



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

EG2022-001

PROJECT NAME: RIVERA LOT CLEARING
SITE ADDRESS: 606 SUFFOLK ST KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 01/28/2022

EXPIRES: 07/27/2022

APPLICANT: Rivera, Jimy
503 W THIRD ST
Kill Devil Hills, NC 27948
252-423-1043

OWNER: SIMENSON, RONALD E
P O BOX 974
MEXICO, XX 00000

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988405097752

Parcel Number: 001135000

Address: 606 SUFFOLK ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 929

Legal Description:

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

PROJECT DESCRIPTION: CLEARING LOT AND BRINGING IN FILL

DETAILS

Permit

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

PAID

JAN 28 2022



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

BJ2022-009

PROJECT NAME: PETTIT BATHROOM
SITE ADDRESS: 102 FERRIS AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/12/2022

EXPIRES: 07/11/2022

APPLICANT: PETTIT, WILLIAM
102 Ferris Avenue
Kill Devil Hills, NC 27948

OWNER: PETTIT, WILLIAM
102 Ferris Avenue
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988419625420

Parcel Number: 003999000

Address: 102 FERRIS AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 45 **Lot(s):** 11

Legal Description:

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

PROJECT DESCRIPTION: REMODEL EXISTING CLOSET SPACE TO BATHROOM

PAID

JAN 13 2022

TOWN OF
KILL DEVIL HILLS

BJ2022-009

PROJECT NAME: PETTIT BATHROOM
SITE ADDRESS: 102 FERRIS AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/12/2022

EXPIRES: 07/11/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	1000.00
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.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Must maintain fixture clearances as detailed by R307 of the 2018 NCRBC.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * 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

JAN 11 2022

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

BJ2022-007	BUILDING JOINT
PROJECT NAME: Pettit ground floor conversion	ISSUED: 01/11/2022
SITE ADDRESS: 102 FERRIS AVE KILL DEVIL HILLS	EXPIRES: 07/10/2022

APPLICANT: PETTIT, WILLIAM 102 Ferris Avenue Kill Devil Hills, NC 27948	OWNER: PETTIT, WILLIAM 102 Ferris Avenue Kill Devil Hills, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN:	988419625420	Parcel Number:	003999000
Address:	102 FERRIS AVE KILL DEVIL HILLS		
Addition:	KITTY HAWK SHORES - REVISED	Zoning:	
Legal Description:		Block: 45	Lot(s): 11

FEES:	Paid	Due	BUILDING AREA:	
Fence	\$100.00	\$0.00	Residential Heated Space	337 sq. Ft.
Res. Building Permit Fee	\$252.75	\$0.00	(.75)	
Totals :	\$352.75	\$0.00		

PROJECT DESCRIPTION: elevate existing ground floor above 8', covert unpermitted internal stairs to closet, add fence to backyard

BJ2022-007**PROJECT NAME:** Pettit ground floor conversion
SITE ADDRESS: 102 FERRIS AVE KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/11/2022**EXPIRES:** 07/10/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
LOT COVERAGE	39.70
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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



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

BJ2021-277

PROJECT NAME: 709 NVDT LLC B6
SITE ADDRESS: 709 North Virginia Dare Trail Kill Devil Hills

BUILDING JOINT

ISSUED: 01/26/2022

EXPIRES: 07/25/2022

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

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

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: 12/31/2022

PARCEL:

PIN: 988416726545B6

Parcel Number:

Address: 709 North Virginia Dare Trail Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 4 and 5 combined, Block 8, Kitty Hawk Shores-revised
B6 Tides Way

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$2,045.95	\$0.00	Covered Porches/Decks	362 SQFT
Covered Porch Residential	\$271.50	\$0.00	Residential Unheated (.40)	238 Sq. Ft
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	2601 sq. Ft.
Totals :	\$2,567.45	\$0.00	(.75)	

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling with pool, pool deck and fence

Town of Kill Devil Hills
Water Charges

PAID

JAN 27 2022

TR5047

BJ2021-277**PROJECT NAME:** 709 NVDT LLC B6**SITE ADDRESS:** 709 North Virginia Dare Trail Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/26/2022**EXPIRES:** 07/25/2022

DETAILS**Permit**

Name	Value
# OF DUMPSTERS	3.00
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	450000.00
LOT COVERAGE	54.67
LIVING SPACE (SQFT)	2601
COVERED PORCHES/DECKS (SQFT)	362
STORAGE (SQFT)	238
TOTAL SQUARE FOOTAGE	3201
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Mike O'Steen 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

JAN 27 2022

Planning and Inspection Department

BJ2022-016

PROJECT NAME: SECU ATM
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/27/2022

EXPIRES: 07/26/2022

APPLICANT: TOWN OF KILL DEVIL HILLS
P O BOX 1719
102 Town Hall Drive
KILL DEVIL HILLS, NC 27948

OWNER: TOWN OF KILL DEVIL HILLS
P O BOX 1719
102 Town Hall Drive
KILL DEVIL HILLS, NC 27948

CONTRACTOR: Reliable Construction Co., INC
PO Box 688
MONROE, NC 28111
704-283-1196

BUILDING LIMITED: Reliable Construction Co., INC
PO Box 688
MONROE, NC 28111
704-283-1196

License: 4190
Expires: 01/01/2023

PARCEL:

PIN: 988410369451

Parcel Number: 008129000

Address: 1634 CROATAN HWY N KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: Installation of prebuilt ATM machine and ADA parking

BJ2022-016**PROJECT NAME:** SECU ATM**SITE ADDRESS:** 1634 CROATAN HWY N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/27/2022**EXPIRES:** 07/26/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	13000.00
STORAGE (SQFT)	42
ENGINEER AND LICENSE NUMBER	Christopher Locklear 20193
ARCHITECT NAME AND LICENSE NUMBER	Robert Moore 4893
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Storage

REQUIRED INSPECTIONS

Special Inspections	Final
Slab/Foundation/Piling	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.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Preconstruction meeting required.
- Proposed improvements shall be staked and approved.
- * Special inspection required for welds holding kiosk to foundation plates.
- * 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

BP2022-014

PROJECT NAME: Jenkins Deck and Stair Rebuild
SITE ADDRESS: 301 HELGA ST E KILL DEVIL HILLS

BUILDING

ISSUED: 01/21/2022

EXPIRES: 07/20/2022

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

OWNER: Ernest Jenkins
2207 Oak St.
VIRGINIA BEACH, VA23451

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

License: 78583
Expires:

PARCEL:

PIN: 988513047218

Parcel Number: 000118000

Address: 301 HELGA ST E KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 8

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

Legal Description:

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

PROJECT DESCRIPTION: replace existing front deck and stairs to new expanded footprint

JAN 24 2022

BP2022-014

PROJECT NAME: Jenkins Deck and Stair Rebuild
SITE ADDRESS: 301 HELGA ST E KILL DEVIL HILLS

BUILDING**ISSUED:** 01/21/2022**EXPIRES:** 07/20/2022**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18000.00
LOT COVERAGE	43.90
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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



Town of Kill Devil Hills

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

PAID

JAN 25 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-014

PROJECT NAME: Shane and Karen Collins
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/25/2022

EXPIRES: 07/24/2022

APPLICANT: Collins, Shane
1424 SHAY ST
Kill Devil Hills, NC 27948
252-202-1193

OWNER: Collins, Shane
1424 SHAY ST
Kill Devil Hills, NC 27948
252-202-1193

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/31/2023

PARCEL:

PIN: 988316749087

Parcel Number: 004890302

Address: 1424 SHAY ST KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

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

Legal Description:

FEES:	Paid	Due
Pool/Hot Tub	\$200.00	\$0.00
Driveway Permit Fee	\$50.00	\$0.00
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$400.00	\$0.00

PROJECT DESCRIPTION: Add 340 square feet to driveway, new fence around pool and yard, hot tub, pool heater, new electric panel, pad for hot tub, misc. lights and plugs

BJ2022-014**PROJECT NAME:** Shane and Karen Collins
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/25/2022**EXPIRES:** 07/24/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In	Zoning Final
Final	

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.



Town of Kill Devil Hills

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

JAN 24 2022

Planning and Inspection Department

BJ2021-259

PROJECT NAME: SAGA New 4 Bedroom House A6 Site 11
SITE ADDRESS: 709 VA DARE TRL N A6 KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/21/2022

EXPIRES: 07/20/2022

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

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988416726545A6

Parcel Number:

Address: 709 VA DARE TRL N A6 KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 4 & 5, Kitty Hawk Shores Revised

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$105.00	\$0.00	Residential Heated Space	2500 sq. Ft.
Res. Building Permit Fee	\$2,005.80	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	140 SQFT
Open Deck Fee	\$300.00	\$0.00	Open Decks	2 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Unheated (.40)	327 Sq. Ft
Totals :	\$2,660.80	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T 25009

BJ2021-259**PROJECT NAME:** SAGA New 4 Bedroom House A6 Site 11
SITE ADDRESS: 709 VA DARE TRL N A6 KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/21/2022**EXPIRES:** 07/20/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	13
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	350000.00
LOT COVERAGE	54.67
LIVING SPACE (SQFT)	2827
COVERED PORCHES/DECKS (SQFT)	140
ACCESSORY STRUCTURE (SQFT)	280
STORAGE (SQFT)	47
OPEN DECK (SQFT)	226
TOTAL SQUARE FOOTAGE	3193
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Mike O'Steen 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

JAN 24 2022

Planning and Inspection Department

BJ2021-278

PROJECT NAME: 709 NVDT LLC A7
SITE ADDRESS: 709 North Virginia Dare Trail Kill Devil Hills

BUILDING JOINT

ISSUED: 01/21/2022

EXPIRES: 07/20/2022

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

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

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: 12/31/2022

PARCEL:

PIN: 988416726545A7

Parcel Number:

Address: 709 North Virginia Dare Trail Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 4 and 5 combined, Block 8, Kitty Hawk Shores Revised
A7 Tides Way

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Open Decks	2 EA
Pool/Hot Tub	\$200.00	\$0.00	Covered Porches/Decks	417 SQFT
Covered Porch Residential	\$312.75	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$300.00	\$0.00	Residential Heated Space	2603 sq. Ft.
Res. Building Permit Fee	\$2,052.65	\$0.00	(.75)	
Totals :	\$2,915.40	\$0.00	Residential Unheated (.40)	251 Sq. Ft

PROJECT DESCRIPTION: Proposed 5 bedroom single family dwelling with pool, concrete pool deck and fence

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: T 2508

BJ2021-278

PROJECT NAME: 709 NVDT LLC A7

SITE ADDRESS: 709 North Virginia Dare Trail Kill Devil Hills

BUILDING JOINT

ISSUED: 01/21/2022

EXPIRES: 07/20/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	5
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	450000.00
LOT COVERAGE	54.67
LIVING SPACE (SQFT)	2603
COVERED PORCHES/DECKS (SQFT)	417
STORAGE (SQFT)	251
OPEN DECK (SQFT)	336
TOTAL SQUARE FOOTAGE	3607
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Mike O'Steen 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

Planning and Inspection Department

BJ2021-225

PROJECT NAME: A5, Site 9Tides Obx Cottage Court 4 Bedroom
SITE ADDRESS: 709 VA DARE TRL N A5 KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

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

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

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: 12/31/2022

PARCEL:

PIN: 988416726545A5

Parcel Number:

Address: 709 VA DARE TRL N A5 KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: A5

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$2,045.95	\$0.00	Covered Porches/Decks	362 SQFT
Pool/Hot Tub	\$200.00	\$0.00	Residential Unheated (.40)	238 Sq. Ft
Covered Porch Residential	\$271.50	\$0.00	Residential Heated Space	2601 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$2,567.45	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: new 4 bedroom single family dwelling with pool

Town of Kill Devil Hills

Water Charges

JAN 21 2022

PAID

Water Tap #: 725006

BJ2021-225**PROJECT NAME:** A5, Site 9Tides Obx Cottage Court 4 Bedroom
SITE ADDRESS: 709 VA DARE TRL N A5 KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/20/2022**EXPIRES:** 07/19/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
# PARKING SPACES/BEDROOM	5
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	15.70
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	450000.00
LOT COVERAGE	54.67
LIVING SPACE (SQFT)	2601
COVERED PORCHES/DECKS (SQFT)	362
STORAGE (SQFT)	238
TOTAL SQUARE FOOTAGE	3201
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Mike O'Steen 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
JAN 18 2022

Planning and Inspection Department

BJ2022-012	BUILDING JOINT
PROJECT NAME: Story Enclosure	ISSUED: 01/17/2022
SITE ADDRESS: 110 Ashville Drive Kill Devil Hills	EXPIRES: 07/16/2022

APPLICANT: JOE HANTON 121 White Acres DR JARVISBURG, NC 27947 252-207-3553	OWNER: Story, Stanley 4425 Wellington Farms Drive chester, va 23831
--	--

UNLICENSED BUILDER: JOE HANTON 121 White Acres DR JARVISBURG, NC 27947 252-207-3553	License: unlicensed Expires: 12/31/2022
---	--

PARCEL:

PIN: 988415630794	Parcel Number:
Address: 110 Ashville Drive Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 48, Memorial Overlook	

FEES:	Paid	Due	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Residential Unheated (.40)	145 Sq. Ft
Totals :	\$150.00	\$0.00		

PROJECT DESCRIPTION: enclose under existing house for storage with garage door

BJ2022-012**PROJECT NAME:** Story Enclosure**SITE ADDRESS:** 110 Ashville Drive Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/17/2022**EXPIRES:** 07/16/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.50
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	5100.00
LOT COVERAGE	39.98
STORAGE (SQFT)	145
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N

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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Attached storage room requires a light and a switch.



