



**Town of Kill Devil Hills**

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

NOV - 1 2021

**Planning and Inspection Department**

<b>BJ2021-221</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Hunt 2nd Living Residence	<b>ISSUED:</b> 10/29/2021
<b>SITE ADDRESS:</b> 321 QUAIL LN KILL DEVIL HILLS	<b>EXPIRES:</b> 04/27/2022

<b>APPLICANT:</b> Smith Contracting LLC PO Box 471 Kitty Hawk, NC 27949 252-202-6602	<b>OWNER:</b> Hunt, M. David 6500 Old Moon Terrace MOSELEY, VA23120 804-221-0444
---	---

<b>GENERAL:</b> Smith Contracting LLC PO Box 471 Kitty Hawk, NC 27949 252-202-6602	<b>License:</b> 79892 <b>Expires:</b> 12/31/2021
---	---

**PARCEL:**

PIN: 988316845033	Parcel Number: 027012000
Address: 321 QUAIL LN KILL DEVIL HILLS	
Addition: WHISPERING PINES SEC 2 & 3	Zoning: Block: F Lot(s): 6

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$1,752.50	\$0.00	Covered Porches/Decks	125 SQFT
Covered Porch Residential	\$93.75	\$0.00	Residential Unheated (.40)	260 Sq. Ft
<b>Totals :</b>	<b>\$1,846.25</b>	<b>\$0.00</b>	Residential Heated Space (.75)	2198 sq. Ft.

**PROJECT DESCRIPTION:** addition of a separate residential dwelling with 1 bedroom

**BJ2021-221****PROJECT NAME:** Hunt 2nd Living Residence  
**SITE ADDRESS:** 321 QUAIL LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/29/2021**EXPIRES:** 04/27/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-5771
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	330000.00
LIVING SPACE (SQFT)	2198
COVERED PORCHES/DECKS (SQFT)	125
GARAGE (SQFT)	260
TOTAL SQUARE FOOTAGE	2583
SURVEYOR NAME AND NUMBER	Kim Hamby 042614
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
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

PAID

NOV - 3 2021

## Planning and Inspection Department

**BJ2021-234**

**PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 601 West Aycock Street Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 11/01/2021

**EXPIRES:** 04/30/2022

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

**OWNER:** OBX COTTAGES LLC  
200 EAST BLACKMAN ST  
nags head, nc 27959  
252-207-5475

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

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

**PARCEL:**

**PIN:** 987520902385

**Parcel Number:**

**Address:** 601 West Aycock Street Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 13R, Block 78 Virginia Dare Shores S/D

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$152.25	\$0.00	Covered Porches/Decks	203 SQFT
T-Pole	\$50.00	\$0.00	Open Decks	1 EA
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	109 Sq. Ft
Res. Building Permit Fee	\$1,384.60	\$0.00	Residential Heated Space (.75)	1788 sq. Ft.
Open Deck Fee	\$150.00	\$0.00	# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$1,836.85</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T 24904

**BJ2021-234**

PROJECT NAME: OBX Cottages LLC

SITE ADDRESS: 601 West Aycock Street Kill Devil Hills

**BUILDING JOINT**

ISSUED: 11/01/2021

EXPIRES: 04/30/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
HEALTH DEPARTMENT PERMIT #	S3-6619
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	230000.00
LOT COVERAGE	39.90
LIVING SPACE (SQFT)	1788
COVERED PORCHES/DECKS (SQFT)	203
OPEN DECK (SQFT)	56
TOTAL SQUARE FOOTAGE	2156
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Raymond G Pate 13018
CULVERT	N
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

NOV - 3 2021

## Planning and Inspection Department

**BJ2021-235**

**PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 603 West Aycock Street Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 11/02/2021

**EXPIRES:** 05/01/2022

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

**OWNER:** OBX COTTAGES LLC  
200 EAST BLACKMAN ST  
nags head, nc 27959  
252-207-5475

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

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

**PARCEL:**

**PIN:** 987520902353

**Parcel Number:**

**Address:** 603 West Aycock Street Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 12R, Block 78, Virginia Dare Shores Subdivision

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$56.25	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	75 SQFT
Res. Building Permit Fee	\$1,379.25	\$0.00	Residential Unheated (.40)	75 Sq. Ft
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$1,635.50</b>	<b>\$0.00</b>	Residential Heated Space (.75)	1799 sq. Ft.

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T 24903

**BJ2021-235****PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 603 West Aycok Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 11/02/2021**EXPIRES:** 05/01/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
HEALTH DEPARTMENT PERMIT #	S3-6617
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	240000.00
LOT COVERAGE	39.80
LIVING SPACE (SQFT)	1799
COVERED PORCHES/DECKS (SQFT)	75
STORAGE (SQFT)	75
OPEN DECK (SQFT)	116
TOTAL SQUARE FOOTAGE	2065
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ARCHITECT NAME AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
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

NOV - 3 2021

## Planning and Inspection Department

**BJ2021-239**

**PROJECT NAME:** Denton Interior Remodel  
**SITE ADDRESS:** 212 ARCHDALE ST E KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/02/2021

**EXPIRES:** 05/01/2022

**APPLICANT:** ACS-OBX LLC  
PO Box 1771  
NAGS HEAD, NC 27959  
252-599-2999

**OWNER:** DENTON, DEAN  
3225 River Run Ln  
GLEN ALLEN, VA 23059

**BUILDING LIMITED:** ACS-OBX LLC  
PO Box 1771  
NAGS HEAD, NC 27959  
252-599-2999

**License:** 80229  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988513127574

**Parcel Number:** 000788000

**Address:** 212 ARCHDALE ST E KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES AMD BLK 6

**Zoning:**  
**Block:** 6 **Lot(s):** 18

**Legal Description:**

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

**PROJECT DESCRIPTION:** kitchen remodel, new flooring, kitchen cabinets, two tile showers

**BJ2021-239****PROJECT NAME:** Denton Interior Remodel**SITE ADDRESS:** 212 ARCHDALE ST E KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/02/2021**EXPIRES:** 05/01/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
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	AO
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	80000.00
SURVEYOR NAME AND NUMBER	Robert C Cummins L-2961
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**

- \* 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!





# 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

**BJ2021-241**

**PROJECT NAME:** Hillaker Office Addition  
**SITE ADDRESS:** 900 CARDINAL ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/02/2021

**EXPIRES:** 05/01/2022

**APPLICANT:** HILLIKER, AMY  
900 CARDINAL ST  
Kill Devil Hills, NC 27948

**OWNER:** HILLIKER, AMY  
900 CARDINAL ST  
Kill Devil Hills, NC 27948

**CONTRACTOR:** MANCUSO DEVELOPMENT  
P.O. Box 147  
610 Currituck Club House Drive  
Corolla, NC 27927  
252-305-4663

**GENERAL:** MANCUSO DEVELOPMENT  
P.O. Box 147  
610 Currituck Club House Drive  
Corolla, NC 27927  
252-305-4663

**License:** 26166  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988312777412

**Parcel Number:** 004440000

**Address:** 900 CARDINAL ST KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 27 **Lot(s):** 1

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Accessory Residential (MIN)	\$100.00	\$0.00	Residential Heated Space	250 sq. Ft.
Fence	\$100.00	\$0.00	(.75)	
Res. Building Permit Fee	\$187.50	\$0.00		
<b>Totals :</b>	<b>\$387.50</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** addition of accessory building to be used as office space

NOV - 2 2021

**BJ2021-241**

**PROJECT NAME:** Hillaker Office Addition  
**SITE ADDRESS:** 900 CARDINAL ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/02/2021

**EXPIRES:** 05/01/2022

---

**DETAILS**
**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	15
HEALTH DEPARTMENT PERMIT #	S22-6843
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	12.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	50000.00
LOT COVERAGE	35.00
LIVING SPACE (SQFT)	250
TOTAL SQUARE FOOTAGE	250
SURVEYOR NAME AND NUMBER	JH Miller L-4958
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

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

---



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2021-233**

**PROJECT NAME:** Eddie and Nazmi Celaj  
**SITE ADDRESS:** 335 AYCOCK ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

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

**OWNER:** Celaj, Eder  
328 Bickett St.  
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:** 988517003998

**Parcel Number:** 000599000

**Address:** 335 AYCOCK ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 47 **Lot(s):** 3-4

**Legal Description:**

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

NOV - 4 2021

**BJ2021-233****PROJECT NAME:** Eddie and Nazmi Celaj  
**SITE ADDRESS:** 335 AYCOCK ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/04/2021**EXPIRES:** 05/03/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S8-6657
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	240000.00
LOT COVERAGE	40.00
LIVING SPACE (SQFT)	2050
COVERED PORCHES/DECKS (SQFT)	116
STORAGE (SQFT)	152
OPEN DECK (SQFT)	64
TOTAL SQUARE FOOTAGE	2382
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
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

NOV - 5 2021

## Planning and Inspection Department

### BJ2021-240

**PROJECT NAME:** Sea Oats Villas Condos Repair  
**SITE ADDRESS:** 1401 VA DARE TRL N KILL DEVIL HILLS

### BUILDING JOINT

**ISSUED:** 11/05/2021

**EXPIRES:** 05/04/2022

**APPLICANT:** Sea Oats Villas Property Owners C/O Signature  
 Touch Property Mgmt.  
 2600 NORTH Croatan HWY  
 Kill Devil Hills, NC 27948  
 252-441-8857

**OWNER:** Sea Oats Villas Property Owners C/O Signature  
 Touch Property Mgmt.  
 2600 NORTH Croatan HWY  
 Kill Devil Hills, NC 27948  
 252-441-8857

**CONTRACTOR:** CLARENCE GIBBS  
 PO BOX 2387  
 Manteo, NC 27954  
 252-202-5991

**BUILDING UNLIMITED:** Gibbs, Clarence  
 Po Box 2387  
 Manteo, NC 27954

**License:** 76990  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98841165410700 **Parcel Number:** 028116999

**Address:** 1401 VA DARE TRL N KILL DEVIL HILLS

**Addition:** **Zoning:**  
**Block:** 0 **Lot(s):** COMMON PROPERTY

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$1,158.00	\$0.00	Covered Porches/Decks	1544 SQFT
Building Permit Fee - Minimum Fee	\$150.00	\$0.00		
Building Permit Fee - Minimum Fee	\$150.00	\$0.00		
Building Permit Fee - Minimum Fee	\$150.00	\$0.00		
<b>Totals :</b>	<b>\$1,608.00</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** replace all rear decks, two sliders accessing each deck, replace siding, windows and doors for each unit, replace two sets of side stairs and landings on north and side yards

**BJ2021-240**

**PROJECT NAME:** Sea Oats Villas Condos Repair  
**SITE ADDRESS:** 1401 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT****ISSUED:** 11/05/2021**EXPIRES:** 05/04/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	Y
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	463225.00
LOT COVERAGE	41.30
COVERED PORCHES/DECKS (SQFT)	1544
SURVEYOR NAME AND NUMBER	Carlos F Gomez L-5274
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

**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.

\* 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.



# Town of Kill Devil Hills

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

NOV - 5 2021

## Planning and Inspection Department

**BJ2021-244**

**PROJECT NAME:** ARGAMAN GROUND FLOOR REMODEL  
**SITE ADDRESS:** 307 W Arch St Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**APPLICANT:** ARGAMAN, JUDAH Y  
P O BOX 2103  
KITTY HAWK, NC 27949  
252-982-6850

**OWNER:** ARGAMAN, JUDAH Y  
P O BOX 2103  
KITTY HAWK, NC 27949  
252-982-6850

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

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

**PARCEL:**

**PIN:** 987516941085

**Parcel Number:** 000225000

**Address:** 307 W Arch St Kill Devil Hills

**Addition:** ORVILLE BEACH WEST

**Zoning:**  
**Block:** 0 **Lot(s):** 124

**Legal Description:**

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

**PROJECT DESCRIPTION:** INSTALL WET BAR, REMOVE RANGE CIRCUIT, CONSTRUCT GRADE LEVEL WALKWAY ON EAST OF HOUSE

**PAID**

CHK 511

11/5/21

**BJ2021-244****PROJECT NAME:** ARGAMAN GROUND FLOOR REMODEL  
**SITE ADDRESS:** 307 W Arch St Kill Devil Hills**BUILDING JOINT****ISSUED:** 11/04/2021**EXPIRES:** 05/03/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	1700.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final	Electrical
Zoning Final	Plumbing

**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.
- \* Home is only approved as 4bed 3 bath Single Family Dwelling.
- \* Home is not approved as a duplex.
- \* No permanent, hardwired cooking facilities are permitted on the ground floor.
- \* All trade work must be completed by licensed tradesmen if property is to be for rent or sale within 365 days of projects completion.





