261-9888

License: n/a
Expires: 12/31/2022

PARCEL:

PIN: 988517201840

Parcel Number: 001702000

Address: 106 AVALON DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0 **Lot(s):** 48

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace rear deck and steps within existing footprint

PAID
10/7/21 Da
pay pel

BP2021-210**PROJECT NAME:** Cornerstone Properties, OBX
SITE ADDRESS: 106 AVALON DR E KILL DEVIL HILLS**BUILDING****ISSUED:** 10/06/2021**EXPIRES:** 04/04/2022**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6500.00
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.

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: Jay Perrin Date: 10/06/2021



Town of Kill Devil Hills

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

PAID
OCT - 7 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-208	BUILDING
PROJECT NAME: Margaret Creef-Ryan	ISSUED: 10/05/2021
SITE ADDRESS: 1725 CREEK ST KILL DEVIL HILLS	EXPIRES: 04/03/2022

APPLICANT: POP'S REPAIR P. O. Box 2380 Kill Devil Hills, NC 27948 256-4400	OWNER: Creef, Margaret A 1500 Penton News CHESAPEAKE, VA 23320
--------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------

H-1, H-2, H-3, CLASS I:	POP'S REPAIR 113 E. Sothel St. Unit #5 Kill Devil Hills, NC 27948 252-256-0093	License: 34144 Expires: 12/31/2021
--------------------------------	-----------------------------------------------------------------------------------------	-----------------------------------------------------

PARCEL:

PIN: 988410266908	Parcel Number: 002652000
Address: 1725 CREEK ST KILL DEVIL HILLS	
Addition: HIGH VIEW - HEDRICKS ADD	Zoning: Block: B Lot(s): 1-2
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace existing steps within the existing footprint

PAID
10/7/21
Check # 1142

BP2021-208PROJECT NAME: Margaret Creef-Ryan
SITE ADDRESS: 1725 CREEK ST KILL DEVIL HILLS**BUILDING**

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

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	4000.00
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.
- * 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.

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 ThumanContractor or Authorized Agent: Julia Scheer Date: 10 / 06 / 2021



Town of Kill Devil Hills

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

OCT - 7 2021

Planning and Inspection Department

BP2021-211

PROJECT NAME: London Screen Porch Addition
SITE ADDRESS: 310 Live Oak Court Kill Devil Hills

BUILDING

ISSUED: 10/07/2021

EXPIRES: 04/05/2022

APPLICANT: LONDON, ROBERT F
P O BOX 164
POINT HARBOR, NC 27964
252-491-8330

OWNER: LONDON, ROBERT F
P O BOX 164
POINT HARBOR, NC 27964
252-491-8330

CONTRACTOR: LONDON, ROBERT F JR
PO Box 785
Kitty Hawk, NC 27949
252-207-8644

GENERAL: LONDON, ROBERT F. JR.
Rt 1 Box 30
Harbinger, NC 27941
252-207-8644

License: 14364
Expires:

PARCEL:

PIN: 988410355587

**Parcel
Number:**

Address: 310 Live Oak Court Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 218, Section 2, First Flight Village

FEES:	Paid	Due	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Covered Porches/Decks	192 SQFT
Totals :			\$150.00	\$0.00

PROJECT DESCRIPTION: add screen porch over deck to house under construction

BP2021-211**PROJECT NAME:** London Screen Porch Addition
SITE ADDRESS: 310 Live Oak Court Kill Devil Hills**BUILDING****ISSUED:** 10/07/2021**EXPIRES:** 04/05/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
COVERED PORCHES/DECKS (SQFT)	192
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	WL Norris L-4554
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

PAID

OCT 12 2021

Planning and Inspection Department

BP2021-213

PROJECT NAME: High Dunes Condo
SITE ADDRESS: 1405 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

APPLICANT: Emanuelson and Dad
PO Box 448
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2212

OWNER: High Dunes Condominium Association INC
PO BOX 144
Kill Devil Hills, NC 27948
252-475-0208

RESIDENTIAL, LIMITED: Emanuelson and Dad
PO Box 448
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2212

License: 79801
Expires: 01/01/2022

PARCEL:

PIN: 98930906937200

Parcel Number: 004674999

Address: 1405 VA DARE TRL S KILL DEVIL HILLS

Addition:

Zoning:

Block: B

Lot(s): COM. PROP.
LTS 11,1

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add 6 X 31 extension to existing beach walkover



PAID

10/11/21

paypal

BP2021-213

PROJECT NAME: High Dunes Condo

SITE ADDRESS: 1405 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Accessory
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	19570.00
SURVEYOR NAME AND NUMBER	Seaboard
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.
- * 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

Planning and Inspection Department

OCT 12 2021

BP2021-212

PROJECT NAME: PYLE FENCE AND STAIR
SITE ADDRESS: 1506 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING
ISSUED: 10/07/2021
EXPIRES: 04/05/2022

APPLICANT: Pyle, Steven
6086 Martins Point Rd
kitty hawk, nc 27949

OWNER: Pyle, Steven
6086 Martins Point Rd
kitty hawk, nc 27949

UNLICENSED - REMODELING: DOMESTIC DETAILS
506 COLINGTON DR
Kill Devil Hills, NC 27948
252-202-6932

License: XXXX
Expires:

PARCEL:

PIN: 989309053401

Parcel Number: 004865000

Address: 1506 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH SEC 1 AMENDED

Block: L **Lot(s):** 8

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Fence	\$100.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	
Totals :	\$250.00	\$0.00	

PROJECT DESCRIPTION: CONSTRUCT 4' FENCE AROUND REAR YARD, CONSTRUCT NEW EXTERIOR STAIR OFF OF DECK TO REAR, REPLACE RAILINGS



PAID

DB
10/11/21 *paypal*

BP2021-212**PROJECT NAME:** PYLE FENCE AND STAIR**SITE ADDRESS:** 1506 WRIGHTSVILLE BLVD KILL DEVIL HILLS**BUILDING****ISSUED:** 10/07/2021**EXPIRES:** 04/05/2022**DETAILS****Permit**

Name	Value
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	3000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Stringline

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

OCT 12 2021

Planning and Inspection Department

BP2021-215	BUILDING
PROJECT NAME: Goulder Rooftop Deck Rebuild	ISSUED: 10/12/2021
SITE ADDRESS: 106 PARK DR KILL DEVIL HILLS	EXPIRES: 04/10/2022

APPLICANT: GOULDER, ROBERT A
3214 HOLLY AVE
COLONIAL HEIGHTS, VA 23834

OWNER: GOULDER, ROBERT A
3214 HOLLY AVE
COLONIAL HEIGHTS, VA23834

CONTRACTOR: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

GENERAL-LIMITED: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

License: 59306
Expires: 01/01/2022

PARCEL:

PIN: 988419608329

Parcel Number: 008161000

Address: 106 PARK DR KILL DEVIL HILLS

Zoning:

Addition: BAUM BAY SHORES - REVISED

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

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: rebuild existing roof top deck and stairs to same footprint

\$ 13,500.00

BP2021-215

PROJECT NAME: Goulder Rooftop Deck Rebuild
SITE ADDRESS: 106 PARK DR KILL DEVIL HILLS

BUILDING**ISSUED:** 10/12/2021**EXPIRES:** 04/10/2022**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
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
LOT COVERAGE	38.53
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

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

OCT 13 2021

Planning and Inspection Department

BP2021-216	BUILDING
PROJECT NAME: SAND LIFE DECK REPAIR	ISSUED: 10/13/2021
SITE ADDRESS: 3316 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 04/11/2022

APPLICANT:	SAND LIFE LLC 318 CAMERON ST. Kill Devil Hills, NC 27948 443-623-5982	OWNER:	SAND LIFE LLC 318 CAMERON ST. Kill Devil Hills, NC 27948 443-623-5982
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UNLICENSED - REMODELING:	OLDS, HOWARD 3617 Windgrass Circle Kitty Hawk, NC 27949	License: XXXXX Expires: 12/31/2022
---------------------------------	---------------------------------------------------------------	-----------------------------------------------------

PARCEL:

PIN:	988509053291	Parcel Number:	000061000
Address:	3316 VA DARE TRL N KILL DEVIL HILLS		
Addition:	ORVILLE BEACH BLK 2	Zoning:	
Legal Description:		Block:	2
		Lot(s):	3-4

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE DECKING, RAILING, AND 2 PORCH ROOF PILINGS

BP2021-216**PROJECT NAME:** SAND LIFE DECK REPAIR**SITE ADDRESS:** 3316 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 10/13/2021**EXPIRES:** 04/11/2022**DETAILS****Permit**

Name	Value
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	8000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 10/13/21



Town of Kill Devil Hills

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

BAD
OCT 13 2021

Planning and Inspection Department

BP2021-214	BUILDING
PROJECT NAME: Frise Deck and Stair Replacement	ISSUED: 10/12/2021
SITE ADDRESS: 121 CAROLYN DR KILL DEVIL HILLS	EXPIRES: 04/10/2022

APPLICANT: Albert L Thomas III P.O. Box 1772 153 Old NC 345 Manteo, NC 27954 252-473-7943	OWNER: Frise, Jonathan & Lori 22455 Pine Top CT Ashburn, VA 20148 571-236-6547
--------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------

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

PIN: 989313141738	Parcel Number: 004905000
Address: 121 CAROLYN DR KILL DEVIL HILLS	
Addition:	Zoning:
Legal Description:	Block: 0 Lot(s): 3

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: rebuilding existing side yard deck, replace two sets of exterior stairs, replace decking and rails and replace 4 columns on covered porch