Town of Kill Devil Hills

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

PAID

JAN 18 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-006

PROJECT NAME: Beard Enclosure
SITE ADDRESS: 300 CHOWAN ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/07/2022

EXPIRES: 07/06/2022

APPLICANT: Beard, Loren
32109 Cedar Ct
FRANKLIN, VA 23851

OWNER: Beard, Loren
32109 Cedar Ct
FRANKLIN, VA 23851

CONTRACTOR: Woodard, Earl/ Cutting Edge Craftsmen LLC
121 Coinjock Dev. RD
Coinjock, NC 27923
252-256-1020

BUILDING LIMITED: Cutting Edge Craftsmen
934 W Kitty Hawk Rd
Kitty Hawk, NC 27949
252-261-2656

License: 72054
Expires: 01/01/2023

PARCEL:

PIN: 988517020408

Parcel Number: 000552000

Address: 300 CHOWAN ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 41 **Lot(s):** 21-22

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$648.00	\$0.00	Residential Heated Space	864 sq. Ft.
			(.75)	
Totals :	\$648.00	\$0.00		

PROJECT DESCRIPTION: enclose under existing house for living space, 2 bedroom staying 2 bedrooms

BJ2022-006

PROJECT NAME: Beard Enclosure

SITE ADDRESS: 300 CHOWAN ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/07/2022

EXPIRES: 07/06/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
HEALTH DEPARTMENT PERMIT #	S22-7580
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.00
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Addition
CONSTRUCTION COST	70000.00
LOT COVERAGE	34.10
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS



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

BJ2021-263

PROJECT NAME: Caggese Addition
SITE ADDRESS: 112 Landing Dr. E. KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/13/2022

EXPIRES: 07/12/2022

APPLICANT: MK Contractors
PO Box 3014
Kill Devil Hills, NC 27948
252-305-3224

OWNER: CAGGESE, GIROLAMO
112 E Landing Drive
Kill Devil Hills, NC 27948

BUILDING LIMITED: MK Contractors
PO Box 3014
Kill Devil Hills, NC 27948
252-305-3224

License: 75229
Expires: 12/31/2022

PARCEL:

PIN: 988411555118

Parcel Number: 002761000

Address: 112 Landing Dr. E. KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$429.00	\$0.00	Residential Heated Space	572 sq. Ft.
Totals :	\$579.00	\$0.00	(.75)	

PROJECT DESCRIPTION: addition above existing house adding one bedroom and bathroom, 3 total bedrooms

PAID

JAN 19 2022

TOWN OF
KILL DEVIL HILLS

BJ2021-263**PROJECT NAME:** Caggese Addition**SITE ADDRESS:** 112 Landing Dr. E. KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/13/2022**EXPIRES:** 07/12/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S22-7323
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	25400.00
LOT COVERAGE	38.00
LIVING SPACE (SQFT)	572
OPEN DECK (SQFT)	82
TOTAL SQUARE FOOTAGE	654
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
ENGINEER AND LICENSE NUMBER	Rick House 24740
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

JAN 13 2022

Planning and Inspection Department

BJ2021-274

PROJECT NAME: Sandy Bottom Homes New House
SITE ADDRESS: 602 Eden Street W Kill Devil Hills

BUILDING JOINT

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

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: 01/01/2023

PARCEL:

PIN: 987520902294

**Parcel
Number:**

Address: 602 Eden Street W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 14R, Block 78, Virginia Dare Shores

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Heated Space	1774 sq. Ft.
Covered Porch Residential	\$152.25	\$0.00	(.75)	
Open Deck Fee	\$150.00	\$0.00	# of Temporary Poles	1 EA
Res. Building Permit Fee	\$1,374.10	\$0.00	Covered Porches/Decks	203 SQFT
Totals :	\$1,726.35	\$0.00	Open Decks	1 EA
			Residential Unheated (.40)	109 Sq. Ft

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

DETAILS

Town of Kill Devil Hills

PAID

Water Tap #: +2500

BJ2021-274**PROJECT NAME:** Sandy Bottom Homes New House
SITE ADDRESS: 602 Eden Street W Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/06/2022**EXPIRES:** 07/05/2022**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S3-7857
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	255000.00
LOT COVERAGE	39.80
LIVING SPACE (SQFT)	1774
COVERED PORCHES/DECKS (SQFT)	203
STORAGE (SQFT)	109
OPEN DECK (SQFT)	56
TOTAL SQUARE FOOTAGE	2142
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Ray Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14163
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

JAN 13 2022

Planning and Inspection Department

BJ2021-270

PROJECT NAME: Frank Soles
SITE ADDRESS: 724 CANAL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

APPLICANT: FRANK SOLES
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

OWNER: FRANK SOLES
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

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

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

License: 67524
Expires: 01/01/2023

PARCEL:

PIN: 988409151132

Parcel Number: 003276311

Address: 724 CANAL DR KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 2

Block: 0 **Lot(s):** 311

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,475.00	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$56.25	\$0.00	Covered Porches/Decks	75 SQFT
T-Pole	\$50.00	\$0.00	Residential Heated Space	1908 sq. Ft.
Open Deck Fee	\$150.00	\$0.00	(.75)	
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	110 Sq. Ft
Totals :	\$1,831.25	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: 724995

BJ2021-270**PROJECT NAME:** Frank Soles
SITE ADDRESS: 724 CANAL DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/06/2022**EXPIRES:** 07/05/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-7776
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	250000.00
LOT COVERAGE	24.50
LIVING SPACE (SQFT)	1908
COVERED PORCHES/DECKS (SQFT)	75
OPEN DECK (SQFT)	131
TOTAL SQUARE FOOTAGE	2224
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Mike Osteen 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

JAN 13 2022

Planning and Inspection Department

BJ2021-276	BUILDING JOINT
PROJECT NAME: Sandy Bottom Homes New House	ISSUED: 01/06/2022
SITE ADDRESS: 600 EDEN ST W Kill Devil Hills	EXPIRES: 07/05/2022

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: 01/01/2023
---	---

PARCEL:

PIN: 987520903237	Parcel Number:
Address: 600 EDEN ST W Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 15R, Block 78, Virginia Dare Shores	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$1,378.50	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	75 Sq. Ft
Covered Porch Residential	\$56.25	\$0.00	Residential Heated Space (.75)	1798 sq. Ft.
Totals :	\$1,634.75 ✓	\$0.00	Covered Porches/Decks	75 SQFT

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

Town of Kill Devil Hills
 Water Charges

T25003

BJ2021-276**PROJECT NAME:** Sandy Bottom Homes New House**SITE ADDRESS:** 600 EDEN ST W Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/06/2022**EXPIRES:** 07/05/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
HEALTH DEPARTMENT PERMIT #	S3-7859
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	255000.00
LOT COVERAGE	36.60
LIVING SPACE (SQFT)	1798
COVERED PORCHES/DECKS (SQFT)	75
STORAGE (SQFT)	75
OPEN DECK (SQFT)	116
TOTAL SQUARE FOOTAGE	2064
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Mike O'Steen 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

JAN 12 2022

Planning and Inspection Department

BJ2021-224

PROJECT NAME: B7, Site 14 Tides Obx Cottage Court 5 Bedroom
SITE ADDRESS: 709 VA DARE TRL N B7 KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/11/2022

EXPIRES: 07/10/2022

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

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

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: 12/31/2022

PARCEL:

PIN: 988416726545B7

Parcel Number: 003692004

Address: 709 VA DARE TRL N B7 KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$300.00	\$0.00	Covered Porches/Decks	417 SQFT
Res. Building Permit Fee	\$2,052.65	\$0.00	Open Decks	2 EA
Covered Porch Residential	\$312.75	\$0.00	Residential Unheated (.40)	251 Sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	2603 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :			# of Temporary Poles	1 EA
	\$2,915.40	\$0.00		

PROJECT DESCRIPTION: new 5 bedroom single family dwelling with pool

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T25005

BJ2021-224**PROJECT NAME:** B7, Site 14 Tides Obx Cottage Court 5 Bedroom
SITE ADDRESS: 709 VA DARE TRL N B7 KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/11/2022**EXPIRES:** 07/10/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
# PARKING SPACES/BEDROOM	5
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	13
Proposed First Floor Elevation	15.70
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	450000.00
LOT COVERAGE	54.67
LIVING SPACE (SQFT)	2603
COVERED PORCHES/DECKS (SQFT)	417
STORAGE (SQFT)	251
OPEN DECK (SQFT)	336
TOTAL SQUARE FOOTAGE	3607
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
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

BJ2022-008	BUILDING JOINT
PROJECT NAME: Starbucks Building Shell	ISSUED: 01/11/2022
SITE ADDRESS: 1208 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 07/10/2022

APPLICANT: MFP Investment Company
102 W Airstrip Rd
Kill Devil Hills, NC 27948

OWNER: CRDR Parker, LLC
PO Box 71125
BETHESDA, MD 20813

CONTRACTOR: PROVOST CONSTRUCTION & SONS LLC
208 W 25th Street
NORFOLK, VA 23517
757-630-0326

BUILDING LIMITED:	PROVOST CONSTRUCTION & SONS LLC 208 W 25th Street NORFOLK, VA 23517 757-630-0326	License: 80962 Expires:
--------------------------	---	--

PARCEL:

PIN:	988312961635	Parcel Number:	004331000
Address:	1208 CROATAN HWY S KILL DEVIL HILLS		
Addition:	KILL DEVIL HILLS REALTY CORP	Zoning:	
Legal Description:		Block:	7
		Lot(s):	11-12 & PT 5 -6

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Com. Building Permit Fees	\$2,645.60	\$0.00	Commercial Space 3307 Sq. Ft.
Totals :	\$2,645.60	\$0.00	

PROJECT DESCRIPTION: building shell and slab for starbucks, associated site improvements for site construction

JAN 11 2022

BJ2022-008**PROJECT NAME:** Starbucks Building Shell**SITE ADDRESS:** 1208 CROATAN HWY S KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/11/2022**EXPIRES:** 07/10/2022

DETAILS**Permit**

Name	Value
# OF DUMPSTERS	2.00
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	25
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	10.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	1207159.00
LIVING SPACE (SQFT)	2607
COVERED PORCHES/DECKS (SQFT)	700
TOTAL SQUARE FOOTAGE	3307
SURVEYOR NAME AND NUMBER	Cathleen M Saunders
ENGINEER AND LICENSE NUMBER	Dennis Altman 030467
ARCHITECT NAME AND LICENSE NUMBER	D. Eugene Thompson 12102
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly



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

JAN 10 2022

BJ2022-005

PROJECT NAME: William Generator
SITE ADDRESS: 438 West Walker Street Kill Devil Hills

BUILDING JOINT

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

APPLICANT: Hills, William
438 W Walker St.
Kill Devil Hills, NC 27948

OWNER: Hills, William
438 W Walker St.
Kill Devil Hills, NC 27948

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

License: 30667-U
Expires:

PARCEL:

PIN: 987520916065

Parcel Number:

Address: 438 West Walker Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 39 & 40, Block 54, Virginia Dare Shores S/D

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

PROJECT DESCRIPTION: Install 22KW generator and transfer switch



PAID
1/7/22
paypal

BJ2022-005**PROJECT NAME:** William Generator**SITE ADDRESS:** 438 West Walker Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/06/2022**EXPIRES:** 07/05/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10677.41
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In

Zoning Final

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.