# Town of Kill Devil Hills

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

NOV 10 2021

## Planning and Inspection Department

<b>BJ2021-246</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Joel Perroth	<b>ISSUED:</b> 11/09/2021
<b>SITE ADDRESS:</b> 201 ARCHDALE ST E KILL DEVIL HILLS	<b>EXPIRES:</b> 05/08/2022

<b>APPLICANT:</b> DARE REPAIRS 448 Old Wharf Rd Wanchese, NC 27981 252-423-0837	<b>OWNER:</b> Joel & Penny Perroth 19918 Wyman Way Germantown, MD 20874 301-540-5024
--	---

<b>BUILDING LIMITED:</b> DARE REPAIRS 448 Old Wharf Rd Wanchese, NC 27981 252-423-0837	<b>License:</b> 81517 <b>Expires:</b>
---	--

**PARCEL:**

<b>PIN:</b> 988517125296	<b>Parcel Number:</b> 000803000
<b>Address:</b> 201 ARCHDALE ST E KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES AMD BLK 5	<b>Block:</b> 5 <b>Lot(s):</b> PT 8-9
<b>Legal Description:</b>	

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$90.00	\$0.00	Covered Porches/Decks	120 SQFT
Res. Building Permit Fee	\$126.00	\$0.00	Residential Heated Space	168 sq. Ft.
<b>Totals :</b>	<b>\$216.00</b>	<b>\$0.00</b>	(.75)	

**PROJECT DESCRIPTION:** Enclosing the existing screened porch and adding 18' to front of house for new porch and new sun room, move steps

**BJ2021-246**

PROJECT NAME: Joel Perroth

SITE ADDRESS: 201 ARCHDALE ST E KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 11/09/2021

EXPIRES: 05/08/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
HEALTH DEPARTMENT PERMIT #	S22-5673
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	60000.00
LOT COVERAGE	44.10
LIVING SPACE (SQFT)	168
COVERED PORCHES/DECKS (SQFT)	120
TOTAL SQUARE FOOTAGE	288
SURVEYOR NAME AND NUMBER	JH Miller
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
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

NOV 12 2021

## Planning and Inspection Department

**BJ2021-243**

**PROJECT NAME:** Willard and Courtney Moody  
**SITE ADDRESS:** 2056 VA DARE TRAIL NORTH KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

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

**OWNER:** MOODY, WILLARD J  
120 RIVERPOINT CRESCENT  
PORTSMOUTH, VA 23707

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

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

### PARCEL:

**PIN:** 988518208856

**Parcel Number:**

**Address:** 2056 VA DARE TRAIL NORTH KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 16A

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Open Deck Fee	\$300.00	\$0.00	Covered Porches/Decks	1257 SQFT
Covered Porch Residential	\$942.75	\$0.00	Open Decks	2 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Unheated (.40)	467 Sq. Ft
Res. Building Permit Fee	\$3,620.15	\$0.00	Residential Unheated (.40)	684 Sq. Ft
<b>Totals :</b>	<b>\$5,062.90</b>	<b>\$0.00</b>	Residential Heated Space (.75)	4213 sq. Ft.

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

### DETAILS

Town of Kill Devil Hills

Water Charges

**PAID**

Water Tap #: 724906

**BJ2021-243**

**PROJECT NAME:** Willard and Courtney Moody  
**SITE ADDRESS:** 2056 VA DARE TRAIL NORTH KILL DEVIL HILLS

**BUILDING JOINT****ISSUED:** 11/12/2021**EXPIRES:** 05/11/2022**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S8-6774
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AO
BASE FLOOD ELEVATION	2
Proposed First Floor Elevation	12.50
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	920000.00
LOT COVERAGE	63.80
LIVING SPACE (SQFT)	4213
COVERED PORCHES/DECKS (SQFT)	1257
GARAGE (SQFT)	684
STORAGE (SQFT)	467
OPEN DECK (SQFT)	213
TOTAL SQUARE FOOTAGE	6834
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Raymond G Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14168
CULVERT	N
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

## Planning and Inspection Department

**BJ2021-247**

**PROJECT NAME:** Grateful Dog Grooming  
**SITE ADDRESS:** 1001 CROATAN HWY S KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/10/2021

**EXPIRES:** 05/09/2022

**APPLICANT:** WORSHAM, JESSICA  
154 Raleigh Wood Dr  
Manteo, NC 27954

**OWNER:** SMALL, PRISCILLA  
PO BOX 426  
Kill Devil Hills, NC 27948  
252-449-5565

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

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

**PARCEL:**

**PIN:** 988308877997

**Parcel Number:** 027929000

**Address:** 1001 CROATAN HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 4

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** relocate existing hot water heater, add wall section to separate front right room, adding plumbing for tub, adding rpz backflow preventor

**PAID**

NOV 10 2021

**BJ2021-247**

**PROJECT NAME:** Grateful Dog Grooming  
**SITE ADDRESS:** 1001 CROATAN HWY S KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/10/2021

**EXPIRES:** 05/09/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N

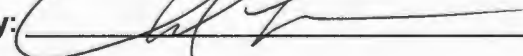
**REQUIRED INSPECTIONS**

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.
- \* Once RPZ backflow preventer is installed, applicant shall forward a copy of the test results to Public Services.
- \* All trade affidavits are required to be submitted prior to rough-in 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:** Wilma Washam **Date:** 11/10/2021



# Town of Kill Devil Hills

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

NOV 15 2021

## Planning and Inspection Department

**BJ2021-245**

**PROJECT NAME:** Aubrey Davis  
**SITE ADDRESS:** 115 WRIGHT AVE E KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/08/2021

**EXPIRES:** 05/07/2022

**APPLICANT:** DAVIS, AUBREY THOMAS &  
115 WRIGHT AVENUE  
P O BOX 2062  
KILL DEVIL HILLS, NC 27948

**OWNER:** DAVIS, AUBREY THOMAS &  
115 WRIGHT AVENUE  
P O BOX 2062  
KILL DEVIL HILLS, NC 27948

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

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

**PARCEL:**

**PIN:** 988420707709

**Parcel Number:** 003883000

**Address:** 115 WRIGHT AVE E KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 37 **Lot(s):** 20

**Legal Description:**

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

**PROJECT DESCRIPTION:** Make shower handicap accessible

**PAID**  
*11/15/21*  
*check # 1745*

**BJ2021-245**

PROJECT NAME: Aubrey Davis

SITE ADDRESS: 115 WRIGHT AVE E KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 11/08/2021

EXPIRES: 05/07/2022

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5500.00
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.

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: 11 / 09 / 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

NOV 16 2021

**BJ2021-218**

**PROJECT NAME:** Baum Bedroom Addition  
**SITE ADDRESS:** 412 PINE CONE CT KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/18/2021

**EXPIRES:** 04/16/2022

**APPLICANT:** Harry Baum  
412 Pine Cone Ct.  
102 Town Hall Drive  
Kill Devil Hills, NC 27948  
252-441-9785

**OWNER:** Harry Baum  
412 Pine Cone Ct.  
102 Town Hall Drive  
Kill Devil Hills, NC 27948  
252-441-9785

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

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

**PARCEL:**

**PIN:** 988316737785

**Parcel Number:** 004890309

**Address:** 412 PINE CONE CT KILL DEVIL HILLS

**Addition:** WHISPERING PINES SEC 2 & 3

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$97.50	\$0.00	Residential Heated Space	649 sq. Ft.
Res. Building Permit Fee	\$389.25	\$0.00	(.75)	
<b>Totals :</b>	<b>\$486.75</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** converting portion of garage to bedroom, 4 total bedrooms, adding gravel parking space

*"X" Flood zone*

**BJ2021-218**

**PROJECT NAME:** Baum Bedroom Addition  
**SITE ADDRESS:** 412 PINE CONE CT KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 10/18/2021

EXPIRES: 04/16/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S5-5660
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10000.00
LOT COVERAGE	32.00
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.

\* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.



# Town of Kill Devil Hills

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

NOV 16 2021

## Planning and Inspection Department

**BJ2021-248**

**PROJECT NAME:** Henry's Restaurant entry rebuild  
**SITE ADDRESS:** 3396 CROATAN HWY N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/10/2021

**EXPIRES:** 05/09/2022

**APPLICANT:** EZZELL, HENRY EMMONS JR  
PO Box 470  
KITTY HAWK, NC 27949  
252-261-6142

**OWNER:** EZZELL, HENRY EMMONS JR  
PO Box 470  
KITTY HAWK, NC 27949  
252-261-6142

**BUILDING UNLIMITED:** OVERTON CONTRACTING LLC  
PO BOX 7804  
Kill Devil Hills, NC 27948  
252-441-9239

**License:** 86646  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 987516943985

**Parcel Number:** 000051000

**Address:** 3396 CROATAN HWY N KILL DEVIL HILLS

**Addition:**

**Zoning:**  
**Block:** 18      **Lot(s):** 1-2

**Legal Description:**

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

**PROJECT DESCRIPTION:** Repair/rebuild vehicle damaged front entrance.

**BJ2021-248**

**PROJECT NAME:** Henry's Restaurant entry rebuild  
**SITE ADDRESS:** 3396 CROATAN HWY N KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 11/10/2021

EXPIRES: 05/09/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	III
CONSTRUCTION COST	40000.00
ENGINEER AND LICENSE NUMBER	JAMES OVERTON 15302
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly

**REQUIRED INSPECTIONS**

Framing	Final
Rough In	Zoning Final
Insulation	

**CONDITIONS**

- \* Foundation survey will be required prior to rough-in inspection.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Engineer of record to submit structural evaluation report as per note on drawings, once existing structure has been opened for for analysis.



# Town of Kill Devil Hills

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

PAD

NOV 17 2021

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

<b>BJ2021-252</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> RIPPLING WATERS REMODEL	<b>ISSUED:</b> 11/17/2021
<b>SITE ADDRESS:</b> 406 ARCH ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 05/16/2022

<b>APPLICANT:</b> RIPPLING WATERS LLC 501 BRUTON DR. GIBSONIA, PA 15044	<b>OWNER:</b> RIPPLING WATERS LLC 501 BRUTON DR. GIBSONIA, PA 15044
---	---

<b>BUILDING LIMITED:</b> Cynergy Solutions LLC PO BOX 153 Powells Point, NC 27966 252-982-6807	<b>License:</b> 83295 <b>Expires:</b> 01/24/2022
---	---

**PARCEL:**

<b>PIN:</b> 987516834977	<b>Parcel Number:</b> 000208000
<b>Address:</b> 406 ARCH ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> ORVILLE BEACH WEST	<b>Block:</b> 0 <b>Lot(s):</b> 106
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$300.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REMODEL INTERIOR DRYWALL, FLOORING, CABINETS, INSTALL 3 NEW WINDOWS AND FRONT DOOR, REPAIR DECK RAILINGS AND ROT REPAIR AS NEEDED, REMOVE GARAGE DOORS TO CONVERT GROUND FLOOR STORAGE ONLY, STRUCTURE TO REMAIN 3 BEDROOM ABOVE WITH STORAGE BELOW, REMOVAL OF UNPERMITTED INTERIOR STAIR

**BJ2021-252****PROJECT NAME:** RIPPLING WATERS REMODEL  
**SITE ADDRESS:** 406 ARCH ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/17/2021**EXPIRES:** 05/16/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	30000.00
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.
- \* 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.
- \* Structure to remain a 3 bedroom sleeping 6.
- \* Ground floor is only approved as storage. No living space is permitted.



# Town of Kill Devil Hills

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

PAID

NOV 19 2021

## Planning and Inspection Department

<b>BJ2021-254</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Wince Garage	<b>ISSUED:</b> 11/19/2021
<b>SITE ADDRESS:</b> 407 BURNS DR KILL DEVIL HILLS	<b>EXPIRES:</b> 05/18/2022

<b>APPLICANT:</b> Wince, Chelsey 407 Burns Dr. Kill Devil Hills, NC 27948 703-785-8197	<b>OWNER:</b> Wince, Chelsey 407 Burns Dr. Kill Devil Hills, NC 27948 703-785-8197
---	---

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

**PARCEL:**

<b>PIN:</b> 988316835589	<b>Parcel Number:</b> 004991000
<b>Address:</b> 407 BURNS DR KILL DEVIL HILLS	
<b>Addition:</b> OCEAN ACRES TRACT 3 SEC 2	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> H <b>Lot(s):</b> 7

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$369.60	\$0.00	Residential Unheated (.40)	924 Sq. Ft
<b>Totals :</b>	<b>\$369.60</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** add garage to ground floor of existing house

**BJ2021-254****PROJECT NAME:** Wince Garage**SITE ADDRESS:** 407 BURNS DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/19/2021**EXPIRES:** 05/18/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3000.00
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
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.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.





# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BJ2021-242</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Jeffrey Helmick	<b>ISSUED:</b> 11/17/2021
<b>SITE ADDRESS:</b> 2012 YORKTOWN KILL DEVIL HILLS	<b>EXPIRES:</b> 05/16/2022

<b>APPLICANT:</b> Sound and Shore Builders, Inc. 1851 W Ehringhaus Street ELIZABETH CITY, NC 27909	<b>OWNER:</b> Helmick, Jeffrey 5233 Inverchapel Road SPRINGFIELD, VA 22151 571-216-6299
--	--

<b>BUILDING LIMITED:</b> Sound and Shore Builders, Inc. 1851 W Ehringhaus Street ELIZABETH CITY, NC 27909	<b>License:</b> 56500 <b>Expires:</b>
---	--

**PARCEL:**

<b>PIN:</b> 988405180895	<b>Parcel Number:</b> 001485000
<b>Address:</b> 2012 YORKTOWN KILL DEVIL HILLS	
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 1359

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	144 SQFT
Res. Building Permit Fee	\$759.75	\$0.00	Residential Heated Space	1013 sq. Ft.
Covered Porch Residential	\$108.00	\$0.00	(.75)	
Land Disturbing	\$100.00	\$0.00	# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$1,017.75</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

NOV 2 2021

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T24907

**BJ2021-242**

**PROJECT NAME:** Jeffrey Helmick  
**SITE ADDRESS:** 2012 YORKTOWN KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/17/2021

**EXPIRES:** 05/16/2022

---

**DETAILS**

**Permit**

---

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	31015
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	180000.00
LOT COVERAGE	32.40
LIVING SPACE (SQFT)	1013
COVERED PORCHES/DECKS (SQFT)	144
TOTAL SQUARE FOOTAGE	1157
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Frederick House 24740
CULVERT	N
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

PAID

NOV 19 2021

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2021-249**

**PROJECT NAME:** Russell New House  
**SITE ADDRESS:** 502 DURHAM ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**APPLICANT:** RUSSELL, ELIZABETH  
1919 Lisbon Road  
CHESAPEAKE, VA 23321

**OWNER:** RUSSELL, ELIZABETH  
1919 Lisbon Road  
CHESAPEAKE, VA 23321

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

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

**PARCEL:**

**PIN:** 988405186845

**Parcel Number:** 001353000

**Address:** 502 DURHAM ST W KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 639

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$1,479.15	\$0.00	Residential Heated Space	1793 sq. Ft.
Covered Porch Residential	\$63.00	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	336 Sq. Ft
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	84 SQFT
<b>Totals :</b>	<b>\$1,742.15</b>	<b>\$0.00</b>	# of Temporary Poles	1 EA
			Open Decks	1 EA

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

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: 360380

**BJ2021-249****PROJECT NAME:** Russell New House  
**SITE ADDRESS:** 502 DURHAM ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/18/2021**EXPIRES:** 05/17/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
Proposed First Floor Elevation	10.20
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	170000.00
LOT COVERAGE	39.30
LIVING SPACE (SQFT)	1793
COVERED PORCHES/DECKS (SQFT)	84
GARAGE (SQFT)	336
OPEN DECK (SQFT)	160
TOTAL SQUARE FOOTAGE	2373
SURVEYOR NAME AND NUMBER	JH Miller L-4958
ENGINEER AND LICENSE NUMBER	Raymond G Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14168
CULVERT	N
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

PAID  
NOV 30 2021

## Planning and Inspection Department

**BJ2021-256**

**PROJECT NAME:** Wells Kitchen  
**SITE ADDRESS:** 805 Virginia Dare Tr. S. Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 11/29/2021

**EXPIRES:** 05/28/2022

**APPLICANT:** Wells, Greg  
PO Box 74  
Charlottesville, VA 22902  
434-531-4849

**OWNER:** Wells, Greg  
PO Box 74  
Charlottesville, VA 22902  
434-531-4849

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

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

**PARCEL:**

**PIN:** 988308993345

**Parcel Number:** 008145003

**Address:** 805 Virginia Dare Tr. S. Kill Devil Hills

**Zoning:**

**Addition:** Baum Beach

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Remodel kitchen includes cabinets, countertops, and flooring

PAID  
11/29/21  
P.O. P.C.

**BJ2021-256**

PROJECT NAME: Wells Kitchen

SITE ADDRESS: 805 Virginia Dare Tr. S. Kill Devil Hills

**BUILDING JOINT**

ISSUED: 11/29/2021

EXPIRES: 05/28/2022

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	60000.00
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.

\* All trade affidavits are required to be submitted prior to rough-in inspection.

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

Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 11 / 29 / 2021



# Town of Kill Devil Hills

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

NOV - 2 2021

## Planning and Inspection Department

**BP2021-234**

**PROJECT NAME:** Romaniello New Rear Deck and Stairs  
**SITE ADDRESS:** 3124 BAY DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/01/2021

**EXPIRES:** 04/30/2022

**APPLICANT:** ROMANIELLO, LEONARD & CHERYL  
327 HIGHLAND AVE  
DOWNTOWN, PA 19335

**OWNER:** ROMANIELLO, LEONARD & CHERYL  
327 HIGHLAND AVE  
DOWNTOWN, PA 19335

**CONTRACTOR:** JERNIGAN ENTERPRISES INC  
P O BOX 95  
GRANDY, NC 27939  
252-489-5007

**GENERAL, UNLIMITED:**

JERNIGAN ENTERPRISES CONSTRUCTION &  
DEVELOPMENT, INC.  
P.O. Box 95  
Grandy, NC 27545  
252-489-5007

**License:** 49781  
**Expires:**

**PARCEL:**

**PIN:** 987520822380

**Parcel Number:** 001071000

**Address:** 3124 BAY DR KILL DEVIL HILLS

**Zoning:**

**Addition:** MOOR SHORES

**Block:** 0 **Lot(s):** 136

**Legal Description:**

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

**PROJECT DESCRIPTION:** new rear deck 10'x'16 and stairs

**BP2021-234**

**PROJECT NAME:** Romaniello New Rear Deck and Stairs  
**SITE ADDRESS:** 3124 BAY DR KILL DEVIL HILLS

**BUILDING****ISSUED:** 11/01/2021**EXPIRES:** 04/30/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	14900.00
OPEN DECK (SQFT)	160
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Jason Mizelle L4917
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final  
Final

Slab/Foundation/Piling

**CONDITIONS**

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

\* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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





# Town of Kill Devil Hills

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

NOV - 3 2021

## Planning and Inspection Department

<b>BP2021-237</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> CREATIVE JEWELERS BREEZEWAY REMOVAL	<b>ISSUED:</b> 11/03/2021
<b>SITE ADDRESS:</b> 2501 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 05/02/2022

**APPLICANT:** TIM CRANK  
3820 Keeper's Way  
Kitty Hawk, NC 27949  
252-255-2015

**OWNER:** TIM CRANK  
3820 Keeper's Way  
Kitty Hawk, NC 27949  
252-255-2015

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

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

**PARCEL:**

**PIN:** 988517115831

**Parcel Number:** 004060001

**Address:** 2501 CROATAN HWY N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 21

**Lot(s):** 25-31

**Legal Description:**

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

**PROJECT DESCRIPTION:** REMOVE UNPERMITTED BREEZEWAY AND CANOPY FROM NORTH EXIT, POUR 36"X44" CONCRETE LANDING

**BP2021-237****PROJECT NAME:** CREATIVE JEWELERS BREEZEWAY REMOVAL**SITE ADDRESS:** 2501 CROATAN HWY N KILL DEVIL HILLS**BUILDING****ISSUED:** 11/03/2021**EXPIRES:** 05/02/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

\* Concrete landing not be be closer than 5 feet to the property line.



# Town of Kill Devil Hills

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

PAID  
NOV - 3 2021

## Planning and Inspection Department

**BP2021-236**

**PROJECT NAME:** COX STAIR AND PILING  
**SITE ADDRESS:** 505 SUFFOLK ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/03/2021

**EXPIRES:** 05/02/2022

**APPLICANT:** COX, ROBERT  
1287 AUTUMN BREEZE DR  
OILVILLE, VA23129  
804-307-8351

**OWNER:** COX, ROBERT  
1287 AUTUMN BREEZE DR  
OILVILLE, VA23129  
804-307-8351

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

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

**PARCEL:**

**PIN:** 988405190785

**Parcel Number:** 001124000

**Address:** 505 SUFFOLK ST KILL DEVIL HILLS

**Zoning:**

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

**Block:** 0 **Lot(s):** 916

**Legal Description:**

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

**PROJECT DESCRIPTION:** REBUILD EXTERIOR STAIR AND RAILINGS, RE-SKIN DECK, REPLACE PILING PER ENGINEER DETAIL



**PAID**

PAID 11/3/21

JB

**BP2021-236****PROJECT NAME:** COX STAIR AND PILING  
**SITE ADDRESS:** 505 SUFFOLK ST KILL DEVIL HILLS**BUILDING****ISSUED:** 11/03/2021**EXPIRES:** 05/02/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	7420.00
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.

\* 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**  
NOV - 5 2021

## Planning and Inspection Department

### BP2021-238

**PROJECT NAME:** COLDWELL BANKER STAIRS  
**SITE ADDRESS:** 2503 CROATAN HWY N KILL DEVIL HILLS

### BUILDING

**ISSUED:** 11/04/2021  
**EXPIRES:** 05/03/2022

**APPLICANT:** KDH at Five and Three Quarters LLC  
2503 N Croatan Hwy  
Kill Devil Hills, NC 27948

**OWNER:** KDH at Five and Three Quarters LLC  
2503 N Croatan Hwy  
Kill Devil Hills, NC 27948

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

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

### PARCEL:

**PIN:** 988517114857

**Parcel Number:** 000444000

**Address:** 2503 CROATAN HWY N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 21 **Lot(s):** 10-20

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	
<b>Totals :</b>	<b>\$300.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** REBUILD EAST EXTERIOR STAIR TO COMMERCIAL CODE, REMOVE UNPERMITTED BREEZWAY, DECK, AND STAIR FROM SOUTH SIDE

**PAID**  
chk 1032  
JTB 11/5/21

**BP2021-238**

**PROJECT NAME:** COLDWELL BANKER STAIRS  
**SITE ADDRESS:** 2503 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

**REQUIRED INSPECTIONS**

Framing	Zoning Final
Insulation	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

NOV - 5 2021

## Planning and Inspection Department

**BP2021-241**

**PROJECT NAME:** ALDRICH STAIRS AND DECKING  
**SITE ADDRESS:** 407 WALLACE ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/05/2021

**EXPIRES:** 05/04/2022

**APPLICANT:** STEPHEN ALDRICH  
7811 Horatio St.  
MCLEAN, VA 22101

**OWNER:** STEPHEN ALDRICH  
7811 Horatio St.  
MCLEAN, VA 22101

**GENERAL, UNLICENSED:** Matt Anderson  
300 Wallace ST  
Kill Devil Hills, NC 27948  
252-489-9171

**License:** 123  
**Expires:**

**PARCEL:**

**PIN:** 987516836523

**Parcel Number:** 000263000

**Address:** 407 WALLACE ST KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**

**Block:** 0 **Lot(s):** 177

**Legal Description:**

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

**PROJECT DESCRIPTION:** REBUILD EXTERIOR STAIR IN SAME LOCATION, REPLACE DECKING AND RAILING

**BP2021-241****PROJECT NAME:** ALDRICH STAIRS AND DECKING  
**SITE ADDRESS:** 407 WALLACE ST KILL DEVIL HILLS**BUILDING****ISSUED:** 11/05/2021**EXPIRES:** 05/04/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6300.00
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:** 11/5/21





# Town of Kill Devil Hills

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

NOV - 8 2021

## Planning and Inspection Department

**BP2021-239**

**PROJECT NAME:** RATEAU STAIRS  
**SITE ADDRESS:** 200 SOTHEL ST E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**APPLICANT:** RATEAU, MUNRO A SR  
1660 RANDY DRIVE  
COOKEVILLE, TN 38501  
434-996-3974

**OWNER:** RATEAU, MUNRO A SR  
1660 RANDY DRIVE  
COOKEVILLE, TN 38501  
434-996-3974

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

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

**PARCEL:**

**PIN:** 988513122848

**Parcel Number:** 000413000

**Address:** 200 SOTHEL ST E KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 8 **Lot(s):** PT 19-22

**Legal Description:**

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

**PROJECT DESCRIPTION:** REBUILD EXTERIOR STAIR IN SAME LOCATION, LANDING PILINGS TO REMAIN

**PAID**

check 1066  
11/8/21 JTB

**BP2021-239**

**PROJECT NAME:** RATEAU STAIRS  
**SITE ADDRESS:** 200 SOTHEL ST E KILL DEVIL HILLS

**BUILDING****ISSUED:** 11/04/2021**EXPIRES:** 05/03/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
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

## Planning and Inspection Department

<b>BP2021-243</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> MORRIS DECK AND STAIR	<b>ISSUED:</b> 11/12/2021
<b>SITE ADDRESS:</b> 203 FRESH POND DR E KILL DEVIL HILLS	<b>EXPIRES:</b> 05/11/2022

<b>APPLICANT:</b> Susan & Jason Morris 11711 Bollingbrook Dr. Richmond, VA 23236 804-873-1380	<b>OWNER:</b> Susan & Jason Morris 11711 Bollingbrook Dr. Richmond, VA 23236 804-873-1380
--	--

<b>BUILDING:</b>	Gibson, William PO Box 2622 kitty hawk, nc 27949 252-207-2700	<b>License:</b> 81900 <b>Expires:</b> 02/26/2022
------------------	--	---

