



BUILDING PERMIT

PERMIT NUMBER: 5170

DATE: 2/2/2022

OWNER: John T & Heather C Randall

BUILDER: Alexander Design Build

ADDRESS: 19130 Lakeside Drive

CONTRACTOR LICENSE #: 73575

CITY: Courtland STATE: VA ZIP: 23837

ADDRESS: 140 Durham St

* (757) 556-7772

CITY: Clayton STATE: NC ZIP: 27520

PHONE: 919-915-0427 Hunter Brown

LOCATION OF BUILDING SITE: 14 Yacht Club - Pirates Cove ZONING DISTRICT: _____

PARCEL NUMBER: 3720979900 FLOOD ZONE: _____ BFE: _____ FFE: _____

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) N/A

ERECT: _____ ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: N/A UNHEATED SPACE: 100 S/F

NUMBER OF STORIES: 3 ROOMS: 1 BATHS: N/A FIREPLACES: N/A

FINISHES:

EXTERIOR WALLS: Hardi-Plank INTERIOR WALLS: Drywall ROOF TYPE AND MATERIAL: Shingles

HEAT TYPE: N/A INSULATION & R VALUE: R-15/R-19 FLOORING: N/A

FOOTING: Concrete FOUNDATION: Concrete

ADDITIONAL NOTES: Remove Existing 144 S/F Hot Tub, Structure and Steps To Existing Deck. Construct 33 S/F Elevator Hoistway/Shaft & 3 Stop Elevator

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: \$52,450.00

Permit Cost: Review 50.00
524.50

Date of Issuance: 3/1/22

Applicant: HTB Hunter Brown

Inspector: [Signature]

Zoning Official: [Signature]

Conditions of Permit: _____



MECHANICAL PERMIT

407 Budleigh Street | PO Box 246 | Manteo, NC 27954 | 252.473.2133 | www.manteonc.gov

* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED*

PERMIT NUMBER: 5171

DATE: 2/22/2022

OWNER: ROBERT HARTMAN
ADDRESS: 50 HAMMOCK DRIVE
CITY: MANTEO STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: RA HOY HEATING AND AIR CONDITIONING LLC
ADDRESS: PO BOX #179
CITY: KITTY HAWK STATE: NC ZIP: 27949
PHONE: 252-261-2008

LOCATION: 50 HAMMOCK DRIVE
BUILDER: _____

PARCEL NUMBER: 025694250

NUMBER OF HEATING UNITS: 1
NUMBER OF REGISTERS: _____
LICENSE NUMBER: 13056
COST: \$8,179.04

NUMBER OF AIR HANDLERS: _____
TONNAGE: 2 TON
WORK ORDER NUMBER: _____
PERMIT COST: \$1500

IF REPAIRING OR ALTERING, PLEASE DESCRIBE WORK:

REMOVE THE FURNACE. INSTALL A 16 SEER 2-TON TRANE HEAT PUMP SYSTEM

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 2/23/22 SEALS: Payton Nix
(APPLICANT)

[Signature]
(INSPECTOR)



MECHANICAL PERMIT

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* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED*

PERMIT NUMBER: 5172

DATE: 2/22/2022

OWNER: JENNETTE ENGLISH
ADDRESS: 4302 SAILFISH DRIVE
CITY: MANTEO STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: RA HOY HEATING AND AIR CONDITIONING LLC
ADDRESS: PO BOX #179
CITY: KITTY HAWK STATE: NC ZIP: 27949
PHONE: 252-261-2008

LOCATION: 4302 SAILFISH DRIVE PARCEL NUMBER: 025694507
BUILDER: _____

NUMBER OF HEATING UNITS: 1 NUMBER OF AIR HANDLERS: 1
NUMBER OF REGISTERS: _____ TONNAGE: 3 TON
LICENSE NUMBER: 13056 WORK ORDER NUMBER: _____
COST: \$9,915.11 PERMIT COST: 850.00

IF REPAIRING OR ALTERING, PLEASE DESCRIBE WORK:

C/O TRANE 14 SEER 3 TON WITH FULL GRILL REPLACEMENT

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 2/23/22 SEALS: Payton Nix
(APPLICANT)

[Signature]
(INSPECTOR)



BUILDING PERMIT

PERMIT NUMBER: 5173

DATE: 02/01/2022

OWNER: Staci & Sean Mull
ADDRESS: 7325 Creighton Road
CITY: Mechanicville STATE: VA ZIP: 23111

BUILDER: Atlantic Coastline Construction/Share
CONTRACTOR LICENSE #: 84874 O'Reilly
ADDRESS: 432 Kitty Hawk Bay Drive
CITY: KDH STATE: NC ZIP: 27948

LOCATION OF BUILDING SITE: 51 Sailfish Drive ZONING DISTRICT: Manteo
PARCEL NUMBER: 025674354 FLOOD ZONE: AE BFE: 5.0 FFE: 15.48
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) 10516361
ERECT: ALTER: REPAIR:

SQUARE FOOTAGE OF HEATED SPACE: 2031 UNHEATED SPACE: 1050
NUMBER OF STORIES: 2 ROOMS: 4 BATHS: 3.5 FIREPLACES: X

FINISHES:
EXTERIOR WALLS: LP Slat INTERIOR WALLS: Sheetrock ROOF TYPE AND MATERIAL: Asp. Shingles
HEAT TYPE: PUMP INSULATION & R VALUE: R19 R30 FLOORING: LVT/Carpet
FOOTING: _____ FOUNDATION: piings

ADDITIONAL NOTES: _____

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: 499,626.00\$

Review \$100 H. \$1015.50
UMP 262.80
Permit Cost: \$1378

Date of Issuance: 2/28/22

Seals: Staci Mull
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



PERMIT NUMBER: 5175

BUILDING PERMIT

DATE: 3-1-22

OWNER: GARY YEAGER
ADDRESS: 619 Sir Walter Raleigh St.
CITY: MANTEO STATE: NC ZIP: 27954

BUILDER: OWNER
CONTRACTOR LICENSE #: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

LOCATION OF BUILDING SITE: 619 Sir Walter Raleigh St. ZONING DISTRICT: _____
PARCEL NUMBER: 025599000 FLOOD ZONE: X BFE: 8 FFE: To Be Determined
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: ✓ ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: _____ UNHEATED SPACE: 1344
NUMBER OF STORIES: 1 ROOMS: _____ BATHS: _____ FIREPLACES: _____

FINISHES:
EXTERIOR WALLS: Metal INTERIOR WALLS: metal ROOF TYPE AND MATERIAL: Metal
HEAT TYPE: _____ INSULATION & R VALUE: Roof R-9 FLOORING: Concrete
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: Metal Storage bld

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- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

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Estimated or Contract Cost: \$20,800

Date of Issuance: 3/2/22

Permit Cost: 336.00

Review 50.00
\$ 386.00

Seals: Gary Yeager
Applicant

Jo At
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



BUILDING PERMIT

PERMIT NUMBER: 5176

DATE: 03/04/2022

OWNER: Berry Muller

BUILDER: Atlantic Coastline Construction

ADDRESS: 52 Sulphur drive

CONTRACTOR LICENSE #: 84874

CITY: Manteo STATE: NC ZIP: 27954

ADDRESS: 432 Kitty Hawk Bay Drive

CITY: KDH STATE: NC ZIP: 27948

LOCATION OF BUILDING SITE: 52 Sailfish Drive

ZONING DISTRICT: 202 8744 B-2

PARCEL NUMBER: 015674355

FLOOD ZONE: _____

BFE: _____

FFE: _____

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

ERECT: _____

ALTER:

REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 2210

UNHEATED SPACE: 400

NUMBER OF STORIES: 2

ROOMS: 4

BATHS: 3

FIREPLACES: X

FINISHES:

EXTERIOR WALLS: 2x4

INTERIOR WALLS: 2x4

ROOF TYPE AND MATERIAL: Shingles

HEAT TYPE: pump

INSULATION & R VALUE: _____

FLOORING: LVP/carpet

FOOTING: _____

FOUNDATION: pilings

ADDITIONAL NOTES: new cabinets, countertops, paint, guest water line replacement, new flooring throughout, additional lighting/movement of existing switches

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: 90,000.00

Permit Cost: 900.00

Date of Issuance: _____

Seals:

[Signature]
Applicant

[Signature]
Inspector

Review 50.00
950.00
[Signature]
Zoning Official

Conditions of Permit: _____



MECHANICAL PERMIT

PERMIT NUMBER: 5177

DATE: 3-8-22

OWNER: MARSHES LIGHT SLIP ASSOC CONTRACTOR: ARMSTRONG + SON HEATING + AIR
 ADDRESS: 207 DARTMOUTH LANE (BOATHOUSE) ADDRESS: 3778 ALBEMARLE CHURCH RD
 CITY: MANTHO STATE: NC ZIP 27954 CITY: COLUMBIA STATE: NC ZIP 27925
 PHONE: _____ PHONE: (252) 797-4100

LOCATION: _____ PARCEL NUMBER: 025557000
 BUILDER: _____

NUMBER OF HEATING UNITS: 2 NUMBER OF REGISTERS: _____
 NUMBER OF B.T.U.'S: 9,000 MINISPLIT TONNAGE: 3.0 TON HEAT PUMP/AIR HANDLER
 LICENSE NUMBER: 22516 WORK ORDER NUMBER: _____
 COST: 3400.00 Permit Cost: 250.00

If repairing or altering, please describe work: CHANGE OUT 3.0 TON H/P & A/H
9000 BTU MINISPLIT

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/9/22 SEALS: Karen Spruill [Signature]
(Applicant) (Inspector)



BUILDING PERMIT

PERMIT NUMBER: 5178

DATE: 1-30-22

OWNER: Gina Merriitt's Sea Dining BUILDER: Carpenter C.S. Inc.
ADDRESS: 504 Seafant Court CONTRACTOR LICENSE #:
CITY: Manteo STATE: NC ZIP: 27954 ADDRESS: 905 8th Ave.
CITY: KDIX STATE: IL ZIP: 27940
PHONE: 252-256-1775

LOCATION OF BUILDING SITE: Pirate's Cove ZONING DISTRICT: _____
PARCEL NUMBER: _____ FLOOD ZONE: / BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: _____ REPAIR: /

SQUARE FOOTAGE OF HEATED SPACE: _____ UNHEATED SPACE: _____
NUMBER OF STORIES: _____ ROOMS: _____ BATHS: _____ FIREPLACES: _____
FINISHES: _____
EXTERIOR WALLS: _____ INTERIOR WALLS: _____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: Remove & replace decking, railing & exterior stairwells within exact footprint.

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: 17,150.00 Date of Issuance: 3/10/22 Permit Cost: 171.50
REVW 50.00
\$221.50

Seals: Gina Merriitt Applicant Joe J Inspector NOJA Zoning Official

Conditions of Permit: _____



ELECTRICAL PERMIT

PERMIT NUMBER: 5779

DOMINION WO# 10524795 DATE: 3/1/22

OWNER: <u>STUART FOREMAN</u>	CONTRACTOR: <u>BRS Electrical Services Inc./Bradley R Smith</u>
ADDRESS: <u>1536-6 CASTLE HAYNERD</u>	ADDRESS: <u>PO Box 2108</u>
CITY: <u>WILMINGTON</u> STATE: <u>NC</u> ZIP: <u>28401</u>	CITY: <u>Kill Devil Hills</u> STATE: <u>NC</u> ZIP: <u>27948</u>
PHONE: _____	PHONE: <u>252-441-5334</u>

LOCATION: 115 GILBERT STREET PARCEL NUMBER: _____

BUILDER: _____

RESIDENTIAL: NEW ALTERATION

COMMERCIAL: NEW ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

SERVICE AMPS: _____ INCREASED TO: _____

LICENSE NUMBER: _____ WORK ORDER NUMBER: _____

COST: _____ Permit Cost: 50.00

If repairing or altering, please describe work: POWER POLE

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/10/22 SEALS: _____
(Appl. cert)

(Inspector)



BUILDING PERMIT

PERMIT NUMBER: 5180

DATE: 3/10/2022

OWNER: C&T Contracting
ADDRESS: 115 Inge Dr.
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: C&T CONTRACTING / CE BATSCHULET
CONTRACTOR LICENSE #: 45367
ADDRESS: 115 Inge Dr.
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252-202-9943

LOCATION OF BUILDING SITE: Lot 30 Marshes Light / 101 Uppowoc Ave. ZONING DISTRICT: R2
PARCEL NUMBER: 027249030 FLOOD ZONE: X BFE: 8' FFE: 8.5'

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: X ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 2372 UNHEATED SPACE: _____
NUMBER OF STORIES: 2 ROOMS: 4 BATHS: 3.5 FIREPLACES: 0

FINISHES:
EXTERIOR WALLS: WOOD SIDING INTERIOR WALLS: DRYWALL ROOF TYPE AND MATERIAL: ARCH SHINGLE
HEAT TYPE: ELECT. HP INSULATION & R VALUE: 19/15/38 FLOORING: WOOD / TILE
FOOTING: _____ FOUNDATION: LOW PILE

ADDITIONAL NOTES: Construct new 4 Bed, 3.5 Bath SFD on low piles with crawl space.

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: 390,000.00

Permit Cost: \$1301.00

Date of Issuance: 3/14/22

Review \$100.00

\$1401.00
elbert

Seals: [Signature]
Applicant

[Signature]
Inspector

Zoning Official

Conditions of Permit: _____



BUILDING PERMIT

PERMIT NUMBER: 5181

DATE: 3-8-22

OWNER: KHKFL Workforce, LLC
ADDRESS: P.O. Box 1839
CITY: Manteo STATE: NC ZIP: 27959

BUILDER: Beach Box Builders
CONTRACTOR LICENSE #: 75421
ADDRESS: P.O. Box 2103
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252-216-6048

LOCATION OF BUILDING SITE: 805 N Hwy 64/264 ZONING DISTRICT: _____
PARCEL NUMBER: 024483000 FLOOD ZONE: x BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: x REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 4400 UNHEATED SPACE: _____
NUMBER OF STORIES: 2 ROOMS: _____ BATHS: _____ FIREPLACES: _____
FINISHES: _____

EXTERIOR WALLS: _____ INTERIOR WALLS: _____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: _____

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: \$130,000.00 Permit Cost: \$300.00
Date of Issuance: 3/16/22 \$1600.00

Seals: [Signature] Applicant [Signature] Inspector [Signature] Zoning Official

Conditions of Permit: _____



BUILDING PERMIT

PERMIT NUMBER: 5182

DATE: 3/10/2022

OWNER: The Town of Manteo
ADDRESS: 407 Budleigh Street
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: A. R. Chesson Construction Co., Inc
CONTRACTOR LICENSE #: 13540
ADDRESS: 315 W. Main St.
CITY: Williamston STATE: NC ZIP: 274954
PHONE: 252-792-4486

LOCATION OF BUILDING SITE: 217 Budleigh Street Manteo North Carolina 27954 United States ZONING DISTRICT: B - 1
PARCEL NUMBER: 024570000 FLOOD ZONE: AE BFE: FFE:
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE)
ERECT: X ALTER: REPAIR:

SQUARE FOOTAGE OF HEATED SPACE: 540 SF UNHEATED SPACE:
NUMBER OF STORIES: 1 ROOMS: 3 BATHS: 2 FIREPLACES: 0

FINISHES:
EXTERIOR WALLS: Cedar Shake INTERIOR WALLS: FRP Panel on GWB ROOF TYPE AND MATERIAL: Metal Roof
HEAT TYPE: Central INSULATION & R VALUE: CLASS III & R-21 FLOORING: Epoxy
FOOTING: Concrete FOUNDATION: Concrete Slab

ADDITIONAL NOTES: Fee waived for Town of Manteo

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- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

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Estimated or Contract Cost: \$432,690

Date of Issuance: 3/10/22 Permit Cost: ~~\$325.00~~ N/A

Seals: Doug M. Chesson
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit:

Attention: Kim Espinoza

(252) 473-4106
FAX 2076



from: Mr. William Edwin Robins
P.O. Box 509
Topping, Va. 23169

Phone 804 694 6202

PERMIT NUMBER: 5183

BUILDING PERMIT

DATE: 3-15-2022

OWNER: William Edwin & Frances Robins
ADDRESS: 21 Sailfish Drive
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: GranPlan, Inc
CONTRACTOR LICENSE #: 85630
ADDRESS: 349 Water Plant Rd.
CITY: Manteo STATE: NC ZIP: 27954
PHONE: (252) 473-3334

LOCATION OF BUILDING SITE: 21 Sailfish Drive ZONING DISTRICT: _____
PARCEL NUMBER: 21 FLOOD ZONE: N/A BFE: - FFE: -
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) N/A
ERECT: _____ ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: N/A UNHEATED SPACE: N/A
NUMBER OF STORIES: 2 ROOMS: 7 BATHS: 3 FIREPLACES: 1

FINISHES:
EXTERIOR WALLS: cedar INTERIOR WALLS: wallboard ROOF TYPE AND MATERIAL: Asphalt
HEAT TYPE: Electric INSULATION & R VALUE: N/A FLOORING: N/A
FOOTING: N/A FOUNDATION: N/A

ADDITIONAL NOTES: Remove and replace counter tops in 3 bathrooms. ~~Note~~
Remove and replace 3 shower doors in 3 bathrooms -
Remove and replace faucets in 3 bathrooms

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- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

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Estimated or Contract Cost: \$12,500.00 Review 50.00
Permit Cost: 125.00
Date of Issuance: 3/16/22 \$ 175.00

Seals: [Signature] Applicant [Signature] Inspector [Signature] Zoning Official

Conditions of Permit: _____



BUILDING PERMIT

PERMIT NUMBER: 5184

DATE: 3/21/2022

OWNER: TIMOTHY & ERICA COBB
ADDRESS: 106 BUCKDEN PLACE
CITY: CARY STATE: NC ZIP: 27518

BUILDER: GRANPLAN, INC.
CONTRACTOR LICENSE #: 85630
ADDRESS: 349-C WATER PLANT ROAD
CITY: MANTEO STATE: NC ZIP: 27954
PHONE: 252-473-3334

LOCATION OF BUILDING SITE: 15 SAILFISH DRIVE, MANTEO, NC 27954 ZONING DISTRICT: 10-MANTEO IN
PARCEL NUMBER: 025694314 FLOOD ZONE: _____ BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: _____ UNHEATED SPACE: _____
NUMBER OF STORIES: 2 ROOMS: 4 BATHS: 3.5 FIREPLACES: _____
FINISHES:
EXTERIOR WALLS: _____ INTERIOR WALLS: _____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: REBUILD FRONT STEPS, REAR STEPS, AND WALKWAY TO BOARDWALK USING TREATED LUMBER, INSTALL NEW TREX DECKBOARDS ON TWO REAR DECKS, INSTALL RAIN ESCAPE UNDER TWO REAR DECK DECKBOARDS FOR CHANNELING RAIN WATER AWAY