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



Town of Kill Devil Hills

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

PAID
JAN 10 2022

Planning and Inspection Department

BUILDING JOINT

ISSUED: 01/07/2022

EXPIRES: 07/06/2022

BJ2021-266

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 602 Harmony Lane Kill Devil Hills

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: 12/31/2022

PARCEL:

PIN: 988413223808

Parcel Number:

Address: 602 Harmony Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 21, Phase 1, Water Oak Residential Community

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,497.45	\$0.00	Covered Porches/Decks	375 SQFT
Covered Porch Residential	\$281.25	\$0.00	Residential Heated Space	1731 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,828.70	\$0.00	# of Temporary Poles	1 EA
			Residential Unheated (.40)	498 Sq. Ft

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T 480575

BJ2021-266

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 602 Harmony Lane Kill Devil Hills

BUILDING JOINT**ISSUED:** 01/07/2022**EXPIRES:** 07/06/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LOT COVERAGE	38.70
LIVING SPACE (SQFT)	1731
COVERED PORCHES/DECKS (SQFT)	375
GARAGE (SQFT)	498
TOTAL SQUARE FOOTAGE	2604
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER 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

PAID

JAN - 7 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-281

PROJECT NAME: Circle K Food Equipment
SITE ADDRESS: 100 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

APPLICANT: WIMCO
PO Box 121
Washington, NC 27889
252-946-5175

OWNER: National Retail Properties
450 S. Orange Avenue
Suite 900
Orlando, FL 32801

GENERAL: WIMCO
PO Box 121
Washington, NC 27889
252-946-5175

License: 3478
Expires:

PARCEL:

PIN: 988419703117

Parcel Number: 004022002

Address: 100 CROATAN HWY S KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 63

Lot(s): PT 3-6, 14-16 & PT1

Legal Description:

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

PROJECT DESCRIPTION: remove and replace existing food cooking equipment, plumbing and electrical work to accommodate new equipment

PAID
1/7/22
P. Gil

BJ2021-281

PROJECT NAME: Circle K Food Equipment
SITE ADDRESS: 100 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	20000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

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: Marty Shaw

Contractor or Authorized Agent: Preston Lollis Date: 01 / 05 / 2022



Town of Kill Devil Hills

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

PAID

JAN - 7 2022

Planning and Inspection Department

T. Lang
1/5/2022

BJ2021-280

PROJECT NAME: Circle K Food Equipment
SITE ADDRESS: 1400 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

APPLICANT: Circle K Stores, Inc.
305 Gregson Dr.
CARY, NC 27511
919-774-6700

OWNER: Circle K Stores, Inc.
305 Gregson Dr.
CARY, NC 27511
919-774-6700

CONTRACTOR: WIMCO
PO Box 121
Washington, NC 27889
252-946-5175

GENERAL: WIMCO
PO Box 121
Washington, NC 27889
252-946-5175

License: 3478
Expires:

PARCEL:

PIN: 988312956568

Parcel Number: 004886000

Address: 1400 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 5-6

Legal Description:

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

PROJECT DESCRIPTION: remove and replace existing food cooking equipment, plumbing and electrical work to accommodate new equipment

PAID
Pr 1/2/22
Pg Pd1

BJ2021-280**PROJECT NAME:** Circle K Food Equipment**SITE ADDRESS:** 1400 CROATAN HWY S KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/04/2022**EXPIRES:** 07/03/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	III
CONSTRUCTION COST	20000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

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

CONDITIONS

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



Town of Kill Devil Hills

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

JAN - 4 2022

Planning and Inspection Department

BJ2021-269

PROJECT NAME: Pool Amenity Building Reconstruction
SITE ADDRESS: 2029 S VA DARE TRL Kill Devil Hills

BUILDING JOINT

ISSUED: 12/30/2021

EXPIRES: 06/28/2022

APPLICANT: First Flight Hotel, LLC
1880 Richmond Road
WILLIAMSBURG, VA 23185
757-218-3888

OWNER: First Flight Hotel, LLC
1880 Richmond Road
WILLIAMSBURG, VA 23185
757-218-3888

CONTRACTOR: PREMIERE CONTRACTING INC.
4517 Beacham Ln
kitty hawk, nc 27949
252-261-7244

GENERAL, UNLIMITED: PREMIERE CONTRACTING INC.
4517 Beacham Ln
kitty hawk, nc 27949
252-261-7244

License: 58986
Expires: 12/31/2021

PARCEL:

PIN: 989313241064

Parcel Number:

Address: 2029 S VA DARE TRL Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 6 Block 3 Sec 4 Nags Head Shores Amended

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$300.00	\$0.00	Open Decks	2 EA
Com. Building Permit Fees	\$345.60	\$0.00	Commercial Space	432 Sq. Ft.
Totals :	\$645.60	\$0.00		

PROJECT DESCRIPTION: construction of pool amenity building, repair and replacement of ramps, walkways and pool fencing from fire damage

BJ2021-269**PROJECT NAME:** Pool Amenity Building Reconstruction
SITE ADDRESS: 2029 S VA DARE TRL Kill Devil Hills**BUILDING JOINT****ISSUED:** 12/30/2021**EXPIRES:** 06/28/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	389246.00
LOT COVERAGE	49.10
LIVING SPACE (SQFT)	432
OPEN DECK (SQFT)	653
TOTAL SQUARE FOOTAGE	1085
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ARCHITECT NAME AND LICENSE NUMBER	Mark Kasten 7220
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

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

CONDITIONS



Town of Kill Devil Hills

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

PAID

JAN - 5 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-273

PROJECT NAME: Gumm Garage Conversion
SITE ADDRESS: 106 WRIGHT AVE W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

APPLICANT: DIGGS, WILLIAM S. III
P.O. Box 349
Kitty Hawk, NC 27949
252-202-2214

OWNER: GUMM, TERRI
509 Hughes Road
CHARLES TOWN, WV 25414

CONTRACTOR: SANDLEWOOD CONSTRUCTION
PO Box 349
Kitty Hawk, NC 27949
252-202-2214

GENERAL BUILDING-LIMITED: SANDLEWOOD CONSTRUCTION
PO Box 349
Kitty Hawk, NC 27949
252-202-2214

License: 12872
Expires: 01/01/2023

PARCEL:

PIN: 988419609555

Parcel Number: 008155000

Address: 106 WRIGHT AVE W KILL DEVIL HILLS

Zoning:

Addition: BAUM BAY SHORES - REVISED

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$521.15	\$0.00	Remodel/Renovation	96 SQFT
Renovation/Remodel/Relocate	\$43.20	\$0.00	Residential Unheated (.40)	116 Sq. Ft
Totals :	\$564.35	\$0.00	Residential Heated Space (.75)	633 sq. Ft.

PROJECT DESCRIPTION: convert garage to living space, remains 4 bedroom

BJ2021-273**PROJECT NAME:** Gumm Garage Conversion
SITE ADDRESS: 106 WRIGHT AVE W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/05/2022**EXPIRES:** 07/04/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-7853
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.35
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	100000.00
LOT COVERAGE	37.40
LIVING SPACE (SQFT)	729
STORAGE (SQFT)	116
SURVEYOR NAME AND NUMBER	Wesley M Meekins
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

JAN - 5 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-275

PROJECT NAME: Carl Worsley New House
SITE ADDRESS: 406 CANAL DR Kill Devil Hills

BUILDING JOINT

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

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: 01/01/2023

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	BUILDING AREA:	
Covered Porch Residential	\$216.75	\$0.00	# of Temporary Poles	1 EA
Res. Building Permit Fee	\$1,466.80	\$0.00	Residential Unheated (.40)	397 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1744 sq. Ft.
Totals :	\$1,733.55	\$0.00	Covered Porches/Decks	289 SQFT

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: T 25002

BJ2021-275**PROJECT NAME:** Carl Worsley New House
SITE ADDRESS: 406 CANAL DR Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/05/2022**EXPIRES:** 07/04/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	SI-7245
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.50
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LOT COVERAGE	30.50
LIVING SPACE (SQFT)	1744
COVERED PORCHES/DECKS (SQFT)	289
GARAGE (SQFT)	315
STORAGE (SQFT)	82
TOTAL SQUARE FOOTAGE	2430
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

PAID

JAN - 5 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-262

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

BUILDING

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

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

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

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

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

License: 12345
Expires:

PARCEL:

PIN: 98841314042600

Parcel Number: 008075999

Address: 700 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): COMMON PROPERTY

Legal Description:

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

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

BP2021-262

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

BUILDING

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	26351.93
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

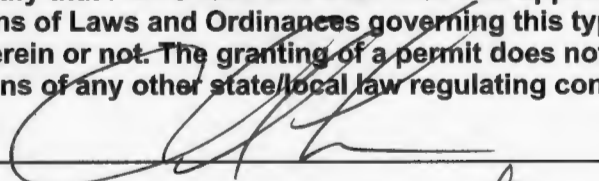
Zoning Final

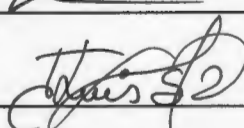
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 01-04-22



Town of Kill Devil Hills

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

PAID

JAN - 4 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-001

PROJECT NAME: Hristov Pool
SITE ADDRESS: 1712 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

APPLICANT: Hristov, Hristo
506 W Airstrip Rd
Kill Devil Hills, NC 27948
252-458-1570

OWNER: Hristov, Hristo
506 W Airstrip Rd
Kill Devil Hills, NC 27948
252-458-1570

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988409168037

Parcel Number: 002360008

Address: 1712 APACHE ST KILL DEVIL HILLS

Addition: APACHE STREET

Zoning:
Block: 0 **Lot(s):** 6

Legal Description:

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

PROJECT DESCRIPTION: New inground pool

BJ2022-001

PROJECT NAME: Hristov Pool
SITE ADDRESS: 1712 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30922
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	25000.00
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
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.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.



Town of Kill Devil Hills

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

JAN - 5 2022

Planning and Inspection Department

BJ2021-271	BUILDING JOINT
PROJECT NAME: Jennings New House	ISSUED: 01/05/2022
SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS	EXPIRES: 07/04/2022

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

RESIDENTIAL - INTERMEDIATE:	JENNINGS, DONALD P. O. Box 1102 nags head, nc 27959 252-207-4936	License: 32637 Expires: 01/01/2023
------------------------------------	---	---

PARCEL:

PIN: 988405281256	Parcel Number: 002238128
Address: 406 PETER LN KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES SEC 2	Block: 0 Lot(s): 128
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$86.25	\$0.00	Covered Porches/Decks	115 SQFT
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	37 Sq. Ft
Res. Building Permit Fee	\$1,118.05	\$0.00	Residential Heated Space	1471 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :			# of Temporary Poles	1 EA
	\$1,354.30	\$0.00		

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: 12500

BJ2021-271**PROJECT NAME:** Jennings New House
SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/05/2022**EXPIRES:** 07/04/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S8-7817
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	10.00
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	250000.00
LOT COVERAGE	38.69
LIVING SPACE (SQFT)	1471
COVERED PORCHES/DECKS (SQFT)	115
STORAGE (SQFT)	37
TOTAL SQUARE FOOTAGE	1623
SURVEYOR NAME AND NUMBER	Gloria Rogers L-3531
ENGINEER AND LICENSE NUMBER	Mike Osteen 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

PAID

JAN - 6 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-003

PROJECT NAME: Clatterbock House Repairs
SITE ADDRESS: 209 FRESH POND DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

APPLICANT: JOE HANTON
121 White Acres DR
JARVISBURG, NC 27947
252-207-3553

OWNER: Shake Your Bouy LLC
14199 Hollows Dr
Montpelier, VA 23192

UNLICENSED BUILDER: JOE HANTON
121 White Acres DR
JARVISBURG, NC 27947
252-207-3553

License: unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 989313142196

Parcel Number: 004942010

Address: 209 FRESH POND DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2

Zoning:
Block: 0 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: replace siding, windows and doors

BJ2022-003

PROJECT NAME: Clatterbock House Repairs
SITE ADDRESS: 209 FRESH POND DR E KILL DEVIL HILLS

BUILDING JOINT**ISSUED:** 01/05/2022**EXPIRES:** 07/04/2022**DETAILS****Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	24000.00
SURVEYOR NAME AND NUMBER	Allen Killingsworth
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.