**PARCEL:**

<b>PIN:</b> 989313141077	<b>Parcel Number:</b> 004944000
<b>Address:</b> 203 FRESH POND DR E KILL DEVIL HILLS	
<b>Addition:</b> LAKE DRIVE DEVELOPMENT SEC 2	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 13

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

**PROJECT DESCRIPTION:** REBIULD DECK AND STAIR TO SAME FOOTPRINT

PAID  
NOV 12 2021  
TOWN OF  
KILL DEVIL HILLS

**BP2021-243**

**PROJECT NAME:** MORRIS DECK AND STAIR  
**SITE ADDRESS:** 203 FRESH POND DR E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

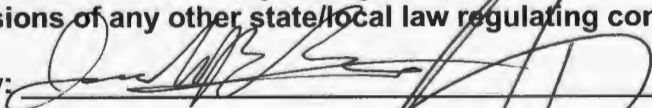
Zoning Final

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.
- \* 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:** 11-12-21



# Town of Kill Devil Hills

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

PAID

NOV 15 2021

## Planning and Inspection Department

70315  
11/15/21

### BP2021-244

**PROJECT NAME:** HH Hunt Senior Living  
**SITE ADDRESS:** 803 Bermuda Bay Blvd Kill Devil Hills

### BUILDING

**ISSUED:** 11/12/2021  
**EXPIRES:** 05/11/2022

**APPLICANT:** MRN Contracting MS LLC  
1677 US HWY 78  
MONROE, GA 30656  
919-480-2700

**OWNER:** SPRING ARBOR  
803 W. Ocean Bay Blvd.  
Kill Devil Hills, NC 27948

**GENERAL-LIMITED:** MRN Contracting MS LLC  
1677 US HWY 78  
MONROE, GA 30656  
919-480-2700

**License:** 37992  
**Expires:** 11/30/2022

### PARCEL:

**PIN:** 988306484499

**Parcel Number:** 008164003

**Address:** 803 Bermuda Bay Blvd Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace roofing



PAID  
11/12/21  
pay paf

**BP2021-244**PROJECT NAME: HH Hunt Senior Living  
SITE ADDRESS: 803 Bermuda Bay Blvd Kill Devil Hills**BUILDING**

ISSUED: 11/12/2021

EXPIRES: 05/11/2022

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	G&I Public
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	250000.00
CONSTRUCTION TYPE	III
OCCUPANCY TYPE	Institutional

**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: Marty ShawContractor or Authorized Agent: Taylor Brady Date: 11 / 12 / 2021



# Town of Kill Devil Hills

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

NOV 15 2021

## Planning and Inspection Department

<b>BP2021-242</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Jerry Farless	<b>ISSUED:</b> 11/08/2021
<b>SITE ADDRESS:</b> 223 AYCOCK ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 05/07/2022

<b>APPLICANT:</b> REGAN, PATRICK 4112 N CROATAN HWY kitty hawk, nc 27949 816-655-2792	<b>OWNER:</b> FARLESS, JERRY L P O BOX 1194 KILL DEVIL HILLS, NC 27948
--	--


<b>UNLICENSED BUILDER:</b> REGAN, PATRICK 4112 N CROATAN HWY kitty hawk, nc 27949 816-655-2792	<b>License:</b> xxxxx <b>Expires:</b> 04/30/2022
---	---

**PARCEL:**

<b>PIN:</b> 988517110313	<b>Parcel Number:</b> 013195000
<b>Address:</b> 223 AYCOCK ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 27 <b>Lot(s):</b> 9-10
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** Replace stairs within existing footprint

 **PAID**  
11/15/21 DW  
CR # 10110

**BP2021-242**

**PROJECT NAME:** Jerry Farless  
**SITE ADDRESS:** 223 AYCOCK ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/08/2021

**EXPIRES:** 05/07/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3362.63
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.
- \* 6x6 pilings are required to be embedded 8 feet.

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

**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** Patrick Regan **Date:** 11 / 10 / 2021





# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BP2021-246</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 11/16/2021</b>
<b>SITE ADDRESS: 101 AVALON DR E KILL DEVIL HILLS</b>	<b>EXPIRES: 05/15/2022</b>

<b>APPLICANT:</b> Kenny Skees 773 52nd ST WEST NORFOLK, VA 23508 757-652-8998	<b>OWNER:</b> Kenny Skees 773 52nd ST WEST NORFOLK, VA 23508 757-652-8998
--	--

<b>UNLICENSED BUILDER:</b>	Surfside Construction 9506 S Old Oregon Inlet Rd. nags head, nc 27959 252-548-9253	<b>License:</b> Unlicensed <b>Expires:</b> 01/26/2029
----------------------------	---	--

**PARCEL:**

<b>PIN:</b> 988517200599	<b>Parcel Number:</b> 001696000
<b>Address:</b> 101 AVALON DR E KILL DEVIL HILLS	
<b>Addition:</b> AVALON BEACH	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 41

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

**PROJECT DESCRIPTION:** Build 6x8 landing and stair.

NOV 16 2021

NOV 16 2021

**BP2021-246****PROJECT NAME:****SITE ADDRESS:** 101 AVALON DR E KILL DEVIL HILLS**BUILDING****ISSUED:** 11/16/2021**EXPIRES:** 05/15/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4650.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

**CONDITIONS**

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

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

Issued By: \_\_\_\_\_

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

Date: 11.16.2021



# 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

**BP2021-247**

**PROJECT NAME:** Schroeder deck and stairs  
**SITE ADDRESS:** 108 BAKER AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/16/2021

**EXPIRES:** 05/15/2022

**APPLICANT:** Schroeder, Michael  
3692 Brannon Dr  
VA Beach, VA 23456  
757-270-4476

**OWNER:** Schroeder, Michael  
3692 Brannon Dr  
VA Beach, VA23456  
757-270-4476

**UNLICENSED BUILDER:** Surfside Construction  
115 ST CLAIR RD  
Kill Devil Hills, NC 27948  
252-548-9253

**License:** Unlicensed  
**Expires:** 01/26/2029

**PARCEL:**

**PIN:** 988419627274

**Parcel Number:** 003982000

**Address:** 108 BAKER AVE KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 44 **Lot(s):** 8

**Legal Description:**

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

**PROJECT DESCRIPTION:** Rebuild two decks and stairs

*"X" Flood Zone*

PAID

NOV 16 2021

**BP2021-247**

**PROJECT NAME:** Schroeder deck and stairs  
**SITE ADDRESS:** 108 BAKER AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/16/2021

**EXPIRES:** 05/15/2022

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

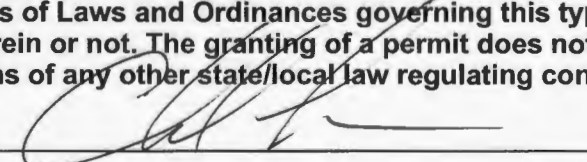
**REQUIRED INSPECTIONS**

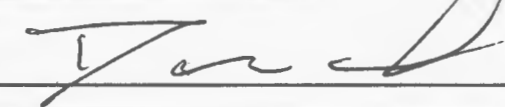
Slab/Foundation/Piling	Final
Zoning Final	

**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.
- \* Stairway required to be in compliance with R311.7.5 NCRBC.
- \* Plates required on pilings notched great than 50% per R4603.6 NCRBC.

**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:** 11.16.2021



# 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

**BP2021-245**

**PROJECT NAME:** Howell Stair Replacement and Deck Repair  
**SITE ADDRESS:** 223 WILKINSON ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/17/2021

**EXPIRES:** 05/16/2022

**APPLICANT:** Ian Froehlich  
101 Mann Court  
Kill Devil Hills, NC 27948  
202-0175

**OWNER:** Howell, Monte  
223 W Wilkinson Street  
Kill Devil Hills, NC 27948

**UNLICENSED - REMODELING:** Ian Froehlich  
101 Mann Court  
Kill Devil Hills, NC 27948  
202-0175

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

**PARCEL:**

**PIN:** 988513022731

**Parcel Number:** 000527000

**Address:** 223 WILKINSON ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 33 **Lot(s):** 8-10

**Legal Description:**

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

**PROJECT DESCRIPTION:** replace existing stairs to same footprint, and repair decking and rails

**PAID WITH CASH**

NOV 18 2021

**BP2021-245**

**PROJECT NAME:** Howell Stair Replacement and Deck Repair

**SITE ADDRESS:** 223 WILKINSON ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/17/2021

**EXPIRES:** 05/16/2022

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	James Baker
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

## Planning and Inspection Department

<b>BP2021-249</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> MANZANO STAIR AND RAILING	<b>ISSUED:</b> 11/19/2021
<b>SITE ADDRESS:</b> 207 AIRSTRIP RD W KILL DEVIL HILLS	<b>EXPIRES:</b> 05/18/2022


<b>APPLICANT:</b> MANZANO, SUSAN 9129 AUTOVILLE DR COLLEGE PARK, MD 20740 302-540-4206	<b>OWNER:</b> MANZANO, SUSAN 9129 AUTOVILLE DR COLLEGE PARK, MD 20740 302-540-4206
---	---

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

<b>PARCEL:</b>			
<b>PIN:</b> 988312864999	<b>Parcel Number:</b> 004384000		
<b>Address:</b> 207 AIRSTRIP RD W KILL DEVIL HILLS		<b>Zoning:</b>	
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 17	<b>Lot(s):</b> 7	
<b>Legal Description:</b>			

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

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

 **PAID**  
JB CLK  
11/22/21

**BP2021-249****PROJECT NAME:** MANZANO STAIR AND RAILING**SITE ADDRESS:** 207 AIRSTRIP RD W KILL DEVIL HILLS**BUILDING****ISSUED:** 11/19/2021**EXPIRES:** 05/18/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5500.00
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

PAID  
NOV 23 2021

## Planning and Inspection Department

**BP2021-250**

**PROJECT NAME:** Stull Piling Replacement  
**SITE ADDRESS:** 111 SPORTSMAN DR E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/19/2021

**EXPIRES:** 05/18/2022

**APPLICANT:** STULL, PHILLIP  
16900 Gossamer Dr  
MOSELEY, VA23120

**OWNER:** STULL, PHILLIP  
16900 Gossamer Dr  
MOSELEY, VA23120

**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:** 988517201994

**Parcel Number:** 001709000

**Address:** 111 SPORTSMAN DR E KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 56

**Legal Description:**

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

**PROJECT DESCRIPTION:** replace 13 pilings with 8x8x16

PAID  
11/24/21  
for pd

**BP2021-250****PROJECT NAME:** Stull Piling Replacement  
**SITE ADDRESS:** 111 SPORTSMAN DR E KILL DEVIL HILLS**BUILDING****ISSUED:** 11/19/2021**EXPIRES:** 05/18/2022**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	14200.00
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: Marty Shaw

Contractor or Authorized Agent: J. Lewis Date: 11 / 22 / 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

### BP2021-252

**PROJECT NAME:** Cristelle Stair Replacement  
**SITE ADDRESS:** 805 THIRD ST W KILL DEVIL HILLS

### BUILDING

**ISSUED:** 11/22/2021

**EXPIRES:** 05/21/2022

**APPLICANT:** Michael, Cristelle  
13722 Cabells Mill Dr  
centreville, va 20120  
703-314-3355

**OWNER:** Michael, Cristelle  
13722 Cabells Mill Dr  
centreville, va 20120  
703-314-3355

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

**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:** 988409165545

**Parcel Number:** 002502003

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

**Addition:** CROATAN SHORES INC SEC 1

**Zoning:**  
**Block:** 12      **Lot(s):** 3

**Legal Description:**

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

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

PAID

NOV 22 2021

TOWN OF  
KILL DEVIL HILLS

**BP2021-252****PROJECT NAME:** Cristelle Stair Replacement  
**SITE ADDRESS:** 805 THIRD ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 11/22/2021**EXPIRES:** 05/21/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2800.00
LOT COVERAGE	26.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Kirk Foreman
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

NOV 23 2021

## Planning and Inspection Department

<b>BP2021-253</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Wilkinson Retaining Wall	<b>ISSUED:</b> 11/23/2021
<b>SITE ADDRESS:</b> 404 FIRST ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 05/22/2022

**APPLICANT:** WILKINSON, NANCY  
404 First Street W  
Kill Devil Hills, NC 27948

**OWNER:** WILKINSON, NANCY  
404 First Street W  
Kill Devil Hills, NC 27948

**CONTRACTOR:** Tim Reese Construction Inc.  
128 Holly Ridge  
Manteo, NC 27954  
252-475-0421

<b>UNLICENSED - REMODELING:</b>	Tim Reese Construction Inc. 128 Holly Ridge Manteo, NC 27954 252-475-0421	<b>License:</b> abc <b>Expires:</b>
---------------------------------	--	--

**PARCEL:**

<b>PIN:</b> 988410259220	<b>Parcel Number:</b> 003204000
<b>Address:</b> 404 FIRST ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> FIRST FLIGHT VILLAGE SEC 2	<b>Block:</b> 0 <b>Lot(s):</b> 204
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** 3' retaining wall in rear yard

**BP2021-253****PROJECT NAME:** Wilkinson Retaining Wall  
**SITE ADDRESS:** 404 FIRST ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 11/23/2021**EXPIRES:** 05/22/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Donald E Wood L-1324
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