BP2021-214**PROJECT NAME:** Frise Deck and Stair Replacement
SITE ADDRESS: 121 CAROLYN DR KILL DEVIL HILLS**BUILDING****ISSUED:** 10/12/2021**EXPIRES:** 04/10/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
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	16100.00
LOT COVERAGE	30.00
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

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

Planning and Inspection Department

BP2021-200

PROJECT NAME: Carey deck
SITE ADDRESS: 304 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING

ISSUED: 09/27/2021

EXPIRES: 03/26/2022

APPLICANT: Carey, Bradley & Abby
133 WEST Windjammer RD
nags head, nc 27959
252-564-5298

OWNER: Carey, Bradley & Abby
133 WEST Windjammer RD
nags head, nc 27959
252-564-5298

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988316942050

Parcel Number: 008464000

Address: 304 OCEAN ACRES DR W KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:
Block: F **Lot(s):** 6

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Rebuild and enlarge side deck and stairs

PAID
12/10/21
check # 1141

BP2021-200**PROJECT NAME:** Carey deck**SITE ADDRESS:** 304 OCEAN ACRES DR W KILL DEVIL HILLS**BUILDING****ISSUED:** 09/27/2021**EXPIRES:** 03/26/2022**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
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
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

Planning and Inspection Department

BP2021-217	BUILDING
PROJECT NAME: Baranyk deck/stairs	ISSUED: 10/14/2021
SITE ADDRESS: 2034 PHOEBUS ST KILL DEVIL HILLS	EXPIRES: 04/12/2022

APPLICANT: Baranyk, Samantha 2034 Phoebus St Kill Devil Hills, NC 27948 703-216-1672	OWNER: Baranyk, Samantha 2034 Phoebus St Kill Devil Hills, NC 27948 703-216-1672
------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------

CONTRACTOR: Brooks Home Renovations
349 Pond Rd
Wanchese, NC 27981
252-423-1939

GENERAL REMODELING-UNLICENSED: Brooks Home Renovations 349 Pond Rd Wanchese, NC 27981 252-423-1939	License: 000000 Expires: 12/31/2022
--------------------------------------------------------------------------------------------------------------------	------------------------------------------------------

PARCEL:

PIN: 988405093088	Parcel Number: 000885000
Address: 2034 PHOEBUS ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 1145
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Rebuild deck, stairs, and storage under steps, replace pilings supporting porch roof

PAID
OCT 15 2021

BP2021-217

PROJECT NAME: Baranyk deck/stairs

SITE ADDRESS: 2034 PHOEBUS ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/14/2021

EXPIRES: 04/12/2022

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	8000.00
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: 

Contractor or Authorized Agent:  Date: 15 Oct 21



Town of Kill Devil Hills

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

PAID
OCT 15 2021

Planning and Inspection Department

BP2021-218	BUILDING
PROJECT NAME: Hamilton Shed	ISSUED: 10/15/2021
SITE ADDRESS: 421 SOTHEL ST W KILL DEVIL HILLS	EXPIRES: 04/13/2022

APPLICANT: Hamilton, John 421 W Sothel Street Kill Devil Hills, NC 27948	OWNER: Hamilton, John 421 W Sothel Street Kill Devil Hills, NC 27948
---------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2021
-----------------	------------------------------------------------------	----------------------------------------------------------

PARCEL:			
PIN:	987520915743	Parcel Number:	000659000
Address:	421 SOTHEL ST W KILL DEVIL HILLS		
Addition:	VIRGINIA DARE SHORES	Zoning:	
Legal Description:		Block: 56	Lot(s): 10-12

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: 10'x12' shed in rear yard

BP2021-218

PROJECT NAME: Hamilton Shed

SITE ADDRESS: 421 SOTHEL ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1600.00
LOT COVERAGE	31.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.



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

BP2021-221	BUILDING
PROJECT NAME: POWELL STORAGE ROOM	ISSUED: 10/18/2021
SITE ADDRESS: 407 MARTIN ST W KILL DEVIL HILLS	EXPIRES: 04/16/2022

APPLICANT: POWELL, MARSHALL 162 SAWYERS CREEK RD Camden, NC 27921 252-339-3063	OWNER: POWELL, MARSHALL 162 SAWYERS CREEK RD Camden, NC 27921 252-339-3063
------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2021
-----------------	------------------------------------------------------	----------------------------------------------------------

PARCEL:

PIN: 988312862036	Parcel Number: 004466001
Address: 407 MARTIN ST W KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 30 Lot(s): W PT 11-12
Legal Description:	

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

PROJECT DESCRIPTION: ENCLOSE 17'X14' SPACE UNDER EXISTING FOOTPRINT FOR STORAGE ONLY

PAID
OCT 18 2021
TOWNSHIP
KILL DEVIL HILLS

BP2021-221PROJECT NAME: POWELL STORAGE ROOM
SITE ADDRESS: 407 MARTIN ST W KILL DEVIL HILLS**BUILDING**

ISSUED: 10/18/2021

EXPIRES: 04/16/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
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	7500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONSFraming 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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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.



Town of Kill Devil Hills

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

PAD
OCT 19 2021

Planning and Inspection Department

BP2021-204	BUILDING
PROJECT NAME: Oyster Point Bldg B reroof	ISSUED: 10/19/2021
SITE ADDRESS: 700 FIRST ST W KILL DEVIL HILLS	EXPIRES: 04/17/2022

APPLICANT: OYSTER PT. HOME OWNERS ASS. 203 Forest Hill Ave ROCKY MOUNT, NC 27801 261-1200	OWNER: OYSTER PT. HOME OWNERS ASS. 203 Forest Hill Ave ROCKY MOUNT, NC 27801 261-1200
-----------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------

CONTRACTOR: Silva Painting Co
PO BOX 2415
Kill Devil Hills, NC 27948

UNLICENSED BUILDER: Silva Painting Co PO BOX 2415 Kill Devil Hills, NC 27948	License: 12345 Expires:
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PARCEL:

PIN: 98841314042600	Parcel Number: 008075999
Address: 700 FIRST ST W KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): COMMON PROPERTY
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: reroof building B, replace shingles, vents, pipe boots, and flashing

BP2021-204

PROJECT NAME: Oyster Point Bldg B reroof
SITE ADDRESS: 700 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/19/2021

EXPIRES: 04/17/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	23351.93

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.
- * Photos of installation showing all roof components required at final 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: _____

Contractor or Authorized Agent: _____

Date: 10-19-21



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

BP2021-223	BUILDING
PROJECT NAME: D&S EMPIRE LLC STAIR	ISSUED: 10/20/2021
SITE ADDRESS: 402 CLAM SHELL DR KILL DEVIL HILLS	EXPIRES: 04/18/2022

APPLICANT: THE D&S EMPIRE 3824 SUGARLOAF PKWY FREDERICK, MD 21704	OWNER: THE D&S EMPIRE 3824 SUGARLOAF PKWY FREDERICK, MD 21704
--------------------------------------------------------------------------------	----------------------------------------------------------------------------

UNLICENSED BUILDER:	ALL AMERICAN LANDSCAPING 6205 CARATOKE HWY GRANDY, NC 27939	License: XXXXXX Expires:
----------------------------	-------------------------------------------------------------------	-------------------------------------------

PARCEL:

PIN: 988405272769	Parcel Number: 002410000
Address: 402 CLAM SHELL DR KILL DEVIL HILLS	Zoning:
Addition: SEA HOLLY RIDGE	Block: A Lot(s): 29
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD WESTERN EXTERIOR STAIR IN SAME FOOTPRINT

PAID
OCT 20 2021

BP2021-223

PROJECT NAME: D&S EMPIRE LLC STAIR
SITE ADDRESS: 402 CLAM SHELL DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

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
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1300.00
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.
- * 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: 10-20-21



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

BP2021-222	BUILDING
PROJECT NAME: Michael Salopek	ISSUED: 10/19/2021
SITE ADDRESS: 218 BURNS DR KILL DEVIL HILLS	EXPIRES: 04/17/2022

APPLICANT: Emanuelson and Dad PO Box 448 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2212	OWNER: SALOPEK, MICHAEL JOHN 218 BURNS AV KILL DEVIL HILLS, NC 27948
-------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------


RESIDENTIAL, LIMITED:	Emanuelson and Dad PO Box 448 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2212	License: 79801 Expires: 01/01/2022
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PARCEL:

PIN: 988316944598	Parcel Number: 008377000
Address: 218 BURNS DR KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES TRACT 3 SEC 1	Block: A Lot(s): 10
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace pilings, deck and steps

 **PAID**
10/19/21
paypal

BP2021-222

PROJECT NAME: Michael Salopek

SITE ADDRESS: 218 BURNS DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/19/2021

EXPIRES: 04/17/2022

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	5900.00
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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Steps cannot project more than 10' from the front yard setback line.