* 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

JAN 24 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2022-007

PROJECT NAME: Elizabeth Neal
SITE ADDRESS: 2021 HIGHVIEW ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

APPLICANT: Cunningham, Deborah
2021 Highview Street
Kill Devil Hills, NC 27948
252-305-3233

OWNER: Neal, Elizabeth
2021 Highview St.
Kill Devil Hills, NC 27948

ELECTRICAL-UNLIMITED: SUBURBAN ELECTRIC CONTRACTORS OF NC INC. **License:** 30633-U
PO Box 925 **Expires:** 08/06/2022
Manteo, NC 27954
252-475-1372

PARCEL:

PIN: 968405089908 **Parcel Number:** 001492000
Address: 2021 HIGHVIEW ST KILL DEVIL HILLS
Addition: AVALON BEACH ANNEX 2 & 3 **Zoning:**
Block: 0 **Lot(s):** 1366
Legal Description:

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

PROJECT DESCRIPTION: Replace 200A meter base and add 200A emergency connect

PAID
1/21/2022
paypal

EL2022-007

PROJECT NAME: Elizabeth Neal
SITE ADDRESS: 2021 HIGHVIEW ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2000.00
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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: Susan Yan Date: 01 / 20 / 2022



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

EL2022-005

PROJECT NAME: WOOD SERVICE CHANGE OUT
SITE ADDRESS: 1519 SIR WALTER RD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

APPLICANT: WOOD, JOSEPH T
SUSAN BOWMAN
#1 ADMIRAL COURT
HAMPTON, VA 23669

OWNER: WOOD, JOSEPH T
SUSAN BOWMAN
#1 ADMIRAL COURT
HAMPTON, VA 23669

ELECTRICAL, UNLIMITED:

LOWIRE TECHNOLOGIES
PO Box 2751
Kill Devil Hills, NC 27948
252-449-4690

License: 19403
Expires: 10/02/2022

PARCEL:

PIN: 988411554663

Parcel Number: 003186000

Address: 1519 SIR WALTER RD KILL DEVIL HILLS

Zoning:

Addition: W R DEATON - DELRAY BEACH

Block: D **Lot(s):** 31

Legal Description:

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

PROJECT DESCRIPTION: METERBASE AND PANEL CHANGE OUT

PAID

JAN 20 2022

TOWN OF
KILL DEVIL HILLS

EL2022-005

PROJECT NAME: WOOD SERVICE CHANGE OUT
SITE ADDRESS: 1519 SIR WALTER RD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

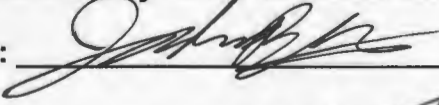
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 1-20-22



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

EL2022-006	ELECTRICAL
PROJECT NAME: PARR METERBASE	ISSUED: 01/20/2022
SITE ADDRESS: 802 WRIGHTSVILLE BLVD KILL DEVIL HILLS	EXPIRES: 07/19/2022

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

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

SPECIAL- SINGLE FAMILY DWELLING: Jones Electrical Solutions
1101 Indian ST
Kill Devil Hills, NC 27948
252-333-4716

License: 34047
Expires: 09/13/2022

PARCEL:

PIN: 988308884891

Parcel Number: 004312000

Address: 802 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: REPLACE SERVICE AND PANEL

JAN 20 2022

EL2022-006

PROJECT NAME: PARR METERBASE

SITE ADDRESS: 802 WRIGHTSVILLE BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 1/20/22



Town of Kill Devil Hills

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

PAID

JAN 10 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2022-002	ELECTRICAL
PROJECT NAME:	ISSUED: 01/05/2022
SITE ADDRESS: 419 QUAIL LN KILL DEVIL HILLS	EXPIRES: 07/04/2022

APPLICANT: FRASCA, MICHAEL J 419 Quail Lane Kill Devil Hills, NC 27948	OWNER: FRASCA, MICHAEL J 419 Quail Lane Kill Devil Hills, NC 27948
---	---

ELECTRICAL - LIMITED:	Jason Griffin Electric 784 Dryridge RD ELIZABETH CITY, NC 27909 252-489-3605	License: 23508 Expires: 11/16/2022
------------------------------	---	---

PARCEL:

PIN: 988316831608	Parcel Number: 004890010
Address: 419 QUAIL LN KILL DEVIL HILLS	Zoning:
Addition: WHISPERING PINES SEC 2 & 3	Block: F Lot(s): 10
Legal Description:	

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

PROJECT DESCRIPTION: Meter base & disconnect changeout

159
PAID
1/10/22
Bryg Pet.

EL2022-002

PROJECT NAME:

SITE ADDRESS: 419 QUAIL LN KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: JG **Date:** 01 / 10 / 2022



Town of Kill Devil Hills

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

PAID
JAN - 7 2022

Planning and Inspection Department

TRAVIS
K. J. JAMES

EL2022-003

PROJECT NAME: Walter Drake
SITE ADDRESS: 3305 RAYMOND AVE KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

APPLICANT: Angel Advanced Technologies, LLC
9138 Caratoke Hwy
Point Harbor, NC 27964
252-207-7519

OWNER: DRAKE, WALTER & ELIZABETH
31395 SUNBEAM RD
FRANKLIN, VA 23851
757-651-7812

ELECTRICAL - LIMITED: Angel Advanced Technologies, LLC
9138 Caratoke Hwy
Point Harbor, NC 27964
252-207-7519

License: 30701-L
Expires: 10/02/2022

PARCEL:

PIN: 988509053033

Parcel Number: 000073000

Address: 3305 RAYMOND AVE KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 2

Zoning:
Block: 2 **Lot(s):** 17

Legal Description:

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

PROJECT DESCRIPTION: Add wiring for hot tub



PAID
1/6/22
Pamper

EL2022-003

PROJECT NAME: Walter Drake

SITE ADDRESS: 3305 RAYMOND AVE KILL DEVIL HILLS

ELECTRICAL

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RH
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2282.43
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 01 / 06 / 2022



Town of Kill Devil Hills

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

PAID

JAN - 6 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

EL2022-001	ELECTRICAL
PROJECT NAME: Town of Kill Devil Hills	ISSUED: 01/05/2022
SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill	EXPIRES: 07/04/2022

APPLICANT: LOWIRE TECHNOLOGIES PO Box 2751 Kill Devil Hills, NC 27948 252-449-4690	OWNER: TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948
--	---

ELECTRICAL, UNLIMITED:	LOWIRE TECHNOLOGIES PO Box 2751 Kill Devil Hills, NC 27948 252-449-4690	License: 19403 Expires: 10/02/2022
-------------------------------	--	---

PARCEL:

PIN: 9876543210	Parcel Number: 23
Address: 102 Town Hall Dr Kill Devil Hill	Zoning: G&I
Addition:	Block: blk Lot(s): lot
Legal Description: This is the legal description test	

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

PAID
CIC-1/6/22

PROJECT DESCRIPTION: Relocate ceiling light fixtures in Planning Department offices

EL2022-001

PROJECT NAME: Town of Kill Devil Hills
SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill

ELECTRICAL
ISSUED: 01/05/2022
EXPIRES: 07/04/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	500.00
FLOOD ZONE	X
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: Charles Thuman

Contractor or Authorized Agent: Daniel Parsons Date: 01 / 05 / 2022



Town of Kill Devil Hills

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

PAID

JAN 28 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2022-007

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 1307 HARPOON DR Kill Devil Hills

OCCUPANCY

ISSUED: 01/28/2022

EXPIRES:

PARENT PERMIT #: BJ2021-045

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

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988414225829

**Parcel
Number:**

Address: 1307 HARPOON DR Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 25, Water Oak Residential Community

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

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling

OP2022-007

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 1307 HARPOON DR Kill Devil Hills

OCCUPANCY

ISSUED: 01/28/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 1.28.22



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

OP2022-005

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 706 Harmony Lane Kill Devil Hills

OCCUPANCY
ISSUED: 01/21/2022

EXPIRES:

PARENT PERMIT #: BJ2021-112

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

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988413220733

Parcel Number:

Address: 706 Harmony Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 16, Water Oak Residential Community

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

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling

PAID

JAN 21 2022

TOWN OF
KILL DEVIL HILLS

OP2022-005

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 706 Harmony Lane Kill Devil Hills

OCCUPANCY

ISSUED: 01/21/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: Graef Muck Date: 1.21.22



Town of Kill Devil Hills

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

PAID

JAN 24 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2022-006	OCCUPANCY
PROJECT NAME: SAGA New 4 Bedroom House	ISSUED: 01/24/2022
SITE ADDRESS: 609 Zen Lane Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2020-189

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

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988413223591

Parcel Number:

Address: 609 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 55 Water Oak Residential Community Phase 1

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

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling (REVISED PLAN)

Handwritten signature and date: 1/24/22

OP2022-006

PROJECT NAME: SAGA New 4 Bedroom House

SITE ADDRESS: 609 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 01/24/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: Gracelyn Murek Date: 1.24.22



Town of Kill Devil Hills

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

JAN 14 2022

Planning and Inspection Department

OP2022-003

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 535 West Eden Street Kill Devil Hills

OCCUPANCY

ISSUED: 01/14/2022

EXPIRES:

PARENT PERMIT #: BJ2021-136

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: 01/01/2023

PARCEL:

PIN: 987520905250

**Parcel
Number:**

Address: 535 West Eden Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 3 and 4, Block 74, Virginia Dare Subdivision

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

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

OP2022-003

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 535 West Eden Street Kill Devil Hills

OCCUPANCY

ISSUED: 01/14/2022

EXPIRES:

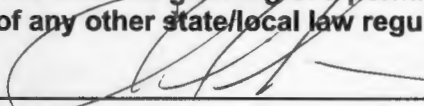
DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 1-14-22



Town of Kill Devil Hills

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

PAID

JAN 18 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2022-004	OCCUPANCY
PROJECT NAME: SAGA New 4 Bedroom House	ISSUED: 01/17/2022
SITE ADDRESS: 605 ZEN LANE Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2021-055

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

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

GENERAL BUILDING - LIMITED:	SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	License: 62306 Expires: 12/31/2022
------------------------------------	---	---

PARCEL:

PIN: 988414225507	Parcel Number:
Address: 605 ZEN LANE Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 53, Water Oak Residential Community	

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

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling with garage

OP2022-004

PROJECT NAME: SAGA New 4 Bedroom House

SITE ADDRESS: 605 ZEN LANE Kill Devil Hills

OCCUPANCY

ISSUED: 01/17/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: Grace Murrel Date: 1.18.22



Town of Kill Devil Hills

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

PAID

JAN 12 2022

Planning and Inspection Department

BP2021-271

PROJECT NAME: Kurt and Mary Fowler
SITE ADDRESS: 2405 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 12/14/2021
EXPIRES: 06/12/2022

APPLICANT: OBRC, LLC
PO Box 1916
Kill Devil Hills, NC 27948
252-305-4856

OWNER: FOWLER, KURT & MARY
1440 Old Adeline RD
PRINCE FREDERICK, MD 20678
490-535-4284

UNLIMITED BUILDING: OBRC, LLC
PO Box 1916
Kill Devil Hills, NC 27948
252-305-4856

License: 78540
Expires: 12/31/2021

PARCEL:

PIN: 988517224155

Parcel Number: 003035000

Address: 2405 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES PLAT B

Zoning:
Block: 0 **Lot(s):** 39-40

Legal Description:

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

PROJECT DESCRIPTION: Replace deck boards and handrails on walkway and dune deck

BP2021-271

PROJECT NAME: Kurt and Mary Fowler
SITE ADDRESS: 2405 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 12/14/2021

EXPIRES: 06/12/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Y
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	11500.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * 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: 1/10/22



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

OP2022-002	OCCUPANCY
PROJECT NAME: SAGA New 3 Bedroom House	ISSUED: 01/13/2022
SITE ADDRESS: 603 Zen Lane Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2021-031

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

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988414225650

Parcel Number:

Address: 603 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 52, Water Oak Subdivision

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

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

JAN 13 2022

T. Shaw
KILL DEVIL HILLS

OP2022-002

PROJECT NAME: SAGA New 3 Bedroom House

SITE ADDRESS: 603 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 01/13/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: Grace Mueck Date: 1.13.22



Town of Kill Devil Hills

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

PAID

JAN - 4 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2022-001

PROJECT NAME: OBX Cottages
SITE ADDRESS: 539 West Eden Street Kill Devil Hills

OCCUPANCY
ISSUED: 01/04/2022

EXPIRES:

PARENT PERMIT #: BJ2021-135

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: 01/01/2023

PARCEL:

PIN: 987520905118

**Parcel
Number:**

Address: 539 West Eden Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 1 and 2, Block 74, Virginia Dare Shores Subdivision

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

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

OP2022-001

PROJECT NAME: OBX Cottages
SITE ADDRESS: 539 West Eden Street Kill Devil Hills

OCCUPANCY

ISSUED: 01/04/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: M. Shaw

Contractor or Authorized Agent: MS Date: 1-4-22



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

DW2022-002	DRIVEWAY
PROJECT NAME: Floan Driveway	ISSUED: 01/25/2022
SITE ADDRESS: 800 CLAM SHELL DR KILL DEVIL HILLS	EXPIRES: 07/24/2022