NOV 29 2021

## Planning and Inspection Department

**BP2021-251**

**PROJECT NAME:** Caccamise Deck Repair  
**SITE ADDRESS:** 113 BAKER AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/22/2021

**EXPIRES:** 05/21/2022

**APPLICANT:** CACCAMISE, PAUL L  
392 BARRY ROAD  
ROCHESTER, NY 14617

**OWNER:** CACCAMISE, PAUL L  
392 BARRY ROAD  
ROCHESTER, NY 14617

**CONTRACTOR:** Cressel Customs LLC  
965 Washington Street  
Manteo, NC 27954  
252-722-1340

**BUILDING:** Cressel Customs LLC  
965 Washington Street  
Manteo, NC 27954  
252-722-1340

**License:** 000000  
**Expires:** 02/28/2025

**PARCEL:**

**PIN:** 988419629144

**Parcel Number:** 003974000

**Address:** 113 BAKER AVE KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 43 **Lot(s):** 19

**Legal Description:**

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

**PROJECT DESCRIPTION:** replace deck boards and rails

**BP2021-251**

**PROJECT NAME:** Caccamise Deck Repair  
**SITE ADDRESS:** 113 BAKER AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 11/22/2021

**EXPIRES:** 05/21/2022

**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	12200.00
CONSTRUCTION TYPE	V
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: Mattson

Contractor or Authorized Agent: [Signature] 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

<b>BP2021-254</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Barba Deck Rebuild	<b>ISSUED:</b> 11/24/2021
<b>SITE ADDRESS:</b> 119 OCEAN BAY BLVD KILL DEVIL HILLS	<b>EXPIRES:</b> 05/23/2022

**APPLICANT:** BARBA, NICHOLAS F  
500 PINEY POINT ROAD  
YORKTOWN, VA 23692

**OWNER:** BARBA, NICHOLAS F  
500 PINEY POINT ROAD  
YORKTOWN, VA 23692

**CONTRACTOR:** JETTY CONSTRUCTION  
1002 W Dean st  
Kill Devil Hills, NC 27948  
252-715-1452

**BUILDING LIMITED:** JETTY CONSTRUCTION  
1002 W Dean st  
Kill Devil Hills, NC 27948  
252-715-1452

**License:** 79683  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988420709536

**Parcel Number:** 003846000

**Address:** 119 OCEAN BAY BLVD KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 36 **Lot(s):** PT 1 & 2

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Open Deck Fee	\$300.00	\$0.00	Open Decks	2 EA
Covered Porch Residential	\$56.25	\$0.00	Covered Porches/Decks	75 SQFT
<b>Totals :</b>	<b>\$356.25</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** rebuild upper and lower deck and staircase, no change to footprint

NOV 30 2021

**BP2021-254**

**PROJECT NAME:** Barba Deck Rebuild  
**SITE ADDRESS:** 119 OCEAN BAY BLVD KILL DEVIL HILLS

**BUILDING****ISSUED:** 11/24/2021**EXPIRES:** 05/23/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	7.5
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	23500.00
LOT COVERAGE	36.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Russell Claus L-5374
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

**CONDITIONS**

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

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



# Town of Kill Devil Hills

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

210

NOV 29 2021

## Planning and Inspection Department

<b>BP2021-255</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> PARSONS EXTERIOR REMODEL	<b>ISSUED:</b> 11/29/2021
<b>SITE ADDRESS:</b> 3115 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 05/28/2022

**APPLICANT:** PARSONS, JULIE  
P. O. BOX 1561  
nags head, nc 27959  
252-202-5854

**OWNER:** PARSONS, JULIE  
P. O. BOX 1561  
nags head, nc 27959  
252-202-5854

**BUILDING-UNLIMITED:** Aria Construction and Development, Inc  
PO Box 321  
CRESWELL, NC 27928  
252-796-7737

**License:** 78928  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988513143055

**Parcel Number:** 000860000

**Address:** 3115 VA DARE TRL N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** 0 **Lot(s):** 36,37

**Legal Description:**

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

**PROJECT DESCRIPTION:** REMODEL EXTERIOR, INCLUDING SIDING, SHINGLES, WINDOWS, DOORS, AND UNDERPINNING

**BP2021-255**

**PROJECT NAME:** PARSONS EXTERIOR REMODEL  
**SITE ADDRESS:** 3115 VA DARE TRL N KILL DEVIL HILLS

**BUILDING****ISSUED:** 11/29/2021**EXPIRES:** 05/28/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	40000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

\* 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.



# Town of Kill Devil Hills

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

PAID

NOV - 5 2021

## Planning and Inspection Department

**ZP2021-066**

**PROJECT NAME:** Gladden Fence  
**SITE ADDRESS:** 3312 RAYMOND AVE KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**APPLICANT:** GLADDEN, ERIC  
4900 S Chesterfield Rd  
ARLINGTON, VA 22206

**OWNER:** GLADDEN, ERIC  
4900 S Chesterfield Rd  
ARLINGTON, VA 22206

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

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

**PARCEL:**

**PIN:** 988509050170

**Parcel Number:** 000002000

**Address:** 3312 RAYMOND AVE KILL DEVIL HILLS

**Zoning:** RL

**Addition:** ORVILLE BEACH AMENDED BLK 3

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** fence around rear and side yard

PAID  
11/5/21  
Pro Bel

**ZP2021-066****PROJECT NAME:** Gladden Fence  
**SITE ADDRESS:** 3312 RAYMOND AVE KILL DEVIL HILLS**ZONING PERMIT****ISSUED:** 11/04/2021**EXPIRES:** 05/03/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	6000.00
SURVEYOR NAME AND NUMBER	William S, Jones L-2532
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: \_\_\_\_\_

*Ryan Lang*

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

*Eric L. Gladden*

Date: 11 / 04 / 2021



# Town of Kill Devil Hills

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

NOV - 4 2021

## Planning and Inspection Department

**ZP2021-067**

**PROJECT NAME:** Bridge Fence  
**SITE ADDRESS:** 501 CANAL DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**APPLICANT:** BRIDGE, JUDITH  
501 CANAL DR  
Kill Devil Hills, NC 27948

**OWNER:** BRIDGE, JUDITH  
501 CANAL DR  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988414345166

**Parcel Number:** 003313000

**Address:** 501 CANAL DR KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 1

**Zoning:**  
**Block:** 0 **Lot(s):** 24

**Legal Description:**

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

**PROJECT DESCRIPTION:** fence around rear and side yard

**ZP2021-067**

**PROJECT NAME:** Bridge Fence  
**SITE ADDRESS:** 501 CANAL DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	1000.00
SURVEYOR NAME AND NUMBER	Michael Barr L-1756
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.

**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:** 11/4/21





# Town of Kill Devil Hills

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

NOV - 4 2021

## Planning and Inspection Department

**ZP2021-065**

**PROJECT NAME:** Wooten Fence  
**SITE ADDRESS:** 526 HAYMAN BLVD W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**APPLICANT:** WOOTEN, WALTER  
526 Hayman Blvd  
Kill Devil Hills, NC 27948

**OWNER:** WOOTEN, WALTER  
526 Hayman Blvd  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 987520910334

**Parcel Number:** 028418000

**Address:** 526 HAYMAN BLVD W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 69 **Lot(s):** 32-34

**Legal Description:**

<b>FEES:</b>	<b><u>Paid</u></b>	<b><u>Due</u></b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** fence around rear and side yard

**ZP2021-065**

**PROJECT NAME:** Wooten Fence  
**SITE ADDRESS:** 526 HAYMAN BLVD W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
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**

\* 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:** 11/4/21



# Town of Kill Devil Hills

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

NOV - 2 2021

## Planning and Inspection Department

**ZP2021-063**

**PROJECT NAME:** MILLS FENCE  
**SITE ADDRESS:** 300 AIRSTRIP RD W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/29/2021

**EXPIRES:** 04/27/2022

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

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

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

**License:** Unlicensed  
**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:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** CONSTRUCT 6' FENCE ALONG PROPERTY LINE TO ENCLOSE REAR YARD

**ZP2021-063**

**PROJECT NAME:** MILLS FENCE

**SITE ADDRESS:** 300 AIRSTRIP RD W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/29/2021

**EXPIRES:** 04/27/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	3000.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

Stringline

**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: Jordan Blythe

Contractor or Authorized Agent: Living Mills Date: 11/01/2021



# Town of Kill Devil Hills

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

NOV 22 2021

## Planning and Inspection Department

**OP2021-077**

**PROJECT NAME:** Small Remodel  
**SITE ADDRESS:** 1700 BAY DR KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 11/22/2021

**EXPIRES:**

**PARENT PERMIT #:** BJ2020-211

**APPLICANT:** Small, Priscilla E.  
P O BOX 426  
KILL DEVIL HILLS, NC 27948  
252-449-5565

**OWNER:** Small, Priscilla E.  
P O BOX 426  
KILL DEVIL HILLS, NC 27948  
252-449-5565

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

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

**License:** 55566  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988413046916

**Parcel Number:** 002554000

**Address:** 1700 BAY DR KILL DEVIL HILLS

**Addition:** CROATAN SHORES INC SEC 1

**Zoning:**

**Block:** 0

**Lot(s):** 6-7& PT.  
BAY VIEW

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Raise and relocated existing house on same parcel, add 2 floors underneath

**OP2021-077**

**PROJECT NAME:** Small Remodel  
**SITE ADDRESS:** 1700 BAY DR KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 11/22/2021

**EXPIRES:**

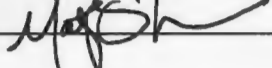
**DETAILS**

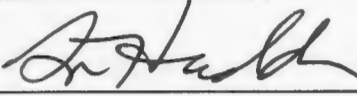
**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Addition
ZONING DISTRICT	RL
FLOOD ZONE	AE
BASE FLOOD ELEVATION	5
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: 11/22/2021



# Town of Kill Devil Hills

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

NOV 22 2021

## Planning and Inspection Department

**OP2021-076**

**PROJECT NAME:** Water Oak Residential LLC  
**SITE ADDRESS:** 1305 Harpoon Drive Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 11/19/2021

**EXPIRES:**

**PARENT PERMIT #:** BJ2021-026

**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

**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

**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:** 988414225854

**Parcel  
Number:**

**Address:** 1305 Harpoon Drive Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 26, Phase 1, Water Oak Residential Community

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**OP2021-076**

**PROJECT NAME:** Water Oak Residential LLC  
**SITE ADDRESS:** 1305 Harpoon Drive Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 11/19/2021

**EXPIRES:**

**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: Grace Munch Date: 11.24.2021





# 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

**OP2021-074**

**PROJECT NAME:** Dream Builders New House  
**SITE ADDRESS:** 2006 PHOEBUS ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED: 11/12/2021**

**EXPIRES:**

PARENT PERMIT #: BJ2021-067

**APPLICANT:** Dream Builders  
PO Box 33  
Kill Devil Hills, NC 27948  
252-573-8910

**OWNER:** Dream Builders  
PO Box 33  
Kill Devil Hills, NC 27948  
252-573-8910

**GENERAL BUILDING - UNLIMITED:** Dream Builders  
PO Box 33  
Kill Devil Hills, NC 27948  
252-573-8910

**License:** 75296  
**Expires:** 01/01/2022

**GENERAL BUILDING - UNLIMITED:** Dream Builders  
PO Box 33  
Kill Devil Hills, NC 27948  
252-573-8910

**License:** 75296  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988405087427

**Parcel Number:** 000906000

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

**Zoning:**

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

**Block:** 0 **Lot(s):** 1173

**Legal Description:**

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

**PAID**

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

NOV 12 2021

TOWN OF  
KILL DEVIL HILLS

**OP2021-074**

**PROJECT NAME:** Dream Builders New House  
**SITE ADDRESS:** 2006 PHOEBUS ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 11/12/2021

**EXPIRES:**

**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11/12/2021



# Town of Kill Devil Hills

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

NOV 17 2021

## Planning and Inspection Department

### OP2021-075

**PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 521 W. Palmetto Street Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 11/16/2021

**EXPIRES:**

PARENT PERMIT #: BJ2021-071

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

**OWNER:** OBX COTTAGES LLC  
200 EAST BLACKMAN ST  
nags head, nc 27959  
252-207-5475

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

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

### PARCEL:

**PIN:** 987408998955

**Parcel**  
**Number:**

**Address:** 521 W. Palmetto Street Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 11R, Block 75, Virginia Dare Shores Recombination

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**OP2021-075**

**PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 521 W. Palmetto Street Kill Devil Hills

**OCCUPANCY**

**ISSUED:** 11/16/2021

**EXPIRES:**

**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: \_\_\_\_\_

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

Date: 11-17-21



# Town of Kill Devil Hills

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

NOV 10 2021

## Planning and Inspection Department

**OP2021-073**

**PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 519 W. Palmetto St. Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 11/10/2021