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

BP2021-226

PROJECT NAME: Broadwater Stair Relocation
SITE ADDRESS: 2040 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

APPLICANT: MS. DOROTHY G BROADWATER
107 Lytham
Smithfield, Va 23430

OWNER: MS. DOROTHY G BROADWATER
107 Lytham
Smithfield, Va 23430

CONTRACTOR: Yoder, Doug
4104 Poor Ridge RD
kitty hawk, nc 27949

UNLICENSED - REMODELING:

Yoder, Doug
4104 Poor Ridge RD
kitty hawk, nc 27949

License: 00000000
Expires:

PARCEL:

PIN: 989313139690

Parcel Number: 008513000

PAID WITH CASH

Address: 2040 VA DARE TRL S KILL DEVIL HILLS

Addition: NAGS HEAD SHORES AMENDED SEC 4

Zoning:

Block: 4 **Lot(s):** 2

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: remove existing front deck stairs and add stairs from back deck

OCT 21 2021

BP2021-226PROJECT NAME: Broadwater Stair Relocation
SITE ADDRESS: 2040 VA DARE TRL S KILL DEVIL HILLS**BUILDING**

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
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	2500.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

OCT 22 2021

Planning and Inspection Department

BP2021-227

PROJECT NAME: Clark deck replacement
SITE ADDRESS: 604 AVALON DR W KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

APPLICANT: Clark, Vickie
618 Sycamore Mill Ct
COLUMBUS, OH 43230

OWNER: Clark, Vickie
618 Sycamore Mill Ct
COLUMBUS, OH 43230

CONTRACTOR: LONGWORTH, W.H.
PO BOX 774
nags head, nc 27959

UNLICENSED - REMODELING: LONGWORTH, W.H.
PO BOX 774
nags head, nc 27959

License: 12345
Expires:

PARCEL:

PIN: 988405096977

Parcel Number: 001561000

Address: 604 AVALON DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 202

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: install joist and decking boards, railings, sills, and foundation to remain as is

BP2021-227

PROJECT NAME: Clark deck replacement

SITE ADDRESS: 604 AVALON DR W KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

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	3800.00
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.

* 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

OCT 25 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-225	BUILDING
PROJECT NAME: YOUNG STAIR REPLACEMENT	ISSUED: 10/21/2021
SITE ADDRESS: 117 CHARLOTTE ST KILL DEVIL HILLS	EXPIRES: 04/19/2022

APPLICANT: YOUNG, GREGG 301 Pond Dr NORFOLK, VA 23434	OWNER: YOUNG, GREGG 301 Pond Dr NORFOLK, VA 23434
--------------------------------------------------------------------	----------------------------------------------------------------

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

PIN: 988406390746	Parcel Number: 001896000
Address: 117 CHARLOTTE ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 1	Block: 0 Lot(s): 453

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD SOUTHERN EXTERIOR STAIR IN SAME LOCATION

PAID
10/22/21

BP2021-225PROJECT NAME: YOUNG STAIR REPLACEMENT
SITE ADDRESS: 117 CHARLOTTE ST KILL DEVIL HILLS**BUILDING**

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

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	800.00
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.

* 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: Bregg Young Date: 10 / 21 / 2021



Town of Kill Devil Hills

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

PAID

OCT 25 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-228

PROJECT NAME:

SITE ADDRESS: 203 FIRST ST E KILL DEVIL HILLS

BUILDING

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

APPLICANT: Mason Insurance Co
164 Madison Rd
ORANGE, VA 22960
540-672-4644

OWNER: Mason Insurance Co
164 Madison Rd
ORANGE, VA 22960
540-672-4644

GENERAL: TO THE T CONSTRUCTION
100 Inge Drive
Manteo, NC 27954
252-216-8991

License: 63750
Expires: 01/01/2022

PARCEL:

PIN: 988411562077

Parcel Number: 003179000

Address: 203 FIRST ST E KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

Block: D **Lot(s):** PT 21 & 22

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Remove and replace siding and trim

11 Flood Zone



PAID
10/25/21 via paypal

BP2021-228

PROJECT NAME:

SITE ADDRESS: 203 FIRST ST E KILL DEVIL HILLS

BUILDING

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	17496.87
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: Charles Thuman

Contractor or Authorized Agent:  Date: 10 / 24 / 2021



Town of Kill Devil Hills

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

OCT 22 2021

Planning and Inspection Department

BP2021-229

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

BUILDING

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

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:

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

PROJECT DESCRIPTION: REPAIR NORTH AND CENTRAL STAIR TOWER, TREADS, PER ENGINEERS RECOMMENDATION, REPAIRS TO BE CERTIFIED BY ENGINEER OF RECORD

BP2021-229**PROJECT NAME: GOLDEN STRAND SOUTH STAIR TOWER
REPAIR****BUILDING****ISSUED: 10/22/2021****EXPIRES: 04/20/2022**

DETAILS**Permit**

Name	Value
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
BASE FLOOD ELEVATION	12.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* Proposed repair plans do not meet the provisions of NCBC. Repairs specified by John Delucia, P.E. 16759, shall be certified in writing prior to final inspection.

* Repairs must be inspected by both the engineer of record, John Delucia, P.E. 16759, as well as Kill Devil Hills Building Official, prior to use of stair tower being permitted.

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

* All repairs shall conform to existing footprint. No changes in dimension is permitted.



Town of Kill Devil Hills

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

OCT 25 2021

Planning and Inspection Department

BP2021-230

PROJECT NAME: Sowell Chimney Removal
SITE ADDRESS: 903 SIXTH AVE KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2021

EXPIRES: 04/23/2022

APPLICANT: Sowell, Hayden & Barbara
PO Box 490
CHESAPEAKE BEACH, MD 20732

OWNER: Sowell, Hayden & Barbara
PO Box 490
CHESAPEAKE BEACH, MD 20732

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988311764917

Parcel Number: 009171000

Address: 903 SIXTH AVE KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:
Block: 33 **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: remove exterior chimney, replace siding

BP2021-230

PROJECT NAME: Sowell Chimney Removal
SITE ADDRESS: 903 SIXTH AVE KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2021

EXPIRES: 04/23/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00

REQUIRED INSPECTIONS

Zoning Final
Final

Framing

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

BP2021-224

PROJECT NAME: Newport siding replacement
SITE ADDRESS: 113 AVIATION AVE E KILL DEVIL HILLS

BUILDING

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

APPLICANT: NEWPORT, BRUCE
113 E AVIATION AVE.
Kill Devil Hills, NC 27948
808-337-9028

OWNER: NEWPORT, BRUCE
113 E AVIATION AVE.
Kill Devil Hills, NC 27948
808-337-9028

GENERAL REMODELING-UNLICENSED: ATLANTIC SIDING
4100 PINEWAY DR
KITTY HAWK, NC 27949
261-3822

License: adc
Expires:

PARCEL:

PIN: 988420705949

Parcel Number: 003897001

Address: 113 AVIATION AVE E KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 38 **Lot(s):** 19

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: replace cedar shingles with vinyl shakes

OCT 25 2021

BP2021-224

PROJECT NAME: Newport siding replacement
SITE ADDRESS: 113 AVIATION AVE E KILL DEVIL HILLS

BUILDING

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

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	28700.00
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: 10/25/2021



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

BP2021-232

PROJECT NAME:

SITE ADDRESS: 1520 KETCH LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2021

EXPIRES: 04/23/2022

APPLICANT: WOOLARD, ELIZABETH M
1520 KETCH LANE
KILL DEVIL HILLS, NC 27948

OWNER: WOOLARD, ELIZABETH M
1520 KETCH LANE
KILL DEVIL HILLS, NC 27948

BUILDING, REMODELING: BILL FROELICH
UNKNOWN
UNKNOWN, XX 00000
207-7999

License: 62232
Expires: 01/01/2022

PARCEL:

PIN: 988413149058

Parcel Number: 026986000

Address: 1520 KETCH LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VLG PH A SEC 3

Zoning:

Block: 0 **Lot(s):** 61

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace stairs and guard rails on front deck.

OCT 25 2021

BP2021-232

PROJECT NAME:

SITE ADDRESS: 1520 KETCH LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2021

EXPIRES: 04/23/2022

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

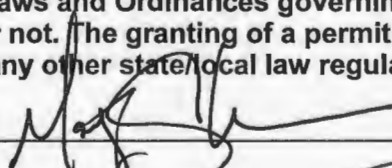
Final

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.

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: _____

10.24.21



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

BP2021-203	BUILDING
PROJECT NAME: Oyster Point Bldg A reroof	ISSUED: 10/26/2021
SITE ADDRESS: 700 FIRST ST W KILL DEVIL HILLS	EXPIRES: 04/24/2022

APPLICANT: OYSTER PT. HOME OWNERS ASS.
203 Forest Hill Ave
ROCKY MOUNT, NC 27801
261-1200

OWNER: OYSTER PT. HOME OWNERS ASS.
203 Forest Hill Ave
ROCKY MOUNT, NC 27801
261-1200

CONTRACTOR: Silva Painting Co
PO BOX 2415
Kill Devil Hills, NC 27948

UNLICENSED BUILDER: Silva Painting Co
PO BOX 2415
Kill Devil Hills, NC 27948

License: 12345
Expires:

PARCEL:

PIN: 98841314042600

Parcel Number: 008075999

Address: 700 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): COMMON PROPERTY

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: reroof building a, replace shingles, vents, pipe boots, and flashing

OCT 26 2021

BP2021-203

PROJECT NAME: Oyster Point Bldg A reroof
SITE ADDRESS: 700 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/26/2021

EXPIRES: 04/24/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	23351.93

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 10-26-21



Town of Kill Devil Hills

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

PAID

OCT - 5 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-285

PROJECT NAME:

SITE ADDRESS: 1401 5-A VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

APPLICANT: HODGE, REBECCA
434 HEARFIELD DR
chesapeake, va 23322

OWNER: HODGE, REBECCA
434 HEARFIELD DR
chesapeake, va 23322

MECHANICAL: R A HOY
PO Box 265
Kitty Hawk, NC 27949
252-261-2008

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 98841165410713

Parcel Number: 028127000

Address: 1401 5-A VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** UNIT 5-A

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC replacement

PAID
10/5/21 by
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MC2021-285

PROJECT NAME:

SITE ADDRESS: 1401 5-A VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6708.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
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: Marty Shaw

Contractor or Authorized Agent: Jessica DeWitt Date: 10 / 04 / 2021



Town of Kill Devil Hills

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

PAID

OCT - 5 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-283

PROJECT NAME:

SITE ADDRESS: 1723 VIRGINIA AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

APPLICANT: Wilson-harfst, Jo Ann
1723 Virginia Avenue
Kill Devil Hills, NC 27948

OWNER: Wilson-harfst, Jo Ann
1723 Virginia Avenue
Kill Devil Hills, NC 27948

PLUMBING CLASS I: MAC'S PLUMBING
UNKNOWN
UNKNOWN, XX 00000

License: 16216
Expires: 12/31/2021

PARCEL:

PIN: 988409160173

Parcel Number: 002579008

Address: 1723 VIRGINIA AVE KILL DEVIL HILLS

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 16 **Lot(s):** 8

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Install gas line for gas fireplace.