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
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Estimated or Contract Cost: \$ 44,924.64

Permit Cost: 499.24

Date of Issuance: 3/22/22

Review 50.00
\$ 549.24

Seals: *Kal Sam*
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



MECHANICAL PERMIT

PERMIT NUMBER: 5185

DATE: 03/24/2022

OWNER: JVE Holdings, LLC
ADDRESS: 405 Queen Elizabeth Ave
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252-202-0610

CONTRACTOR: Norris Mechanical
ADDRESS: 100 Freedom Ave
CITY: Powells Point STATE: NC ZIP: 27966
PHONE: 252-491-2673

LOCATION: Trenquill House Inn
BUILDER: _____

PARCEL NUMBER: 024589000

NUMBER OF HEATING UNITS: 1 outdoor, 2 indoor
NUMBER OF B.T.U.'s: 36K
LICENSE NUMBER: 11100
COST: \$16,600.00

NUMBER OF REGISTERS: 0
TONNAGE: 4
WORK ORDER NUMBER: _____
Permit Cost: \$50.00

If repairing or altering, please describe work: Installation of new ductless mini split with 1 outdoor unit and 2 indoor units to serve the lobby and bathrooms.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/28/22

SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)



MECHANICAL PERMIT

PERMIT NUMBER: 5186

DATE: 3-29-22

OWNER: CINDY BRABG

CONTRACTOR: ISLAND HVAC

ADDRESS: 4304 SAILFISH

ADDRESS: PO BOX 2252

CITY: MANTEO STATE: NC ZIP: 27954

CITY: KDIF STATE: NC ZIP: 27949

PHONE: _____

PHONE: _____

LOCATION: _____ PARCEL NUMBER: 02 5694509

BUILDER: _____

NUMBER OF HEATING UNITS: 1

NUMBER OF REGISTERS: _____

NUMBER OF B.T.U.'s: 42000

TONNAGE: 3.5

LICENSE NUMBER: 22354

WORK ORDER NUMBER: _____

COST: \$8,100

Permit Cost: \$150 (\$50 prev)

If repairing or altering, please describe work: Remove AWD Replace EXISTING 3.5 ton UNIT WITH AN AIR TEMP 3.5 TON 14 SEER

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/29/22

SEALS: [Signature]
(Applicant)

[Signature] Fred
(Inspector)



Residential Project Approval
Application # 202200237

Property Address: 411 RIDGEVIEW WAY **PIN #:** 989108786081 **Parcel:** 006749045
Lot/Block/Sec: LOT: 6 BLK: SEC: 5 **Subdivision:** SOUTHRIDGE - SEC 5
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** VACANT
Flood Zone: AE **Base Flood Elevation:** 4.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9891 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: NAGS HEAD CONSTRUCTION - AND DEVELOPMENT
Owner Address: C/O VIKING MANAGEMENT INC P.O. BOX 16472 CHESAPEAKE, VA 23328
Contractor Name: Nags Head Construction & Development, In **Contractor Phone:** 757-306-9620
Contractor Address: PO Box 16472 CHESAPEAKE, VA 23328

Description: Construct new single-family dwelling on pilings, 4 bedroom 3.1 bathrooms
Construction Value: \$260000 **Classification of Work:** NEW RESIDENTIAL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR202200730	B-RESIDENTIAL NEW CONST SFD	\$3707.98	SS	03/04/2022

Conditions of Approval:

- Building under construction elevation may be required. A final flood elevation certificate is required.
- Ground floor enclosure shall have flood vents if below 9-foot RFPE. All material below the 9-foot RFPE shall be pressure treated.
- All subs shall pull permits prior to starting work.
- Call for all required inspections.
- Review Zoning, Stormwater and Public Works permit conditions
- Please call with any questions at 252-441-7016

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200729	FLOOD PERMIT	\$0.00	SS	03/04/2022

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202200728	PW APPROVAL RES NEW	\$1244.64	LCN	03/04/2022

Conditions of Approval:

- See Public Works Approval handout for detailed project information
- For Public Works related items please call the Public Works Department at 252-441-1122.
- Culvert required - Flared end section required - Contact Public Works for more information
- All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call Public Works for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt. Call for FINAL inspection once pouring is complete. Give 24 advance notice for all inspections.
- 36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'
- 36-4(f):max. driveway apron shall be a min. of 10' in length, 4" thick, 3,000 psi conc. and designed for access purposes only. The driveway apron shall be sloped a min. of 1/4" per foot from the eop to a point 6' offset from the eop, creating a valley section within the driveway, (2" min. drop)



Residential Project Approval
Application # 202200258

Property Address: 124 WEST WESTSIDE CT **PIN #:** 071811560534 **Parcel:** 007324007

Lot/Block/Sec: LOT: 7 BLK: SEC: **Subdivision:** CHAWANOOK WEST

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** VACANT

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: BERGEL, NOAH D - BERGEL, JENNIFER KELLER

Owner Address: 10901 George Mill Rd Lovettsville, VA 20180

Contractor Name: SEA COUNTRY HOMES OBX, LLC **Contractor Phone:** 252-207-8338

Contractor Address: 1508 CAPAINS LANE KILL DEVIL HILLS, NC 27948

Description: Construct new single-family dwelling, 4 bedrooms, 4.1 baths

Construction Value: \$620000 **Classification of Work:** NEW RESIDENTIAL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR202200686	B-RESIDENTIAL NEW CONST	\$3668.48	SS	03/02/2022

Conditions of Approval:

- Provide address #s on home that meet the TONH ordinance.
- Water heater shall be elevated to 9-foot RFPE. All material below the 9-foot RFPE shall be pressure treated.
- A building under construction elevation cert may be required. A final flood elevation certificate is required.
- Ground floor enclosure shall be unfinished and unheated and not exceed 300 square foot using outside dimensions to measure area.
- Pull all trade permits prior to starting work.
- Call for all required inspections. Review Zoning, Stormwater and Public Works permit conditions.
- Call for Zoning, Stormwater and Public Works final inspections before calling for Building final inspection.
- Call Steve at 252 449 2005 if I can be of any help.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200685	FLOOD PERMIT	\$0.00	SS	03/02/2022

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202200684	PW APPROVAL RES NEW	\$1699.64	LCN	03/02/2022

Conditions of Approval:

- See Public Works Approval handout for detailed project information
- For Public Works related items please call the Public Works Department at 252-441-1122.
- All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call Public Works for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt. Call for FINAL inspection once pouring is complete. Give 24 advance notice for all inspections.
- 36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'
- 36-4(f):max. driveway apron shall be a min. of 10' in length, 4" thick, 3,000 psi conc. and designed for access purposes only. The driveway apron shall be sloped a min. of 1/4" per foot from the eop to a point 6' offset from the eop, creating a valley section within the driveway, (2" min. drop)

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202200683	ZONING PERMIT - RES	\$0.00	MK	03/02/2022

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 202200330

Property Address: 115 WEST SEAWATCH CT **PIN #:** 080005293983 **Parcel:** 024961586
Lot/Block/Sec: LOT: 6 BLK: SEC: **Subdivision:** SEAWATCH
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0800 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: BRICKHEAD, DAVID L - BRICKHEAD, SARAH
Owner Address: 2825 LIVE OAK LN

Contractor Name: Frasca Custom Homes, LLC **Contractor Phone:** 252-480-0515
Contractor Address: 2401 Collington Rd Kill Devil Hills, NC 27948

Description: Roof replacement 3/4" fire treated cedar shakes, replacement of valley & hip flashing
Construction Value: \$35480 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200874	RES ADD-REM-REP-ACC	\$260.00	SS	03/02/2022

Conditions of Approval:

- Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Emily Lewis to discuss 252-480-4707 emilylewis@villagerealtyobx.com prior to commencing construction.
- Call for material check. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200673	FLOOD PERMIT	\$0.00	SS	03/02/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)



Residential Project Approval
Application # 202200336

Property Address: 5707 SOUTH SANDBAR DR **PIN #:** 080118305596 **Parcel:** 000380110

Lot/Block/Sec: LOT: 8 BLK: SEC: **Subdivision:** DOLPHIN RUN

Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING, LARGE

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MCNALLY, JOHN J III - MCNALLY, BARBARA A

Owner Address: 1436 S VEAUX LOOP

Contractor Name: Gibbs Daughters NC, LLC **Contractor Phone:** 252-202-5991

Contractor Address: PO Box 2387 Manteo, NC 27954

Description: Replace the existing deck boards and railings

Construction Value: \$62624 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200718	RES ADD-REM-REP-ACC	\$340.00	SS	03/04/2022

Conditions of Approval:

- Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Emily Lewis to discuss 252-480-4707 emilylewis@villageraltyobx.com prior to commencing construction.
-
- All work shall meet current code. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200717	FLOOD PERMIT	\$0.00	SS	03/04/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)



Residential Project Approval
Application # 202200343

Property Address: 5203 SOUTH LINKS DR **PIN #:** 080117029198 **Parcel:** 024961307
Lot/Block/Sec: LOT: 7 BLK: SEC: **Subdivision:** WEDGES,THE
Zoning: VILLAGE DET SF 3 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: DENSMORE, JOHN JOSEPH
Owner Address: 1292 DUNLORA DR

Contractor Name: CORNERSTONE MARINE & REMODELING LLC **Contractor Phone:** 252-455-0960
Contractor Address: PO BOX 2371 Manteo, NC 27954

Description: Demo kitchen cabinets and flooring and replace with new cabi net, appliances, and faucet
Construction Value: \$44000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200722	RES ADD-REM-REP-ACC	\$280.00	SS	03/04/2022

Conditions of Approval:

- All work shall meet current codes. All subs pull permits prior to starting work. Call for all required inspections Smoke and co2 detectors to code throughout home. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200721	FLOOD PERMIT	\$0.00	SS	03/04/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202200372

Property Address: 4128 WEST DRIFTING SANDS CT **PIN #:** 989108877937 **Parcel:** 030237000

Lot/Block/Sec: LOT: 11 BLK: SEC: 1 **Subdivision:** SOUTHRIDGE SEC 1

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9891 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MCCULLEN, MICHAEL G - MCCULLEN, KAREN G

Owner Address: 4128 Drifting Sands Ct

Contractor Name: PROPERTY OWNER **Contractor Phone:**

Contractor Address: See Above 000, 00 00000

Description: Remove & replace all wood decking, handrails & stairs, 12 windows & existing siding, trim, soffit & fascia boards

Construction Value: \$64690 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200804	RES ADD-REM-REP-ACC	\$340.00	SS	03/11/2022

Conditions of Approval:

- Provide address #s on home if none are present. Call for inspection of framing or sheathing repairs. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Install siding per product evaluation report. Pull electrical permit to contend with wiring issues as they arise. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200803	FLOOD PERMIT	\$0.00	SS	03/11/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

Date



Residential Project Approval
Application # 202200408

Property Address: 109 EAST DANUBE AVE **PIN #:** 080109066329 **Parcel:** 026403007
Lot/Block/Sec: LOT: 2 BLK: D1 SEC: 3 **Subdivision:** ROANOKE SOUND SHORES RESUB S 3
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: PHILLIPS-FEAKINS, OLIVER - FEAKINS, NADI
Owner Address: 23 WARWICK RD

Contractor Name: Frasca Custom Homes, LLC **Contractor Phone:** 252-480-0515
Contractor Address: 2401 Colington Rd Kill Devil Hills, NC 27948

Description: Replacement of existing siding with new vinyl siding system

Construction Value: \$47800 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200874	RES ADD-REM-REP-ACC	\$280.00	SS	03/17/2022

Conditions of Approval:

- Call for inspection of rot repair. Pull electrical permit to deal with wiring issues if need be. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200873	FLOOD PERMIT	\$0.00	SS	03/17/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202200460

Property Address: 9504 SOUTH OLD OREGON INLET RD **PIN #:** 071806398305 **Parcel:** 007970020

Lot/Block/Sec: LOT: 20 BLK: SEC: **Subdivision:** HOLLYWD BCH RECOMB/SO CREEK AC

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 4.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: ZIMMERMANN, CURT - ZIMMERMANN, TERRI

Owner Address: 330 PENNINGTON DR

Contractor Name: OBRC, LLC **Contractor Phone:**

Contractor Address: P O Box 1916 Kitty Hawk, NC 27949

Description: Replacing existing roof shingles w/new asphalt shingles, alu minum soffit & facia w/Hardi Color Plus, gutters & paint

Construction Value: \$35000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200935	RES ADD-REM-REP-ACC	\$250.00	SS	03/23/2022

Conditions of Approval:

- All work shall meet current code. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200934	FLOOD PERMIT	\$0.00	SS	03/23/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202200423

Property Address: 2904 SOUTH LOST COLONY DR **PIN #:** 989210276414 **Parcel:** 005786000

Lot/Block/Sec: LOT: 10 BLK: C SEC: **Subdivision:** VISTA COLONY PLACE

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: EVANS, WINBORNE H

Owner Address: 2904 S LOST COLONY DR

Contractor Name: Forrest Seal, LLC **Contractor Phone:** 252-599-2521

Contractor Address: PO Box 2333 Kitty Hawk, NC 27949

Description: Complete the necessary work to add the storage area & stair well area as drawn on plans

Construction Value: \$55000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200946	RES ADD-REM-REP-ACC	\$320.00	SS	03/23/2022

Conditions of Approval:

- Provide address #s on home if none are present. A final flood elevation certificate may be required. Provide smoke and co2 detectors to code throughout home. Pull all permits prior to starting work. Call for all required inspections. Review zoning permit conditions. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200945	FLOOD PERMIT	\$0.00	SS	03/23/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202200944	ZONING PERMIT - RES	\$0.00	MK	03/23/2022

Conditions of Approval:

Addition of storage and stairs meeting setbacks and allowable lot coverage calculations
Must maintain setbacks
As-built survey
call for final zoning once completed 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202200188

Property Address: 3626 SOUTH OLD NAGS HEAD WOODS RD **PIN #:** 989214236743 **Parcel:** 026251000

Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: SPECIAL ENVIRONMENTAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: WRIGHT, KRISTI MIDGETTE

Owner Address: 207 W BARNES ST

Contractor Name: PROPERTY OWNER **Contractor Phone:**

Contractor Address: See Above

Description: Construct 30X40 garage with storage in attic space, bathroom & rock driveway

Construction Value: \$50000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200954	RES ADD-REM-REP-ACC	\$280.00	SS	03/23/2022

Conditions of Approval:

- A final flood elevation certificate is required. Anchor bolts shall be in place at time of footing inspection. Soil engineering may be requested. Call for footing inspection. Call for sheathing and framing inspection. Call for any trench inspections. Pull trade permits prior to starting work. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200953	FLOOD PERMIT	\$0.00	SS	03/23/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202200949	ZONING PERMIT - RES	\$0.00		03/23/2022

Conditions of Approval:

Site visit with Aaron Wright, Kate Jones and Margaux Kerr 3/18/2022 - no trees proposed to be removed for installation of the septic and detached garage

Detached garage is not a finished space, no habitable space other than the bathroom 62 sqft is habitable at this time. Storage only.

A bedroom is not permitted or proposed at this time per permit application

Add rock drive per proposed site plan

Moving existing material onsite for balanced building pad maximum height 35ft

as-built survey required

stabilization once complete

call for final zoning 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head



**Residential Project Approval
Application # 202200395**

Property Address: 100 EAST SAND CASTLE CT PIN #: 080118309120 Parcel: 030607000
Lot/Block/Sec: LOT: 1 BLK: SEC: Subdivision: SEASIDE
Zoning: VILLAGE DET SF 3 Land Use: SINGLE FAMILY DWELLING
Flood Zone: X Base Flood Elevation: 0.0 Regulatory Flood Elevation: 9
Map Panel No: 0801 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 1988

Owner Name: JONES, STEVEN C - JONES, DEBORAH S
Owner Address: 44 WOODLAND RD

Contractor Name: PROPERTY OWNER Contractor Phone:
Contractor Address: See Above 000, 00 00000

Description: Enlarge elevator shaft walls on 1st 2nd 3rd levels to accomodate new elevator, enlarge elevator pit, move 1 nonload bear

Construction Value: \$47500 Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202200966	RES ADD-REM-REP-ACC	\$280.00	SS	03/23/2022

Conditions of Approval:

- Additional engineering could be requested. Pull trade permits prior to starting work. Call for all required inspections. Provide smoke and co2 detectors to code. Provide elevator certification prior to scheduling final inspection. Call for final inspection. Any questions please call me at 252 449 2005

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200965	FLOOD PERMIT	\$0.00	SS	03/23/2022

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

Date

3/24/22

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 4414290

Commercial Project Approval
Application # 202200238

Property Address: 4800 SOUTH CROATAN HWY **PIN #:** 080113049010 **Parcel:** 024961512

Lot/Block/Sec: LOT: PARCEL L BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: VILLAGE ATTACHED SF 4 **Land Use:** HOSPITAL

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: OUTER BANKS HOSPITAL INC
Owner Address: 4800 S CROATAN HWY NAGS HEAD, NC 27959

Contractor Name: C. A. Lewis, Inc. **Contractor Phone:** 252-757-3536
Contractor Address: 2825 S Charles Ave Greenville, NC 27858

Description: Interior remodel of lab, nuclear camera and MRI. Metal stud framed, drywall, new finish ACT and floor covering

Construction Value: \$3309799 **Classification of Work:** COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202200658	COMM ADD-REM-REP-ACC	\$5349.70	SS	03/01/2022

Conditions of Approval:
- See review comments we have provided

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200657	FLOOD PERMIT	\$0	SS	03/01/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202200656	ZONING PERMIT - COMM	\$0	KW	3/01/2022

Conditions of Approval:
Zoning has been reviewed and approved for an internal remodel within the lab. No increase in footprint or lot coverage is proposed or permitted.
Final zoning inspection required upon completion.

Additional Conditions:
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

As per Town Code, contractors are responsible for any damage caused to Town owned facilities during construction on any site in Nags Head such as, but not limited to: multi-use path, streets, shoulders, swales, drainage facilities, water lines and related facilities.