**EXPIRES:**

**PARENT PERMIT #:** BJ2021-070

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

**OWNER:** OBX COTTAGES LLC  
200 EAST BLACKMAN ST  
nags head, nc 27959  
252-207-5475

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

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

**PARCEL:**

**PIN:** 987408999909

**Parcel Number:**

**Address:** 519 W. Palmetto St. Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 12R, Block 75, Virginia Dare Shores Subdivision

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**OP2021-073**

**PROJECT NAME:** OBX Cottages LLC  
**SITE ADDRESS:** 519 W. Palmetto St. Kill Devil Hills

**OCCUPANCY**

**ISSUED:** 11/10/2021

**EXPIRES:**

**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent:  Date: 11-10-21



# Town of Kill Devil Hills

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

PAID

NOV - 9 2021

## Planning and Inspection Department

### OP2021-072

**PROJECT NAME:** Southwood Management, Inc.  
**SITE ADDRESS:** 1005 LISA CT KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 11/09/2021

**EXPIRES:**

PARENT PERMIT #: BJ2021-074

**APPLICANT:** CHRISTOPHER ZAPPULLA  
107 Sir John White CT  
K D H, NC 27948

**OWNER:** Southwood Management, Inc.  
5031 Pitzer Rd.  
ROANOKE, VA 24014  
540-353-6886

**RESIDENTIAL-LIMITED:** ZAPPULLA, Christopher  
107 Sir John White CT  
Kill Devil Hills, NC 27948  
252-581-0107

**License:** 39968  
**Expires:** 01/01/2022

### PARCEL:

**PIN:** 988405076619

**Parcel Number:** 002184000

**Address:** 1005 LISA CT KILL DEVIL HILLS

**Zoning:**

**Addition:** WRIGHT'S SHORES

**Block:** 0 **Lot(s):** 88

**Legal Description:**

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**OP2021-072**

**PROJECT NAME:** Southwood Management, Inc.  
**SITE ADDRESS:** 1005 LISA CT KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 11/09/2021

**EXPIRES:**

**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: \_\_\_\_\_

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

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

11-9-21





# Town of Kill Devil Hills

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

NOV - 5 2021

## Planning and Inspection Department

### OP2021-043

**PROJECT NAME:** Group Holdings New House  
**SITE ADDRESS:** 600 AIRSTRIP RD W KILL DEVIL HILLS

### OCCUPANCY

**ISSUED:** 07/23/2021

**EXPIRES:**

**PARENT PERMIT #:** BJ2021-030

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

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

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

**GENERAL, UNLIMITED:**

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

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

**PARCEL:**

**PIN:** 988312766208

**Parcel Number:** 004512000

**Address:** 600 AIRSTRIP RD W KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 40 **Lot(s):** 4

**Legal Description:**

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** New 7 Bedroom SFD

**OP2021-043**

**PROJECT NAME:** Group Holdings New House  
**SITE ADDRESS:** 600 AIRSTRIP RD W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 07/23/2021

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
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:** Walt Spaw **Date:** 11/5/21



# Town of Kill Devil Hills

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

NOV - 1 2021

## Planning and Inspection Department

**OP2021-071**

**PROJECT NAME:** Cross New House  
**SITE ADDRESS:** 1101 AVALON DR W KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 11/01/2021

**EXPIRES:**

**PARENT PERMIT #:** BJ2021-007

**APPLICANT:** Cross, David  
4013 seaford rd  
SEAFORD, VA 23696  
757-268-6146

**OWNER:** Cross, David  
4013 seaford rd  
SEAFORD, VA 23696  
757-268-6146

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

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

**PARCEL:**

**PIN:** 987408997248

**Parcel Number:** 001629000

**Address:** 1101 AVALON DR W KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 275

**Legal Description:**

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

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

**OP2021-071**

**PROJECT NAME:** Cross New House  
**SITE ADDRESS:** 1101 AVALON DR W KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 11/01/2021  
**EXPIRES:**

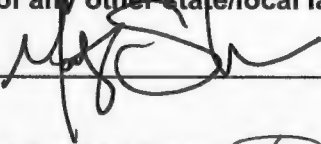
**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent:  Date: 11/1/2021



# Town of Kill Devil Hills

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

PAID

NOV 19 2021

## Planning and Inspection Department

<b>EL2021-094</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 11/18/2021</b>
<b>SITE ADDRESS: 1503 VA DARE TRL S KILL DEVIL HILLS</b>	<b>EXPIRES: 05/17/2022</b>

**APPLICANT:** Crutchfield, Michael  
8443 Highway 1  
South Hill, VA 27948

**OWNER:** Crutchfield, Michael  
8443 HWY 1  
SOUTH HILL, VA 23970

**ELECTRICAL-UNLIMITED:** DAVCO ELECTRIC INC.  
406 W Lake Drive  
Kill Devil Hills, NC 27948  
441-4106

**License:** 04354  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 989309151948

**Parcel Number:** 008234000

**Address:** 1503 VA DARE TRL S KILL DEVIL HILLS

**Zoning:**

**Addition:** OCEAN ACRES INC

**Block:** 0 **Lot(s):** PT PAR.A

**Legal Description:**

FEES:	<u>Paid</u>	<u>Due</u>
Electrical Permit Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Install t-pole

PAID  
11/19/21  
Check # 1269

**EL2021-094**

**PROJECT NAME:**

**SITE ADDRESS:** 1503 VA DARE TRL S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11

**REQUIRED INSPECTIONS**

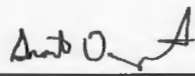
Final

**CONDITIONS**

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

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

**Issued By:** Charles Thuman

**Contractor or Authorized Agent:**  **Date:** 11 / 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

**EL2021-091**

**PROJECT NAME:** Gerald Jordan  
**SITE ADDRESS:** 1832 BAY DR KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/25/2021

**EXPIRES:** 04/23/2022

**APPLICANT:** Titan Solar Power NC Inc.  
525 W. Baseline Road  
MESA, AZ 85210  
980-285-3407

**OWNER:** JORDAN, GERALD H  
4217 MERCEDES COURT  
VIRGINIA BEACH, VA23455

**GENERAL:** Titan Solar Power NC Inc.  
525 W. Baseline Road  
MESA, AZ 85210  
980-285-3407

**License:** 33714  
**Expires:** 10/31/2022

**PARCEL:**

**PIN:** 988409060727

**Parcel Number:** 002275000

**Address:** 1832 BAY DR KILL DEVIL HILLS

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

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Rooftop Solar Installation

### DETAILS

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
CONSTRUCTION COST	35520.00
FLOOD ZONE	AE
OCCUPANCY TYPE	One & Two Family Dwelling

NOV - 9 2021

**EL2021-091**

**PROJECT NAME:** Gerald Jordan  
**SITE ADDRESS:** 1832 BAY DR KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/25/2021

**EXPIRES:** 04/23/2022

**REQUIRED INSPECTIONS**

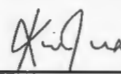
Final

**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.
- \* Contractor must submit all required documentation as required by NCOSFM prior to 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:** Charles Thuman

**Contractor or Authorized Agent:**  **Date:** 10/27/2021





# Town of Kill Devil Hills

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

NOV - 5 2021

## Planning and Inspection Department

**EL2021-093**

**PROJECT NAME:** Reed Electric  
**SITE ADDRESS:** 101 FERRIS AVE KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 11/05/2021

**EXPIRES:** 05/04/2022

**APPLICANT:** Reed, Josh  
101 Ferris Ave  
Kill Devil Hills, NC 27948  
903-360-2602

**OWNER:** Reed, Josh  
101 Ferris Ave  
Kill Devil Hills, NC 27948  
903-360-2602

**ELECTRICAL-I:** SPECIALTY ELECTRICAL CONTRACTORS, INC. **License:** 24891-I  
104 Waterway CT **Expires:** 08/22/2022  
Aydlett, NC 27916  
252-599-0163

**PARCEL:**

**PIN:** 988419625254 **Parcel Number:** 003987000  
**Address:** 101 FERRIS AVE KILL DEVIL HILLS  
**Addition:** KITTY HAWK SHORES - REVISED **Zoning:**  
**Block:** 44 **Lot(s):** 13  
**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace overhead service and panel

" X<sup>th</sup> Flood zone

**EL2021-093**

**PROJECT NAME:** Reed Electric  
**SITE ADDRESS:** 101 FERRIS AVE KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 11/05/2021

**EXPIRES:** 05/04/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
NCP PROJECT #	33136186
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1100.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: \_\_\_\_\_

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

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



# Town of Kill Devil Hills

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

PAID

NOV - 3 2021

## Planning and Inspection Department

<b>ZP2021-064</b>	<b>PAID WITH CASH</b>	<b>ZONING PERMIT</b>
<b>PROJECT NAME:</b> Lane Fence		<b>ISSUED:</b> 11/03/2021
<b>SITE ADDRESS:</b> 1003 CARDINAL ST KILL DEVIL HILLS		<b>EXPIRES:</b> 05/02/2022

**APPLICANT:** LANE, DEREK  
1003 CARDINAL STREET  
Kill Devil Hills, NC 27948

**OWNER:** LANE, DEREK  
1003 CARDINAL STREET  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988312870181

**Parcel Number:** 004412000

**Address:** 1003 CARDINAL ST KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 22      **Lot(s):** 9

**Legal Description:**

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

**PROJECT DESCRIPTION:** fence around rear and side yard

*\$1000.00*

**ZP2021-064**

**PROJECT NAME:** Lane Fence

**SITE ADDRESS:** 1003 CARDINAL ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/03/2021

**EXPIRES:** 05/02/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

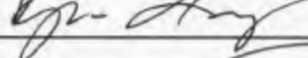
Final


**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.

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: 11/3/21



# Town of Kill Devil Hills

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

PAID  
WITH  
CASH

NOV 23 2021

## Planning and Inspection Department

**ZP2021-069**

**PROJECT NAME:** Leonard Fence  
**SITE ADDRESS:** 2407 BAY DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/24/2021

**EXPIRES:** 05/23/2022

**APPLICANT:** Cliff Leonard  
2407 Bay Dr.  
Kill Devil Hills, NC 27948  
252-202-1981

**OWNER:** Cliff Leonard  
2407 Bay Dr.  
Kill Devil Hills, NC 27948  
252-202-1981

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

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

**PARCEL:**

**PIN:** 987520809292

**Parcel Number:** 000730000

**Address:** 2407 BAY DR KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 78 **Lot(s):** 1

**Legal Description:**

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

**PROJECT DESCRIPTION:** fence across rear yard

*Value \$1,000.00*

**ZP2021-069****PROJECT NAME:** Leonard Fence**SITE ADDRESS:** 2407 BAY DR KILL DEVIL HILLS**ZONING PERMIT****ISSUED:** 11/24/2021**EXPIRES:** 05/23/2022**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	WL Norris Jr L-4554
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.

**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

**ZP2021-071**

**PROJECT NAME:** RHODES FENCE  
**SITE ADDRESS:** 407 SUFFOLK ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/30/2021

**EXPIRES:** 05/29/2022

**APPLICANT:** RHODES, JORDAN  
407 SUFFOLK ST  
Kill Devil Hills, NC 27948  
252-202-0190

**OWNER:** RHODES, JORDAN  
407 SUFFOLK ST  
Kill Devil Hills, NC 27948  
252-202-0190

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

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

**PARCEL:**

**PIN:** 988405192853

**Parcel Number:** 001118000

**Address:** 407 SUFFOLK ST KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 908

**Legal Description:**

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

**PROJECT DESCRIPTION:** CONSTRUCT 6' FENCE ALONG PROPERTY LINE

NOV 30 2021

**ZP2021-071**

**PROJECT NAME:** RHODES FENCE  
**SITE ADDRESS:** 407 SUFFOLK ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/30/2021

**EXPIRES:** 05/29/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	3000.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

Stringline

**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: 11/30/2021





# Town of Kill Devil Hills

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

NOV 30 2021

## Planning and Inspection Department

<b>ZP2021-070</b>	<b>ZONING PERMIT</b>
<b>PROJECT NAME:</b> Rabbitt Fence	<b>ISSUED:</b> 11/29/2021
<b>SITE ADDRESS:</b> 531 EDEN STREET W Kill Devil Hills	<b>EXPIRES:</b> 05/28/2022

<b>APPLICANT:</b> Sam Wright and Sons Fence Co 1103 Boundary Street Kill Devil Hills, NC 27948	<b>OWNER:</b> RABBITT, MATTHEW 531 EDEN STREET W Kill Devil Hills, NC 27948
--	---

<b>UNLICENSED BUILDER:</b> Sam Wright and Sons Fence Co 1103 Boundary Street Kill Devil Hills, NC 27948	<b>License:</b> 12345 <b>Expires:</b>
---	--

**PARCEL:**

<b>PIN:</b> 987520906203	<b>Parcel Number:</b>
<b>Address:</b> 531 EDEN STREET W Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> <b>Lot(s):</b>
<b>Legal Description:</b> Lots 5 & 6, Block 74, Virginia Dare Shores	

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

**PROJECT DESCRIPTION:** fence around rear and side yard

**ZP2021-070**

**PROJECT NAME:** Rabbitt Fence  
**SITE ADDRESS:** 531 EDEN STREET W Kill Devil Hills

**ZONING PERMIT**

**ISSUED:** 11/29/2021

**EXPIRES:** 05/28/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	5300.00
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
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.