MC2021-283

PROJECT NAME:

SITE ADDRESS: 1723 VIRGINIA AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	800.00
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: 10-5-21



Town of Kill Devil Hills

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

PAID

OCT - 6 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-286

PROJECT NAME: Va Dare, LLC HVAC
SITE ADDRESS: 701 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

APPLICANT: VIRGINIA DARE LLC
201 DEXTER ST W
CHESAPEAKE, VA 23324
757-812-2042

OWNER: VIRGINIA DARE LLC
201 DEXTER ST W
CHESAPEAKE, VA 23324
757-812-2042

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: 988308990599-2104

Parcel Number: 027931001

Address: 701 VA DARE TRL S KILL DEVIL HILLS

Zoning: OIR

Addition: SUBDIVISION - NONE

Block: 0 **Lot(s):** 1

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: C/O 1.5 Ton HVAC system

"X" Flood Zone



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10/4/21
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MC2021-286

PROJECT NAME: Va Dare, LLC HVAC

SITE ADDRESS: 701 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6480.00
CONSTRUCTION TYPE	V
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: H. W. Francis **Date:** 10 / 05 / 2021



Town of Kill Devil Hills

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

PAID

OCT - 7 2021

Planning and Inspection Department

TOWNSHIP
KILL DEVIL HILLS

MC2021-284	MECHANICAL
PROJECT NAME:	ISSUED: 10/04/2021
SITE ADDRESS: 703 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 04/02/2022

APPLICANT: Hugh Jones Trust 3705 Favero Rd. RICHMOND, VA 23233 804-201-1661	OWNER: TWO STEWARDS LLC 1665 WIND FLOWER RD CHAMBERSBURG, PA 17202 240-217-4101
---------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------

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

PIN: 988420727458	Parcel Number: 003693002
Address: 703 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 8 Lot(s): 2
Legal Description:	

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC replacement

PAID
10/7/21 De
payrol

MC2021-284

PROJECT NAME:

SITE ADDRESS: 703 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

DETAILS

Permit

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

REQUIRED INSPECTIONS

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: Donna Chesson Date: 10/04/2021



Town of Kill Devil Hills

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

OCT - 8 2021

Planning and Inspection Department

MC2021-287

PROJECT NAME:

SITE ADDRESS: 1108 Cambridge Rd 307-B Kill Devil Hills

MECHANICAL

ISSUED: 10/08/2021

EXPIRES: 04/06/2022

APPLICANT: Maki, Kevin
4652 Hummingbird LN
Fairfax, VA 22033

OWNER: Maki, Kevin
4652 Hummingbird LN
Fairfax, VA 22033

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: 98830648123848

**Parcel
Number:**

Address: 1108 Cambridge Rd 307-B Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: 98830648123848

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC replacement

MC2021-287

PROJECT NAME:

SITE ADDRESS: 1108 Cambridge Rd 307-B Kill Devil Hills

MECHANICAL

ISSUED: 10/08/2021

EXPIRES: 04/06/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6959.00
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:** 10-8-21



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

MC2021-290

PROJECT NAME: Capt'n Georges HVAC
SITE ADDRESS: 705 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/14/2021

EXPIRES: 04/12/2022

APPLICANT: PITCO 1, LLC
1956 Laskin Road
Va. Beach, Va 23454

OWNER: PITCO 1, LLC
1956 Laskin Road
Va. Beach, Va 23454

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: 988308892096

Parcel Number: 004309000

Address: 705 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 1 **Lot(s):** 5 & 6

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: C/O 20 ton roof top package unit

OCT 14 2021

MC2021-290

PROJECT NAME: Capt'n Georges HVAC
SITE ADDRESS: 705 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/14/2021

EXPIRES: 04/12/2022

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	37095.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 10-14-21



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

MC2021-291

PROJECT NAME:

SITE ADDRESS: 102 BICKETT ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/14/2021

EXPIRES: 04/12/2022

APPLICANT: Darden, Thomas & Elizabeth
15215 Riverview RD
SMITHFIELD, VA 23430

OWNER: Darden, Thomas & Elizabeth
15215 Riverview RD
SMITHFIELD, VA 23430

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: 988517118181

Parcel Number: 003031000

Address: 102 BICKETT ST E KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORE AMD BLK 24

Block: 24 **Lot(s):** PT 9 & 10

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC replacement

PAID
 10/14/21
 P.S. P.C.I.

MC2021-291

PROJECT NAME:

SITE ADDRESS: 102 BICKETT ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/14/2021

EXPIRES: 04/12/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	15000.00
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: Marty Shaw

Contractor or Authorized Agent: Gabby Willis Date: 10 / 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

MC2021-292	MECHANICAL
PROJECT NAME: Black HVAC	ISSUED: 10/15/2021
SITE ADDRESS: 1706 CREEK ST KILL DEVIL HILLS	EXPIRES: 04/13/2022

APPLICANT: NEVANIEL BLACK 4200 Maria Ln. Bethlehem, XX 18017	OWNER: NEVANIEL BLACK 4200 Maria Ln. Bethlehem, XX 18017
---------------------------------------------------------------------------	-----------------------------------------------------------------------

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


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: 988410266495	Parcel Number: 004611000
Address: 1706 CREEK ST KILL DEVIL HILLS	Zoning:
Addition: HIGH VIEW - HEDRICKS ADD	Block: C Lot(s): 17
Legal Description:	

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: hvac changeout

 **PAID**
10/18/21 *RL*
Paypal

MC2021-292

PROJECT NAME: Black HVAC

SITE ADDRESS: 1706 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5420.00
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: Andrew L Buchanan Date: 10 / 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

MC2021-289

PROJECT NAME: Alabanza HVAC
SITE ADDRESS: 3114 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/13/2021

EXPIRES: 04/11/2022

APPLICANT: ALABANZA, THOMAS M
420 Knottingham Way
DANVILLE, VA 24541

OWNER: ALABANZA, THOMAS M
420 Knottingham Way
DANVILLE, VA 24541

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: 987520821072

Parcel Number: 001076000

Address: 3114 BAY DR KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:
Block: 0 **Lot(s):** 141

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: C/O 2.5 ton HVAC system

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Mc 10/15/21
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MC2021-289

PROJECT NAME: Alabanza HVAC

SITE ADDRESS: 3114 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/13/2021

EXPIRES: 04/11/2022

DETAILS**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6145.00
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: Charles ThumanContractor or Authorized Agent: Andrew L Buchanan Date: 10 / 14 / 2021



Town of Kill Devil Hills

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

PAID

OCT 19 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-294

PROJECT NAME:

SITE ADDRESS: 1106 CLAM SHELL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/18/2021

EXPIRES: 04/16/2022

APPLICANT: West, Joshua
1106 Clamshell Dr.
Kill Devil Hills, NC 27948
757-641-4133

OWNER: West, Joshua
1106 Clamshell Dr.
Kill Devil Hills, NC 27948
757-641-4133

MECHANICAL: American Refrigeration
P.O. Box 835
nags head, nc 27959
252-305-5320

License: 15578
Expires: 12/31/2021

PARCEL:

PIN: 988409063769

Parcel Number: 002556004

Address: 1106 CLAM SHELL DR KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:
Block: 23 **Lot(s):** 3A

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC replacement



PAID

On 10/18/21

P. O. Shaw

MC2021-294

PROJECT NAME:

SITE ADDRESS: 1106 CLAM SHELL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/18/2021

EXPIRES: 04/16/2022

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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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: 10 / 18 / 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

MC2021-293

PROJECT NAME: Standahl HVAC
SITE ADDRESS: 1930 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

APPLICANT: STANDAHL, JERRY J
325 MEADOW LANE
FRANKLIN, VA 23851

OWNER: STANDAHL, JERRY J
325 MEADOW LANE
FRANKLIN, VA 23851

CONTRACTOR: R.A. HOY HEATING AND AIR CONDITIONING,
INC.
PO Box 169
Kitty Hawk, NC 27949

MECHANICAL: R A HOY
PO Box 265
Kitty Hawk, NC 27949
252-261-2008

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988406396510

Parcel Number: 002847004

Address: 1930 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

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

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: minisplit changeout

PAID
10/19/21
pay pay

MC2021-293

PROJECT NAME: Standahl HVAC

SITE ADDRESS: 1930 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3976.44
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: Paxton Nix Date: 10 / 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

MC2021-295

PROJECT NAME:

SITE ADDRESS: 1101 Cambridge Rd Kill Devil Hills

MECHANICAL

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

APPLICANT: Bermuda Bay Homeowners Association
PO Box 1807
Nags Head, NC 27959
480-4722

OWNER: Bermuda Bay Homeowners Association
PO Box 1807
Nags Head, NC 27959
480-4722