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 4414290

Commercial Project Approval
Application # 202200274

Property Address: 7100 SOUTH CROATAN HWY **PIN #:** 080015632617 **Parcel:** 008834000

Lot/Block/Sec: LOT: 1-7 & 10-16 AND BLK: 12 SEC: **Subdivision:** WHALEBONE BEACHES REVISED

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SHOPPING CENTER

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:**

Map Panel No: **Map Panel Date:** **Suffix:** **Datum Used:**

Owner Name: SRE MUSTANG LLC - C/O SINGERMAN REAL EST

Owner Address: 980 N MICHIGAN AVE STE 1660 CHICAGO, IL 60611

Contractor Name: GO GREEN CONST., INC T/A GO GREEN CONSTR **Contractor Phone:** 412-367-5870

Contractor Address: 3471 Babcock Blvd Ste 205 Pittsburgh, PA 15237

Description: Remodel of space #102 (formerly Hanes) into Aerie Store (American Eagle); 4425 SF; tenant upfit includes: see txt

Construction Value: \$232313 **Classification of Work:** COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202200796	COMM ADD-REM-REP-ACC	\$733.47	SS	03/11/2022

Conditions of Approval:

- Please read & review Zoning permit conditions below as well as comments from the Deputy Fire Chief (email attached)
 - Please review Building Review Comments (attached).
 - Call for Final Inspections
-

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200795	FLOOD PERMIT	\$0.00	SS	03/11/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202200794	ZONING PERMIT - COMM	\$0.00	KW	03/11/2022

Conditions of Approval:

- Zoning has been reviewed and approved for the interior upfit of Unit 102 for new retail (Aerie).
- All work to occur within the existing footprint, NO increase in footprint or lot coverage permitted.
- Final zoning inspection required upon completion.

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 4414290

Commercial Project Approval
Application # 202200387

Property Address: SOUTH VA DARE TRL **PIN #:** 080020816113 **Parcel:** 000110555
Lot/Block/Sec: LOT: HURON ST BLK: SEC: **Subdivision:** SUBDIVISION - NONE
Zoning: COMMERCIAL/RESIDENTIAL DISTRIC **Land Use:** PUBLIC BEACH ACCESS
Flood Zone: VE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0800 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: TOWN OF NAGS HEAD
Owner Address: P O BOX 99

Contractor Name: SAWYER & SONS CONSTRUCTION, INC. **Contractor Phone:** 252-394-5153
Contractor Address: PO Box 570 Columbia, NC 27925

Description: Demo and rebuild Huron St Beach Access
Construction Value: \$73325 **Classification of Work:** COMMERCIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202200855	COMM ADD-REM-REP-ACC	\$0.00	SS	03/16/2022

Conditions of Approval:

- Provide address #s per Town of Nags Head ordinance.
- Handicap parking? Call for material inspection. All ADA requirements shall be met.
- Call with any questions - Steve 252 449 2005 or Cory 252 449 6043.
- Call for Final Inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202200854	FLOOD PERMIT	\$0.00	SS	03/16/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202200853	ZONING PERMIT - COMM	\$0.00	KW	03/16/2022

Conditions of Approval:

- Zoning has been reviewed and approved for the reconstruction of a 6 ft. wide pedestrian beach accessway at Huron Street.
- Construction must comply with all provisions of CAMA Exemption.
- If feasible, buffering/vegetation shall be installed along the northern and southern property boundary. Final Zoning Inspection required upon completion.

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9402

03/09/2022

Parcel Number: 018697077
 Location: 125 COLINGTON POINTE DR 302-D – COLINGTON
 Subdivision: COLINGTON POINTE
 Legal Description: LOT: UNIT 302-D BLK: SEC:


Owner Name: COLINGTON POINTE LLC
 Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948
 Owner Phone and email: 252-207-8710

Contractor Name: RM SAUNDERS GENERAL CONTRACTOR INC
 Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2522078710 Contractor NC License#: 32380

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD		
Proposed Construction Type:	MOBL	Cost of Construction:	\$290,000
Finished Square Footage:	2085	CAMA Permit#:	2021-01
Unfinished Square Footage:	344	Septic Permit#:	S22-9028
Stories:	3.0	Septic Permit Date:	2/18/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	14	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	7	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6
		Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval. LOCAL AREA ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE ROUGH IN, FINAL ELEVATION CERTIFICATE REQUIRED BEFORE CO	PERMIT FEE	\$1,701.35
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	TOTAL FEES:	\$1,886.35

Applicant Signature:  RM SAUNDERS GENERAL CONTRACTOR INC

Inspector Signature: KEIL TWIFORD AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9409

03/09/2022

Parcel Number: 018697074
 Location: 125 COLINGTON POINTE DR 302-A – COLINGTON
 Subdivision: COLINGTON POINTE
 Legal Description: LOT: UNIT 302-A BLK: SEC:

Owner Name: COLINGTON POINTE LLC
 Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948
 Owner Phone and email: 252-207-8710

Contractor Name: RM SAUNDERS GENERAL CONTRACTOR INC
 Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2522078710 Contractor NC License#: 32380

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD		
Proposed Construction Type:	MULT	Cost of Construction:	\$290,000
Finished Square Footage:	2133	CAMA Permit#:	2021-01
Unfinished Square Footage:	303	Septic Permit#:	522-9028
Stories:	3.0	Septic Permit Date:	2/18/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	14	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	
Proposed Finished Floor Elevation:	8'6"	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6
		Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,720.95
LOCAL AREA ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE ROUGH IN, FINAL ELEVATION CERTIFICATE REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	TOTAL FEES:	\$1,905.95

Applicant Signature:  RM SAUNDERS GENERAL CONTRACTOR INC

Inspector Signature: KEIL TWIFORD AYT

Application Reference # 6419 on 02/18/2022



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9403

03/09/2022

Parcel Number: 018697075
 Location: 125 COLINGTON POINTE DR 302-B - COLINGTON
 Subdivision: COLINGTON POINTE
 Legal Description: LOT: UNIT 302-B BLK: SEC:

Owner Name: COLINGTON POINTE LLC
 Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948
 Owner Phone and email: 252-207-8710

Contractor Name: RM SAUNDERS GENERAL CONTRACTOR INC
 Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2522078710 Contractor NC License#: 32380

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD		
Proposed Construction Type:	MULT	Cost of Construction:	\$290,000
Finished Square Footage:	2045	CAMA Permit#:	2021-01
Unfinished Square Footage:	438	Septic Permit#:	S22-9028
Stories:	3.0	Septic Permit Date:	2/18/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	14	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	
Proposed Finished Floor Elevation:	7	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6
		Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,708.95
LOCAL AREA ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE ROUGH IN, FINAL ELEVATION CERTIFICATE REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	TOTAL FEES:	\$1,893.95

Applicant Signature:  RM SAUNDERS GENERAL CONTRACTOR INC

Inspector Signature: KEIL TWIFORD AYT

Application Reference # 6422 on 02/18/2022



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9407

03/09/2022

Parcel Number: 018697076
 Location: 125 COLINGTON POINTE DR 302-C – COLINGTON
 Subdivision: COLINGTON POINTE
 Legal Description: LOT: UNIT 302-C BLK: SEC:

Owner Name: COLINGTON POINTE LLC.
 Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948
 Owner Phone and email: 441-2544 OBX HOUSING 255-0117

Contractor Name: RM SAUNDERS GENERAL CONTRACTOR INC
 Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2522078710 Contractor NC License#: 32380

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD		
Proposed Construction Type:	MULT	Cost of Construction:	\$290,000
Finished Square Footage:	2091	CAMA Permit#:	2021-01
Unfinished Square Footage:	389	Septic Permit#:	S22-9028
Stories:	3.0	Septic Permit Date:	2/18/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	14	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	
Proposed Finished Floor Elevation:	7	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6
		Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval. LOCAL AREA ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE ROUGH IN, FINAL ELEVATION CERTIFICATE REQUIRED BEFORE CO	PERMIT FEE	\$1,723.85
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	TOTAL FEES:	\$1,908.85

Applicant Signature:  RM SAUNDERS GENERAL CONTRACTOR INC

Inspector Signature: KEIL TWIFORD AYT

Application Reference # 6424 on 02/18/2022



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9382

03/08/2022

Parcel Number: 018644000
 Location: COLINGTON RD – COLINGTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: NIGEL BLACKMORE
 Owner Mail Address: 814 FAIRGATE DR WEXFORD, PA 15090
 Owner Phone and email:

Contractor Name: SEAGULL CONTRACTING CORP
 Contractor Mail Address: 605 ARCTIC AVE, VIRGINIA BEACH, VA 23451
 Contractor Phone: 757-513-9021 Contractor NC License#: 83670

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$933,123
Finished Square Footage:	2875	CAMA Permit#:	2019-15
Unfinished Square Footage:	2129	Septic Permit#:	S8-9174
Stories:	2.0	Septic Permit Date:	02/22/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	14	Water Tap#:	no
Footing Type:	CONCRETE	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	9.1	Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	13.8
		Baths/half baths:	3.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. LOCAL AREA ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE ROUGH IN, FINAL ELEVATION CERTIFICATE REQUIRED BEFORE CO.	PERMIT FEE	\$3,007.85
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$3,117.85

Applicant Signature: _____ SEAGULL CONTRACTING CORP

Inspector Signature: KEIL TWIFORD AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9399

03/09/2022

Parcel Number: 027696000
 Location: 1021 HARBOUR VIEW DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC T
 Legal Description: LOT: 43 BLK: SEC: T

Owner Name: RM SAUNDERS GENERAL CONTRACTOR INC
 Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948
 Owner Phone and email: 252-207-8710 randy@rmsaunders.com

Contractor Name: RM SAUNDERS GENERAL CONTRACTOR INC
 Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2522078710 Contractor NC License#: 32380

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$160,000
Finished Square Footage:	1257	CAMA Permit#:	
Unfinished Square Footage:	94	Septic Permit#:	S4-8216
Stories:	2.0	Septic Permit Date:	01/12/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	7	Water Tap#:	53359
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	13.2
		Baths/half baths:	3.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. AS BUILT SURVEY REQUIRED BEFORE CO	PERMIT FEE	\$980.35
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$1,090.35

Applicant Signature:  RM SAUNDERS GENERAL CONTRACTOR INC

Inspector Signature: _____ AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9886

03/30/2022

Parcel Number: 018992000
 Location: 156 SIR CHANDLER DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC B
 Legal Description: LOT: 68 BLK: SEC: B

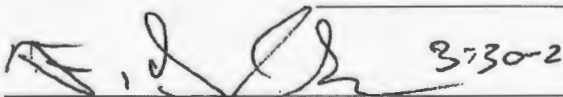
Owner Name: BRANDON MITCHELL
 Owner Mail Address: 3930 PARKER ST APT B KITTY HAWK, NC 27949
 Owner Phone and email:

Contractor Name: COASTLINE REALTY AND CONSTRUCTION LLC
 Contractor Mail Address: PO BOX 998, NAGS HEAD, NC 27959
 Contractor Phone: 252-256-0556 Contractor NC License#: 62368

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD ON PILINGS		
Proposed Construction Type:	SFD	Cost of Construction:	\$300,000
Finished Square Footage:	1548	CAMA Permit#:	2022-09 & 17-22
Unfinished Square Footage:	1120	Septic Permit#:	30954
Stories:	2.0	Septic Permit Date:	7/6/2021
Building Height:	32'4"	Survey/Site Plan:	YES
Total Rooms:	7	Water Tap#:	53410
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	8	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	3.1
		Baths/half baths:	3.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. LOCAL ELEVATION STANDARD OF 8' APPLIES IN AE4 ZONE, AREAS BELOW 8' REQUIRE FLOOD VENTS, UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO.	PERMIT FEE	\$1,609.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	TOTAL FEES:	\$1,794.00

Applicant Signature:  3-30-22 COASTLINE REALTY AND CONSTRUCTION LLC

Inspector Signature: Ed Kindervater/AD  ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-9896

03/30/2022

Parcel Number: 018968000
Location: 104 SIR CHANDLER DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC B
Legal Description: LOT: 43 BLK: SEC: B

Owner Name: ALAN L LINDLEY
Owner Mail Address: 13405 WILDWOOD CT - WOODBRIDGE, VA 22191
Owner Contact Information:

Contractor Name: KREISER ELECTRIC
Contractor Mail Address: 3847 IVY LANE - KITTY HAWK, NC 27949
Contractor Phone: 252-564-2367
Contractor NC License#: UL 12287

DETAILS RESIDENTIAL

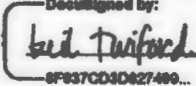
Amp Increase: 0
Service Amps: 200
Cost of Job: \$1,500
ELECTRICAL PERMIT FEE: \$150.00

Comments: REPLACE METER BASE, ADD OUTSIDE PANEL/DICONNECT, MOVE INSIDE PANEL

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Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  DocuSigned by:
AAAFCE3EBA99431... 3/30/2022 KREISER ELECTRIC kreiserelectric@gmail.com

Inspector Signature:  DocuSigned by:
8F937C03D027480... 3/30/2022 ALD



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9387

03/09/2022

Parcel Number: 018788152
 Location: 152 BAYCLIFF TRL – COLINGTON
 Subdivision: BAY CLIFF
 Legal Description: LOT: 152 BLK: SEC:

Owner Name: ROBBIN F LAIRD
 Owner Mail Address: 2554 C ARLINGTON MILLS DR - ARLINGTON, VA 22206
 Owner Contact Information:

Contractor Name: ALL SEASON HEATING AND COOLING
 Contractor Mail Address: PO BOX 244 - POINT HARBOR, NC 27964
 Contractor Phone: 252-491-9232
 Contractor NC License#: L19091

DETAILS RESIDENTIAL

UNITS:	2.00	Cost of Job:	\$6,430
Electrical Contractor ID:	30701-I		
Units	2	MECHANICAL PROJECT FEE:	\$150.00

Comments: Replace upstairs system with a 1.5 ton split system heat pum p and air handler

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Applicant Signature: _____ ALL SEASON HEATING AND COOLING
 stacie@allseasonshac.com

Inspector Signature: _____ AYT



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 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9893

03/30/2022

Parcel Number: 018941000
 Location: 230 EAGLE DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC B
 Legal Description: LOT: 13 BLK: SEC: B

Owner Name: STEVEN G KOJCSICH
 Owner Mail Address: 104 CARDINAL CT WILLIAMSBURG, VA 23185
 Owner Phone and email:

Contractor Name: EMANUELSON AND DAD INC
 Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959
 Contractor Phone: 252-261-2212 Contractor NC License#: 79801

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work Install Bulkhead

Cost of Construction: \$15,735
 CAMA Permit#: 86212
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: DocuSigned by:
 Lorelei Zumbannan EMANUELSON AND DAD INC
 6258507D22C845A... 3/30/2022

Inspector Signature: DocuSigned by:
 Keil Twiford ALD
 8F937CD3D827490... 3/30/2022



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9331

03/07/2022

Parcel Number: 018788120
Location: 120 JIMMY CT – COLINGTON
Subdivision: BAY CLIFF
Legal Description: LOT: 120 BLK: SEC:

Owner Name: EMILY BOYD HOLMES
Owner Mail Address: 120 JIMMY CT - KILL DEVIL HILLS, NC 27948
Owner Contact Information:

Contractor Name: NORTH BEACH SERVICES
Contractor Mail Address: PO BOX 181 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-6293
Contractor NC License#: L22053

DETAILS RESIDENTIAL


UNITS: 1.00 Cost of Job: \$5,000
Electrical Contractor ID: 24744
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install mini split h/p with one wall mount

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Applicant Signature  NORTH BEACH SERVICES
311F27182B6E415... 3/7/2022

Inspector Signature  AYT
8F937CD3D827499... 3/7/2022



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9360

03/08/2022

Parcel Number: 020904011
 Location: 136 SWAN VIEW DR – COLINGTON
 Subdivision: SWAN VIEW SHORES
 Legal Description: LOT: 11 BLK: SEC: 1

Owner Name: ASHLEY V JOHNSON
 Owner Mail Address: P O BOX 7321 KILL DEVIL HILLS, NC 27948
 Owner Phone and email: 252-423-1028 rdjohnson1017@yahoo.com

Contractor Name: OWNER
 Contractor Mail Address: ,
 Contractor Phone: Contractor NC License#:

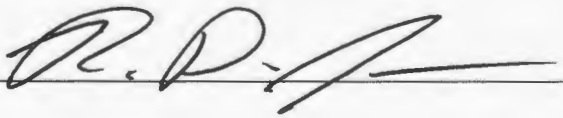
BUILDING INFORMATION

Proposed Construction Use:	RESIDENTIAL ADDITION , 542 SQ. FT. MASTER BEDROOM WITH BEDROOM AND CLOSET		
Proposed Construction Type:	SFD	Cost of Construction:	\$100,000
Finished Square Footage:	542	CAMA Permit#:	NA
Unfinished Square Footage:	0	Septic Permit#:	S9-8023
Stories:	1.0	Septic Permit Date:	01/03/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	2	Water Tap#:	NA
Footing Type:	PILING	Water Type:	
Exterior Finish:	VINYL SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	12	Base Flood Elevation:	8.0
Bedrooms:	1	Lot/Ground Elevation:	7
		Baths/half baths:	1.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 AS BUILT SURVEY REQUIRED BEFORE CO

PERMIT FEE	\$406.50
HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$416.50

Applicant Signature:  RICHARD JOHNSON

Inspector Signature: KEIL TWIFORD AYT



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9348

03/07/2022

Parcel Number: 019575000
 Location: 201 KITTY HAWK BAY DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC K
 Legal Description: LOT: 104 BLK: SEC: K

Owner Name: KELLY JR JOHNSON
 Owner Mail Address: 325 TURNSTONE DR SUFFOLK, VA 23435
 Owner Phone and email: 757-615-1785 njohnson@blairbrothers.com

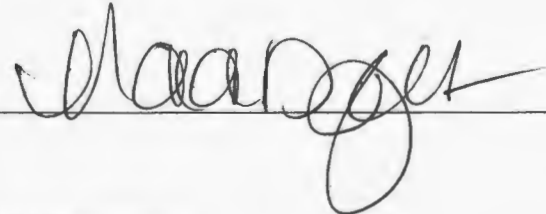
Contractor Name: OWNER
 Contractor Phone: Contractor NC License#:

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work UNDER HOUSE STORAGE
 Septic Permit Date: Cost of Construction: \$3,200
 Septic Permit #: CAMA Permit#:
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: ENCLOSURE NOT TO BE USED AS PERMIT FEE \$150.00
 ACCESORY DWELLING UNIT

TOTAL FEES: \$150.00

Applicant Signature:  KELLY JOHNSON
 Inspector Signature: KEIL TWIFORD AYT



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 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9413

03/09/2022

Parcel Number: 018762009
 Location: 219 TOWER LN – COLINGTON
 Subdivision: CARLYLE-ON-THE-SOUND
 Legal Description: LOT: 9 BLK: SEC:

Owner Name: DANA E AYDLETT
 Owner Mail Address: P O BOX 1649 KITTY HAWK, NC 27949
 Owner Phone and email:

Contractor Name: LIGHTENING MARINE
 Contractor Mail Address: PO BOX 1649, KITTY HAWK, NC 27949
 Contractor Phone: 252-441-7712 Contractor NC License#:

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work CONSTRUCT APPROX 160' VINYL RETAINING WALL ON REAR OF PROPERTY

Cost of Construction: \$7,100
 CAMA Permit#:
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: *Dana Aydlett* LIGHTENING MARINE

Inspector Signature: KEIL TWIFORD AYT



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-9417

03/10/2022

Parcel Number: 019989000
 Location: 1123 HARBOUR VIEW DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC N
 Legal Description: LOT: 109 BLK: SEC: N

Owner Name: JEREMY WILKINS
 Owner Mail Address: PO BOX 2944 KITTY HAWK, NC 27949
 Owner Phone and email:

Contractor Name: MOD HOM LLC
 Contractor Mail Address: 3206 RAYMOND AVE, KDH
 Contractor Phone: 252-489-7051 Contractor NC License#: 85244

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , INTERIOR REMODEL NO CHANGE TO ORIGINAL FOOTPRINT		
Proposed Construction Type:		Cost of Construction:	\$57,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	SHX
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan PERMIT FEE \$570.00 or site plan requires prior approval.