**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:** [Signature] **Date:** 11 / 29 / 2021



# Town of Kill Devil Hills

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

PAID  
WITH  
CASH

NOV 24 2021

## Planning and Inspection Department

**ZP2021-068**

**PROJECT NAME:** Bernard Fence  
**SITE ADDRESS:** 210 WALKER ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/24/2021

**EXPIRES:** 05/23/2022

**APPLICANT:** Bernard, Bradford  
1915 Helen Lane  
Kill Devil Hills, NC 27948

**OWNER:** Bernard, Bradford  
1915 Helen Lane  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988517019705

**Parcel Number:** 000494000

**Address:** 210 WALKER ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 29      **Lot(s):** 26-28

**Legal Description:**

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

**PROJECT DESCRIPTION:** fence around rear and side yard

**ZP2021-068**

**PROJECT NAME:** Bernard Fence  
**SITE ADDRESS:** 210 WALKER ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 11/24/2021

**EXPIRES:** 05/23/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	1000.00
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
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.

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: 11/24/21



# Town of Kill Devil Hills

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

1200

Planning and Inspection Department

NOV 17 2021

**ZP2021-062**

**PROJECT NAME:** Holmes Fence Replacement  
**SITE ADDRESS:** 533 CHOWAN ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/29/2021

**EXPIRES:** 04/27/2022

**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

**PARCEL:**

**PIN:** 987520817691

**Parcel Number:** 000703000

**Address:** 533 CHOWAN ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 68 **Lot(s):** 4-6

**Legal Description:**

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

**PROJECT DESCRIPTION:** replace existing fence to same layout

**ZP2021-062**

**PROJECT NAME:** Holmes Fence Replacement  
**SITE ADDRESS:** 533 CHOWAN ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/29/2021

**EXPIRES:** 04/27/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	5000.00
SURVEYOR NAME AND NUMBER	Ray Meekins
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

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.

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: 11-17-21



# Town of Kill Devil Hills

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

NOV - 4 2021

## Planning and Inspection Department

**MC2021-297**

**PROJECT NAME:** Unit H

**SITE ADDRESS:** 2400 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED: 10/20/2021**

**EXPIRES: 04/18/2022**

PARENT PERMIT #: MC2021-296

**APPLICANT:** OVERSEAS PROFESSIONAL  
CENTER PROPERTY OWNERS  
KILL DEVIL HILLS, NC 27948

**OWNER:** OVERSEAS PROFESSIONAL  
CENTER PROPERTY OWNERS  
KILL DEVIL HILLS, NC 27948

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

Anderson Heating and Cooling Co., LLC  
PO Box 396  
Kitty Hawk, NC 27949  
252-619-3105

**License:** 31438  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98851711344600

**Parcel Number:** 009113999

**Address:** 2400 CROATAN HWY N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** 0

**Lot(s):** COMMON PROP.

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC replacement

**PAID**  
11/3/21  
CK# 0285

**MC2021-297**

PROJECT NAME: Unit H

SITE ADDRESS: 2400 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 10/20/2021

EXPIRES: 04/18/2022

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7345.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: \_\_\_\_\_

*Marty Shaw*

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

*Gil Anderson*

Date: 10/20/2021





**Town of Kill Devil Hills**

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

NOV - 4 2021

**Planning and Inspection Department**

<b>MC2021-296</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Unit A	<b>ISSUED:</b> 10/20/2021
<b>SITE ADDRESS:</b> 2400 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 04/18/2022

**APPLICANT:** OVERSEAS PROFESSIONAL  
CENTER PROPERTY OWNERS  
KILL DEVIL HILLS, NC 27948

**OWNER:** OVERSEAS PROFESSIONAL  
CENTER PROPERTY OWNERS  
KILL DEVIL HILLS, NC 27948

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

Anderson Heating and Cooling Co., LLC  
PO Box 396  
Kitty Hawk, NC 27949  
252-619-3105

**License:** 31438  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98851711344600

**Parcel Number:** 009113999

**Address:** 2400 CROATAN HWY N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** 0

**Lot(s):** COMMON  
PROP.

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC replacement

**PAID**  
11/3/21  
CK# 0285

**MC2021-296**

**PROJECT NAME:** Unit A

**SITE ADDRESS:** 2400 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/20/2021

**EXPIRES:** 04/18/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7289.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Gil Anderson Date: 10 / 20 / 2021



# Town of Kill Devil Hills

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

NOV - 8 2021

## Planning and Inspection Department

<b>MC2021-302</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Seigler HVAC	<b>ISSUED:</b> 11/05/2021
<b>SITE ADDRESS:</b> 101 ROCKY MOUNT ST KILL DEVIL HILLS	<b>EXPIRES:</b> 05/04/2022

<b>APPLICANT:</b> JANE SEIGLER 4108 Duke Dr PORTSMOUTH, VA 23703 757-373-3579	<b>OWNER:</b> JANE SEIGLER 4108 Duke Dr PORTSMOUTH, VA 23703 757-373-3579
--	--

<b>MECHANICAL, PLUMBING, ELECTRICAL:</b> CHRIS'S ELECTRICAL AND MECHANICAL, LLC 2039 Newbern St. Kill Devil Hills,, NC 27948 480-0738	<b>License:</b> 20044 H-3, P, 22217-L <b>Expires:</b> 12/31/2021
--	---

**PARCEL:**

<b>PIN:</b> 988517203128	<b>Parcel Number:</b> 001929000
<b>Address:</b> 101 ROCKY MOUNT ST KILL DEVIL HILLS	
<b>Addition:</b> AVALON BEACH ANNEX 1	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 493

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

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

**PAID**  
11/5/21  
for bal

**MC2021-302**

**PROJECT NAME:** Seigler HVAC

**SITE ADDRESS:** 101 ROCKY MOUNT ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/05/2021

**EXPIRES:** 05/04/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Christopher J Sterner Date: 11 / 05 / 2021



# Town of Kill Devil Hills

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

PAID

NOV - 9 2021

## Planning and Inspection Department

**MC2021-301**

**PROJECT NAME:** WHITE HVAC  
**SITE ADDRESS:** 3100 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**APPLICANT:** WHITE, K GLENN  
46 BLUE STONE DRIVE  
CHADDS FORD, PA 19317

**OWNER:** WHITE, K GLENN  
46 BLUE STONE DRIVE  
CHADDS FORD, PA 19317

**PLUMBING, MECHANICAL:** NORRIS MECHANICAL  
P.O. Box 217  
HARBINGER, NC 27941  
252-491-2673

**License:** 11100  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988513133541

**Parcel Number:** 031005000

**Address:** 3100 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 10 **Lot(s):** 4

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT 2 UNITS, WORK DONE WITHOUT PERMITS, CURRENT LOCATION IS NOT APPROVED AS IT IMPEDES EGRESS REQUIREMENTS, MUST HAVE CLEAR 36" FROM NOSING OF STAIR



PAID

*JB* *paid*  
11/9/21

**MC2021-301**

**PROJECT NAME:** WHITE HVAC  
**SITE ADDRESS:** 3100 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/04/2021

**EXPIRES:** 05/03/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	15625.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AO
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:** Jordan Blythe

**Contractor or Authorized Agent:** Henry B. [Signature] **Date:** 11 / 09 / 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

**MC2021-303**

**PROJECT NAME:** Alger HVAC  
**SITE ADDRESS:** 1412 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/09/2021

**EXPIRES:** 05/08/2022

**APPLICANT:** ALGER, TERRENCE F  
102 Reserve Green Dr  
MOREHEAD CITY, NC 28557  
585-742-8544

**OWNER:** ALGER, TERRENCE F  
102 Reserve Green Dr  
MOREHEAD CITY, NC 28557  
585-742-8544

**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:** 989309054747

**Parcel Number:** 004736009

**Address:** 1412 MEMORIAL BLVD S KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL BEACH SEC 1 REVISED

**Block:** H **Lot(s):** 9

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC system

PAID

NOV 12 2021

TOWN OF  
KILL DEVIL HILLS

**MC2021-303**

**PROJECT NAME:** Alger HVAC  
**SITE ADDRESS:** 1412 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/09/2021

**EXPIRES:** 05/08/2022

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6277.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

---

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11-12-21





# Town of Kill Devil Hills

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

NOV 15 2021

## Planning and Inspection Department

**MC2021-306**

**PROJECT NAME:**

**SITE ADDRESS:** 1713 SOBLE DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

**APPLICANT:** Coastal Elements  
172 Bean Landing Rd.  
Harbinger, NC 27941  
252-548-4202

**OWNER:** CHAMBERS, GEORGE & ARIEL  
15602 STEAMBOAT WAY  
SILVER SPRING, MD 20906

**MECHANICAL H-3 CLASS 1:** Coastal Elements  
172 Bean Landing Rd.  
Harbinger, NC 27941  
252-548-4202

**License:** 32607  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988410473146

**Parcel Number:** 002926000

**Address:** 1713 SOBLE DR KILL DEVIL HILLS

**Addition:** HEDRICKS ADD-PAR B CROATAN SH

**Zoning:**  
**Block:** 0 **Lot(s):** 11

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace mini split system

**PAID**  
11/15/21 by  
paypal

**MC2021-306**

**PROJECT NAME:**

**SITE ADDRESS:** 1713 SOBLE DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: BRF Date: 11 / 12 / 2021



# Town of Kill Devil Hills

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

NOV 16 2021

## Planning and Inspection Department

**MC2021-304**

**PROJECT NAME:** Gregory Davis  
**SITE ADDRESS:** 1323 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

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

**OWNER:** Davis, Gregory and Kelly  
34 Merry Lane  
WESTON, CT 06883

**MECHANICAL, H-3, I:** AIR HANDLERS OBX  
8788 Caratoke Hwy  
Harbinger, NC 27941  
252-216-8945

**License:** 23577  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 98841564493933

**Parcel Number:**

**Address:** 1323 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Croatan Surf Club - Unit 4J

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

**PROJECT DESCRIPTION:** HVAC

**PAID**  
11/16/21  
check # 1128

**MC2021-304****PROJECT NAME:** Gregory Davis  
**SITE ADDRESS:** 1323 VA DARE TRL N KILL DEVIL HILLS**MECHANICAL****ISSUED:** 11/12/2021**EXPIRES:** 05/11/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7216.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

---

**CONDITIONS**

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

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

**Issued By:** Charles Thuman**Contractor or Authorized Agent:** Linda Burgess **Date:** 11 / 12 / 2021



# Town of Kill Devil Hills

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

NOV 18 2021

## Planning and Inspection Department

**MC2021-308**

**PROJECT NAME:**

**SITE ADDRESS:** 1701 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/16/2021

**EXPIRES:** 05/15/2022

**APPLICANT:** JOHNSTON, ELIZABETH M  
107 CARDINAL COURT  
WILLIAMSBURG, VA 23185

**OWNER:** JOHNSTON, ELIZABETH M  
107 CARDINAL COURT  
WILLIAMSBURG, VA 23185

**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:** 98841157138108

**Parcel Number:** 028091000

**Address:** 1701 VA DARE TRL N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** C

**Lot(s):** UNIT 3B LT  
17-19

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC replacement

139  
**PAID**  
R 11/18/21  
Ray Bell

**MC2021-308**

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 11/16/2021

EXPIRES: 05/15/2022

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5370.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

---

**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 ShawContractor or Authorized Agent: Andrew L Buchanan Date: 11 / 17 / 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

**MC2021-311**

**PROJECT NAME:** JACOCKS HVAC  
**SITE ADDRESS:** 1233 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**APPLICANT:** JACOCKS, SYLVIA GREEN  
206 W. Wood Hill Dr.  
nags head, nc 27959  
252-423-2230

**OWNER:** JACOCKS, SYLVIA GREEN  
206 W. Wood Hill Dr.  
nags head, nc 27959  
252-423-2230

**MECHANICAL:** Trademark Heating & Cooling  
PO Box 2554  
Kill Devil Hills, NC 27948  
252-564-4601

**License:** 31311  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 989309075094

**Parcel Number:** 004659000

**Address:** 1233 VA DARE TRL S KILL DEVIL HILLS

**Addition:** KILL DEVIL BEACH SEC 1 REVISED

**Zoning:**

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT 1233B

PAID

NOV 18 2021

**MC2021-311**

**PROJECT NAME:** JACOCKS HVAC  
**SITE ADDRESS:** 1233 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

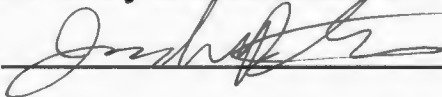
**REQUIRED INSPECTIONS**

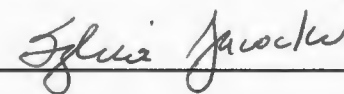
Final

**CONDITIONS**

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

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

**Issued By:** 

**Contractor or Authorized Agent:**  **Date:** 11/18/21





# 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

**MC2021-307**

**PROJECT NAME:** Daniels HVAC  
**SITE ADDRESS:** 1302 Tranquil Place Kill Devil Hills

**MECHANICAL**

**ISSUED:** 11/15/2021

**EXPIRES:** 05/14/2022

**APPLICANT:** Daniels, Brian  
1016 Pennington Dr  
LANCASTER, SC 29720

**OWNER:** Daniels, Brian  
1016 Pennington Dr  
LANCASTER, SC 29720

**H-3, CLASS 2:** OBX Air Pro's Heating and Cooling  
197 WEST MOBILE  
HARBINGER, NC 27941  
252-435-8782

**License:** 29480  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988413221545

**Parcel Number:**

**Address:** 1302 Tranquil Place Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 64, Phase 1, Water Oak Residential Community