HVAC: DeHat HVAC
102 Yaupon TR
kitty hawk, nc 27949
256-2436

License: 23299
Expires:

PARCEL:

PIN: 988306387222

**Parcel
Number:**

Address: 1101 Cambridge Rd Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 300 Recreation, Sunset Bay

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC replacement



PAID
10/21/21
CK#9868

MC2021-295

PROJECT NAME:

SITE ADDRESS: 1101 Cambridge Rd Kill Devil Hills

MECHANICAL

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	6400.00
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: _____

Marty Shaw

Contractor or Authorized Agent: _____

[Signature]

Date: 10/20/2021



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

MC2021-299

PROJECT NAME: Angela Preston
SITE ADDRESS: 505 CHOWAN ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

APPLICANT: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

OWNER: Preston, Robert
505 W Chowan ST
Kill Devil Hills, NC 27948
910-547-3634

MECHANICAL: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

License: 23299
Expires: 12/31/2021

PARCEL:

PIN: 987520911709

Parcel Number: 026673000

Address: 505 CHOWAN ST W KILL DEVIL HILLS


Addition: VIRGINIA DARE SHORES

Zoning:
Block: 68 **Lot(s):** 18-20

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC

 **PAID**
10/21/21 PG
CK #9867

MC2021-299

PROJECT NAME: Angela Preston

SITE ADDRESS: 505 CHOWAN ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6400.00
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: [Signature] **Date:** 10/21/2021



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

MC2021-298	MECHANICAL
PROJECT NAME: Tracey Yeaman	ISSUED: 10/20/2021
SITE ADDRESS: 700 K8 FIRST ST W KILL DEVIL HILLS	EXPIRES: 04/18/2022

APPLICANT: One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	OWNER: Yeaman, Tracey Johnson 170 Walker Court DANVILLE, VA 24540 434-251-9486
--------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------

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: 98841314042656	Parcel Number: 008075027
Address: 700 K8 FIRST ST W KILL DEVIL HILLS	
Addition:	Zoning:
	Block: 0
	Lot(s): UT 8 BLDG K
Legal Description:	

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: HVAC

OCT 21 2021

MC2021-298

PROJECT NAME: Tracey Yeaman

SITE ADDRESS: 700 K8 FIRST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5631.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
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: _____

10-21-21



Town of Kill Devil Hills

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

PAID

OCT 25 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-300	MECHANICAL
PROJECT NAME:	ISSUED: 10/22/2021
SITE ADDRESS: 604 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 04/20/2022

APPLICANT: DAVID & ANGELA SAVAGE 406 Bracey Way CHESAPEAKE, VA 23323	OWNER: DAVID & ANGELA SAVAGE 406 Bracey Way CHESAPEAKE, VA 23323
-----------------------------------------------------------------------------------	-------------------------------------------------------------------------------

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

PARCEL:			
PIN:	988420725102	Parcel Number:	003738000
Address:	604 VA DARE TRL N KILL DEVIL HILLS		
Addition:	KITTY HAWK SHORES - REVISED	Zoning:	
Legal Description:		Block: 22	Lot(s): 3

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace two HVAC systems

PAID
10/23/21
Rg Rg

MC2021-300

PROJECT NAME:

SITE ADDRESS: 604 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	13109.00
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: Marty Shaw

Contractor or Authorized Agent: Jessica DeWitt Date: 10 / 22 / 2021



Town of Kill Devil Hills

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

PAID

OCT 22 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

PL2021-012
PROJECT NAME:
SITE ADDRESS: 300 AIRSTRIP RD W KILL DEVIL HILLS

PLUMBING
ISSUED: 10/15/2021
EXPIRES: 04/13/2022

APPLICANT: Mills, Stacy
300 WEST Airstrip RD
Kill Devil Hills, NC 27948

OWNER: Mills, Stacy
300 WEST Airstrip RD
Kill Devil Hills, NC 27948

PLUMBING CLASS I: Mr. Groovy's Plumbing LLC
115 Oakwood Trl
Point Harbor, NC 27964
252-717-0550

License: 35063
Expires: 12/31/2021

PARCEL:

PIN: 988312873017

**Parcel
Number:** 027085000

Address: 300 AIRSTRIP RD W KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 22 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: Replace existing piping with pex. New water heater.



PAID

10/22/21 B,
Paying

PL2021-012

PROJECT NAME:

SITE ADDRESS: 300 AIRSTRIP RD W KILL DEVIL HILLS

PLUMBING

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Rough In

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: [Signature] Date: 10 / 19 / 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

EG2021-020

PROJECT NAME: HOLIAN LAND CLEARING
SITE ADDRESS: 812 FRANCES LN KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

APPLICANT: HOLIAN, PIERCE
91 OSPREY LN
kitty hawk, nc 27949
252-256-2854

OWNER: HOLIAN, PIERCE
91 OSPREY LN
kitty hawk, nc 27949
252-256-2854

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988405170672

Parcel Number: 002305091

Address: 812 FRANCES LN KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

Zoning:
Block: 0 **Lot(s):** 91

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: CLEARING AND GRADING

OCT 21 2021

EG2021-020

PROJECT NAME: HOLIAN LAND CLEARING
SITE ADDRESS: 812 FRANCES LN KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/21/2021

EXPIRES: 04/19/2022

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	2000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8.0

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.
- * 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: 10/21/21



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

OP2021-064

PROJECT NAME: Volodymyr Gochack
SITE ADDRESS: 219 GUNAS DR KILL DEVIL HILLS

OCCUPANCY

ISSUED: 10/07/2021

EXPIRES:

PARENT PERMIT #: BJ2021-038

APPLICANT: GODFREY CONSTRUCTION CO.
P.O. Box 694
Kill Devil Hills, NC 27948
252-202-1469

OWNER: Gochack, Volodymyr
PO Box 582
Avon, NC 27915
252-256-2229

GENERAL BUILDING - UNLIMITED: GODFREY CONSTRUCTION CO.
P.O. Box 694
Kill Devil Hills, NC 27948
252-202-1469

License: 66982
Expires: 01/05/2022

GENERAL BUILDING - UNLIMITED: GODFREY CONSTRUCTION CO.
P.O. Box 694
Kill Devil Hills, NC 27948
252-202-1469

License: 66982
Expires: 01/05/2022

PARCEL:

PIN: 988316938816

Parcel Number: 008433000

Address: 219 GUNAS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:
Block: D **Lot(s):** 8-11

Legal Description:

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

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

OCT - 7 2021

OP2021-064

PROJECT NAME: Volodymyr Gochack
SITE ADDRESS: 219 GUNAS DR KILL DEVIL HILLS

OCCUPANCY

ISSUED: 10/07/2021

EXPIRES:

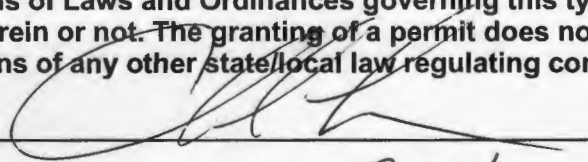
DETAILS

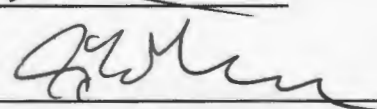
Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 10-7-21



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

OP2021-067

PROJECT NAME: New 3 Bedroom SFD
SITE ADDRESS: 711 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 10/18/2021

EXPIRES:

PARENT PERMIT #: BJ2020-254

APPLICANT: SAGA CONSTRUCTION INC.
1314 S Croatan Hwy, Suite 301
Kill Devil Hills, NC 27948
252-441-9003

OWNER: Water Oak Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

License: 62306
Expires: 12/31/2021

PARCEL:

PIN: 988417220311

**Parcel
Number:**

Address: 711 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 62, Water Oak Residential Community

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

PROJECT DESCRIPTION: New 3 Bedroom 2 bath Single Family Dwelling, proposed pool is not permitted

OCT 18 2021

OP2021-067

PROJECT NAME: New 3 Bedroom SFD
SITE ADDRESS: 711 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 10/18/2021

EXPIRES:

DETAILS


Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 10/18/21



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

OP2021-066 PROJECT NAME: Eric Pruitt SITE ADDRESS: 2055 NEW BERN ST KILL DEVIL HILLS	OCCUPANCY ISSUED: 10/14/2021 EXPIRES:
-----------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------

PARENT PERMIT #: BJ2020-243

APPLICANT:	PRUITT, ERIC GLADSTONE 2055 New Bern Street Kill Devil Hills, NC 27948	OWNER:	PRUITT, ERIC GLADSTONE 2055 New Bern Street Kill Devil Hills, NC 27948
CONTRACTOR:	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	License:	Same as Owner
		Expires:	12/31/2021
GENERAL:	PRUITT, ERIC GLADSTONE 2055 New Bern Street Kill Devil Hills, NC 27948	License:	21008
		Expires:	01/01/2022

PARCEL:			
PIN:	988518207841	Parcel Number:	001781000
Address:	2055 NEW BERN ST KILL DEVIL HILLS		
Addition:	AVALON BEACH ANNEX 1	Zoning:	
Legal Description:		Block:	0 Lot(s): 332

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Proposed second story addition/3 bedroom single family dwelling

PND
OCT 14 2021

OP2021-066

PROJECT NAME: Eric Pruitt

SITE ADDRESS: 2055 NEW BERN ST KILL DEVIL HILLS

OCCUPANCY

ISSUED: 10/14/2021

EXPIRES:

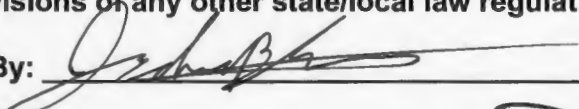
DETAILS

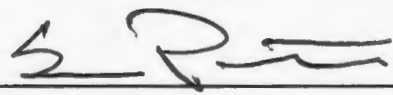
Permit

Name	Value
PURPOSE	Residential Addition
ZONING DISTRICT	C
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 10/14/21



Town of Kill Devil Hills

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

OCT 14 2021

PAID

TOWN
CLERK

Planning and Inspection Department

OP2021-065	OCCUPANCY
PROJECT NAME: Lane Investment Properties NC, LLC	ISSUED: 10/14/2021
SITE ADDRESS: 705 Seventh Avenue Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2021-124

APPLICANT: EAST COAST CONSTRUCTION GROUP PO Box 329 KILL DEVIL HILLS, NC 27948 252-202-1600	OWNER: Lane Investment Properties NC, LLC PO Box 329 Kill Devil Hills, NC 27948 252-202-1600
-------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------

GENERAL:	EAST COAST CONSTRUCTION GROUP PO Box 329 KILL DEVIL HILLS, NC 27948 252-202-1600	License: 34495 Expires: 01/01/2022
GENERAL:	EAST COAST CONSTRUCTION GROUP PO Box 329 KILL DEVIL HILLS, NC 27948 252-202-1600	License: 34495 Expires: 01/01/2022

PARCEL:

PIN: 988311678339	Parcel Number:
Address: 705 Seventh Avenue Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 7, Block 37, Kill Devil Hill Realty Corp. Addition S/D	

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

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

OP2021-065

PROJECT NAME: Lane Investment Properties NC, LLC
SITE ADDRESS: 705 Seventh Avenue Kill Devil Hills

OCCUPANCY

ISSUED: 10/14/2021

EXPIRES:

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Bill Ze Date: 10-14-2021



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

OP2021-068	OCCUPANCY
PROJECT NAME: Haddon Homes New House	ISSUED: 10/22/2021
SITE ADDRESS: 509 BURNS DR KILL DEVIL HILLS	EXPIRES:

PARENT PERMIT #: BJ2021-126

APPLICANT: HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287	OWNER: HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287
----------------------------------------------------------------------------------------	------------------------------------------------------------------------------------

CONTRACTOR:	HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287	License: 55566 Expires: 01/01/2022
CONTRACTOR:	HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287	License: 55566 Expires: 01/01/2022

PARCEL:

PIN: 988316728877	Parcel Number: 005022000
Address: 509 BURNS DR KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES TRACT 3 SEC 2	Block: H Lot(s): 43
Legal Description:	

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

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

PAID

OCT 22 2021

OP2021-068

PROJECT NAME: Haddon Homes New House
SITE ADDRESS: 509 BURNS DR KILL DEVIL HILLS

OCCUPANCY

ISSUED: 10/22/2021

EXPIRES:

DETAILS

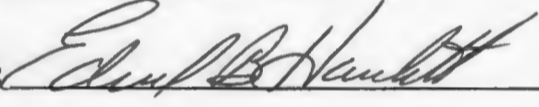
Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 10/22/21



Town of Kill Devil Hills

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

PAID
OCT 29 2021

Planning and Inspection Department

PLANNING AND INSPECTION

OP2021-070	OCCUPANCY
PROJECT NAME: Saga New 3 Bedroom SFD	ISSUED: 10/28/2021
SITE ADDRESS: 609 Zen Lane Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2020-084

APPLICANT: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
---------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------

CONTRACTOR: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

GENERAL BUILDING - LIMITED:	SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	License: 62306 Expires: 12/31/2021
------------------------------------	---------------------------------------------------------------------------------------------------------------	-----------------------------------------------------

PARCEL:

PIN: 988413223591	Parcel Number:
Address: 609 Zen Lane Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 55 Water Oak Residential Community Phase 1	

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

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

OP2021-070

PROJECT NAME: Saga New 3 Bedroom SFD
SITE ADDRESS: 609 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 10/28/2021

EXPIRES:

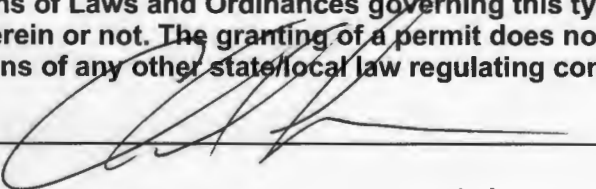
DETAILS


Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 10/29/21



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

OP2021-069

PROJECT NAME: SAGA New 3 Bedroom House
SITE ADDRESS: 705 Zen Ln Kill Devil Hills

OCCUPANCY

ISSUED: 10/27/2021

EXPIRES:

PARENT PERMIT #: BJ2020-193

APPLICANT: Water Oak Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

OWNER: Water Oaks Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

CONTRACTOR: SAGA CONSTRUCTION INC.
1314 S Croatan Hwy, Suite 301
Kill Devil Hills, NC 27948
252-441-9003

GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

License: 62306
Expires: 12/31/2021

PARCEL:

PIN: 988417221480

Parcel Number:

Address: 705 Zen Ln Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 59, Water Oak Residential Community

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

PAID

OCT 28 2021

TOWN OF
KILL DEVIL HILLS

OP2021-069

PROJECT NAME: SAGA New 3 Bedroom House
SITE ADDRESS: 705 Zen Ln Kill Devil Hills

OCCUPANCY

ISSUED: 10/27/2021

EXPIRES:

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 10/28/21



Town of Kill Devil Hills

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

PAID

OCT - 1 2021

Planning and Inspection Department

ZP2021-055

PROJECT NAME: Dare County Schools
SITE ADDRESS: 109 Veterans Drive KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

APPLICANT: METRO RENTAL
PO Box 77
Kill Devil Hills, NC 27948
252-480-3535

OWNER: DARE COUNTY BD OF ED
P O BOX 640
MANTEO, NC 27954

CONTRACTOR: METRO RENTAL
PO Box 77
Kill Devil Hills, NC 27948
252-480-3535

License: LEGACY UNKNOWN
Expires: 12/31/2022

PARCEL:

PIN: 988311572105

Parcel Number: 008165002

Address: 109 Veterans Drive KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent for special event

PAID
10/1/21 to
no charge

ZP2021-055

PROJECT NAME: Dare County Schools
SITE ADDRESS: 109 Veterans Drive KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	G&I Public
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Commercial Accessory
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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: Donna Elliott

Contractor or Authorized Agent: Neal Slet Date: 10/1/21



Town of Kill Devil Hills

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

PAID

OCT - 5 2021

Planning and Inspection Department

ZP2021-053	ZONING PERMIT
PROJECT NAME: Alex Wolcott	ISSUED: 09/29/2021
SITE ADDRESS: 3206 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 03/28/2022

APPLICANT: WOLCOTT, LANA HOBBS 929 DITCHLEY ROAD VIRGINIA BEACH, VA23451	OWNER: WOLCOTT, LANA HOBBS 929 DITCHLEY ROAD VIRGINIA BEACH, VA23451
---------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------

CONTRACTOR:	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	License: Same as Owner Expires: 12/31/2021
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PARCEL:

PIN: 988513047632	Parcel Number: 000082000
Address: 3206 VA DARE TRL N KILL DEVIL HILLS	
Addition: ORVILLE BEACH BLK 5	Zoning:
Legal Description:	Block: 5 Lot(s): 5

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Fence

PAID
10/5/21
pay pd

ZP2021-053

PROJECT NAME: Alex Wolcott

SITE ADDRESS: 3206 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/29/2021

EXPIRES: 03/28/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	1600.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* Call for a stringline inspection before installing the fence.

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

Issued By: Donna Elliot

Contractor or Authorized Agent: Alex Wolcott 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

OCT 25 2021

Planning and Inspection Department

ZP2021-056

PROJECT NAME: Lambodera Holdings
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

APPLICANT: METRO RENTAL
PO Box 77
Kill Devil Hills, NC 27948
252-480-3535

OWNER: Lambodera Holdings LLC
4005 River Park Drive
Suffolk, VA 23435
252-333-4102

CONTRACTOR: METRO RENTAL
PO Box 77
Kill Devil Hills, NC 27948
252-480-3535

License: LEGACY UNKNOWN
Expires: 12/31/2022

PARCEL:

PIN: 988415649035

Parcel Number: 003711000

Address: 1111 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 2A

Lot(s): 6 & N PT 5

Legal Description:

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent for wedding

ZP2021-056

PROJECT NAME: Lambodera Holdings
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning 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: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 10/25/21



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

ZP2021-059

PROJECT NAME: Rockis Fence
SITE ADDRESS: 209 WILKINSON ST E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

APPLICANT: ROCKIS, REBECCA
209 E Wilkinson Street
Kill Devil Hills, NC 27948

OWNER: ROCKIS, REBECCA
209 E Wilkinson Street
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988513131286

Parcel Number: 009184000

Address: 209 WILKINSON ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 9 **Lot(s):** 11-13

Legal Description:

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: fence around rear and side yard

PAID
OCT 22 2021

ZP2021-059

PROJECT NAME: Rockis Fence

SITE ADDRESS: 209 WILKINSON ST E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	2500.00
LOT COVERAGE	37.04
SURVEYOR NAME AND NUMBER	Michael Barr
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

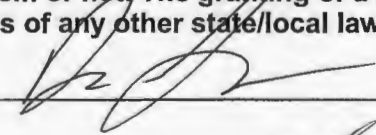
Final

CONDITIONS

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

* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

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: 10/22/21



Town of Kill Devil Hills

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

OCT 25 2021

Planning and Inspection Department

ZP2021-060	ZONING PERMIT
PROJECT NAME: Metro Rental	ISSUED: 10/22/2021
SITE ADDRESS: 1803 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 04/20/2022