TOTAL FEES: \$570.00

Applicant Signature: *Hal Hagan* MOD HOM LLC

Inspector Signature: KEIL TWIFORD AYT



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ACCESSORY PERMIT

ACCESSORY PERMIT#: REPAIR-9662

03/21/2022

Parcel Number: 020597000
Location: 227 RHODOMS DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC U
Legal Description: LOT: 26A BLK: SEC: U

Owner Name: WILLIAM TTEE LOSCALZO
Owner Mail Address: 140 RIVERA WILLIAMSBURG, VA 23188
Owner Phone and email:

Contractor Name: BARRETT & HABER, LLC, T/A EMANUELSON & D
Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959
Contractor Phone: Contractor NC License#: 87233

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - REPAIR,
Description of Work repair existing bulkhead by replacing tieback rods

Cost of Construction: \$12,670
CAMA Permit#: :
Flood Zone: :
Base Flood Elevation: 0.0
Lot/Ground Elevation: :

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

DocuSigned by:
Applicant Signature: *Emanuelson and Dad* BARRETT & HABER, LLC, T/A EMANUELSON & D
6258597D22C845A... 3/21/2022

DocuSigned by:
Inspector Signature: *keil twiford* AYT
8F837CD3D827499... 3/21/2022



County of Dare
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GENERATOR INSTALL

GENERATOR INSTALL#: GENR-9379

03/08/2022

Parcel Number: 028483000
Location: 102 QUEEN MARY CT – COLINGTON
Subdivision: COLINGTON HARBOR SEC O
Legal Description: LOT: 7 BLK: SEC: O

Owner Name: ROBERT I POLK
Owner Mail Address: 102 QUEEN MARY CT - KILL DEVIL HILLS, NC 27948
Owner Contact Information:

Contractor Name: BEAR ROCK ELECTRIC INC
Contractor Mail Address: PO BOX 1604 - KITTY HAWK, NC 27949
Contractor Phone: 8886889927
Contractor NC License#: U-30667

DETAILS RESIDENTIAL

Cost of Job: \$10,385

GENERATOR INSTALL FEE: \$150.00

Comments: INSTALLATION OF 22KW GENERAC GENERATOR AND 200 AMPY TRANSFER SWITCH ON ELEVATED WOODEN STAND

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Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  BEAR ROCK ELECTRIC INC
70157EB1798C4D1... 3/8/2022 nclose@bearrookelectric.com

Inspector Signature:  AYT
8F937CD3D827490... 3/8/2022



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REPAIR

REPAIR#: REPAIR-9561

03/16/2022

Parcel Number: 018787000
 Location: 244 WILLIAMS DR – COLINGTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LIBERTY CHRISTIAN FELLOWSHIP INC
 Owner Mail Address: 244 WILLIAMS DR - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: FRASCA CUSTOM HOMES LLC
 Contractor Mail Address: 2401 COLINGTON RD - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-256-1814
 Contractor NC License#: 72094

DETAILS RESIDENTIAL

Cost of Job: \$74,475

REPAIR FEE: \$150.00

Comments: ROOF REPLACEMENT

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Applicant Signature:  FRASCA CUSTOM HOMES LLC
 frascacustomhomes@gmail.com

Inspector Signature: KEIL TWIFORD AYT



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MISC ACCESSORY

MISC ACCESSORY#: ACC-9566

03/16/2022

Parcel Number: 019853000
 Location: 209 BROADBAY DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC M
 Legal Description: LOT: 100 BLK: SEC: M

Owner Name: KEVIN W TAYLOR
 Owner Mail Address: 6400 LOXLEY CT - SUFFOLK, VA 23435
 Owner Contact Information:

Contractor Name: OWNER
 Contractor Mail Address: -
 Contractor Phone: NA
 Contractor NC License#: NA

DETAILS RESIDENTIAL

Cost of Job: \$1,500

CAMA Permit 2022-06

MISC ACCESSORY FEE: \$150.00

Lot/Ground elevation (ft)

Comments: 12x24 INTEX ABOVE GROUND POOL WITH -120 SQ FT DECK

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Applicant Signature: Kevin W. Taylor KEVIN W TAYLOR

Inspector Signature: KEIL TWIFORD AYT



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9567

03/16/2022

Parcel Number: 020036000
Location: 105 CLUB VIEW CT – COLINGTON
Subdivision: COLINGTON HARBOR SEC O
Legal Description: LOT: 52 BLK: SEC: O

Owner Name: JOHN LEE ALLDREDGE
Owner Mail Address: 105 CLUB VIEW CT KILL DEVIL HILLS, NC 27948
Owner Phone and email:

Contractor Name: ADP SWIMMING POOLS & CONSTRUCTION LLC
Contractor Mail Address: 801 INDIAN DR, KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-305-8088 Contractor NC License#: 53785

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
Description of Work: INSTALL NEW 50' BULKHEAD, REPAIR PIER

Cost of Construction: \$15,000
CAMA Permit#:
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: Adrian Pitts ADP SWIMMING POOLS & CONSTRUCTION LLC
C135623DF4844F3... 3/16/2022

Inspector Signature: keil twiford AYT
8F937CD3D827490... 3/16/2022



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ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-9548

03/15/2022

Parcel Number: 026739044
 Location: 118 SEA GULL CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC W
 Legal Description: LOT: 44 BLK: SEC: W

Owner Name: BERNADINE M WHITE
 Owner Mail Address: 118 SEAGULL CT - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: OWNER
 Contractor Mail Address: -
 Contractor Phone: NA
 Contractor NC License#: NA

DETAILS RESIDENTIAL

Amp Increase:
 Service Amps:

Cost of Job: \$
ELECTRICAL PERMIT FEE: \$150.00

Comments: NEW PANEL BOX WITH NEW BREAKERS

WORK ORDER # 33254768

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: Bernadine White BERNADINE M WHITE

Inspector Signature: KEIL TWIFORD AYT



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9663

03/21/2022

Parcel Number: 019874000
Location: 342 EAGLE DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC M
Legal Description: LOT: 124 BLK: SEC: M

Owner Name: BRENT SMITH
Owner Mail Address: 15487 S CEDAR CREEK LN MONTPELIER, VA 23192
Owner Phone and email:

Contractor Name: D & B BULKHEADS
Contractor Mail Address: 5217 LUNAR DR, KITTY HAWK, NC 27949
Contractor Phone: 704-418-8667 Contractor NC License#:

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
Description of Work 3 tie pilings

Septic Permit Date:	Cost of Construction:	\$2,950
Septic Permit #:	CAMA Permit#:	86261
	Flood Zone:	
	Base Flood Elevation:	0.0
	Lot/Ground Elevation:	

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: Lauren Westfield D & B BULKHEADS

Inspector Signature: KEIL TWIFORD AYT



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DOCKS;PIERS;BULKHDS, BOATLFTS

DOCKS;PIERS;BULKHDS, BOATLFTS#: ACC-9665

03/21/2022

Parcel Number: 018953000
 Location: 233 EAGLE DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC B
 Legal Description: LOT: 26 & 27 BLK: SEC: B

Owner Name: EDWARD P KAPPES
 Owner Mail Address: 233 EAGLE DR - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: D & B BULKHEADS
 Contractor Mail Address: 5217 LUNAR DR - KITTY HAWK, NC 27949
 Contractor Phone: 704-418-8667
 Contractor NC License#: NA

DETAILS RESIDENTIAL

CAMA Permit 86279
 Lot/Ground elevation (ft)

Cost of Job: \$6,400

**DOCKS;PIERS;BULKHDS,
 BOATLFTS FEE: \$250.00**

Comments: DOCK REPLACEMENT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: *James Westfield* D & B BULKHEADS
 bran8843@gmail.com

Inspector Signature: KEIL TWIFORD AYT



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 Frisco: (252) 475-5878

DOCKS;PIERS;BULKHDS, BOATLFTS

DOCKS;PIERS;BULKHDS, BOATLFTS#: ACC-9664

03/21/2022

Parcel Number: 019673000
 Location: 131 SUNSET DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC L
 Legal Description: LOT: 52 BLK: SEC: L

Owner Name: DONNA A SUGG
 Owner Mail Address: 131 SUNSET DR - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: D&B BULKHEADS INC
 Contractor Mail Address: 401 AYCOCK ST - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-455-6322
 Contractor NC License#: NA

DETAILS RESIDENTIAL

CAMA Permit	86280	Cost of Job:	\$11,050
Lot/Ground elevation (ft)		DOCKS;PIERS;BULKHDS, BOATLFTS FEE:	\$250.00

Comments: BOATLIFT

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Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Lauren Westfield* D&B BULKHEADS INC
 bran8843@gmail.com

Inspector Signature: KEIL TWIFORD AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

DOCKS;PIERS;BULKHDS, BOATLFTS

DOCKS;PIERS;BULKHDS, BOATLFTS#: ACC-9779

03/25/2022

Parcel Number: 020639000
 Location: 103 QUEEN CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC V
 Legal Description: LOT: 36 BLK: SEC: V

Owner Name: BRIAN E COEY
 Owner Mail Address: 5413 MICA DR - PRINCE GEORGE, VA 23875
 Owner Contact Information:

Contractor Name: TIM REESE CONSTRUCTION
 Contractor Mail Address: 128 HOLLY RIDGE RD - MANTEO, NC 27954
 Contractor Phone: 252-473-1243
 Contractor NC License#: NA

DETAILS RESIDENTIAL

CAMA Permit	NA	Cost of Job:	\$3,500
Lot/Ground elevation (ft)		DOCKS;PIERS;BULKHDS, BOATLFTS FEE:	\$250.00

Comments:

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Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ TIM REESE CONSTRUCTION

Inspector Signature: _____ ALD



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 Planning Office
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Manteo: (252) 475-5870
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 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9812

03/25/2022

Parcel Number: 018834000
 Location: 111 QUORK CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC A
 Legal Description: LOT: 31 BLK: SEC: A

Owner Name: CYNTHIA L SWOOPE
 Owner Mail Address: 111 QUORK CT - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS:	1.00	Cost of Job:	\$10,783
Electrical Contractor ID:	22222-L		
Units	0	MECHANICAL PROJECT FEE:	\$150.00

Comments: COMPLETE DUCT SYSTEM C/O THAT SERVICES UPSTAIRS AND MID LE VEL.

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: DocuSigned by:
PAXTON NIX 3/28/2022 R A HOY HEATING AND AIR CONDITIONING INC
 0308088408084A8... paxtonn@rahoy.com

Inspector Signature: DocuSigned by:
Paul Twiford 3/28/2022 CHF
 8F937CD3D827488...

Application Reference # 6752 on 03/18/2022



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9811

03/25/2022

Parcel Number: 018875000
 Location: 210 ROANOKE DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC A
 Legal Description: LOT: 75 BLK: SEC: A

Owner Name: LINWOOD CARROLL BRYANT
 Owner Mail Address: P O BOX 321 - RICH SQUARE, NC 27869
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

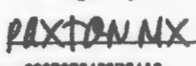
DETAILS RESIDENTIAL

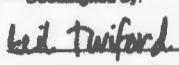
UNITS:	1.00	Cost of Job:	\$7,154
Electrical Contractor ID:	n/a		
Units	0	MECHANICAL PROJECT FEE:	\$150.00

Comments: C/O 16 SEER 1.5 TON TRANE H/P SYSTEM THAT SEVICES THE GROUND FLOOR. REUSE THE EXISTING STAND, LINE SET AND DUCT WORK.

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature  3/28/2022 R A HOY HEATING AND AIR CONDITIONING INC
 030898408D84A8... paxtonn@rahoy.com

Inspector Signature  3/28/2022 CHF
 8F837CD3D827498...

Application Reference # 6782 on 03/21/2022



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-9846

03/29/2022

Parcel Number: 020412000
 Location: 489 HARBOUR VIEW DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC S
 Legal Description: LOT: 10 BLK: SEC: S

Owner Name: MICHAEL REYNOLDS
 Owner Mail Address: 489 HARBOR VIEW DR KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: ALPHA AND OMEGA MULTI SERVICE LLC
 Contractor Mail Address: 121 SEAGULL CT, KILL DEVILS HILLS, NC 27948
 Contractor Phone: 2524553670 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , REMOVE AND REPLACE EXISTING DECK BOARDS & HANDRAILS		
Proposed Construction Type:		Cost of Construction:	\$3,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	4.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: _____ ALPHA AND OMEGA MULTI SERVICE LLC

Inspector Signature: _____ ALD



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 Frisco: (252) 475-5878

REPAIR

REPAIR#: REPAIR-9843

03/29/2022

Parcel Number: 019273099
 Location: 213 SOUNDVIEW DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC E
 Legal Description: LOT: 99 BLK: SEC: E

Owner Name: MORI BEN ARI COHEN
 Owner Mail Address: 213 SOUNDVIEW DR - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: BARRY TWIFORD
 Contractor Mail Address: 5545 MASHOES RD - MANNS HARBOR, NC 27953
 Contractor Phone: 252-423-0568
 Contractor NC License#: UNLICENSED

DETAILS RESIDENTIAL

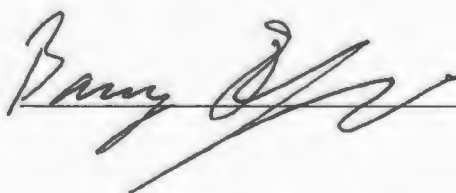
Cost of Job: \$15,000

REPAIR FEE: \$150.00

Comments: REMOVE AND REPLACE DECK BOARDS, HANDRAIL, STEPS,

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  BARRY TWIFORD
 TWIFORDBARRY4@GMAIL.COM

Inspector Signature: Ed Kindervater/AD  ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9268

03/03/2022

Parcel Number: 029312044
Location: 7016 CURRITUCK RD – MARTIN'S POINT
Subdivision: MARTIN'S POINT SECTION 2
Legal Description: LOT: 44 BLK: 1 SEC: 2

Owner Name: LEIGH P FORBES
Owner Mail Address: 7016 CURRITUCK RD - KITTY HAWK, NC 27949
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$4,301
Electrical Contractor ID: 22222-L
Units 1 MECHANICAL PROJECT FEE: \$150.00

Comments: C/O AIR HANDLER ONLY! GEOTHERMAL SYSTEM! TRANE TEM6 3-TON!

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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DocuSigned by:
Applicant Signature *Rahaton Ah* 3/7/2022 R A HOY HEATING AND AIR CONDITIONING INC
paxtonn@rahoy.com

DocuSigned by:
Inspector Signature *Ed bindenator* 3/4/2022 ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9878

03/30/2022

Parcel Number: 020368000
Location: 448 HARBOUR VIEW DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC R
Legal Description: LOT: 102 BLK: SEC: R

Owner Name: FRANCIS SHERIDAN
Owner Mail Address: 405 WARREN WRIGHT RD - BELCHERTOWN, MA 01007
Owner Contact Information:

Contractor Name: ANDERSON HEATING & COOLING LLC
Contractor Mail Address: PO BOX 396 - KITTY HAWK, NC 27949
Contractor Phone: 252-619-3105
Contractor NC License#: 314838

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,846
Electrical Contractor ID: 30003
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace existing HVAC system with a new Carrier 2 Ton 14 SEE R Heat Pump and matching Air Handler

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Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

DocuSigned by:
Applicant Signature Anderson Heating and Cooling 3/30/2022 ANDERSON HEATING & COOLING LLC
AD7B3D0640FF46B... contact@andersonheatingandcooling.com

DocuSigned by:
Inspector Signature ALD 3/30/2022 ALD
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County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

REPAIR

REPAIR#: REPAIR-9846

03/29/2022

Parcel Number: 020412000
Location: 489 HARBOUR VIEW DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC S
Legal Description: LOT: 10 BLK: SEC: S

Owner Name: MICHAEL REYNOLDS
Owner Mail Address: 489 HARBOR VIEW DR - KILL DEVIL HILLS, NC 27948
Owner Contact Information:

Contractor Name: ALPHA AND OMEGA MULTI SERVICE LLC
Contractor Mail Address: 121 SEAGULL CT - KILL DEVILS HILLS, NC 27948
Contractor Phone: 2524553670
Contractor NC License#: NA

DETAILS RESIDENTIAL

Cost of Job: \$3,000

REPAIR FEE: \$150.00

Comments: REMOVE AND REPLACE EXISTING DECK BOARDS & HANDRAILS

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Applicant Signature: _____ ALPHA AND OMEGA MULTI SERVICE LLC
alphaomegaservices8@gmail.com

Inspector Signature: *Paul Dainford* ALD
DocuSigned by: Paul Dainford 3/29/2022
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**County of Dare
Planning Department
PO Box Drawer 1000
Manteo NC 27954**

**Manteo
(252)475-5870
Northern Beach
(252)475-5871
Buxton
(252)475-5878**

MECHANICAL PERMIT DATA

PERMIT#: 9845

Permit Date: 2022-03-29

Parcel Number: **004152000**
 PIN Number: 988305282636
 Location: 103 PINE CONE TRL KILL DEVIL HILLS NC
 Subdivision Name: BAUM BAY HARBOR SECS 1-4
 Legal Description: LOT: E BLK: SEC: 2

Owner: RANDOLPH VAUGHAN FOSTER
 Owner Address: 103 PINE COVE TRL KILL DEVIL HILLS NC 27948
 Owner Phone: N/A

CONTRACTOR

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC
 Contractor Address: 3978 ALBEMARLE CHURCH RD COLUMBIA NC 27925
 Contractor Phone: 252-797-4100
 NC License #: L22516 License Type: MECH

DETAILS REPLACE DUCTWORK UNDER HOUSE

Cost of job: \$5,000
 Electrical Contractor ID: NA
 Units: 0

MECHANICAL PERMIT FEE 150.00
TOTAL FEES: \$150.00

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Applicant Signature: ARMSTRONG AND SON HEATING AND AIR LLC
 Inspector Signature: SIGNATURE ON FILE
 Application Reference: 6830



County of Dare
 Planning Department
 PO Box Drawer 1000
 Manteo NC 27954

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 Buxton
 (252)475-5878

MECHANICAL PERMIT DATA

PERMIT#: 9380

Permit Date: 2022-03-08

Parcel Number: **019609000**
 PIN Number: 986416935501
 Location: 207 E SIR WALTER RALEIGH DR COLINGTON NC
 Subdivision Name: COLINGTON HARBOR SEC K
 Legal Description: LOT: 141 BLK: SEC: K

Owner: JOHN H KONNERT
 Owner Address: 2408 SWEET BAY LN RESTON VA 22091
 Owner Phone: N/A

CONTRACTOR

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Address: PO BOX 265 KITTY HAWK NC 27949
 Contractor Phone: 252-261-8178
 NC License #: L13056 License Type: MECH

DETAILS C/O 14 SEER 2.5 TON H/P SYSTEM THAT SERVICES THE WHOLE HOUSE ! REUSE THE EXISTING STAND, LINE SET AND DUCT WORK.