APPLICANT: FLOAN, MARJORIE KAY P O BOX 1971 KILL DEVIL HILLS, NC 27948	OWNER: FLOAN, MARJORIE KAY P O BOX 1971 KILL DEVIL HILLS, NC 27948
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN: 988409173330	Parcel Number: 002371000
Address: 800 CLAM SHELL DR KILL DEVIL HILLS	
Addition: SEA HOLLY RIDGE	Zoning:
Legal Description:	Block: A Lot(s): 12

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

PROJECT DESCRIPTION: add 10'x16' driveway addition in right of way

PAID
JAN 28 2022
T. LANGRISH
KILL DEVIL HILLS

Handwritten: "X" and "Flood Zone"

DW2022-002

PROJECT NAME: Floan Driveway

SITE ADDRESS: 800 CLAM SHELL DR KILL DEVIL HILLS

DRIVEWAY

ISSUED: 01/25/2022

EXPIRES: 07/24/2022

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	William T Robbins L2677
ZONING DISTRICT	RL
CONSTRUCTION COST	2500.00
TOTAL SQUARE FOOTAGE	160

REQUIRED INSPECTIONS

Zoning Final

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.
- * 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: 1-28-2022



Town of Kill Devil Hills

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

PAID

JAN - 7 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

DW2021-010	PAID WITH CASH	DRIVEWAY
PROJECT NAME: Smith Driveway		ISSUED: 12/20/2021
SITE ADDRESS: 106 THIRD ST E KILL DEVIL HILLS		EXPIRES: 06/18/2022

APPLICANT: Smith, Michael 104 Commerce ST Smithfield, VA 23430 757-576-4203	OWNER: Smith, Michael 104 Commerce ST Smithfield, VA 23430 757-576-4203
---	---

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

PARCEL:

PIN: 988406378800	Parcel Number: 002734000
Address: 106 THIRD ST E KILL DEVIL HILLS	Zoning:
Addition: SUBDIVISION - NONE	Block: 0 Lot(s): 0
Legal Description:	

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

PROJECT DESCRIPTION: replace existing driveway to same footprint, small portion of driveway in right of way

Cost ?
~~\$8,000~~

DW2021-010

PROJECT NAME: Smith Driveway
SITE ADDRESS: 106 THIRD ST E KILL DEVIL HILLS

DRIVEWAY

ISSUED: 12/20/2021

EXPIRES: 06/18/2022

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Carlos Gomez L-3241
ZONING DISTRICT	C
FLOOD ZONE	X
LOT COVERAGE	18.98

REQUIRED INSPECTIONS

Zoning Final

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: 1/7/21



Town of Kill Devil Hills

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

JAN - 7 2022

Planning and Inspection Department

DW2021-011

PROJECT NAME: Gilbert Driveway Addition
SITE ADDRESS: 1721 CREEK ST KILL DEVIL HILLS

DRIVEWAY

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

APPLICANT: Gilbert, Cecil
13845 Braddock Springs
Apt F
CENTREVILLE, VA 20121
254-339-6761

OWNER: Gilbert, Cecil
13845 Braddock Springs
Apt F
CENTREVILLE, VA 20121
254-339-6761

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988410266940

Parcel Number: 002653000

Address: 1721 CREEK ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: add 11x20 driveway pad

DW2021-011

PROJECT NAME: Gilbert Driveway Addition
SITE ADDRESS: 1721 CREEK ST KILL DEVIL HILLS

DRIVEWAY

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Marty Barnette
ZONING DISTRICT	RL
CONSTRUCTION COST	4000.00
FLOOD ZONE	X
TOTAL SQUARE FOOTAGE	220

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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:** 1/7/22



Town of Kill Devil Hills

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

PAID

JAN 31 2022

Planning and Inspection Department

ZP2022-004

PROJECT NAME: Mummert Fence
SITE ADDRESS: 320 WALKER ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/31/2022

EXPIRES: 07/30/2022

APPLICANT: MUMMERT, BENJAMIN
102 OSPREY LN
kitty hawk, nc 27949

OWNER: MUMMERT, BENJAMIN
102 OSPREY LN
kitty hawk, nc 27949

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988517013454

Parcel Number: 000588000

Address: 320 WALKER ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 45 **Lot(s):** 29-31

Legal Description:

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

PROJECT DESCRIPTION: fence around rear and side yard

ZP2022-004

PROJECT NAME: Mummert Fence
SITE ADDRESS: 320 WALKER ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/31/2022

EXPIRES: 07/30/2022

DETAILS

Permit

Name	Value
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	3000.00
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.

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: 1-31-2022



Town of Kill Devil Hills

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

PAID

PAIL
WITH
CASH

JAN 26 2022

Planning and Inspection Department

ZP2022-003	ZONING PERMIT
PROJECT NAME: Adams Fence	ISSUED: 01/26/2022
SITE ADDRESS: 208 WILKINSON ST W KILL DEVIL HILLS	EXPIRES: 07/25/2022

APPLICANT: ADAMS, MARK
208 Wilkinson Street W
Kill Devil Hills, NC 27948

OWNER: ADAMS, MARK
208 Wilkinson Street W
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988513022983

Parcel Number: 000538000

Address: 208 WILKINSON ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 34 **Lot(s):** 25-26

Legal Description:

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

PROJECT DESCRIPTION: fence around rear and side yard, connecting to house

ZP2022-003

PROJECT NAME: Adams Fence

SITE ADDRESS: 208 WILKINSON ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/26/2022

EXPIRES: 07/25/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	500.00
SURVEYOR NAME AND NUMBER	George Midgette
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: _____

1/26/22



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

ZP2022-002

PROJECT NAME: REISSE RETAINING WALL
SITE ADDRESS: 2807 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/19/2022

EXPIRES: 07/18/2022

APPLICANT: DANA REISSE
312 Oak Forest Ave
CATONSVILLE, MD 21228

OWNER: DANA REISSE
312 Oak Forest Ave
CATONSVILLE, MD 21228

GENERAL BUILDING-LIMITED: SOUNDSIDE CONSTRUCTION
P. O. Box 956
Manteo, NC 27954
252-305-2526

License: 26579
Expires: 01/01/2023

PARCEL:

PIN: 988513139121

Parcel Number: 000826000

Address: 2807 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES PLAT B

Zoning:
Block: 0 **Lot(s):** 21

Legal Description:

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

PROJECT DESCRIPTION: REBUILD RETAINING WALL ON SOUTH SIDE OF DRIVEWAY

PAID

JAN 19 2022

TOWN OF
KILL DEVIL HILLS

ZP2022-002

PROJECT NAME: REISSE RETAINING WALL
SITE ADDRESS: 2807 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/19/2022

EXPIRES: 07/18/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

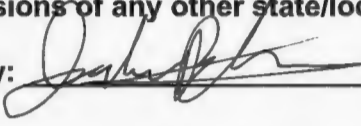
Final


Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Unbalanced fill shall not exceed 48" without engineers certification.

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:** 1-19-22



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

ZP2022-001

PROJECT NAME: Myers Fence
SITE ADDRESS: 524 W. Palmetto Street Kill Devil Hills

ZONING PERMIT

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

APPLICANT: AAA Lawn Enforcement
4227 Worthington Lane
kitty hawk, nc 27949
252-207-6496

OWNER: Myers, Arthur
29 Dalghren Rd
RICHMOND, VA 23233

GENERAL: AAA Lawn Enforcement
4227 Worthington Lane
kitty hawk, nc 27949
252-207-6496

License: 123456
Expires: 10/31/2025

PARCEL:

PIN: 987520906197

Parcel Number:

Address: 524 W. Palmetto Street Kill Devil Hills

Addition:

Zoning:

Block:

Lot(s):

Legal Description: Lot 33R, Block 74

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

PROJECT DESCRIPTION: fence around rear and side yard

PAID

JAN - 5 2022

TOWN OF
KILL DEVIL HILLS

ZP2022-001

PROJECT NAME: Myers Fence
SITE ADDRESS: 524 W. Palmetto Street Kill Devil Hills

ZONING PERMIT

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	5500.00
SURVEYOR NAME AND NUMBER	John R. Mayne
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: 1-5-2022



Town of Kill Devil Hills

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

PAID

JAN - 4 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

DM2021-019

PROJECT NAME: Palm and Pine Ventures
SITE ADDRESS: 205 HAYMAN BLVD E KILL DEVIL HILLS

DEMOLITION

ISSUED: 12/29/2021

EXPIRES: 06/27/2022

APPLICANT: East Coast Abatement and Demolition
176 Winchester Way
Moyock, NC 27958
252-232-7740

OWNER: Palm and Pine Ventures
1513 Glider Ct
Kill Devil Hills, NC 27948

ABATEMENT AND DEMOLITION: East Coast Abatement and Demolition
176 Winchester Way
Moyock, NC 27958
252-232-7740

License: 2701030130
Expires: 12/31/2022

PARCEL:

PIN: 988513125563

Parcel Number: 000785000

Address: 205 HAYMAN BLVD E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES AMD BLK 6

Zoning:

Block: 6 **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: Demo of fire damaged single family dwelling

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FLOOD ZONE	X
CONSTRUCTION COST	18500.00

PAID
1/4/22
Paypal

DM2021-019

PROJECT NAME: Palm and Pine Ventures

SITE ADDRESS: 205 HAYMAN BLVD E KILL DEVIL HILLS

DEMOLITION

ISSUED: 12/29/2021

EXPIRES: 06/27/2022

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Kartni Austin Date: 12 / 30 / 2021



Town of Kill Devil Hills

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

PAID

JAN 31 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-015

PROJECT NAME:

SITE ADDRESS: 2602 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/25/2022

EXPIRES: 07/24/2022

APPLICANT: Carlson, Peter & Traci
421 Four Islands TR
LANEXA, VA 23089

OWNER: Carlson, Peter & Traci
421 Four Islands TR
LANEXA, VA 23089

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 988517129378

Parcel Number: 000383000

Address: 2602 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 5 **Lot(s):** 3

Legal Description:

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

PROJECT DESCRIPTION: Heat pump replacement

PAID
CR-1/21/22
Paypal

MC2022-015

PROJECT NAME:

SITE ADDRESS: 2602 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/25/2022

EXPIRES: 07/24/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5249.64
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: Marty Shaw

Contractor or Authorized Agent: Paxton Nix **Date:** 01 / 25 / 2022



Town of Kill Devil Hills

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

PAID

JAN 31 2022

Planning and Inspection Department

Town of Kill Devil Hills

MC2022-016	MECHANICAL
PROJECT NAME: Unit 4J	ISSUED: 01/25/2022
SITE ADDRESS: 1319 North Virginia Dare Trail - Unit 4J Kill Devil Hills	EXPIRES: 07/24/2022

APPLICANT: Davis, Gregory and Kelly 34 Merry Lane WESTON, CT 06883	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: 12/31/2022
----------------------------	--	---

PARCEL:

PIN: 98841564493933	Parcel Number:
Address: 1319 North Virginia Dare Trail - Unit 4J Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Croatan Surf Club - Unit 4J	

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

PROJECT DESCRIPTION: HVAC replacement

PAID
1/28/22-12
CK# 1131

MC2022-016

PROJECT NAME: Unit 4J

SITE ADDRESS: 1319 North Virginia Dare Trail - Unit 4J Kill Devil Hills

MECHANICAL

ISSUED: 01/25/2022

EXPIRES: 07/24/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7116.00
CONSTRUCTION TYPE	III
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
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 Shaw

Contractor or Authorized Agent: LINDA G BURGESS Date: 01 / 26 / 2022



Town of Kill Devil Hills

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

PAID

JAN 27 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-018	MECHANICAL
PROJECT NAME: McMichael HVAC	ISSUED: 01/26/2022
SITE ADDRESS: 1601 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/25/2022

APPLICANT: McMichael, Scott 9911 River RD Newport News, VA 23601	OWNER: McMichael, Scott 9911 River RD Newport News, VA 23601
---	---

H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2022
---------------------	--	---

PARCEL:

PIN: 98841156647305	Parcel Number: 002781005
Address: 1601 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: B Lot(s): UT 105 16-20
Legal Description:	

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

PROJECT DESCRIPTION: C/O 4Ton HVAC system

MC2022-018

PROJECT NAME: McMichael HVAC

SITE ADDRESS: 1601 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/26/2022

EXPIRES: 07/25/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7320.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