APPLICANT: METRO RENTAL PO Box 77 Kill Devil Hills, NC 27948 252-480-3535	OWNER: OUTER BANKS THEATERS LLC PO BOX 357 Murfreesboro, NC 27855
-------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------

CONTRACTOR: METRO RENTAL PO Box 77 Kill Devil Hills, NC 27948 252-480-3535	License: LEGACY UNKNOWN Expires: 12/31/2022
--------------------------------------------------------------------------------------------	--------------------------------------------------------------

PARCEL:

PIN: 988406386196	Parcel Number: 002736000
Address: 1803 CROATAN HWY N KILL DEVIL HILLS	Zoning:
Addition: SUBDIVISION - NONE	Block: 0 Lot(s): 0
Legal Description:	

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent for special event

ZP2021-060

PROJECT NAME: Metro Rental

SITE ADDRESS: 1803 CROATAN HWY N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Commercial Accessory
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning 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:

Donna Elliott

Contractor or Authorized Agent:

[Signature]

Date:

10/25/21



Town of Kill Devil Hills

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

OCT 25 2021

Planning and Inspection Department

ZP2021-057

PROJECT NAME: Hemang Shah
SITE ADDRESS: 1113 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

APPLICANT: METRO RENTAL
PO Box 77
Kill Devil Hills, NC 27948
252-480-3535

OWNER: BIANNU OMMG LLC
P. O. Box 90
Kill Devil Hills, NC 27948
252-489-4565

CONTRACTOR: METRO RENTAL
PO Box 77
Kill Devil Hills, NC 27948
252-480-3535

License: LEGACY UNKNOWN
Expires: 12/31/2022

PARCEL:

PIN: 988415648098

Parcel Number: 003711007

Address: 1113 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 2A **Lot(s):** 7

Legal Description:

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent for wedding

ZP2021-057

PROJECT NAME: Hemang Shah
SITE ADDRESS: 1113 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 10/25/21



Town of Kill Devil Hills

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

OCT 29 2021

Planning and Inspection Department

ZP2021-061	ZONING PERMIT
PROJECT NAME: Daylida Fence	ISSUED: 10/28/2021
SITE ADDRESS: 2003 NEW BERN ST KILL DEVIL HILLS	EXPIRES: 04/26/2022

APPLICANT: Perrin, Jay - OBX Deck PO Box 1734 Kill Devil Hills, NC 27948 252-305-6000	OWNER: DAYLIDA, MICHAEL 16 Rambling Ln MALVERN, PA 19355
-------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------

CONTRACTOR: Perrin, Jay - OBX Deck PO Box 1734 Kill Devil Hills, NC 27948 252-305-6000	License: 1234567 Expires: 05/31/2025
--------------------------------------------------------------------------------------------------------	-------------------------------------------------------

PARCEL:

PIN: 988406393678	Parcel Number: 001807000
Address: 2003 NEW BERN ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 1	Block: 0 Lot(s): 358
Legal Description:	

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: fence around rear and side yard

PAID
10/29/21
Ry L

ZP2021-061

PROJECT NAME: Daylida Fence

SITE ADDRESS: 2003 NEW BERN ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 10/28/2021

EXPIRES: 04/26/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	6000.00
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

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: Ryan Lang

Contractor or Authorized Agent: Jay Perrin Date: 10 / 29 / 2021



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

OCT 11 2021

EG2021-019

PROJECT NAME: BAKOPOLOS LAND CLEARING
SITE ADDRESS: 605 W Holly St Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

APPLICANT: BAKOPOULOS, NICHOLAS
107 ST CLAIR RD
KILL DEVIL HILLS, NC 27948

OWNER: BAKOPOULOS, NICHOLAS
107 ST CLAIR RD
KILL DEVIL HILLS, NC 27948

BUILDING LIMITED: Hughes, Ryland James
3945 Pineway Drive
kitty hawk, nc 27949
252-202-4111

License: 76503
Expires: 01/01/2022

PARCEL:

PIN: 988316844935

Parcel Number: 008232000

Address: 605 W Holly St Kill Devil Hills

Addition: KILL DEVIL BEACH EXTENDED

Zoning:

Block: BB **Lot(s):** 1-3

Legal Description:

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: CLEAR AND FILL LOT

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	6000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	X

EG2021-019

PROJECT NAME: BAKOPOLOS LAND CLEARING
SITE ADDRESS: 605 W Holly St Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

Date:



Town of Kill Devil Hills

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

PAID

SEP 30 2021

Planning and Inspection Department

EL2021-082	ELECTRICAL
PROJECT NAME: JORGENSEN LIFT SYSTEM	ISSUED: 09/30/2021
SITE ADDRESS: 1723 APACHE ST KILL DEVIL HILLS	EXPIRES: 03/29/2022

APPLICANT: Jorgensen, Anne Katherine 1723 Apache ST Kill Devil Hills, NC 27948	OWNER: Jorgensen, Anne Katherine 1723 Apache ST Kill Devil Hills, NC 27948
---------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------

ELECTRICAL, UNLIMITED:	Outer Banks Electric 1210 Burnside Rd Manteo, NC 27954	License: 24451 Expires:
-------------------------------	--------------------------------------------------------------	------------------------------------------

PARCEL:

PIN: 988409168544	Parcel Number: 002703002
Address: 1723 APACHE ST KILL DEVIL HILLS	Zoning:
Addition: HIGH VIEW - HEDRICKS ADD	Block: E Lot(s): 2
Legal Description:	

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: INSTALL 2 CIRCUITS FOR SEPTIC LIFT SYSTEM

EL2021-082

PROJECT NAME: JORGENSEN LIFT SYSTEM
SITE ADDRESS: 1723 APACHE ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 09/30/2021

EXPIRES: 03/29/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1100.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In

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: _____

9/30/21



Town of Kill Devil Hills

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

PAID

OCT - 4 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2021-083

PROJECT NAME:

SITE ADDRESS: 1521 Monument Lane KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

APPLICANT: Rumschlag, William & Elizabeth
114 Saddle DR
NEWPORT NEWS, VA23602
757-879-5115

OWNER: Rumschlag, William & Elizabeth
114 Saddle DR
NEWPORT NEWS, VA23602
757-879-5115

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

License: 30667-U
Expires:

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:

FEE:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Relocate meter base and electrical service. Add generator and connection.



PAID
10/4/21
PJ Pol

EL2021-083

PROJECT NAME:

SITE ADDRESS: 1521 Monument Lane KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/01/2021

EXPIRES: 03/30/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Eric [Signature] Date: 10/01/2021



Town of Kill Devil Hills

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

OCT - 8 2021

Planning and Inspection Department

EL2021-084	ELECTRICAL
PROJECT NAME: Thomas T-Pole	ISSUED: 10/08/2021
SITE ADDRESS: 1903 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 10/08/2022

APPLICANT: THOMAS, KRISTINE M 3594 Beeler St DENVER, CO 80238	OWNER: THOMAS, KRISTINE M 3594 Beeler St DENVER, CO 80238
----------------------------------------------------------------------------	------------------------------------------------------------------------

ELECTRICAL:	JESSE N. OWENS ELECTRIC CORP HARBINGER NC UNKNOWN UNKNOWN, XX 00000	License: 3360L Expires: 02/28/2022
--------------------	------------------------------------------------------------------------------	-----------------------------------------------------

PARCEL:

PIN: 988406492055	Parcel Number: 002817000
Address: 1903 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: Croatan Shores Amended	Block: E Lot(s): 18
Legal Description:	

FEES:	Paid	Due
Electrical Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Install T-Pole

EL2021-084

PROJECT NAME: Thomas T-Pole

SITE ADDRESS: 1903 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/08/2021

EXPIRES: 10/08/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	350.00
FLOOD ZONE	VE
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: _____

10/08/2021



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

OCT 13 2021

EL2021-085

PROJECT NAME: ASHLEY METERBASE AND OVERHEAD SERVICE
SITE ADDRESS: 2903 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL
ISSUED: 10/11/2021
EXPIRES: 04/09/2022

APPLICANT: ASHLEY, STEPHEN H
6644 STONEY POINT SOUTH
NORFOLK, VA 23502

OWNER: ASHLEY, STEPHEN H
6644 STONEY POINT SOUTH
NORFOLK, VA 23502

ELECTRICAL-LIMITED: BRS ELECTRICAL SERVICES
PO Box 2108
Kill Devil Hills, NC 27948
252-207-5334

License: 23077
Expires: 07/31/2022

PARCEL:

PIN: 988513138245

Parcel Number: 000824000

Address: 2903 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES PLAT B

Zoning:
Block: 0 **Lot(s):** 18

Legal Description:

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE METERBASE, FEEDERS, AND GROUNDING, OVERHEAD SERVICE

PAID
EB 10/12/21
PayPal

EL2021-085

PROJECT NAME: ASHLEY METERBASE AND OVERHEAD SERVICE
SITE ADDRESS: 2903 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12.00
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.

* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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: Bradley R Smith Date: 10 / 11 / 2021



Town of Kill Devil Hills

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

OCT 12 2021

Planning and Inspection Department

EL2021-086

PROJECT NAME: Jennings T-Pole
SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/12/2021

EXPIRES: 04/10/2022

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: 988405281256

Parcel Number: 002238128

Address: 406 PETER LN KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES SEC 2

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

Legal Description:

FEES:	Paid	Due
Electrical Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Install t-pole

DETAILS

Permit

Name	Value
NC POWER TEMPORARY #	10459323
ZONING DISTRICT	RL
PURPOSE	Residential New
CONSTRUCTION COST	300.00
FLOOD ZONE	X

EL2021-086

PROJECT NAME: Jennings T-Pole
SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/12/2021

EXPIRES: 04/10/2022

REQUIRED INSPECTIONS

Final

CONDITIONS

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

* Electrical trade affidavit 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: _____

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

OCT 12 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-288

PROJECT NAME: Rohe HVAC
SITE ADDRESS: 1904 GEORGIA LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

APPLICANT: REGINA ROHE
146 Grande Dr.
Morrisville, NC 27560
919-208-5403

OWNER: REGINA ROHE
146 Grande Dr.
Morrisville, NC 27560
919-208-5403

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

License: 19091
Expires: 12/31/2021

PARCEL:

PIN: 988405173725

Parcel Number: 002307000

Address: 1904 GEORGIA LN KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

Zoning:

Block: 0 **Lot(s):** 100

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
10/11/21 via
paypal

MC2021-288

PROJECT NAME: Rohe HVAC

SITE ADDRESS: 1904 GEORGIA LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/11/2021

EXPIRES: 04/09/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8675.00
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: Charles Thuman

Contractor or Authorized Agent:  Date: 10 / 11 / 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

EL2021-088

PROJECT NAME:

SITE ADDRESS: 709 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

APPLICANT: 709 NVDT LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

OWNER: 709 NVDT LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

ELECTRICAL, PLUMBING AND HEATING: ACE MECHANICAL OBX
P.O. Box 209
Manns Harbor, NC 27953

License: 14118-L, 17603 P, H-3
Expires: 06/30/2022

PARCEL:

PIN: 988416726545

Parcel Number: 003692004

Address: 709 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 8 **Lot(s):** 4 & 5

Legal Description:

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Provide electrical connections and equipment for lift station pump

PAID
10/19/21
paypal

EL2021-088

PROJECT NAME:

SITE ADDRESS: 709 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/15/2021

EXPIRES: 04/13/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential New
CONSTRUCTION COST	4500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Thomas Twiddy Date: 10 / 19 / 2021



Town of Kill Devil Hills

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

PAID
OCT 25 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2021-089	ELECTRICAL
PROJECT NAME:	ISSUED: 10/22/2021
SITE ADDRESS: 1007 FOURTH ST W KILL DEVIL HILLS	EXPIRES: 04/20/2022

APPLICANT: SOSA, SANTOS 1007 WEST FOURTH ST Kill Devil Hills, NC 27948	OWNER: SOSA, SANTOS 1007 WEST FOURTH ST Kill Devil Hills, NC 27948
-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------

ELECTRICAL - LIMITED:	Coastal Mechanical and Electric Services 151 Savannah Ave JARVISBURG, NC 27947 252-453-2765	License: 29815-L Expires: 01/21/2022
------------------------------	------------------------------------------------------------------------------------------------------	-------------------------------------------------------

PARCEL:

PIN: 988409077143	Parcel Number: 002264000
Address: 1007 FOURTH ST W KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES SEC 2	Block: 0 Lot(s): 36
Legal Description:	

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Install new irrigation pump and associated wiring.

PAID
10/25/2021
paypal

EL2021-089

PROJECT NAME:

SITE ADDRESS: 1007 FOURTH ST W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1850.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: John pugh Date: 10 / 25 / 2021



Town of Kill Devil Hills

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

PAID

OCT 25 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2021-090

PROJECT NAME:

SITE ADDRESS: 506 FIRST ST W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

APPLICANT: Smith, Roy & Rozaland
13950 Lebanon RD
Disputanta, VA23842

OWNER: Smith, Roy & Rozaland
13950 Lebanon RD
Disputanta, VA23842

ELECTRICAL - UNLIMITED:

ABOVE CODE ELECTRIC
PO BOX 688
kitty hawk, nc 27949
252-375-3232

License: U.31933
Expires: 12/31/2021

PARCEL:

PIN: 988409253213

Parcel Number: 003261000

Address: 506 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:

Block: 0 **Lot(s):** 294

Legal Description:

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace electrical panel



PAID

10/25/21

check # 4759

EL2021-090

PROJECT NAME:

SITE ADDRESS: 506 FIRST ST W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/22/2021

EXPIRES: 04/20/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Ronald Richard Date: 10/22/2021



Town of Kill Devil Hills

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

PAID

OCT 27 2021

Planning and Inspection Department

DEPT OF
PLANNING AND INSPECTION

EL2021-092	ELECTRICAL
PROJECT NAME:	ISSUED: 10/26/2021
SITE ADDRESS: 1611 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 04/24/2022

APPLICANT: SCRIMSHAW II PROPERTY N/A N/A, XX 00000	OWNER: SCRIMSHAW II PROPERTY N/A N/A, XX 00000
-----------------------------------------------------------------	-------------------------------------------------------------

ELECTRICAL, UNLIMITED:	LOWIRE TECHNOLOGIES PO Box 2751 Kill Devil Hills, NC 27948 252-449-4690	License: 19403 Expires: 10/02/2022
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PARCEL:

PIN: 98841156485300	Parcel Number: 002776999
Address: 1611 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: B Lot(s): 9,10 COMMON PROPERTY
Legal Description:	

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace house electrical panel

PAID
10/26/21 DE
pay pay

EL2021-092

PROJECT NAME:

SITE ADDRESS: 1611 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 10/26/2021

EXPIRES: 04/24/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
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: Marty Shaw

Contractor or Authorized Agent: Edie Parsons Date: 10/26/2021



Town of Kill Devil Hills

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

PAID

OCT - 5 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

DM2021-015

PROJECT NAME: POPE DEMO
SITE ADDRESS: 1406 MAXINE ST KILL DEVIL HILLS

DEMOLITION

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

APPLICANT: POPE, DEBORAH
9 ANCHOR WAY DR
BERLIN, MD 21811
443-614-5820

OWNER: RULE, CELIA MAE
4024 TREELEY ROAD
CHESTER, VA 23831

GENERAL: ETHERIDGE CONSTRUCTION COMPANY
UNKNOWN
UNKNOWN, XX 00000

License: 57111
Expires: 01/01/2022

PARCEL:

PIN: 988315744366

Parcel Number: 004808000

Address: 1406 MAXINE ST KILL DEVIL HILLS

Addition: KILL DEVIL BEACH EXTENDED

Zoning:

Block: 9 **Lot(s):** 6

Legal Description:

FEES:	Paid	Due
Demolition	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: DEMO EXISTING MOBILE HOME

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FLOOD ZONE	X
CONSTRUCTION COST	4900.00

DM2021-015

PROJECT NAME: POPE DEMO

SITE ADDRESS: 1406 MAXINE ST KILL DEVIL HILLS

DEMOLITION

ISSUED: 10/04/2021

EXPIRES: 04/02/2022

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-5-21



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

DM2021-013

PROJECT NAME: Thomas Demo
SITE ADDRESS: 1903 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

APPLICANT: Griggs & Co. Homes Inc.
P. O. Box 125
Point Harbor, NC 27964
207-8450

OWNER: THOMAS, KRISTINE M
3594 Beeler St
DENVER, CO 80238

GENERAL UNLIMITED: Griggs & Co. Homes Inc.
P. O. Box 125
Point Harbor, NC 27964
207-8450

License: 48170
Expires:

PARCEL:

PIN: 988406492055

Parcel Number: 002817000

Address: 1903 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: Croatan Shores Amended

Block: E **Lot(s):** 18

Legal Description:

FEES:	Paid	Due
Demolition	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: demo existing house and driveway

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
FLOOD ZONE	VE
CONSTRUCTION COST	22000.00

OCT - 6 2021

DM2021-013

PROJECT NAME: Thomas Demo

SITE ADDRESS: 1903 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 10/05/2021

EXPIRES: 04/03/2022

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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: _____

10/6/21



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

DW2021-008

PROJECT NAME: Childress Driveway
SITE ADDRESS: 2037 YORKTOWN KILL DEVIL HILLS

DRIVEWAY

ISSUED: 10/13/2021

EXPIRES: 04/11/2022

APPLICANT: CHILDRESS, MARGIE N
2060 Fairlane Dr
Powhatan, VA 23139

OWNER: CHILDRESS, MARGIE N
2060 Fairlane Dr
Powhatan, VA 23139

CONTRACTOR: Musick Concrete Services
718 W Kitty Hawk Rd.
kitty hawk, nc 27949
202-1241

UNLICENSED BUILDER: Musick Concrete Services
718 W Kitty Hawk Rd.
kitty hawk, nc 27949
202-1241

License: Unlicensed
Expires: 01/01/2022

PARCEL:

PIN: 988405099435

Parcel Number: 001474000

Address: 2037 YORKTOWN KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3


Zoning:

Block: 0 **Lot(s):** 1346

Legal Description:

FEES:	Paid	Due
Driveway Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: replace existing driveway to same footprint, add concrete under house

 **PAID**
10/19/21
pay pay

DW2021-008

PROJECT NAME: Childress Driveway
SITE ADDRESS: 2037 YORKTOWN KILL DEVIL HILLS

DRIVEWAY

ISSUED: 10/13/2021

EXPIRES: 04/11/2022

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Kirk R Foreman
ZONING DISTRICT	RL
CONSTRUCTION COST	10150.00
FLOOD ZONE	X
LOT COVERAGE	36.74

REQUIRED INSPECTIONS

Rough In	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.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Pre pour inspection required for slab area underneath existing structure for termite control spray on grade.

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: Manya Childress Date: 10 / 18 / 2021