Cost of job: \$6,972
 Electrical Contractor ID: 22222-L
 Units: 1

MECHANICAL PERMIT FEE 150.00
TOTAL FEES: \$150.00

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Applicant Signature: R A HOY HEATING AND AIR CONDITIONING INC
 Inspector Signature: SIGNATURE ON FILE
 Application Reference: 6566



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

COMMERCIAL BUILDING PERMIT

BUILDING PERMIT#: C-9848

03/29/2022

Parcel Number: 018658000
 Location: 2141 COLINGTON RD – COLINGTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: JOSEPH JR JONES
 Owner Mail Address: 4000 LONG MEADOW LN LAKE ORION, MI 48359
 Owner Phone and email:

Contractor Name: OWNER/BLDR
 Contractor Mail Address:
 Contractor Phone: Contractor NC License#: UNLICENSED

BUILDING INFORMATION

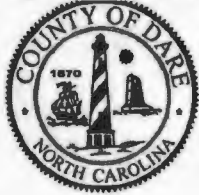
Proposed Construction Use:	ROOF OVER DECK AND 5X5FT DECK	Cost of Construction:	\$500
Occupancy:		CAMA Permit#:	
Proposed Construction Type:		Septic Permit#:	
Finished Square Footage:		Septic Permit Date:	
Unfinished Square Footage:		Survey/Site Plan:	
Stories:		Water Tap#:	
Building Height:		Water Type:	
Total Rooms:		Flood Zone:	
Footing Type:		Base Flood Elevation:	0.0
Exterior Finish:		Lot/Ground Elevation:	
Sprinkler System:		Baths/half baths:	0/0
Proposed Finished Floor Elev:			
Bedrooms:			

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  JOSEPH JR JONES

Inspector Signature: KIEL TWIFORD/AD  ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
KDH: (252) 475-5871
Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9883

03/30/2022

Parcel Number: 018686000
Location: 1648 COLINGTON RD – COLINGTON
Subdivision: CHARLES P NUNEMAKER ET ALS
Legal Description: LOT: NEW PARCEL 1 BLK: SEC:

Owner Name: WILLIAM J JR MEYER
Owner Mail Address: PO BOX 1115 KILL DEVIL HILLS, NC 27948
Owner Phone and email:

Contractor Name: WILLIAM J JR MEYER
Contractor Mail Address: PO BOX 1115, KILL DEVIL HILLS, NC 27948
Contractor Phone: 25298265952 Contractor NC License#: OWNER/BLDR

ACCESSORY INFORMATION

Proposed Construction: COMMERCIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
Description of Work ADD SOLID WOOD FENCE

Cost of Construction: \$2,000
CAMA Permit#: 0
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation: 0

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: Bill Marine WILLIAM J JR MEYER
3/30/2022

Inspector Signature: Neil Twiford ALD
3/30/2022



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9273

03/03/2022

Parcel Number: 024234070
 Location: 157 AIRPORT RD – MANTEO
 Subdivision: EVANSVILLE SUBDIV
 Legal Description: LOT: 70 BLK: SEC:

Owner Name: MARY LOU PENNY DURNEY
 Owner Mail Address: 170 AIRPORT RD MANTEO, NC 27954
 Owner Phone and email: 757-434-0598 VABEACHPEN@YAHOO.COM

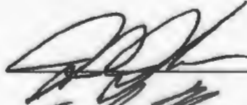
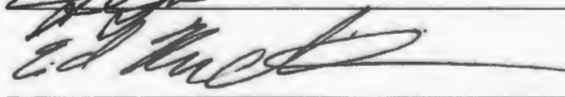
Contractor Name: JD JOHNSON REALTY CONSTRUCTION LLC
 Contractor Mail Address: PO BOX 340, MANTEO, NC 27954
 Contractor Phone: 252-305-9982 Contractor NC License#: 73168

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$400,000
Finished Square Footage:	1450	CAMA Permit#:	NA
Unfinished Square Footage:	750	Septic Permit#:	S4-9111
Stories:	1.0	Septic Permit Date:	2/23/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	5	Water Tap#:	52075
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	17	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	13.7
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. AS-BUILT SURVEY REQUIRED BEFORE CO	PERMIT FEE	\$1,388.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$1,498.00

Applicant Signature:  JD JOHNSON REALTY CONSTRUCTION LLC
 Inspector Signature:  ALD



County of Dare
 Planning Office
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 Manteo NC 27954

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 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9468

03/11/2022

Parcel Number: 024423025
 Location: 165 TUSCARORA CT – MANTEO
 Subdivision: CROATAN WOODS DEVELOPMENT INC
 Legal Description: LOT: 23 BLK: SEC:

Owner Name: LYNNE BRAISTED PEDERSEN
 Owner Mail Address: 7017 FAIRWINDS DR ORIENTAL, NC 28571
 Owner Phone and email:

Contractor Name: BARKER & BARKER CUSTOM HOMES, LLC
 Contractor Mail Address: 112 WALTER CT, MANTEO, NC 27954
 Contractor Phone: 2523335449 Contractor NC License#: 84173

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$600,000
Finished Square Footage:	2128	CAMA Permit#:	NA
Unfinished Square Footage:	1418	Septic Permit#:	S3-9200
Stories:	2.0	Septic Permit Date:	2/28/2022
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	8	Water Tap#:	53397
Footing Type:	MASONARY	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	12.5	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	5.7
		Baths/half baths:	2.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,163.00
LOCAL ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE FLOOD VENTS, UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$2,273.00

Applicant Signature: BARKER & BARKER CUSTOM HOMES, LLC

Inspector Signature: Ed Kindervater / AD ALD



County of Dare
 Planning Office
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Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9533

03/15/2022

Parcel Number: 024423024
 Location: 173 TUSCARORA CT – MANTEO
 Subdivision: CROATAN WOODS DEVELOPMENT INC
 Legal Description: LOT: 22 BLK: SEC:

Owner Name: DAVID M CREWS
 Owner Mail Address: 109 CANVASBACK CT GEORGETOWN, KY 40324
 Owner Phone and email: 919-417-0733 david_crews_zooo@yahoo.com

Contractor Name: C TRIP LLC
 Contractor Mail Address: 770 BROOKS DAIRY ROAD, GEORGETOWN, KY 40324
 Contractor Phone: 919-417-0733 Contractor NC License#: 87218

BUILDING INFORMATION

Proposed Construction Use: SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD. THREE STORY HOUSE ON PILINGS

Proposed Construction Type:	SFD	Cost of Construction:	\$650,000
Finished Square Footage:	2589	CAMA Permit#:	NA
Unfinished Square Footage:	1520	Septic Permit#:	S3-7523
Stories:	3.0	Septic Permit Date:	12/03/02021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	8	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	8	Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	4.4
		Baths/half baths:	3.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 LOCAL ELEVATION STANDARD OF 8' APPLIES AREAS UNDER 8' WILL REQUIRE FLOOD VENTS, HEIGHT AND UNDER CONSTRUCTION ELEVATION CERTIFICATES REQUIRED BEFORE ROUGH IN, FINISHED COSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO

PERMIT FEE	\$2,550.00
HOME OWNERS RECOVERY FEE	10.00
RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$2,660.00

DocuSigned by:
David Crews

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DocuSigned by:

Applicant Signature:

Ed binderwater

8F0A005E752B444...

3/15/2022

3/15/2022

C TRIP LLC

Inspector Signature:

ALD



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9777

03/25/2022

Parcel Number: 023612000
 Location: 4195 MILL LANDING RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: JEFFREY H GARRISON
 Owner Mail Address: 4102 W VANS CIVER DR NAGS HEAD, NC 27959
 Owner Phone and email:

Contractor Name: HATCHELL CONCRETE, INC
 Contractor Mail Address: PO BOX 2405, MANTEO, NC 27954
 Contractor Phone: 252-473-6074 Contractor NC License#: 34205

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION TWO BDRM TWO BTH SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$200,000
Finished Square Footage:	1400	CAMA Permit#:	NA
Unfinished Square Footage:	674	Septic Permit#:	S22-9655
Stories:	1.0	Septic Permit Date:	3/21/2022
Building Height:	27'11"	Survey/Site Plan:	YES
Total Rooms:	4	Water Tap#:	49736
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	12	Base Flood Elevation:	8.0
Bedrooms:	2	Lot/Ground Elevation:	4
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. Existing Mobile Home shall be removed before issuance of CO. LOCAL ELEVATION STANDARD OF 8' APPLIES AREAS BELOW 8' REQUIRE FLOOD VENTS, UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, AS BUILT SURVEY AND FINISHED CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE CO	PERMIT FEE	\$1,320.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$1,430.00

Applicant Signature:  HATCHELL CONCRETE, INC

Inspector Signature: Ed Kindervater / AD  ALD



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9785

03/25/2022

Parcel Number: 025226015
 Location: 294 AIRPORT RD – MANTEO
 Subdivision: CAROLINA WOODS
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: STANFORD M WHITE
 Owner Mail Address: P O DRAWER 1447 NAGS HEAD, NC 27959
 Owner Phone and email: 252-207-3799 stan@outerbanksrentals.com

Contractor Name: STAN WHITE REALTY AND CONSTRUCTION INC
 Contractor Mail Address: PO BOX 1447, NAGS HEAD, NC 27959
 Contractor Phone: 252-441-1515 Contractor NC License#: 18946

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD ON PILINGS		
Proposed Construction Type:	SFD	Cost of Construction:	\$225,000
Finished Square Footage:	1164	CAMA Permit#:	NA
Unfinished Square Footage:	590	Septic Permit#:	S8-9623
Stories:	1.0	Septic Permit Date:	3/18/2022
Building Height:	20'00"	Survey/Site Plan:	YES
Total Rooms:	6	Water Tap#:	53418
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	12.9	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	8.7
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,109.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

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TOTAL FEES: \$1,219.00

Applicant Signature: STAN WHITE REALTY AND CONSTRUCTION INC

Inspector Signature: Ed Kindervater/AD ALD



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9789

03/25/2022

Parcel Number: 025212013
 Location: 124 SUNNYSIDE DR – MANTEO
 Subdivision: SUNNYSIDE
 Legal Description: LOT: 13 BLK: SEC:

Owner Name: CHRISTIAN TYLER BRANTLEY
 Owner Mail Address: P O BOX 1253 BUXTON, NC 27920
 Owner Phone and email:

Contractor Name: SIMPLESIDE CONSTRUCTION INC
 Contractor Mail Address: 308 W HELGA ST, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2525648307 Contractor NC License#: 78583

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD ON PILINGS		
Proposed Construction Type:	SFD	Cost of Construction:	\$415,000
Finished Square Footage:	2242	CAMA Permit#:	NA
Unfinished Square Footage:	1635	Septic Permit#:	S3-9138
Stories:	1.5	Septic Permit Date:	2/24/22
Building Height:	25'11"	Survey/Site Plan:	YES
Total Rooms:	8	Water Tap#:	PUBLIC
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	
Proposed Finished Floor Elevation:	14.5	Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	11.5
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. LOCAL ELEVATION STANDARD OF 8' APPLIES UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO.	PERMIT FEE	\$2,336.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$2,446.00

Applicant Signature: _____ SIMPLESIDE CONSTRUCTION INC

Inspector Signature: Ed bindenwater 3/25/2022 ALD
DocuSigned by: BFOA095E752B444...



County of Dare
 Planning Office
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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9841

03/28/2022

Parcel Number: 027480000
 Location: 196 JONES CIR – MANTEO
 Subdivision: JONES HEIGHTS
 Legal Description: LOT: 30 BLK: SEC:

Owner Name: FRANK MCNARY COLLINS
 Owner Mail Address: P O BOX 1231 MANTEO, NC 27954
 Owner Phone and email:


Contractor Name: GODFEYCONSTRUCTION
 Contractor Mail Address: P.O. BOX 694, KILL DEVIL HILLS, NC 27948
 Contractor Phone: Contractor NC License#: 6982


BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , CONSTRUCT NEW SFD ON PILINGS		
Proposed Construction Type:	SFD	Cost of Construction:	\$261,854
Finished Square Footage:	1416	CAMA Permit#:	NA
Unfinished Square Footage:	199	Septic Permit#:	S3-7332
Stories:	1.0	Septic Permit Date:	11/22/2021
Building Height:	18'00"	Survey/Site Plan:	YES
Total Rooms:	6	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	
Proposed Finished Floor Elevation:	10.2	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6.7
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,142.00
LOCAL ELEVATION STANDARD OF 8' APPLIES AREAS BELOW 8' REQUIRE FLOOD VENTS, UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$1,252.00

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Applicant Signature:  GODFEYCONSTRUCTION

Inspector Signature:  Ed Kindervater/AD ALD



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9849

03/29/2022

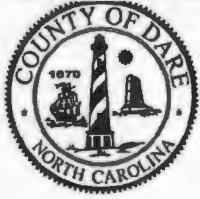
Parcel Number: 024230000
Location: 149 AIRPORT RD - MANTEO
Subdivision: EVANSVILLE SUBDIV
Legal Description: LOT: 72 BLK: SEC:

Owner Name: ZACHARY MCCOY TILLET
Owner Mail Address: 105 MIDDLE ST MANTEO, NC 27954
Owner Phone and email:

Contractor Name: COASTAL SEPTIC COMPANY
Contractor Mail Address: 2110 S LARK AVE, NAGS HEAD, NC 27959
Contractor Phone: 2524417441 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use: SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD ON PILINGS WITH GARAGE SLAB
Proposed Construction Type: SFD Cost of Construction: \$205,000
Finished Square Footage: 1185 CAMA Permit#: NA
Unfinished Square Footage: 436 Septic Permit#: S8-8659
Stories: 1.0 Septic Permit Date: 2/1/2022
Building Height: 21'00: Survey/Site Plan: YES
Total Rooms: 6 Water Tap#: 52071
Footing Type: COMBINATION Water Type: Central Water
Exterior Finish: LAP SIDING Flood Zone: X



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9219

03/01/2022

Parcel Number: 027242000
Location: 181 BAYVIEW DR – STUMPY POINT
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: NITA TOXEY DOUGHTIE
Owner Mail Address: 415 TAYLOR MILL RD EURE, NC 27935
Owner Phone and email:

Contractor Name: NORTHEASTERN MARINE INC
Contractor Mail Address: PO BOX 42, KITTY HAWK, NC 27949
Contractor Phone: 2522613682 Contractor NC License#: 30026

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
Description of Work CONSTRUCT 365' VINYL BULKHEAD. APPROX. 100' FOR NATURAL SHORELINE AND
BALANCE REPLACEMENT BULKHEAD

Cost of Construction: \$85,000
CAMA Permit#: 86220
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

DocuSigned by:
Julie Emory
Applicant Signature: _____ 3/1/2022 NORTHEASTERN MARINE INC

DocuSigned by:
Ed kindervater
Inspector Signature: _____ 3/1/2022 ALD



County of Dare
 Planning Office
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 Manteo NC 27954

Manteo: (252) 475-5870
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9299

03/04/2022

Parcel Number: 024104000
 Location: 292 BAYVIEW DR – STUMPY POINT
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: B MARK MATHIAS
 Owner Mail Address: 292 BAYVIEW DR STUMPY POINT, NC 27978
 Owner Phone and email:

Contractor Name: B MARK MATHIAS
 Contractor Mail Address: 292 BAYVIEW DR, STUMPY POINT, NC 27978
 Contractor Phone: 252-706-0613 Contractor NC License#: OWNER/BLDR

ACCESSORY INFORMATION


Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work BOAT LIFT ONLY

Cost of Construction: \$11,000
 CAMA Permit#: 00400
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  B MARK MATHIAS

Inspector Signature: Ed Kindervater / AD  ALD



County of Dare
 Planning Office
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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9437

03/10/2022

Parcel Number: 017460001
 Location: 5679 MASHOES RD – MASHOES
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: ROBERT C PEDERSEN
 Owner Mail Address: P O BOX 4 MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: ROBERT C PEDERSEN
 Contractor Mail Address: P O BOX 4, MANTEO, NC 27954
 Contractor Phone: 252-414-0930 Contractor NC License#: OWNER/BLDR

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work CONSTRUCT 56X6 PIER, 16X4 PLATFORM W/ 6X16 LWR LANDING, BOAT LIFT AND 24X14
 HIP ROOF

Cost of Construction: \$70,560
 CAMA Permit#: 86452
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  ROBERT C PEDERSEN

Inspector Signature: Ed Kindervater / AD  ALD



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9657

03/21/2022

Parcel Number: 025117000
 Location: 1205 N HWY 64/264 – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: PHILIP S JR RUCKLE
 Owner Mail Address: 1205 N HWY 64/264 MANTEO, NC 27954
 Owner Phone and email:


Contractor Name: PHILIP S JR RUCKLE
 Contractor Mail Address: 1205 N HWY 64/264, MANTEO, NC 27954
 Contractor Phone: 252-473-1301 Contractor NC License#: OWNER/BLDR

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work: ADD ONTO BACK OF EXISTING HOUSE 8'X30' DECK.
 Septic Permit Date: Cost of Construction: \$5,000
 Septic Permit #: CAMA Permit#: Flood Zone: Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: Replacement permit for expired PERMIT FEE \$150.00
 Permit # 6004197

TOTAL FEES: \$150.00

Applicant Signature:  PHILIP S JR RUCKLE

Inspector Signature: Ed Kindervater / AD  ALD



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9746

03/24/2022

Parcel Number: 030037000
 Location: 104 BRADFORD LN – MANTEO
 Subdivision: BRAKEWOOD SEC. 3
 Legal Description: LOT: 38 BLK: SEC: 3

Owner Name: TERRANCE DOUGLAS JONES
 Owner Mail Address: 104 BRADFORD LN MANTEO, NC 27954
 Owner Phone and email:

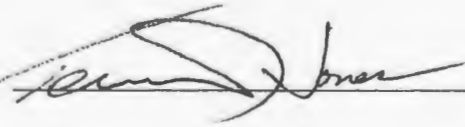
Contractor Name: TERRANCE DOUGLAS JONES
 Contractor Mail Address: 104 BRADFORD LN, MANTEO, NC 27954
 Contractor Phone: 2524733665 Contractor NC License#: OWNER/BLDR