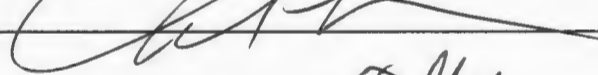
REQUIRED INSPECTIONS


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: 

Contractor or Authorized Agent:  Date: 1-27-22



Town of Kill Devil Hills

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

JAN 27 2022

Planning and Inspection Department

MC2022-017	MECHANICAL
PROJECT NAME: Chicella HVAC	ISSUED: 01/26/2022
SITE ADDRESS: 1401 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 07/25/2022

APPLICANT: Chicella, Michael
2144 Shubert Dr
VIRGINIA BEACH, VA 23454

OWNER: Chicella, Michael
2144 Shubert Dr
VIRGINIA BEACH, VA23454

H3, CLASS 1:

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

License: 12643
Expires: 12/31/2022

PARCEL:

PIN: 98930906943003

Parcel Number: 028106000

Address: 1401 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

Block: B **Lot(s):** 9-10 UNIT 3

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

7 2
MC2022-017

PROJECT NAME: Chicella HVAC

SITE ADDRESS: 1401 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/26/2022

EXPIRES: 07/25/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5860.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
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: _____

Contractor or Authorized Agent: _____

Date: _____

1-27-22



Town of Kill Devil Hills

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

PAID

JAN 25 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2022-014	MECHANICAL
PROJECT NAME: Blackstock HVAC	ISSUED: 01/24/2022
SITE ADDRESS: 1800 St David Rd Kill Devil Hills	EXPIRES: 07/23/2022

APPLICANT: Blackstock, Steven 1800 St. David St 104-B1 Kill Devil Hills, NC 27948 252-202-1160	OWNER: Blackstock, Steven 1800 St. David St 104-B1 Kill Devil Hills, NC 27948 252-202-1160
--	--

MECHANICAL H-3 CLASS 1:	NORTH BEACH SERVICES P.O. Box 181 Kitty Hawk, NC 27949 252-491-2878	License: 22053 Expires: 12/31/2022
--------------------------------	--	---

PARCEL:

PIN: 98830927406102	Parcel Number:
Address: 1800 St David Rd Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Hamilton Cay Condominium	

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

PAID
1/25/2022
Ray Ray

MC2022-014

PROJECT NAME: Blackstock HVAC

SITE ADDRESS: 1800 St David Rd Kill Devil Hills

MECHANICAL

ISSUED: 01/24/2022

EXPIRES: 07/23/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
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: Charles Thuman

Contractor or Authorized Agent: Gabby Willis Date: 01 / 24 / 2022



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

MC2022-013	MECHANICAL
PROJECT NAME: Nguyen HVAC	ISSUED: 01/20/2022
SITE ADDRESS: 1803 SUNSET AVE KILL DEVIL HILLS	EXPIRES: 07/19/2022

APPLICANT: NGUYEN, CU 1803 Sunset Ave Kill Devil Hills, NC 27948 252-207-6010	OWNER: NGUYEN, CU 1803 Sunset Ave Kill Devil Hills, NC 27948 252-207-6010
---	---

H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2022
---------------------	--	---

PARCEL:

PIN: 988409066341	Parcel Number: 002513000
Address: 1803 SUNSET AVE KILL DEVIL HILLS	Zoning:
Addition: CROATAN SHORES INC SEC 1	Block: 17 Lot(s): 4
Legal Description:	

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

22

MC2022-013

PROJECT NAME: Nguyen HVAC

SITE ADDRESS: 1803 SUNSET AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/20/2022

EXPIRES: 07/19/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8382.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

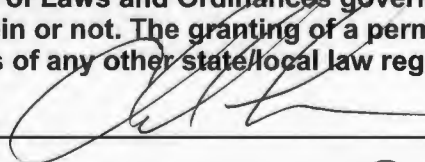
REQUIRED INSPECTIONS

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: 1-21-22



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

MC2022-011

PROJECT NAME: Karosi HVAC
SITE ADDRESS: 320 LIVE OAK CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/19/2022

EXPIRES: 07/18/2022

APPLICANT: Karosi, David
320 Live Oak Ct
Kill Devil Hills, NC 27948
252-305-9468

OWNER: Karosi, David
320 Live Oak Ct
Kill Devil Hills, NC 27948
252-305-9468

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

License: 33486
Expires: 12/31/2022

PARCEL:

PIN: 988410352672

Parcel Number: 003219000

Address: 320 LIVE OAK CT KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 223

Legal Description:

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

PAID

JAN 20 2022

T. THOMAS
KILL DEVIL HILLS

MC2022-011

PROJECT NAME: Karosi HVAC

SITE ADDRESS: 320 LIVE OAK CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/19/2022

EXPIRES: 07/18/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

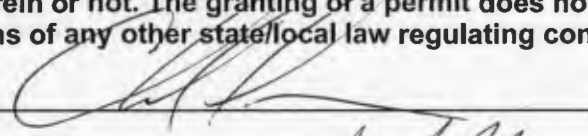
REQUIRED INSPECTIONS

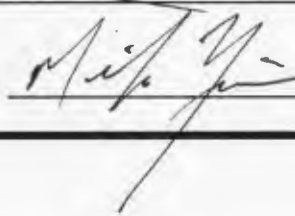
Final

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: 1-20-22



Town of Kill Devil Hills

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

PAID
JAN 19 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-010	MECHANICAL
PROJECT NAME:	ISSUED: 01/19/2022
SITE ADDRESS: 105 CAMELLIA DR KILL DEVIL HILLS	EXPIRES: 07/18/2022

APPLICANT: Ruffino, Jason & Danielle
35 Beverly ST
ROCHESTER, NY 14610

OWNER: Ruffino, Jason & Danielle
35 Beverly ST
ROCHESTER, NY 14610

MECHANICAL H-3: DUSTY RHODS HEATING AND AIR CONDITIONING License: 21691
INC Expires: 12/31/2022
P.O. Box 444
Kitty Hawk, NC 27949
252-202-6852

PARCEL:

PIN: 988411551122	Parcel Number: 028390000
Address: 105 CAMELLIA DR KILL DEVIL HILLS	
Addition:	Zoning:
Legal Description:	Block: 9 Lot(s): 7

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

PROJECT DESCRIPTION: Install mini split on lower level

MC2022-010

PROJECT NAME:

SITE ADDRESS: 105 CAMELLIA DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/19/2022

EXPIRES: 07/18/2022

DETAILS

Permit

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

REQUIRED INSPECTIONS

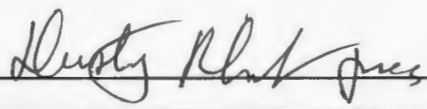
Final

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: 1-19-22



Town of Kill Devil Hills

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

PAID

JAN 14 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-008

PROJECT NAME: LEGGIO HVAC
SITE ADDRESS: 1807 SEMINOLE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/11/2022

EXPIRES: 07/10/2022

APPLICANT: SUE LEGGIO
1807 Seminole St.
K D H, NC 27948

OWNER: SUE LEGGIO
1807 Seminole St.
K D H, NC 27948

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 988410276436

Parcel Number: 002477000

Address: 1807 SEMINOLE ST KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC C/O

PAID
Mc 1/14/22
Pg Al

MC2022-008

PROJECT NAME: LEGGIO HVAC

SITE ADDRESS: 1807 SEMINOLE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/11/2022

EXPIRES: 07/10/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7641.70
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: Paxton Nix Date: 01 / 11 / 2022



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

MC2022-009

PROJECT NAME:

SITE ADDRESS: 112 SUTTON AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/12/2022

EXPIRES: 07/11/2022

APPLICANT: DOUGLAS ANDERSON
916 Jodi Lynn Trl.
CHESAPEAKE, VA 23322

OWNER: DOUGLAS ANDERSON
916 Jodi Lynn Trl.
CHESAPEAKE, VA 23322

H3, CLASS 1: One Hour Heating and Air Conditioning
701 Fresh Pond West
Kill Devil Hills, NC 27948
441-1740

License: 12643
Expires: 12/31/2022

PARCEL:

PIN: 988419711552

Parcel Number: 003931000

Address: 112 SUTTON AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 41

Lot(s): 5-6

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID

JAN 12 2022

TOWN OF
KILL DEVIL HILLS

MC2022-009

PROJECT NAME:

SITE ADDRESS: 112 SUTTON AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/12/2022

EXPIRES: 07/11/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7919.00
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: 1-12-22



Town of Kill Devil Hills

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

PAID

JAN 11 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-004	MECHANICAL
PROJECT NAME: Planning Duct Work	ISSUED: 01/06/2022
SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill	EXPIRES: 07/05/2022

APPLICANT: TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948	OWNER: TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948
---	---

MECHANICAL, H-3, I:	MASTER HEATING AND COOLING P.O. Box 707 Kitty Hawk, NC 27949 255-0095	License: 18066 Expires: 12/31/2022
----------------------------	--	---

PARCEL:

PIN: 9876543210	Parcel Number: 23
Address: 102 Town Hall Dr Kill Devil Hill	Zoning: G&I
Addition:	Block: blk Lot(s): lot
Legal Description: This is the legal description test	

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

PAID
CA-1/11/22

PROJECT DESCRIPTION: Relocate duct work in planning

MC2022-004

PROJECT NAME: Planning Duct Work
SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill

MECHANICAL

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	500.00
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: Charles Thuman

Contractor or Authorized Agent: Anthony Pritchett **Date:** 01 / 11 / 2022



Town of Kill Devil Hills

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

JAN 11 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-006	MECHANICAL
PROJECT NAME: KDHPO HVAC	ISSUED: 01/10/2022
SITE ADDRESS: 302 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 07/09/2022

APPLICANT: Southern Postal realty Holdings, LLC 75 Columbia Ave CEDARHURST, NY 11516	OWNER: Southern Postal realty Holdings, LLC 75 Columbia Ave CEDARHURST, NY 11516
---	---

MECHANICAL, H-3, I:	MASTER HEATING AND COOLING P.O. Box 707 Kitty Hawk, NC 27949 255-0095	License: 18066 Expires: 12/31/2022
----------------------------	--	---

PARCEL:

PIN: 988308795741	Parcel Number: 004026000
Address: 302 CROATAN HWY S KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 65 Lot(s): 4-6,15-17PT3,7,14,1
Legal Description:	

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

PROJECT DESCRIPTION: C/O 2 5Ton HVAC systems

Paid
via 1/11/22
Pg Bel

MC2022-006

PROJECT NAME: KDHPO HVAC

SITE ADDRESS: 302 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/10/2022

EXPIRES: 07/09/2022

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	8000.00
CONSTRUCTION TYPE	III
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: Charles Thuman

Contractor or Authorized Agent: H. W. Francis **Date:** 01 / 11 / 2022



Town of Kill Devil Hills

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

PAID

JAN 11 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-007	MECHANICAL
PROJECT NAME:	ISSUED: 01/10/2022
SITE ADDRESS: 1409 North Virginia Dare Trail Kill Devil Hills	EXPIRES: 07/09/2022

APPLICANT: CARRIBEAN JEWEL LLC 1159 MILL GARDEN CT GREAT FALLS, VA22066	OWNER: CARRIBEAN JEWEL LLC 1159 MILL GARDEN CT GREAT FALLS, VA22066
--	--

MECHANICAL H-3, CLASS 1:	Anderson Heating and Cooling Co., LLC PO Box 396 Kitty Hawk, NC 27949 252-619-3105	License: 31438 Expires: 12/31/2022
---------------------------------	---	---

PARCEL:

PIN: 988411652398	Parcel Number: 002757000
Address: 1409 North Virginia Dare Trail Kill Devil Hills	Zoning: OCEAN IMPACT RESIDENTIAL
Addition: Birdsong Subdivision	Block: Lot(s): 1A
Legal Description: Lot 1A, The Birdsong Subdivision	

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

PROJECT DESCRIPTION: HVAC replacement

PAID
1/11/22
Chk# 0337

MC2022-007

PROJECT NAME:

SITE ADDRESS: 1409 North Virginia Dare Trail Kill Devil Hills

MECHANICAL

ISSUED: 01/10/2022

EXPIRES: 07/09/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7403.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
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: Marty Shaw

Contractor or Authorized Agent: Gil Anderson Date: 01/11/2022



Town of Kill Devil Hills

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

PAID

JAN - 6 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-006	BUILDING
PROJECT NAME: BARNES DECK ADDITION	ISSUED: 01/06/2022
SITE ADDRESS: 516 LAURA LN KILL DEVIL HILLS	EXPIRES: 07/05/2022

APPLICANT: Barnes, Warren 516 Laura LN Kill Devil Hills, NC 27948	OWNER: Barnes, Warren 516 Laura LN Kill Devil Hills, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN: 988405178878	Parcel Number: 027475000
Address: 516 LAURA LN KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES SEC 2	Block: 0 Lot(s): 114
Legal Description:	

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

PROJECT DESCRIPTION: CONSTRUCT 340sqft NEAR GRADE DECK ON SOUTH OF HOME.