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

**PROJECT DESCRIPTION:** Install mini split in garage

PAID  
11/19/21  
By Paul

**MC2021-307**

**PROJECT NAME:** Daniels HVAC  
**SITE ADDRESS:** 1302 Tranquil Place Kill Devil Hills

**MECHANICAL**

**ISSUED:** 11/15/2021

**EXPIRES:** 05/14/2022

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

---

**CONDITIONS**

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Lee Guthrie Date: 11 / 18 / 2021



# Town of Kill Devil Hills

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

NOV 19 2021

## Planning and Inspection Department

**MC2021-312**

**PROJECT NAME:** Glass HVAC  
**SITE ADDRESS:** 328 EDEN ST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**APPLICANT:** GLASS, HARVEY JAY  
1701 J BIRCH TRAIL CIRCLE  
CHESAPEAKE, VA 23320

**OWNER:** GLASS, HARVEY JAY  
1701 J BIRCH TRAIL CIRCLE  
CHESAPEAKE, VA 23320

**CONTRACTOR:** NORRIS MECHANICAL  
P.O. Box 217  
HARBINGER, NC 27941  
252-491-2673

**PLUMBING, MECHANICAL:** NORRIS MECHANICAL  
P.O. Box 217  
HARBINGER, NC 27941  
252-491-2673

**License:** 11100  
**Expires:** 12/31/2021

**PARCEL:**

**PIN:** 988517004992

**Parcel Number:** 000611000

**Address:** 328 EDEN ST ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 47 **Lot(s):** 35-36

**Legal Description:**

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

**PROJECT DESCRIPTION:** New 2 Ton HVAC System



**PAID**

11/19/21

*JB*

*Pay Paid*

**MC2021-312**

**PROJECT NAME:** Glass HVAC

**SITE ADDRESS:** 328 EDEN ST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6350.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

**Issued By:** Jordan Blythe

**Contractor or Authorized Agent:** Henry B. Now **Date:** 11 / 18 / 2021



# Town of Kill Devil Hills

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

PAD

Planning and Inspection Department

NOV 19 2021

## MC2021-310

PROJECT NAME: BRINKLEY HVAC  
SITE ADDRESS: 2024 WRIGHTSVILLE BLVD KILL DEVIL HILLS

## MECHANICAL

ISSUED: 11/18/2021

EXPIRES: 05/17/2022

**APPLICANT:** Russell Brinkley  
2024 Wrightsville Blvd.  
Kill Devil Hills, NC 27948  
757-298-6042

**OWNER:** Russell Brinkley  
2024 Wrightsville Blvd.  
Kill Devil Hills, NC 27948  
757-298-6042

**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:** 989313132480

**Parcel Number:** 008351001

**Address:** 2024 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**Addition:** Fresh Pond Beaches

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

**MC2021-310**

**PROJECT NAME:** BRINKLEY HVAC  
**SITE ADDRESS:** 2024 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/18/2021

**EXPIRES:** 05/17/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

**Issued By:** \_\_\_\_\_

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

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

11-19-21



# Town of Kill Devil Hills

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

1719

## Planning and Inspection Department

NOV 24 2021

<b>MC2021-315</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> MCLANE HVAC	<b>ISSUED:</b> 11/24/2021
<b>SITE ADDRESS:</b> 1714 MEMORIAL BLVD S KILL DEVIL HILLS	<b>EXPIRES:</b> 05/23/2022

<b>APPLICANT:</b> SHAWN MCLANE 12314 Ashton Mill Terrace Glen Allen, va 23059 804-405-3085	<b>OWNER:</b> SHAWN MCLANE 12314 Ashton Mill Terrace Glen Allen, va 23059 804-405-3085
---	---

<b>H-3, CLASS I:</b>	ISLAND HEATING AND COOLING UNKNOWN UNKNOWN, XX 00000 252-305-5048	<b>License:</b> 22354 <b>Expires:</b> 12/31/2021
----------------------	--	---

**PARCEL:**

PIN: 989313049827	Parcel Number: 008270000
Address: 1714 MEMORIAL BLVD S KILL DEVIL HILLS	
Addition: OCEAN ACRES INC	Zoning: Block: 0 Lot(s): 99-100
Legal Description:	

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

**MC2021-315**

**PROJECT NAME:** MCLANE HVAC

**SITE ADDRESS:** 1714 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/24/2021

**EXPIRES:** 05/23/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5510.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

**Issued By:** 

**Contractor or Authorized Agent:** 

**Date:** 11-24-21





## 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

**MC2021-316**

**PROJECT NAME:**

**SITE ADDRESS:** 602 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/24/2021

**EXPIRES:** 05/23/2022

**APPLICANT:** Durko, John  
602 West First Street  
Kill Devil Hills, NC 27948  
540-631-8857

**OWNER:** Durko, John  
602 West First Street  
Kill Devil Hills, NC 27948  
540-631-8857

**H-3, CLASS 1:** Phelps Heating and Air Cond  
89 Shore DR  
CRESWELL, NC 27928  
252-796-7776

**License:** 22218  
**Expires:** 12/31/2022

**PARCEL:**

**PIN:** 988409157016

**Parcel Number:** 003284000

**Address:** 602 FIRST ST W KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 2

**Zoning:**

**Block:** 0 **Lot(s):** 320

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC replacement

NOV 24 2021

**MC2021-316**

**PROJECT NAME:**

**SITE ADDRESS:** 602 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 11/24/2021

**EXPIRES:** 05/23/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent: Brad Phelps Date: 11/24/2021



# Town of Kill Devil Hills

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

NOV 10 2021

## Planning and Inspection Department

**EG2021-021**

**EXCAVATION AND GRADING**

**PROJECT NAME:** Carl Worsley Land Disturbance  
**SITE ADDRESS:** 408 CANAL DR Kill Devil Hills

**ISSUED:** 11/09/2021  
**EXPIRES:** 05/08/2022

**APPLICANT:** CARL WORSLEY & ASSOCIATES, INC  
PO BOX 188  
nags head, nc 27959

**OWNER:** CARL WORSLEY & ASSOCIATES, INC  
PO BOX 188  
nags head, nc 27959

**GENERAL, UNLIMITED:** CARL WORSLEY & ASSOCIATES  
PO Box 188  
Nags Head, NC 27959  
252-423-0445

**License:** 58569  
**Expires:** 01/01/2022

**PARCEL:**

**PIN:** 988414346326

**Parcel Number:**

**Address:** 408 CANAL DR Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 164, First Flight Village, Sec 1

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

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

**EG2021-021**

**PROJECT NAME:** Carl Worsley Land Disturbance

**SITE ADDRESS:** 408 CANAL DR Kill Devil Hills

**EXCAVATION AND GRADING**

**ISSUED:** 11/09/2021

**EXPIRES:** 05/08/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	7000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	X
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592

**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:** 11/11/21



# Town of Kill Devil Hills

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

NOV 10 2021

## Planning and Inspection Department

### EG2021-022

**PROJECT NAME:** Carl Worsley Land Disturbance  
**SITE ADDRESS:** 406 CANAL DR Kill Devil Hills

### EXCAVATION AND GRADING

**ISSUED:** 11/09/2021

**EXPIRES:** 05/08/2022

**APPLICANT:** CARL WORSLEY & ASSOCIATES, INC  
PO BOX 188  
nags head, nc 27959

**OWNER:** CARL WORSLEY & ASSOCIATES, INC  
PO BOX 188  
nags head, nc 27959

**GENERAL, UNLIMITED:** CARL WORSLEY & ASSOCIATES  
PO Box 188  
Nags Head, NC 27959  
252-423-0445

**License:** 58569  
**Expires:** 01/01/2022

#### PARCEL:

**PIN:** 988414346399

**Parcel  
Number:**

**Address:** 406 CANAL DR Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 165, First Flight Village Sec 1

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

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

### DETAILS

#### Permit

Name	Value
ESTIMATED CONSTRUCTION COST	7000.00
CAMA PERMIT	N
FLOOD ZONE	X
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592

**EG2021-022**

**PROJECT NAME:** Carl Worsley Land Disturbance

**SITE ADDRESS:** 406 CANAL DR Kill Devil Hills

**EXCAVATION AND GRADING**

**ISSUED:** 11/09/2021

**EXPIRES:** 05/08/2022

**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: 11/11/21



# Town of Kill Devil Hills

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

PAID

NOV - 2 2021

## Planning and Inspection Department

**SG2021-024**

**PROJECT NAME:** Subway  
**SITE ADDRESS:** 1700 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 10/25/2021

**EXPIRES:** 04/23/2022

**APPLICANT:** SUBWAY  
1726 N. Croatan Hwy.  
Kill Devil Hills, NC 27948

**OWNER:** OLIVOLA, MARK  
NANCY O WALTON  
P O BOX 364  
KILL DEVIL HILLS, NC 27948

**CONTRACTOR:** SAME AS APPLICANT  
0000000  
00000000, nc 00000

**License:** 123456  
**Expires:** 04/30/2022

**PARCEL:**

**PIN:** 988410374122

**Parcel Number:** 002739000

**Address:** 1700 CROATAN HWY N KILL DEVIL HILLS

**Zoning:**

**Addition:** HEDRICKS ADDITION - CROATAN SH

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

**Legal Description:**

FEES:	Paid	Due
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Sign on the building

**PAID**  
11/2/21 DY  
CK#018901

**SG2021-024**

**PROJECT NAME:** Subway

**SITE ADDRESS:** 1700 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 10/25/2021

**EXPIRES:** 04/23/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	24.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	1000.00
FLOOD ZONE	X

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

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

\* 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:** Donna Elliott

**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

### SG2021-025

**PROJECT NAME:** Blue Anchor LLC  
**SITE ADDRESS:** 2401 CROATAN HWY N KILL DEVIL HILLS

### SIGN

**ISSUED:** 11/10/2021

**EXPIRES:** 05/09/2022

**APPLICANT:** ADLIGHT SIGNS  
600 West Boundry Street  
Kill Devil Hills, NC 27948  
252-449-2800

**OWNER:** Blue Anchor Partners, LLC  
23 Meredith Ct.  
Monmouth, NJ 07750  
201-660-4212

**CONTRACTOR:** ADLIGHT SIGNS  
600 West Boundry Street  
Kill Devil Hills, NC 27948  
252-449-2800

**License:** LEGACY UNKNOWN  
**Expires:** 12/31/2030

### PARCEL:

**PIN:** 988517115597

**Parcel Number:** 003037000

**Address:** 2401 CROATAN HWY N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORE AMD BLK 22

**Zoning:**

**Block:** 22

**Lot(s):** 6-8 SUR DB  
128/460

**Legal Description:**

FEES:	Paid	Due
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Install new panels on free-standing sign

NOV 16 2021

**SG2021-025**

**PROJECT NAME:** Blue Anchor LLC

**SITE ADDRESS:** 2401 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 11/10/2021

**EXPIRES:** 05/09/2022

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF SIGNS	1
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	57.75
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	8500.00
FLOOD ZONE	X

---

**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.

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

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

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

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

\* Free-standing sign cannot exceed 20 feet in elevation above street grade measured from ground elevation to the top of the sign structure. Sign cannot overhang into the right of way.

\* 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

**SG2021-026**

**PROJECT NAME:** LL Flooring  
**SITE ADDRESS:** 1700 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

**APPLICANT:** ADLIGHT SIGNS  
600 West Boundry Street  
Kill Devil Hills, NC 27948  
252-449-2800

**OWNER:** OLIVOLA, MARK  
NANCY O WALTON  
P O BOX 364  
KILL DEVIL HILLS, NC 27948

**CONTRACTOR:** ADLIGHT SIGNS  
600 West Boundry Street  
Kill Devil Hills, NC 27948  
252-449-2800

**License:** LEGACY UNKNOWN  
**Expires:** 12/31/2030

**PARCEL:**

**PIN:** 988410374122

**Parcel Number:** 002739000

**Address:** 1700 CROATAN HWY N KILL DEVIL HILLS

**Zoning:**

**Addition:** HEDRICKS ADDITION - CROATAN SH

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Sign on the building

NOV 16 2021

**SG2021-026**

**PROJECT NAME:** LL Flooring

**SITE ADDRESS:** 1700 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 11/12/2021

**EXPIRES:** 05/11/2022

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	32.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	3000.00
FLOOD ZONE	X

**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.
  - \* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.
- No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).
- Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
  - \* 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:** 10-16-21