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - SWIMMING POOLS;HOT TUBS, POOL
 Description of Work: CONSTRUCT INGROUND 16'X32' POOL
 Septic Permit Date: 08/18/2021 Cost of Construction: \$50,000
 Septic Permit #: S22-5536 CAMA Permit#: NA
 Flood Zone: X
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: Lot Coverage not to Exceed 30%. AS PERMIT FEE \$300.00
 BUILT SURVEY REQUIRED BEFORE CO

TOTAL FEES: \$300.00

Applicant Signature:  TERRANCE DOUGLAS JONES

Inspector Signature: Ed Kindervater / AD  ALD



County of Dare
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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9766

03/25/2022

Parcel Number: 026075000
 Location: 8 COOPER LN – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: WILLIAM A HOLTON
 Owner Mail Address: 12015 CUTBANK CHURCH RD MC KENNEY, VA 23872
 Owner Phone and email:

Contractor Name: WILLIAM A HOLTON
 Contractor Mail Address: 12015 CUTBANK CHURCH RD, MC KENNEY, VA 23872
 Contractor Phone: 2526192810 Contractor NC License#: OWNER/BLDR

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC
 Description of Work: REMOVE FRONT TRAILER AND ADD 12 X 24 SHED
 Septic Permit Date: Cost of Construction: \$8,000
 Septic Permit #: CAMA Permit#:
 Footing Type: Flood Zone:
 Finished Square Footage: 0 Base Flood Elevation: 0.0
 Unfinished Square Footage: 288 Lot/Ground Elevation:

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: William A Holton WILLIAM A HOLTON

Inspector Signature: Ed Smith ALD



County of Dare
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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9786

03/25/2022

Parcel Number: 024383000
Location: 277 MOTHER VINEYARD RD – MANTEO
Subdivision: MOTHER VINEYARD SECTION 1
Legal Description: LOT: 10 BLK: SEC: 1

Owner Name: ROLAND DOCK III SAWYER
Owner Mail Address: P O BOX 1292 MANTEO, NC 27954
Owner Phone and email:

Contractor Name: ADP SWIMMING POOLS & CONSTRUCTION LLC
Contractor Mail Address: 801 INDIAN DR, KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-305-8088 Contractor NC License#: 53785

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
Description of Work CONSTRUCT NEW BULKHEAD

Cost of Construction: \$36,800
CAMA Permit#: 86268
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

DocuSigned by:
Applicant Signature: Adrian Pitts ADP SWIMMING POOLS & CONSTRUCTION LLC
C135823DF4844F3... 3/25/2022
C135823DF4844F3... 3/25/2022
DocuSigned by:
Inspector Signature: Ed Kunderwater ALD
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8F0A895E752B444... 3/25/2022



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-9788

03/25/2022

Parcel Number: 024384000
Location: 283 MOTHER VINEYARD RD – MANTEO
Subdivision: MOTHER VINEYARD SECTION 1
Legal Description: LOT: 11A BLK: SEC: 1

Owner Name: ROC P M SANSOTTA
Owner Mail Address: 283 MOTHER VINEYARD RD MANTEO, NC 27954
Owner Phone and email:

Contractor Name: ADP SWIMMING POOLS & CONSTRUCTION LLC
Contractor Mail Address: 801 INDIAN DR, KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-305-8088 Contractor NC License#: 53785

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
Description of Work CONSTRUCT NEW BULKHEAD

Cost of Construction: \$31,000
CAMA Permit#: 86269
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation: ?

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: Adrian Pitts ADP SWIMMING POOLS & CONSTRUCTION LLC
3/25/2022

Inspector Signature: Ed Kindervater ALD
3/25/2022



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9270

03/03/2022

Parcel Number: 024410031
Location: 129 WEIR POINT DR – MANTEO
Subdivision: HERITAGE POINT PHASE 2
Legal Description: LOT: 73 BLK: SEC:

Owner Name: DAVID E WEIMER
Owner Mail Address: 129 WEIR POINT DR - MANTEO, NC 27954
Owner Contact Information: 757-553-8791 weimer05@verizon.net

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,969
Electrical Contractor ID: 22222-L
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: C/O 16 SEER 2-TON H/P SYSTEM WITH REMI HALO THAT SERVICES T HE UPSTAIRS. INSTALL REMI HALO IN THE DOWN SYSTEM. DUCT MODS

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature *Paxton Ahj* 3/7/2022 R A HOY HEATING AND AIR CONDITIONING INC
paxtonn@rahoy.com

Inspector Signature *Ed bindenwater* 3/7/2022 ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9267

03/03/2022

Parcel Number: 024658005
Location: 124 CAROLINA COURT WEST – MANTEO
Subdivision: CAROLINA PINES WEST
Legal Description: LOT: 5 BLK: SEC:

Owner Name: ALFREDO R LANDAZURI
Owner Mail Address: 124 W CAROLINA CT - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: ANDERSON HEATING & COOLING LLC
Contractor Mail Address: PO BOX 396 - KITTY HAWK, NC 27949
Contractor Phone: 252-619-3105
Contractor NC License#: 314838

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,898
Electrical Contractor ID: 3
Units 0 MECHANICAL PROJECT FEE: \$150.00

Comments: Replace existing HVAC system with a new Carrier 14SEER 2 Ton Heat Pump and matching Air Handler

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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DocuSigned by:
Applicant Signature Anderson Heating and Cooling 3/3/2022 ANDERSON HEATING & COOLING LLC
AD7B9D064CFF428... contact@andersonheatingandcooling.com

DocuSigned by:
Inspector Signature Ed Kindemater 3/3/2022 ALD
0F0A98E7828444...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9534

03/15/2022

Parcel Number: 023265000
Location: 139 CREEKVIEW LN – MANTEO
Subdivision: WESCOTT ESTATES
Legal Description: LOT: 9 BLK: SEC:

Owner Name: LILIAS J. MORRISON
Owner Mail Address: PO BOX 146 - HARBINGER, NC 27941
Owner Contact Information: 252-491-8622

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 4.00 Cost of Job: \$93,163
Electrical Contractor ID: 22222-L
Units 4 **MECHANICAL PROJECT FEE: \$200.00**

Comments: C/O 4 SYSTEMS. 18 SEER 4 TON, 18 SEER 4 TON, 18 SEER 2.5 TON , 18 SEER 2 TON. NEW STANDS SAME LOCATIONS NEW DUCT WORK SYST

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature *Paxton Ahj* 3/15/2022 R A HOY HEATING AND AIR CONDITIONING INC
paxtonn@rahoy.com

Inspector Signature *Ed kindenator* 3/15/2022 ALD



County of Dare
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Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9661

03/21/2022

Parcel Number: 023271028
Location: 135 CREEKVIEW LN – MANTEO
Subdivision: WESCOTT ESTATES
Legal Description: LOT: 28 BLK: SEC:

Owner Name: LILIAS J. MORRISON
Owner Mail Address: PO BOX 146 - HARBINGER, NC 27941
Owner Contact Information: 252-491-8622

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$18,243
Electrical Contractor ID: 22222-L
Units 2 **MECHANICAL PROJECT FEE: \$150.00**

Comments: 16 SEER 2-TON AND 3-TON DOUBLE C/O. NEW STAND SAME LOCATION. REUSE EXISTING LINE SETS AND DUCT WORK.

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DocuSigned by:
Applicant Signature Paxton Ahoy 3/21/2022 R A HOY HEATING AND AIR CONDITIONING INC
03980284080e4a6... paxtonn@rahoy.com

DocuSigned by:
Inspector Signature Ed Kindemater 3/21/2022 ALD
8f0a988e7528444...



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PO Box Drawer 1000
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Manteo: (252) 475-5870
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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9865

03/29/2022

Parcel Number: 024410005
Location: 131 FORT HUGAR WAY – MANTEO
Subdivision: HERITAGE POINT PHASE 2
Legal Description: LOT: 47 BLK: SEC:

Owner Name: ROBERT C TTEE WEBSTER
Owner Mail Address: 131 FORT HUGAR WAY - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: ANDERSON HEATING & COOLING LLC
Contractor Mail Address: PO BOX 396 - KITTY HAWK, NC 27949
Contractor Phone: 252-619-3105
Contractor NC License#: 314838

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,898
Electrical Contractor ID: 30003
Units 1 MECHANICAL PROJECT FEE: \$150.00

Comments: Replace existing Top Floor HVAC system with a new 2 Ton Carrier 14SEER Heat Pump and matching Air Handler

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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DocuSigned by:
Applicant Signature Anderson Heating and Cooling 3/29/2022 ANDERSON HEATING & COOLING LLC
AD789D0094CPF438... contact@andersonheatingandcooling.com

DocuSigned by:
Inspector Signature Ed Binder 3/29/2022 ALD
8F0A88E752D444...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-9839

03/28/2022

Parcel Number: 024410055
Location: 154 BATTLEFIELD CT – MANTEO
Subdivision: HERITAGE POINT PHASE 3
Legal Description: LOT: 97 BLK: SEC:

Owner Name: SUSAN E LINNEY
Owner Mail Address: 2236 HARTFORDS BLUFF CIR - MOUNT PLEASANT, SC 29466
Owner Contact Information:

Contractor Name: SOUNDSIDE HEATING AND AIR CONDITIONING,
Contractor Mail Address: 106 ROBERT BRUCE DR - MANTEO, NC 27954
Contractor Phone: 2524737769
Contractor NC License#: L34278

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$27,000
Electrical Contractor ID: 34997
Units 2 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install 3.5 ton and 3 ton 14 SEER Goodman heat pump split sy stems with duct work.

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DocuSigned by:
Applicant Signature Joseph Mabry 3/28/2022 SOUNDSIDE HEATING AND AIR CONDITIONING,
soundsidehvac@gmail.com

DocuSigned by:
Inspector Signature Ed Kindemater 3/28/2022 ALD



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REPAIR

REPAIR#: REPAIR-9314

03/04/2022

Parcel Number: 025779000
Location: 601 VISTA LAKE DR – MANTEO
Subdivision: VISTA LAKE SEC 2
Legal Description: LOT: 49 BLK: SEC:

Owner Name: LESTER TALLY PAGE
Owner Mail Address: 601 VISTA LAKE DR - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: JES CONSTRUCTION LLC
Contractor Mail Address: 1741 CORPORATE LANDING PKWY STE 101 - VIRGINIA BEACH, VA 23454
Contractor Phone: 757-558-9909
Contractor NC License#: 69678

DETAILS RESIDENTIAL

Cost of Job: \$5,500

REPAIR FEE: \$150.00

Comments: Stabilize existing foundation using Intellijacks

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature *JES Construction LLC* 3/7/2022 JES CONSTRUCTION LLC
jesvbpermitting@jeswork.com

Inspector Signature *Ed Binder* 3/4/2022 ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
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Frisco: (252) 475-5878

REPAIR

REPAIR#: REPAIR-9879

03/30/2022

Parcel Number: 028529000
Location: 121 THE OAKS – MANTEO
Subdivision: WILDWOODS
Legal Description: LOT: 6 BLK: SEC: 1

Owner Name: BROOKE MICHEL ELLIOTT
Owner Mail Address: PO BOX 718 - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: JES CONSTRUCTION LLC
Contractor Mail Address: 1741 CORPORATE LANDING PKWY STE 101 - VIRGINIA BEACH, VA 23454
Contractor Phone: 757-558-9909
Contractor NC License#: 69678

DETAILS RESIDENTIAL

Cost of Job: \$24,000

REPAIR FEE: \$150.00

Comments: Crawlspace carpentry, encapsulation and drainage

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Applicant Signature *JES Construction LLC* 3/30/2022 JES CONSTRUCTION LLC
jesvbpermitting@jeswork.com

Inspector Signature *Ed Binder* 3/30/2022 ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
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Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-9685

03/22/2022

Parcel Number: 016602000
 Location: 514 E R DANIELS RD – WANCHESE
 Subdivision: J T DANIELS
 Legal Description: LOT: 5 BLK: SEC:

Owner Name: RHEA ANNE BYRD
 Owner Mail Address: 514 ER DANIELS RD WANCHESE, NC 27981
 Owner Phone and email: 252-216-5725 girltrouble_4@hotmail.com

Contractor Name: BILL FROELICH
 Contractor Mail Address: PO BOX 3337, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-480-2124 Contractor NC License#: 62232

BUILDING INFORMATION

Proposed Construction Use: RESIDENTIAL ENCLOSURE , ENCLOSING CARPORT TO CONVERT TO GARAGE FOR STORAGE PURPOSES ONLY.

Proposed Construction Type:	Cost of Construction:	\$5,000
Finished Square Footage:	CAMA Permit#:	NA
Unfinished Square Footage:	Septic Permit#:	S22-9578
Stories:	Septic Permit Date:	3/17/2022
Building Height:	Survey/Site Plan:	NA
Total Rooms:	Water Tap#:	NA
Footing Type:	Water Type:	NA
Exterior Finish:	Flood Zone:	
Proposed Finished Floor Elevation:	Base Flood Elevation:	0.0
7.7	Lot/Ground Elevation:	7.2
Bedrooms:	Baths/half baths:	0/0
0		

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
 HOME OWNERS RECOVERY FEE 10.00

ENCLOSURE BELOW 8ft. MUST HAVE FLOOD VENTS ON TWO WALLS. NOT TO BE USED AS LIVING OR CONDITIONED SPACE. FINAL CONSTRUCTION EC REQUIRED BEFORE CO

TOTAL FEES: \$160.00

Applicant Signature: [Signature] BILL FROELICH

Inspector Signature: Ed Kindervater / AD ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
KDH: (252) 475-5871
Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: **GENR-9564**

03/16/2022

Parcel Number: 030900000
Location: 106 FORT HUGAR WAY – MANTEO
Subdivision: HERITAGE POINT PHASE 1
Legal Description: LOT: 8 BLK: SEC:

Owner Name: WILLIAM R III BONNER
Owner Mail Address: 106 FORT HUGAR WAY MANTEO, NC 27954
Owner Phone and email:

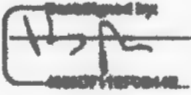
Contractor Name: ELECTRICAL AND LIGHTING SOLUTIONS, INC
Contractor Mail Address: 2556 GAYTON CENTRE DRIVE, HENRICO, VA 23238
Contractor Phone: 8046416339 Contractor NC License#: L.32035


ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - GENERATOR INSTALL,
Description of Work: INSTALL 20KW GENERATOR WITH TWO AUTOMATIC TRANSFER SWITCHES
:
:
Cost of Construction: \$14,200
CAMA Permit#:
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  _____ ELECTRICAL AND LIGHTING SOLUTIONS, INC
3/16/2022

Inspector Signature:  _____ ALD
3/16/2022



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
KDH: (252) 475-5871
Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: **GENR-9565**

03/16/2022

Parcel Number: 030929000
Location: 111 FORT HUGAR WAY – MANTEO
Subdivision: HERITAGE POINT PHASE 1
Legal Description: LOT: 37 BLK: SEC:

Owner Name: PARRAN R WILKINSON
Owner Mail Address: 44791 SMITHS NURSERY RD HOLLYWOOD, MD 20636
Owner Phone and email:

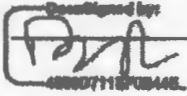
Contractor Name: ELECTRICAL AND LIGHTING SOLUTIONS, INC
Contractor Mail Address: 2556 GAYTON CENTRE DRIVE, HENRICO, VA 23238
Contractor Phone: 8046416339 Contractor NC License#: L.32035

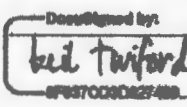
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - GENERATOR INSTALL,
Description of Work: INSTALL 20 KW GENERATOR WITH ONE AUTOMATIC TRANSFER SWITCH
:
:
Cost of Construction: \$12,000
CAMA Permit#:
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  _____ ELECTRICAL AND LIGHTING SOLUTIONS, INC
3/21/2022

Inspector Signature:  _____ ALD
3/17/2022



County of Dare
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Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-9535

03/15/2022

Parcel Number: 025923000
Location: 612 OLD WHARF RD – WANCHESE
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: VICTOR LYNN III DAVIS
Owner Mail Address: 612 OLD WHARF RD - WANCHESE, NC 27981
Owner Contact Information:

Contractor Name: COTTAGE ELECTRIC
Contractor Mail Address: PO BOX 2192 - MANTEO, NC 27954
Contractor Phone: 2522165796
Contractor NC License#: L.27745

DETAILS RESIDENTIAL

Cost of Job: \$8,000

Amp Increase: 0
Service Amps: 200
ELECTRICAL PERMIT FEE: \$150.00

Comments: Installed generator and transfer switch

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Applicant Signature *Jonathan Calson* 3/15/2022 COTTAGE ELECTRIC
cottageelectric@yahoo.com

Inspector Signature *Ed binder* 3/15/2022 ALD



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 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

MOBILE HOME PERMIT

PERMIT#: R-9730

03/22/2022

Parcel Number: 028175000
 Location: 19532 SOUTH LAKE DR – EAST LAKE
 Subdivision: SOUTH LAKE SUB LOT: 29 BLK: SEC:
 Mobile Home Park: ---
OWNER INFORMATION BASNIGHT ENTERPRISES LLC
 1560 NORTH ROAD ST MANTEO, NC 27954

CONTRACTOR CLAYTON HOMES INC
 1560 NORTH ROAD ST ELIZABETH CITY, NC 27909
 252-335-1070 NC License#: 59143

MOBILE HOME MOVER D AND D MOBILE HOME MOVERS
 7838 HWY 17 N WASHINGTON, NC 27889
 252-944-6422

MOBILE HOME INSTALLER CLAYTON HOMES INC
 1560 NORTH ROAD ST ELIZABETH CITY, NC 27909
 252-335-1070 NC License#: 59143

DETAILS INSTALL 2021 16X76 CLAYTON ANNIVERSARY MOBILE HOME

Living Space	1216	Estimated Cost:	\$105,000
Non-living Space	0	CAMA Permit#:	
Make:	Clayton	Septic Permit#:	S22-9469
Model:	Anniversary	Septic Permit Date:	03/11/2022
Year:	2021	Survey/Site Plan:	
Serial #:	OHC031221NC	Water Tap#:	
HUD #:	NTA2008893	Water Type:	
Width in feet:	16	Flood Zone:	
Length in feet:	76	Base Flood Elevation:	0.0
Hurricane Built:	3	Lot/Ground Elevation:	2.0
Footing/foundation Type:	COMBINATION	Application Number:	6681

Comments: Any deviation from the building plan or site plan requires prior approval. AE4 FLOOD ZONE REQUIRES 8' ELEVATION TO THE BOTTOM OF THE LOWEST STRUCTURAL MEMBER OF THE FRAME, FINISHED CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE CO

PERMIT FEE	\$608.00
FLOOD DEVELOPMENT BLDG PERMIT	75.00

B6

TOTAL FEES: \$683.00

Applicant Signature: Chris Metzger CLAYTON HOMES INC

Inspector Signature: Edwards ALD



County of Dare
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 Manteo NC 27954