BP2022-006PROJECT NAME: BARNES DECK ADDITION
SITE ADDRESS: 516 LAURA LN KILL DEVIL HILLS**BUILDING**

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
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	Slab/Foundation/Piling
Final	Floor box

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.
- * Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

JAN - 7 2022

Planning and Inspection Department

MC2022-005	MECHANICAL
PROJECT NAME: ALKER HVAC	ISSUED: 01/07/2022
SITE ADDRESS: 502 LANDING DR W KILL DEVIL HILLS	EXPIRES: 07/06/2022

APPLICANT: ALKER, GREGORY B
502 W LANDING DR
KILL DEVIL HILLS, NC 27948-8445

OWNER: ALKER, GREGORY B
502 W LANDING DR
KILL DEVIL HILLS, NC 27948-8445

MECHANICAL H-3, CLASS 1: Brian Mace Hedrick
17 Palmetto LN
Southern Shores, NC 27949
252-489-5836

License: 32559
Expires: 12/31/2022

PARCEL:

PIN: 988414330506

Parcel Number: 003584000

Address: 502 LANDING DR W KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 2, THE

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2022-005

PROJECT NAME: ALKER HVAC

SITE ADDRESS: 502 LANDING DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/07/2022

EXPIRES: 07/06/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6450.00
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: _____



Town of Kill Devil Hills

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

PAID

JAN - 4 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-001	MECHANICAL
PROJECT NAME: Owens HVAC	ISSUED: 01/04/2022
SITE ADDRESS: 803 FOX ST KILL DEVIL HILLS	EXPIRES: 07/03/2022

APPLICANT: DEAN OWENS 5 Las Cruces Irvine, CA 92614	OWNER: DEAN OWENS 5 Las Cruces Irvine, CA 92614
--	--

MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	License: 13056 Expires: 12/31/2022
--------------------	---	---

PARCEL:

PIN: 988308789106	Parcel Number: 030876000
Address: 803 FOX ST KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 14 Lot(s): 9
Legal Description:	

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

PROJECT DESCRIPTION: C/O two HVAC systems

DETAILS

Permit Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	17039.74
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N

PAID
1/4/22
Pattal

MC2022-001

PROJECT NAME: Owens HVAC

SITE ADDRESS: 803 FOX ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Paxton Nix Date: 01 / 04 / 2022



Town of Kill Devil Hills

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

PAID

JAN - 4 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-002

PROJECT NAME: Woodson HVAC
SITE ADDRESS: 1019 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

APPLICANT: THOMAS WOODSON
10265 Shawn Grove Pl.
Mechanicsville, VA 23116

OWNER: THOMAS WOODSON
10265 Shawn Grove Pl.
Mechanicsville, VA 23116

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 98841573165208

Parcel Number: 003707301

Address: 1019 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: 12

Lot(s): 1,2 UNIT
301

Legal Description:

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

PROJECT DESCRIPTION: C/O HVAC system, add supply to master bed

PAID
1/4/22 by
payrol

MC2022-002

PROJECT NAME: Woodson HVAC

SITE ADDRESS: 1019 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8623.50
CONSTRUCTION TYPE	V
FLOOD ZONE	X
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: Charles Thuman

Contractor or Authorized Agent: Paxton Nix **Date:** 01 / 04 / 2022



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

JAN - 5 2022

MC2022-003	MECHANICAL
PROJECT NAME: William Lovell	ISSUED: 01/04/2022
SITE ADDRESS: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS	EXPIRES: 07/03/2022

APPLICANT: ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232	OWNER: WILLIAM LOVELL 122 soundside estates grandy, nc 27939
---	---

MECHANICAL:	ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232	License: 19091 Expires: 12/31/2022
--------------------	---	---

PARCEL:

PIN: 98931313384516	Parcel Number: 028045000
Address: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): UNIT 2-H
Legal Description:	

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

PROJECT DESCRIPTION: HVAC

PAID
via 1/5/22
Peg Pel

MC2022-003

PROJECT NAME: William Lovell

SITE ADDRESS: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/04/2022

EXPIRES: 07/03/2022

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8705.00
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:  **Date:** 01 / 04 / 2022



Town of Kill Devil Hills

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

PAID
JAN 31 2022
TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2022-021	BUILDING
PROJECT NAME: GREER DECKING AND RAILING	ISSUED: 01/31/2022
SITE ADDRESS: 213 BICKETT ST E KILL DEVIL HILLS	EXPIRES: 07/30/2022

APPLICANT: Greer, Phillip 213 E. Bickett St. Kill Devil Hills, NC 27948 252-236-1894	OWNER: Greer, Phillip 213 E. Bickett St. Kill Devil Hills, NC 27948 252-236-1894
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN: 988517213271	Parcel Number: 001686000
Address: 213 BICKETT ST E KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH	Block: 0 Lot(s): 30
Legal Description:	

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

PROJECT DESCRIPTION: REPLACE DECKING WIHT COMPOSITE, INSTALL ADDITIONAL JOISTS, STRINGERS, AND RAILPOSTS

BP2022-021PROJECT NAME: GREER DECKING AND RAILING
SITE ADDRESS: 213 BICKETT ST E KILL DEVIL HILLS**BUILDING**

ISSUED: 01/31/2022

EXPIRES: 07/30/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
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

Planning and Inspection Department

BP2022-020	BUILDING
PROJECT NAME: Gus stairs	ISSUED: 01/28/2022
SITE ADDRESS: 1720 VIRGINIA AVE KILL DEVIL HILLS	EXPIRES: 07/27/2022

APPLICANT: Zinovis, Constantine
1720 Virginia Ave
Kill Devil Hills, NC 27948
757-287-0686

OWNER: Zinovis, Constantine
1720 Virginia Ave
Kill Devil Hills, NC 27948
757-287-0686

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/31/2023

PARCEL:

PIN: 988409069050

Parcel Number: 002594000

Address: 1720 VIRGINIA AVE KILL DEVIL HILLS

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 18 **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: Rebuild rear stairs in original location

PAID

JAN 28 2022

TOWN OF
KILL DEVIL HILLS



Town of Kill Devil Hills

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

PAID

JAN 27 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-017

PROJECT NAME: Quail Lane Apartment Stair and Deck Rebuild
SITE ADDRESS: 214 QUAIL LN KILL DEVIL HILLS

BUILDING

ISSUED: 01/26/2022

EXPIRES: 07/25/2022

APPLICANT: ASHBY FARRIOR, LLC
4729 N Croatan Hwy
kitty hawk, nc 27949

OWNER: ASHBY FARRIOR, LLC
4729 N Croatan Hwy
kitty hawk, nc 27949

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988316942727

Parcel Number: 005118000

Address: 214 QUAIL LN KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 1

Zoning:
Block: B **Lot(s):** 7&8

Legal Description:

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

PROJECT DESCRIPTION: rebuild existing front decks and stairs to same footprint

BP2022-017**PROJECT NAME:** Quail Lane Apartment Stair and Deck Rebuild**SITE ADDRESS:** 214 QUAIL LN KILL DEVIL HILLS**BUILDING****ISSUED:** 01/26/2022**EXPIRES:** 07/25/2022**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	17500.00
LOT COVERAGE	18.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Jason Mizelle L4917
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Zoning Final
Final

Floor box

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

JAN 27 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-019	BUILDING
PROJECT NAME: MOORE STAIR REBUILD	ISSUED: 01/26/2022
SITE ADDRESS: 403 DURHAM ST W KILL DEVIL HILLS	EXPIRES: 07/25/2022

APPLICANT: Moore, Austin 8195 Natures Way Williamsburg, Va 23188	OWNER: Moore, Austin 8195 Natures Way Williamsburg, Va 23188
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN: 988405189834	Parcel Number: 001345000
Address: 403 DURHAM ST W KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 630
Legal Description:	

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

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR NOT TO EXCEED 45", REPLACE RAILING AND DECKING

PAID
1/26/22
Jb Pongal

BP2022-019**PROJECT NAME:** MOORE STAIR REBUILD
SITE ADDRESS: 403 DURHAM ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 01/26/2022**EXPIRES:** 07/25/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	16000.00
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.

* Stairs shall not exceed 45" so to not encroach into required parking.

* 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

PAID
JAN 27 2022

BP2022-018	BUILDING
PROJECT NAME: Awful Arthurs Boardwalk replacement	ISSUED: 01/26/2022
SITE ADDRESS: 2106 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/25/2022

APPLICANT: MACKO OBX CONSTRUCTION, INC P.O. BOX 3689 Kill Devil Hills, NC 27948 252-480-6411	OWNER: Willowbrook Estates, LLC PO Box 1653 Kill Devil Hills, NC 27948
--	---

BUILDING UNLIMITED:	MACKO OBX CONSTRUCTION, INC P.O. BOX 3689 Kill Devil Hills, NC 27948 252-480-6411	License: 81540 Expires: 01/01/2023
----------------------------	--	---

PARCEL:

PIN: 988518216261	Parcel Number: 003075000
Address: 2106 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH	Block: 0 Lot(s): 11,12 & 30' OF 10
Legal Description:	

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

PROJECT DESCRIPTION: replace existing boardwalk connecting awful arthurs to beach shop, no change to existing footprint

BP2022-018

PROJECT NAME: Awful Arthurs Boardwalk replacement
SITE ADDRESS: 2106 VA DARE TRL N KILL DEVIL HILLS

BUILDING**ISSUED:** 01/26/2022**EXPIRES:** 07/25/2022**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S22-8451
FLOOD ZONE	AO
BASE FLOOD ELEVATION	+2
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
SURVEYOR NAME AND NUMBER	John Delucia

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.
- * No change to footprint permitted. Walkway shall be reconstructed to same size and location.



Town of Kill Devil Hills

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

PAID

JAN 24 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-013	BUILDING
PROJECT NAME: LIPSCOMB STAIR AND RAIL	ISSUED: 01/18/2022
SITE ADDRESS: 1510 Small Place Kill Devil Hills	EXPIRES: 07/17/2022

APPLICANT: LIPSCOMB, PAUL 1510 SMALL CT Kill Devil Hills, NC 27948 252-581-0011	OWNER: LIPSCOMB, PAUL 1510 SMALL CT Kill Devil Hills, NC 27948 252-581-0011
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN: 988413244529	Parcel Number: 003349001
Address: 1510 Small Place Kill Devil Hills	Zoning:
Addition: FIRST FLIGHT VILLAGE SEC 1	Block: Lot(s): 68A
Legal Description:	

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

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR AND RAILING IN SAME LOCATION

PAID
1/21/22 *paid*
JS

BP2022-013PROJECT NAME: LIPSCOMB STAIR AND RAIL
SITE ADDRESS: 1510 Small Place Kill Devil Hills**BUILDING**

ISSUED: 01/18/2022

EXPIRES: 07/17/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

Issued By: Jordan Blythe

Contractor or Authorized Agent:  Date: 01/19/2022



Town of Kill Devil Hills

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

PAID

JAN 14 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2021-263

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

BUILDING

ISSUED: 01/12/2022

EXPIRES: 07/11/2022

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

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

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

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

License: 12345
Expires:

PARCEL:

PIN: 98841314042600

Parcel Number: 008075999

Address: 700 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): COMMON PROPERTY

Legal Description:

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

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

BP2021-263

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

BUILDING

ISSUED: 01/12/2022

EXPIRES: 07/11/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	26351.93
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* Photo verification of project 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: 01-14-22



Town of Kill Devil Hills

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

PAID

JAN - 6 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2021-266	BUILDING
PROJECT NAME: HARE STAIRS	ISSUED: 12/16/2021
SITE ADDRESS: 1713 WYANDOTTE ST KILL DEVIL HILLS	EXPIRES: 06/14/2022

APPLICANT: HARE, CHLOE
6582 BLENHEIM RD
Powhatan, VA 23139
909-557-4967

OWNER: HARE, CHLOE
6582 BLENHEIM RD
Powhatan, VA 23139
909-557-4967

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988409262442

Parcel Number: 002692000

Address: 1713 WYANDOTTE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: REPLACE STRINGERS ON 2 SETS OF EXTERIOR STAIRS

cost \$2000.00



PAID

1/6/22

JP *Ray Pad*

BP2021-266

PROJECT NAME: HARE STAIRS

SITE ADDRESS: 1713 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 12/16/2021

EXPIRES: 06/14/2022

DETAILS

Permit

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: Jordan Blythe

Contractor or Authorized Agent: Chloe Hare Date: 01 / 04 / 2022



Town of Kill Devil Hills

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

PAID

JAN 12 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-275	BUILDING
PROJECT NAME: Harris Rear Deck and Stair Replacement	ISSUED: 12/17/2021
SITE ADDRESS: 700 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 06/15/2022

APPLICANT: Perry, Ronald 1411 Pirates Loop Kill Devil Hills, NC 27948 252-202-3635	OWNER: HARRIS, NANCY 403 Pineview Drive ELIZABETH CITY, NC 27909
--	---

UNLICENSED - REMODELING:	Perry, Ronald 1411 Pirates Loop Kill Devil Hills, NC 27948	License: 12345 Expires:
---------------------------------	--	--

PARCEL:

PIN: 988419724236	Parcel Number: 003729000
Address: 700 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 21 Lot(s): 1
Legal Description:	

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

PROJECT DESCRIPTION: replace rear deck and stairs to same footprint

BP2021-275

PROJECT NAME: Harris Rear Deck and Stair Replacement
SITE ADDRESS: 700 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 12/17/2021

EXPIRES: 06/15/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RH
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
SURVEYOR NAME AND NUMBER	Richard Quible L-1157
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
JAN 11 2022

Planning and Inspection Department

BP2022-010

PROJECT NAME: Ramada Column Repair
SITE ADDRESS: 1701 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 01/11/2022

EXPIRES: 07/10/2022

APPLICANT: O W L NEAL PARTNERSHIP
PO BOX 2716
KILL DEVIL HILLS, NC 27948

OWNER: O W L NEAL PARTNERSHIP
PO BOX 2716
KILL DEVIL HILLS, NC 27948

CONTRACTOR: Neely's Projects, LLC
1733 Sam Wilson Road
CHARLOTTE, NC 28214
803-984-7463

BUILDING LIMITED: Neely's Projects, LLC
1733 Sam Wilson Road
CHARLOTTE, NC 28214
803-984-7463

License: 73244
Expires: 12/31/2022

PARCEL:

PIN: 989309154444

Parcel Number: 008235000

Address: 1701 VA DARE TRL S KILL DEVIL HILLS

Addition: OCEAN ACRES INC

Zoning:
Block: 0 **Lot(s):** C & D

Legal Description:

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

PROJECT DESCRIPTION: Repair structural metal support per engineers letter, and install cladding

BP2022-010

PROJECT NAME: Ramada Column Repair

SITE ADDRESS: 1701 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 01/11/2022

EXPIRES: 07/10/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	III
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

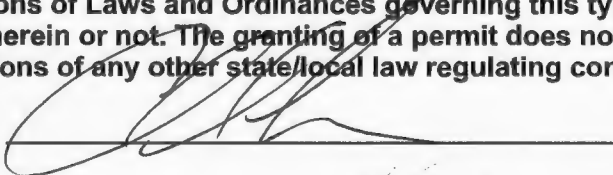
Special Inspections Final
Zoning Final

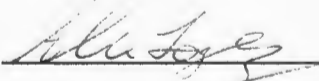
CONDITIONS

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

* Special inspection required for steel repair and welding to the support column.

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: 1-11-22



Town of Kill Devil Hills

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

PAID

JAN 11 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-009	BUILDING
PROJECT NAME: WHITE STAIR REBUILD	ISSUED: 01/10/2022
SITE ADDRESS: 1237A VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 07/09/2022

APPLICANT: WHITE, STACEY
117 PELICAN POINTE DR
ELIZABETH CITY, NC 27909
252-339-5200

OWNER: WHITE, STACEY
117 PELICAN POINTE DR
ELIZABETH CITY, NC 27909
252-339-5200

UNLICENSED BUILDER: GEORGE & SONS
182 SCUPPERNONG RD
MANTEO, NC 27954
252-423-1037

License: XXXXXX
Expires:

PARCEL:

PIN: 989309064887

Parcel Number: 004879000

Address: 1237A VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

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

Legal Description:

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

PROJECT DESCRIPTION: REBUILD TO SETS OF EXTERIOR STAIRS

PAID
1/11/22
py bel

BP2022-009

PROJECT NAME: WHITE STAIR REBUILD

SITE ADDRESS: 1237A VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 01/10/2022

EXPIRES: 07/09/2022

DETAILS

Permit

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

REQUIRED INSPECTIONS

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

JAN 11 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-008

PROJECT NAME: Nadjarian Repair
SITE ADDRESS: 807 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 01/10/2022

EXPIRES: 07/09/2022

APPLICANT: Nadjarian, Paul
2757 N Quebec St
Arlington, VA 22207
415-336-4962

OWNER: Nadjarian, Paul
2757 N Quebec St
Arlington, VA 22207

RESIDENTIAL - LIMITED:

BEACH CONSTRUCTION GROUP
1496 COLINGTON RD
Kill Devil Hills, NC 27948
252-441-8224

License: 77114
Expires: 01/01/2023

PARCEL:

PIN: 988415723676

Parcel Number: 003697000

Address: 807 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 8 **Lot(s):** PT 9

Legal Description:

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

PROJECT DESCRIPTION: Remove and replace siding windows and trim at 3rd floor deck area, repairs as needed

PAID
1/10/22
Res Pcl

BP2022-008

PROJECT NAME: Nadjarian Repair

SITE ADDRESS: 807 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 01/10/2022

EXPIRES: 07/09/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	30000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 01 / 10 / 2022



Town of Kill Devil Hills

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

PAID
JAN 11 2022

Planning and Inspection Department

BP2022-004	BUILDING
PROJECT NAME: HOBBS STAIR REBUILD	ISSUED: 01/05/2022
SITE ADDRESS: 2707 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/04/2022

APPLICANT: HOBBS, G S JR
319 WESTERM AVENUE
SUFFOLK, VA 23434

OWNER: HOBBS, G S JR
319 WESTERM AVENUE
SUFFOLK, VA 23434

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

License: 123
Expires:

PARCEL:

PIN: 988513220890

Parcel Number: 000831000

Address: 2707 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES PLAT B

Block: 0 **Lot(s):** 26

Legal Description:

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

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR IN SAME LOCATION

BP2022-004**PROJECT NAME:** HOBBS STAIR REBUILD**SITE ADDRESS:** 2707 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 01/05/2022**EXPIRES:** 07/04/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
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

PAID

JAN 10 2022

Planning and Inspection Department

BP2022-007	BUILDING
PROJECT NAME: FOREHAND DECK ADDITION AND STAIR	ISSUED: 01/10/2022
SITE ADDRESS: 200 GUNAS DR KILL DEVIL HILLS	EXPIRES: 07/09/2022

APPLICANT: FOREHAND, BRAD 200 GUNAS DR Kill Devil Hills, NC 27948 515-491-2614	OWNER: FOREHAND, BRAD 200 GUNAS DR Kill Devil Hills, NC 27948 515-491-2614
--	--

UNLICENSED - REMODELING:	SUNSHINE CONSTRUCTION 302 COUNTRY CLUB RD Camden, NC 27921 252-339-3448	License: XXXXXX Expires:
---------------------------------	--	---

PARCEL:

PIN: 989313041335	Parcel Number: 008410000
Address: 200 GUNAS DR KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES TRACT 3 SEC 1	Block: C Lot(s): 2
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$156.00	\$0.00	Covered Porches/Decks	208 SQFT
Totals :	\$306.00	\$0.00		

PROJECT DESCRIPTION: CONSTRUCT 8'X29' DECK ADDITION, REBUILD EXISTING DECK, RELOCATE STAIRS

BP2022-007**PROJECT NAME:** FOREHAND DECK ADDITION AND STAIR
SITE ADDRESS: 200 GUNAS DR KILL DEVIL HILLS**BUILDING****ISSUED:** 01/10/2022**EXPIRES:** 07/09/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONSSlab/Foundation/Piling
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.
- * 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.
- * Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

JAN - 5 2022

Planning and Inspection Department

BP2022-001

PROJECT NAME: COLEMAN STAIRS
SITE ADDRESS: 1821 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

APPLICANT: COLEMAN, ROBERT C
500 STERLING RD
VIRGINIA BEACH, VA23464

OWNER: COLEMAN, ROBERT C
500 STERLING RD
VIRGINIA BEACH, VA23464

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988406484598

Parcel Number: 002797000

Address: 1821 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

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

Legal Description:

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

PROJECT DESCRIPTION: REBUILD 2 SETS OF EXTERIOR STAIRS

BP2022-001**PROJECT NAME:** COLEMAN STAIRS**SITE ADDRESS:** 1821 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 01/05/2022**EXPIRES:** 07/04/2022

DETAILS**Permit**

Name	Value
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	12.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
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.

* 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

JAN - 5 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-002	BUILDING
PROJECT NAME: COLEMAN STAIRS	ISSUED: 01/05/2022
SITE ADDRESS: 1823 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/04/2022

APPLICANT: COLEMAN, ROBERT C 500 STERLING RD VIRGINIA BEACH, VA23464	OWNER: COLEMAN, ROBERT C 500 STERLING RD VIRGINIA BEACH, VA23464
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
-----------------	--	--

PARCEL:

PIN: 988406484673	Parcel Number: 002796000
Address: 1823 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: Croatan Shores Amended	Block: D Lot(s): 8
Legal Description:	

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

PROJECT DESCRIPTION: REBUILD 2 SETS OF EXTERIOR STAIRS

BP2022-002

PROJECT NAME: COLEMAN STAIRS

SITE ADDRESS: 1823 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

DETAILS**Permit**

Name	Value
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	12.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: Contractor or Authorized Agent: Date: JAN 5th 2022



Town of Kill Devil Hills

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

PAID

JAN - 6 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-005

PROJECT NAME: Leary Wall Removal
SITE ADDRESS: 802 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

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

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

CONTRACTOR: Burgwald Remodeling
101 Airstrip Rd
#165
Kill Devil Hills, NC 27948
240-543-9980

GENERAL, UNLICENSED: Burgwald Remodeling
101 Airstrip Rd
#165
Kill Devil Hills, NC 27948
240-543-9980

License: 0000000
Expires: 03/08/2022

PARCEL:

PIN: 988405092907

Parcel Number: 001588000

Address: 802 SPORTSMAN DR W KILL DEVIL HILLS

Addition: AVALON BEACH

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Remodel/Renovation 191 SQFT
Totals :	\$150.00	\$0.00	

PROJECT DESCRIPTION: remove wall between bedrooms, converting house into 2 total bedrooms

Flood zone?

BP2022-005PROJECT NAME: Leary Wall Removal
SITE ADDRESS: 802 SPORTSMAN DR W KILL DEVIL HILLS**BUILDING**

ISSUED: 01/06/2022

EXPIRES: 07/05/2022

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8400.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Framing

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: M. ShawContractor or Authorized Agent: SS Date: 1-6-22



Town of Kill Devil Hills

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

PAID

JAN - 6 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-003	BUILDING
PROJECT NAME: O'Connell Piling Replacement	ISSUED: 01/05/2022
SITE ADDRESS: 402 CLAM SHELL DR KILL DEVIL HILLS	EXPIRES: 07/04/2022

APPLICANT: MITCHELL, BRANDON 401 Aycock Street Kill Devil Hills, NC 27948 704-418-8667	OWNER: Oconnell, CIARA 1745 East Borne Drive VIRGINIA BEACH, VA 23454
--	--

UNLICENSED - REMODELING: MITCHELL, BRANDON 401 Aycock Street Kill Devil Hills, NC 27948 704-418-8667	License: 12345 Expires:
--	--

PARCEL:

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

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

PROJECT DESCRIPTION: replace 6 deck pilings

BP2022-003

PROJECT NAME: O'Connell Piling Replacement
SITE ADDRESS: 402 CLAM SHELL DR KILL DEVIL HILLS

BUILDING

ISSUED: 01/05/2022

EXPIRES: 07/04/2022

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

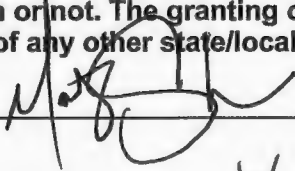
Final

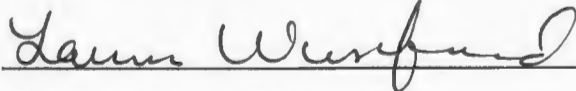
CONDITIONS

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

* 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:** 1.6.22