Manteo: (252) 475-5870
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ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-9692

03/22/2022

Parcel Number: 024876000
 Location: 4751 MILL LANDING RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: WANCHESE OPERATIONS INC
 Owner Mail Address: 2000 NORTHGATE COMMERCE PKWY - SUFFOLK, VA 23435
 Owner Contact Information:

Contractor Name: M O S ELECTRIC
 Contractor Mail Address: PO BOX 2699 - KITTY HAWK, NC 27949
 Contractor Phone: 252-207-8678
 Contractor NC License#: 5938 UL

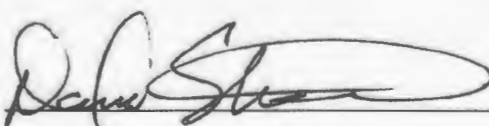
DETAILS COMMERCIAL


Amp Increase:	0	Cost of Job:	\$300
Service Amps:	100	ELECTRICAL PERMIT FEE:	\$150.00

Comments: TEMP POWER POLE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  M O S ELECTRIC
 mosdms@earthlink.net

Inspector Signature: Ed Kindervater / AD  ALD



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PO Box Drawer 1000
Manteo NC 27954

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X

GENERATOR INSTALL

GENERATOR INSTALL#: GENR-9377

03/08/2022

Parcel Number: 024461000
Location: 104 CANNON TRL – MANTEO
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: CHRISTOPHER L SEAWELL
Owner Mail Address: PO BOX 339 - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: BEAR ROCK ELECTRIC INC
Contractor Mail Address: PO BOX 1604 - KITTY HAWK, NC 27949
Contractor Phone: 8886889927
Contractor NC License#: U-30667

DETAILS RESIDENTIAL

Cost of Job: \$10,500

GENERATOR INSTALL FEE: \$150.00

Comments: INSTALLATION OF GENERAC 24KW CENERATOR AND 200 AMP TRANSFER SWITCH ON ELEVATED WOODEN PLATFORM

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Applicant Signature:
70157EB179BC4D1... 3/8/2022 BEAR ROCK ELECTRIC INC
nclose@bearrockelectric.com

Inspector Signature:
8F0A695E752B444... 3/8/2022 AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

L

ELECTRICAL PERMIT#: ELEC-9659

03/21/2022

Parcel Number: 013331001
 Location: 370 HARBOR RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: SONNY'S HARBOR LLC
 Owner Mail Address: PO BOX 305 - WANCHESE, NC 27981
 Owner Contact Information:

Contractor Name: LOWIRE LLC
 Contractor Mail Address: PO BOX 2751 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2524494690
 Contractor NC License#: U-19403

DETAILS COMMERCIAL

Amp Increase:	200	Cost of Job:	\$20,000
Service Amps:	600	ELECTRICAL PERMIT FEE:	\$150.00

Comments: SERVICE UPGRADE FROM 400 TO 600 - ADDITION OF ELECTRICAL OUTLETS

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Daniel Parsons*
DocuSigned by: 5F87FCF2C876416... 3/25/2022 LOWIRE LLC
 daniel@lowire.com

Inspector Signature: *Ed Kindemater*
DocuSigned by: 8F0A695E752B444... 3/21/2022 AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-9344

03/07/2022

Parcel Number: 023957001
 Location: 8353 SHIPYARD RD – MANNS HARBOR
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: SHERRY TWIDDY FOREMAN
 Owner Mail Address: PO BOX 77 - MANNS HARBOR, NC 27953
 Owner Contact Information: 252-256-4488 naturesharmony11@gmail.com

Contractor Name: LOWIRE LLC
 Contractor Mail Address: PO BOX 2751 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2524494690
 Contractor NC License#: U-19403

DETAILS COMMERCIAL

Amp Increase:	0	Cost of Job:	\$2,500
Service Amps:	100	ELECTRICAL PERMIT FEE:	\$150.00

Comments: REPLACE MAIN ELEC SERVICE INCL UTILITY METER BASE, MAIN PANEL/BREAKERS BLDG 1. SUBPANEL/BREAKERS BLDG 3. GRNHSE 1&3

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Eddie Spawors LOWIRE LLC
 daniel@lowire.com

Inspector Signature: KEIL TWIFORD AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

COMMERCIAL BUILDING PERMIT

BUILDING PERMIT#: **GENR-9448**

03/11/2022

Parcel Number: 026087000
 Location: 332 POND RD – WANCHESE
 Subdivision: CROATAN INC
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: CROWN CASTLE SOUTH LLC
 Owner Mail Address: PMB 343 4017 WASHINGTON RD MCMURRAY, PA 15317
 Owner Phone and email:

Contractor Name: TL Worley Electrical Services
 Contractor Mail Address: 3863 Barber Mill Road, Clayton, NC 27520
 Contractor Phone: Contractor NC License#: U.10597

BUILDING INFORMATION

Proposed Construction Use: , INSTALL EMERGENCY BACK-UP GENERATOR FOR AT&T ANTENNA & EXPAND FENCING

Occupancy:

Proposed Construction Type:		Cost of Construction:	\$18,500
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Sprinkler System:		Base Flood Elevation:	0.0
Proposed Finished Floor Elev:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan PERMIT FEE \$150.00
 or site plan requires prior approval.

DocuSigned by:

Chasity Johnson, Project Coordinator, EIT

3E1DD8859AA448...

TOTAL FEES:

3/17/2022

\$150.00

Applicant Signature:

DocuSigned by:

Ed Kindemater

8F0A095E752B444...

Inspector Signature:

3/17/2022

ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-9343

L

03/07/2022

Parcel Number: 013331001
 Location: 370 HARBOR RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: SONNY'S HARBOR LLC
 Owner Mail Address: PO BOX 305 - WANCHESE, NC 27981
 Owner Contact Information:

Contractor Name: LOWIRE LLC
 Contractor Mail Address: PO BOX 2751 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2524494690
 Contractor NC License#: U-19403

DETAILS COMMERCIAL

Cost of Job: \$2,000

Amp Increase: 0
 Service Amps: 200

ELECTRICAL PERMIT FEE: \$150.00

Comments: REPAIR / REPLACE 200A MAIN ELECTRICAL PANEL. DAMAGED.

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Ed Daniel LOWIRE LLC
 daniel@lowire.com

Inspector Signature: KEIL TWIFORD AYT



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**

5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000035

Parcel: 022352027
PIN: 986715534837
Location: 79 DUCK WOODS DR
District: RS1 - Single Family Residential District
Subdiv: SO/SH BLK 227
Lot-Block-Sect: LOT: 27 BLK: 227 SEC:

Owner: LOVELL, SAMUEL
Address: 990 HIGHLAND LAKE RD
KITTY HAWK, NC 27949
Phone #: 252-722-6474

BUSINESS NAME:
CONTRACTOR'S NAME: LOVELL, SAMUEL
ADDRESS: 990 HIGHLAND LAKE RD
CITY, STATE, ZIP: UNION HALL, VA 24176
OFFICE#: 252-732-6474
CELL#: 252-732-6474
FAX#:
EMAIL:

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - INSTALL FRONT STEPS, REMOVING HANDICAP RAMP- INSTTALL PEX 1" WATER LINE
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$8,000.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	80.00
Minimum Permit Fee	20.00
	TOTAL FEE: 100.00

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Samuel W Lovell SAMUEL W LOVELL
Applicant - Owner/Contractor (Please print and sign name)

03/01/2022

Date Approved

Kerrin Clark
Building/Code/Zoning Official By MB

3-1-2022
Date Issued

**TOWN OF SOUTHERN SHORES
 PLANNING AND CODE ENFORCEMENT**
 5375 N Virginia Dare Trail, Southern Shores, NC 27949
 (252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date January 28, 2022

**TP22-000012
 Mechanical Trade Permit**

Project Address: 33 E DOGWOOD TRL
Property Owner: SITTERSON, WILLIAM R

PIN #: 022120000
Mailing Address: 921 MORATTICO CIR
 GLEN ALLEN, VA 23060

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling
Phone: (252) 491-2878
N. C. License Number: 22053

Qualifier: Jimmy Weaver
Address: PO Box 181
 Kitty Hawk , NC 27949

Description of Work: Replace HVAC system with Trane 14 Seer 1.5 ton h/p and matching a/h

Project Cost Estimate: \$7,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Maddy Willis 2/25/22
 Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-2-22
 Signature of Permit Official Date
 By MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 02, 2022

**TP22-000031
Mechanical Trade Permit**

Project Address: 5 SANDFIDDLER CT
Property Owner: WILLEMS, JAY MARTIN

PIN #: 022524005
Mailing Address: 412 BEACH DR
ANNAPOLIS, MD 21403

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Anderson Heating & Cooling
Phone: (252) 619-3105
N. C. License Number: 31438

Qualifier: Gil Anderson
Address: PO Box 396
Kitty Hawk, NC 27949

Description of Work: Replace existing HVAC system with a new Carrier 2 Ton 14SEER Heat Pump and matching Air Handler

Project Cost Estimate: \$7,846.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.


Signature of Licensee or Duly Authorized Representative

3/2/22
Date

 3-2-22
Signature of Permit Official Date

By MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 02, 2022

**TP22-000032
Mechanical Trade Permit**

Project Address: 43 ELEVENTH AVE

PIN #: 021000000

Property Owner: MCGRAW, RYAN P

Mailing Address: 7702 FULMAR DR
DUBLIN, OH 43017

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: OBHC, Inc. dba One Hour Heating & Air Conditioning

Qualifier: Brian McDonald

Phone: (252) 441-1740

Address: PO Box 2600

N. C. License Number: 12643

Kill Devil Hills, NC 27948

Description of Work: REPLACE HVAC WITH 14 SEER 3 TON DAIKIN AIR HANDLER & HEAT PUMP

Project Cost Estimate: \$7,369.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

3-2-22

Signature of Licensee or Duly Authorized Representative Date

3-2-22

Signature of Permit Official Date

By MB



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**

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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000034

Parcel: 021791000
PIN: 986818416306
Location: 213 SEA OATS TRL
District: RS1 - Single Family Residential District
Subdiv: SO/SH BEACH BLK 84
Lot-Block-Sect: LOT: 20 BLK: 84 SEC:

Owner: KEATING, THOMAS L
Address: 213 SEA OATS TRL
SOUTHERN SHORES, NC 27949
Phone #: --

BUSINESS NAME: Albanese Construction Company
CONTRACTOR'S NAME: Joe Albanese
ADDRESS: 1811 Sea Swept Road
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 441-3856
CELL#:
FAX#:
EMAIL: jjalbanese@msn.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - REPLACE 32' OF ROTTED DOUBLE 2 X 12 GIRDER ON WEST SIDE OF DECK
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$2,150.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	22.00
Homeowners Recovery Fund	10.00
Minimum Permit Fee	78.00
	TOTAL FEE: 110.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

[Signature] _____ *[Signature]* Jennifer Albanese
Applicant - Owner/Contractor (Please print and sign name)

Date Approved

[Signature] Kevin Clark _____
Building/Code/Zoning Official By *[Signature]* mrs

3-2-2022
Date Issued

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 281-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date February 22, 2022

**TP22-000027
Mechanical Trade Permit**

Project Address: 15 THIRTEENTH AVE
Property Owner: MANN, STEPHEN

PIN #: 021299000
Mailing Address: 150 SAN CARLOS AVE
EL CERRITO, CA 94530

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Air-O-Smith
Phone: (252) 261-5238
N. C. License Number: 30070

Qualifier: Steven Smith
Address: 330 N. Dogwood Trail
Southern Shores, NC 27949

Description of Work: REPLACE MID LOWER LEVEL TERANE 14 SEER 2 TON 410A HEAT PUMP & AIR HANDLER LINE & LOW VOLTAGE WIRING

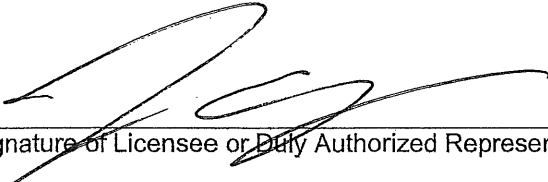
Project Cost Estimate: \$7,800.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.


Signature of Licensee or Duty Authorized Representative

2/23/2022
Date


Signature of Permit Official
By 

3-4-22
Date



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000036

Parcel: 022203000
PIN: 986818319120
Location: 213 S WOODLAND DR
District: RS1 - Single Family Residential District
Subdiv: SO/SH SOUNDSSIDE BLK 95
Lot-Block-Sect: LOT: 45 BLK: 95 SEC:

Owner: GOULD, JAMES H
Address: 213 S WOODLAND DR
SOUTHERN SHORES, NC 27949
Phone #: 804-731-1353

BUSINESS NAME:
CONTRACTOR'S NAME: James Gould
ADDRESS: 213 Woodland Drive
CITY, STATE, ZIP: Southern Shores, NC 27949
OFFICE#: 804-731-1353
CELL#: 804-731-1353
FAX#:
EMAIL: jpgouldoz@gmail.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Homeowner will be completing this project.

Remove existing railing on N and E side of deck and replace with treated lumber benches with 36 " backs that serve as railings too. Approximately 17 linear feet of railing being removed and replaced. No deck boards being changed at this time.
SPECIAL CONDITIONS - ALL WOOD BELOW RFP (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$500.00
Description		Total Cost
Remodel / Renovation / Repair Fee		5.00
Minimum Permit Fee		95.00
		TOTAL FEE: 100.00

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James Gould 3/4/22
Applicant - Owner/Contractor (Please print and sign name)

03/04/2022

Date Approved

Kevin Clark
Building/Code/Zoning Official *By MB*

3-4-2022
Date Issued

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 07, 2022

**TP22-000033
Electrical Trade Permit**

Project Address: 141 W HOLLY TRL
Property Owner: BERNTSEN, KEITH CRISTIAN

PIN #: 022266000
Mailing Address: 141 W HOLLY TRL
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: HW Olds Framing & Mechanical
Phone: (252) 489-8169
N. C. License Number: 6341-L

Qualifier: Howard W. Olds
Address: 3617 Windgrass Circle
Kitty Hawk, NC 27949

Description of Work: SERVICE CHANGE OUT 200 AMP TO 400 AMP

Project Cost Estimate: \$3,500.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

March 8, 2022

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

Date

By MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 02, 2022

**TP22-000030
Plumbing Trade Permit**

Project Address: 318 WAX MYRTLE TRL
Property Owner: HALEY, RICHARD SCOTT

PIN #: 020977000
Mailing Address: 318 WAX MYRTLE TRL
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Mr. Groovy's Plumbing Llc
Phone:
N. C. License Number: 35063

Qualifier: Joseph Holton
Address: P.O. Box 91
Point Harbor, NC 27964

Description of Work: Installation of a new tankless water heater

Project Cost Estimate: \$3,500.00

Permit Amount: 100.00

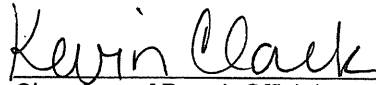
Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.



Signature of Licensee or duly Authorized Representative 3-4-2022 Date



Signature of Permit Official 3-9-2022 Date
By RUB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
 5375 N Virginia Dare Trail, Southern Shores, NC 27949
 (252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 09, 2022

**TP22-000036
Gas Trade Permit**

Project Address: 104 S DOGWOOD TRL

PIN #: 022318000

Property Owner: HOWDERSHELL, MATTHEW

Mailing Address: 104 S DOGWOOD TRL
SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Tarhell Fireplace and Grill Shop

Qualifier: Roy Murray

Phone: (252) 426-1426

Address: 657 OCEAN HWY S

N. C. License Number: 21798

Hertford, NC 27944

Description of Work: Gas line and Fireplace install

Project Cost Estimate: \$15,300.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Roy Murray

3/9/2022

Signature of Licensee or Duly Authorized Representative

Date

Kevin Clark

3-9-2022

Signature of Permit Official

Date

By MB



**TOWN OF SOUTHERN SHORES
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**COMMERCIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000040

Parcel: 022819005 Owner: SOUTHERN SHORES CROSSING LLC -
PIN: 987717024126 Address: SOUTHERN SHORES PIZZA UNIT 105 & 106
Location: 1 OCEAN BLVD P.O. BOX 150
District: C - General Commercial District KITTY HAWK, NC 27949
Subdiv: SUBDIVISION - NONE Phone #: 804-420-6878
Lot-Block-Sect: LOT: 3&4 AND PARCEL B BLK: SEC:


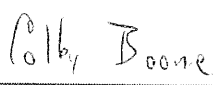
BUSINESS NAME: SOUTHERN SHORES PIZZA **NC G.C. LICENSED CONTRACTOR:**
CONTRACTOR'S NAME: **NC G.C. LICENSE NUMBER:**
ADDRESS: 1 OCEAN BLVD UNIT 106 **LIMITATION:**
CITY, STATE, ZIP: SOUTHERN SHORES, NC 27949 **CLASSIFICATION:**
OFFICE#: 804-420-6878 **QUALIFIER:**
CELL#: **LIEN AGENT NAME:**
FAX#: **ENTRY#:**
EMAIL: **LIEN AGENT ADDRESS:**

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - COMBINE UNIT 105 & 106 VIA INSTALLING DOOR IN FIRE PARTITION, EXTEND CIRCUIT FOR STAND UP FREEZERS
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMITTED/CONDITIONAL USE: Per ZA
HEATED/LIVING AREAS (SqFt):	HEAT:	COMMERCIAL USE: Per ZA
NON-HEATED AREAS (SqFt):	A/C:	PROPERTY USE: Commercial
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	BUILDING USE: Per BL
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$3,000.00
Description		Total Cost
Remodel / Renovation / Repair Fee		30.00
Minimum Permit Fee		70.00
		TOTAL FEE: 100.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

03/08/2022

Date Approved

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 09, 2022

**TP22-000035
Mechanical Trade Permit**

Project Address: 249 DUCK RD
Property Owner: ALDERMAN, PATRICIA L

PIN #: 021615000
Mailing Address: 900 WORMLEY CREEK DR
YORKTOWN, VA 23692

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Norris Mechanical, LLC
Phone: (252) 491-2673
N. C. License Number: 11100

Qualifier: HERSEY B NORRIS
Address: 100 Freedom Avenue
Powells Point, NC 27966

Description of Work: Replace existing heat pump split system with new 3-Ton 4 head mini split system.

Project Cost Estimate: \$11,150.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Stephanie Lebrun 03/09/2022
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-10-2022
Signature of Permit Official Date
By *YMB*

**TOWN OF SOUTHERN SHORES
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Residential Trade Contractor Permit

Date March 08, 2022

TP22-000034
Mechanical Trade Permit

Project Address: 192 BRIGHT LANTERN LN
Property Owner: DRAPER, FRANK DALE

PIN #: 022383019
Mailing Address: P. O. BOX 574
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling
Phone: (252) 491-2878
N. C. License Number: 22053

Qualifier: Jimmy Weaver
Address: PO Box 181
Kitty Hawk , NC 27949

Description of Work: Replace top level system with Trane 14 Seer 3 ton h/p and matching a/h

Project Cost Estimate: \$7,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Sabby Willis
Signature of Licensee or Duly Authorized Representative

3/9/22
Date

Kevin Clark
Signature of Permit Official
3-14-22
Date
By mB



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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000044

Parcel:	022383549	Owner:	CHAPMAN, CHRISTINA L
PIN:	986711672113	Address:	177 CLAMSHELL TRL
Location:	177 CLAMSHELL TRL		SOUTHERN SHORES, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	301-219-1981
Subdiv	CHICAHIAUK		
Lot-Block-Sect:	LOT: 549 BLK: SEC:		

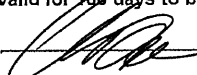
BUSINESS NAME:	Coastal Roofing and Siding, Inc.	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Bill Frasca	NC G.C. LICENSE NUMBER:	
ADDRESS:	2401 Colington Road	LIMITATION:	
CITY, STATE, ZIP:	Kill Devil Hills, NC 27948	CLASSIFICATION:	
OFFICE#:	(252) 256-1814	QUALIFIER:	
CELL#:		LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	coastalrands@hotmail.com	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - REPLACEMENT OF 8-10 SHEETS OF PLYWOOD - SISTER BOTH SIDES OF RAFTERS
SPECIAL CONDITIONS - ALL WOOD BELOW RPPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:


TOTAL CONSTRUCTION COST: \$1,200.00	
PERMIT FEES:	Total Cost
Description	
Remodel / Renovation / Repair Fee	12.00
Homeowners Recovery Fund	10.00
Minimum Permit Fee	88.00
	TOTAL FEE: 110.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.


Ariana Hughes (Office Manager)
Applicant - Owner/Contractor (Please print and sign name)

03/14/2022

Date Approved


Kevin Clark
Building/Code/Zoning Official By MB

3-14-2022

Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000041

Parcel: 022819111
PIN: 986716926780
Location: 32 OCEAN VIEW LOOP
District: RS1 - Single Family Residential District
Subdiv: OCEAN VIEW SUBDIVISION
Lot-Block-Sect: LOT: 11R BLK: SEC:

Owner: COBLE, JAMES ANTHONY
Address: 2317 W GREY GABLES DR
BURLINGTON, NC 27215
Phone #: 336-269-0177

BUSINESS NAME: Shoreline Electric of Kill Devil Hills Corp
CONTRACTOR'S NAME: Gary Justice
ADDRESS: 126 Waterview Drive
CITY, STATE, ZIP: Grandy, NC 27939
OFFICE#: (252) 599-1967
CELL#:
FAX#:
EMAIL: shorelineelectricdh@gmail.com

NC G.C. LICENSED CONTRACTOR: Electrical
NC G.C. LICENSE NUMBER: U.09716
LIMITATION: Unlimited
CLASSIFICATION: Unlimited
QUALIFIER: GARY DEAN JUSTICE
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL GAS GENERATOR WITH 36 X 60 SALT TREATED PLATFORM
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input checked="" type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input checked="" type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000020
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/10/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$8,000.00	
PERMIT FEES:	Total Cost
Description	100.00
Minimum Permit Fee	TOTAL FEE: 100.00

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[Signature]
Applicant - Owner/Contractor

Gary Justice
(Please print and sign name)

03/10/2022

Date Approved

Kerni Clark
Building/Code/Zoning Official *By MB*

3.14.2022
Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000037

Parcel:	022482000	Owner:	HOERNER, ELISABETH FORBES
PIN:	986715546693	Address:	75 POTESKEET TRL
Location:	75 POTESKEET TRL		KITTY HAWK, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	757-301-8789
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 398 BLK: SEC:		

BUSINESS NAME:	Virginia Foundation Solutions	NC G.C. LICENSED CONTRACTOR:
CONTRACTOR'S NAME:	Devon Lewis	NC G.C. LICENSE NUMBER:
ADDRESS:	529 Viking Drive	LIMITATION:
CITY, STATE, ZIP:	Virginia Beach, VA 23452	CLASSIFICATION:
OFFICE#:		QUALIFIER:
CELL#	(757) 301-8789	LIEN AGENT NAME:
FAX#:		ENTRY#:
EMAIL:	permits@vfwworks.com	LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL-REPAIR - Install SmartJacks on poured footings, supplemental beam, floor joist sister and Push Piers to stabilize foundation
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Shaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:	TOTAL CONSTRUCTION COST: \$22,899.27
Description	Total Cost
Remodel / Renovation / Repair Fee	229.00
	TOTAL FEE: 229.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

Devon Lewis

 Applicant - Owner/Contractor (Please print and sign name)

Kevin Clark

 Building/Code/Zoning Official *By MB*

Date Approved

 Date Issued *3-15-2022*



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000042

Parcel: 022383008
PIN: 986818409680
Location: 197 SEA OATS LN
District: RS1 - Single Family Residential District
Subdiv: CHICHAUK
Lot-Block-Sect: LOT: 8 BLK: SEC:

Owner: HAGENAH, TODD D
Address: 197 SEA OATS LN
KITTY HAWK, NC 27949
Phone #: 252-489-3835

BUSINESS NAME: Snearer Construction, Inc
CONTRACTOR'S NAME: Paul Snearer
ADDRESS: P.O. Box 2875
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: (252) 261-2228
CELL#:
FAX#:
EMAIL: paulsnearerhomes@gmail.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 25865
LIMITATION: Unlimited
CLASSIFICATION: Building
QUALIFIER: Paul Snearer
LIEN AGENT NAME: First American Title Insurance Company
ENTRY#: 1650945
LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL NEW CONCRETE POOL 16 X 32 POOL ON SOUTH SIDE OF HOUSE
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000021
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/11/2022
BATHS: 1/2 BATHS:	ROOF:	PERMITTED/CONDITIONAL USE:
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 1,200 SHED:	DECKS (SqFt):	SEPTIC PERMIT #: S22-9092
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	DATE ISSUED: 02/22/2022
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	

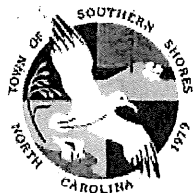
PERMIT FEES:	TOTAL CONSTRUCTION COST: \$75,000.00
Description	
Swimming Pools	
	Total Cost 125.00
	TOTAL FEE: 125.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

Kevin Clark
Applicant - Owner/Contractor
Paul Snearer
(Please print and sign name)

Kevin Clark
Building/Code/Zoning Official *Byms*

Date Approved
3.15.2022
Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000031

Parcel: 021366000 Owner: LANG, EDWARD J
PIN: 986809159478 Address: 296 SEA OATS TRL
Location: 302 HILLCREST DR SOUTHERN SHORES, NC 27949
District: RS1 - Single Family Residential District Phone #: 252-207-1952
Subdiv: SO/SH BEACH BLKS 63 73 83 82A
Lot-Block-Sect: LOT: 7 BLK: 82A SEC:

BUSINESS NAME: Fulcher Homes **NC G.C. LICENSED CONTRACTOR:** Licensed General Contractor
CONTRACTOR'S NAME: O.C. Fulcher **NC G.C. LICENSE NUMBER:** 17852
ADDRESS: P.O. Box 543 **LIMITATION:** Unlimited
CITY, STATE, ZIP: Kitty Hawk, NC 27949 **CLASSIFICATION:** Building
OFFICE#: (252) 261-3316 **QUALIFIER:** O.C. Fulcher
CELL#: **LIEN AGENT NAME:** Chicago Title Company, LLC
FAX#: 1625512
EMAIL: fulcheroc@earthlink.net **ENTRY#:** 223 S. WEST ST SUITE 900
LIEN AGENT ADDRESS: RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): NEW CONSTRUCTION - CONSTRUCTION OF A 3 BEDROOM HOUSE 2135 SQ FT WITH 2 1/2 BATHS
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 6	TYPE OF FOUNDATION: Monolithic slab	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 2135.0	HEAT: Heat Pump	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 1,011	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES: 1	INTERIOR WALLS: SHEETROCK	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 3	EXTERIOR WALLS: Cedar Shakes	ZONING PERMIT #: ZP22-000019
SEPTIC CAP. # OF PERSONS: 6	FIREPLACE: Gas	DATE APPROVED: 03/01/2022
BATHS: 2 1/2 BATHS: 1	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 618	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt): 393	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: S8-8358
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 01/19/2022

TOTAL CONSTRUCTION COST: \$590,500.00

PERMIT FEES:	Total Cost
Description	
Plan Review Fee - Single Family New Construction	150.00
Heated/Living Area Fee (Single Family)	1,281.00
Non-Heated Areas Fee (Single Family)	303.30
Homeowners Recovery Fund	10.00
TOTAL FEE:	1,744.30

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

Applicant - Owner/Contractor

(Please print and sign name)

03/01/2022

Date Approved

O.C. Fulcher

3/2/22

Date Issued

Building/Code/Zoning Official

Kevin Clark RymB

3-15-2022

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Trade Contractor Permit

Date March 11, 2022

**TP22-000038
Mechanical Trade Permit**

**Project Address: 178 OCEAN BLVD
Property Owner: SUKYS, AIDA T**

**PIN #: 021897000
Mailing Address: 4417 STANFORD ST
CHEVY CHASE, MD 20815**

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

**Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056**

**Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949**

Description of Work: C/O 16 SEER 5 TON AND 16 SEER 2TON HP ONLY.

Project Cost Estimate: \$11,565.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Brian Lancaster
Signature of Licensee or Duly Authorized Representative

3/15/2022
Date

Kevin Clark
Signature of Permit Official
By mB

3/15/22
Date

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Residential Trade Contractor Permit

Date March 15, 2022

**TP22-000040
Mechanical Trade Permit**

Project Address: 149 POTESKEET LOOP
Property Owner: CANNING, KURT D

PIN #: 022383533

Mailing Address: 149 POTESKEET LOOP
SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Master Heating & Cooling
Phone: (252) 255-0095
N. C. License Number: L.18066

Qualifier: Anthony Pritchett
Address: P.O. Box 707
Kitty Hawk, NC 27949

Description of Work: REPLACE 3 TON 18 SEER R410A BOSCH HEAT PUMP SYSTEM FOR LOWER LEVEL

Project Cost Estimate: 11,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative Date

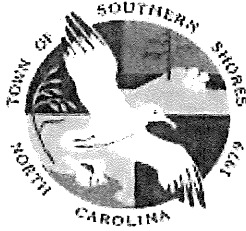
Signature of Permit Official

3-16-2022
Date

By MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**

5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 15, 2022

**TP22-000041
Mechanical Trade Permit**

Project Address: 6 PURPLE MARTIN LN
Property Owner: EDWARDS, KENNETH

PIN #: 021660000

Mailing Address: 10263 FIRETOWER RD
WINDSOR, VA 23487

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Master Heating & Cooling
Phone: (252) 255-0095
N. C. License Number: L.18066

Qualifier: Anthony Pritchett
Address: P.O. Box 707
Kitty Hawk, NC 27949

Description of Work: REPLACE 1.5 TON 14 SEER R410A LENNOX HEAT PUMP SYSTEM LOWER LEVEL

Project Cost Estimate: \$7,250.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Susan Pritchett
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-16-22
Signature of Permit Official Date
By MB



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000043

Parcel: 021917000
PIN: 986707790565
Location: 159 OCEAN BLVD
District: RS1 - Single Family Residential District
Subdiv: SO/SH AMENDED PLAT B SEC 3
Lot-Block-Sect: LOT: 1 & 2 BLK: 30 SEC: 3

Owner: BENEDICT, JON K
Address: 12607 CRABTREE FALLS DR
BRISTOW, VA 20136
Phone #: 703-283-6227

BUSINESS NAME: Frasca Custom Homes, LLC
CONTRACTOR'S NAME: William Frasca
ADDRESS: 2401 Colington Rd
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#:
CELL#: (252) 480-0515
FAX#:
EMAIL: frascacustomhomes@gmail.com


NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 72094
LIMITATION: Building
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME: Chicago Title Company, LLC
ENTRY#: 1650342
223 S. WEST ST SUITE 900
RALEIGH N.C 27603
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - REPLACEMENT OF EXISTING SIDING WITH NEW CEDAR SHAKE STYLE , REPLACE DECK FLASHING, TRIM OUT SCREEN PORCH. NO STRUCTURAL CHANGES
SPECIAL CONDITIONS - ALL WOOD BELOW RFPPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$73,680.00	
Description			Total Cost
Remodel / Renovation / Repair Fee			737.00
Homeowners Recovery Fund			10.00
			TOTAL FEE: 747.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.


Ariana Hughes (Office Manager)
Applicant - Owner/Contractor (Please print and sign name)

03/15/2022
Date Approved


Kevin Clark
Building/Code/Zoning Official 

Date Issued
3/15/2022



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000038

Parcel:	022565000	Owner:	WRIGHT, WILLIAM A
PIN:	986710258505	Address:	87 N DOGWOOD TRL
Location:	87 S DOGWOOD TRL		KITTY HAWK, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	252-256-1050
Subdiv	SO/SH 114-117 126,127 200-202		
Lot-Block-Sect:	LOT: 3 BLK: 116 SEC:		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	WRIGHT, WILLIAM A	NC G.C. LICENSE NUMBER:	
ADDRESS:	87 N. DOGWOOD TRAIL	LIMITATION:	
CITY, STATE, ZIP:	SOUTHERN SHORES, NC 27949	CLASSIFICATION:	
OFFICE#:	252-256-1050	QUALIFIER:	
CELL#:	252-256-1050	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:		LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL 14 X 14 SHED WITH FLOOD VENTS
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

****** (1)- TIE DOWN INSPECTION NEEDED BEFORE SUB FLOOR INSTALLED (2)- FLOOD VENTS REQUIRED ******

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input checked="" type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 196	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000022
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/17/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #: S22-9213
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED: 03/01/2022

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$3,000.00
Description		Total Cost
Non-Heated Areas Fee (Single Family)		58.80
Minimum Permit Fee		41.20
		TOTAL FEE: 100.00

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[Signature] 3/17/2022
 Applicant - Owner/Contractor (Please print and sign name)
 Kevin Clark
 Building/Code/Zoning Official *By MB*

Date Approved
 3.17.2022
 Date Issued



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000048

Parcel:	026785000	Owner:	GARCIA, DEBORAH ANNE
PIN:	986712767956	Address:	116 CLAMSHELL TRL
Location:	116 CLAM SHELL TRL		KITTY HAWK, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	252-202-9921
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 62 BLK: SEC:		

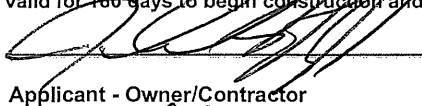
BUSINESS NAME:	CORNERSTONE MARINE & REMODELING LLC	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	DAVID PENNINGTON	NC G.C. LICENSE NUMBER:	84441
ADDRESS:	PO BOX 2371	LIMITATION:	LIMITED
CITY, STATE, ZIP:	MANTEO, NC 27954	CLASSIFICATION:	BUILDING
OFFICE#:		QUALIFIER:	
CELL#:	(252) 455-0960	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	CORNERSTONEOBX@YAHOO.COM	LIEN AGENT ADDRESS:	


DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - PULL OLD TOPS & SINK AND REPLACE WITH NEW TOP & SINK & FAUCET
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$5,000.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	50.00
Homeowners Recovery Fund	10.00
Minimum Permit Fee	50.00
	TOTAL FEE: 110.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.


 Applicant - Owner/Contractor (Please print and sign name)


 Building/Code/Zoning Official by: MB

Date Approved
 Date Issued: 3-18-2022



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**COMMERCIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000049

Parcel: 022819005 Owner: SOUTHERN SHORES CROSSING LLC
PIN: 987717024126 Address: P.O. BOX 150
Location: 1 OCEAN BLVD UNIT #106 KITTY HAWK, NC 27949
District: C - General Commercial District Phone #: 5404206878
Subdiv: SUBDIVISION - NONE
Lot-Block-Sect: LOT: 3&4 AND PARCEL B BLK: SEC:

BUSINESS NAME: SOUTHERN SHORES ICE CREAM CO. INC. NC G.C. LICENSED CONTRACTOR:
CONTRACTOR'S NAME: COLBY BOONE NC G.C. LICENSE NUMBER:
ADDRESS: 1 OCEAN BLVD UNIT #106 LIMITATION:
CITY, STATE, ZIP: SOUTHERN SHORES, NC 27949 CLASSIFICATION:
OFFICE#: 540-420-6878 QUALIFIER:
CELL#: LIEN AGENT NAME:
FAX#: ENTRY#:
EMAIL: COLBYBOONE@GMAIL.COM LIEN AGENT ADDRESS:

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - EXTEND CIRCUIT FOR FREEZERS & REGISTER - ADD PLUMBING FOR DIP WELL & RINSE SINK
SPECIAL CONDITIONS - ALL WOOD BELOW RFFE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMITTED/CONDITIONAL USE: Per ZA
HEATED/LIVING AREAS (SqFt):	HEAT:	COMMERCIAL USE: Per ZA
NON-HEATED AREAS (SqFt):	A/C:	PROPERTY USE: Commercial
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: 1/2 BATHS:	ROOF:	BUILDING USE: Per BL
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$5,000.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	50.00
Minimum Permit Fee	50.00
	TOTAL FEE: 100.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

3-18-2022

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

03/18/2022

Building/Code/Zoning Official

Date Approved

Kevin Clark By MJB

3-18-2022



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000168

Parcel: 022480000
PIN: 986715640652
Location: 73 TRINITIE TRL
District: RS1 - Single Family Residential District
Subdiv: CHICHAUK
Lot-Block-Sect: LOT: 395 BLK: SEC:

Owner: SWAIN, WILLIAM M
Address: 73 TRINITIE TRL
SOUTHERN SHORES, NC 27949
Phone #: 252-573-1646

BUSINESS NAME: KJ Construction and Remodeling, Co.
CONTRACTOR'S NAME: Keith Dobie
ADDRESS: P.O. Box 242
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: (252) 207-6589
CELL#
FAX#:
EMAIL: kjconstructionco@yahoo.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 59936
LIMITATION: Unlimited
CLASSIFICATION: Building
QUALIFIER: WILLIAM KEITH DOBIE, JR
Fidelity National Title Company, LLC
LIEN AGENT NAME: 1543069
ENTRY#: 223 S. WEST ST SUITE 900
LIEN AGENT ADDRESS: RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION - enclose under house storage/garage. unheated 11/8/2021 AMENDED PERMIT TO INCLUDE 256 SQ FT OF NEW DECK -AMENDED PERMIT TO INCLUDE 45 SQ FOOT OF DECK- ADDING 45 SQ FEET TO FRONT DECK
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 6	TYPE OF FOUNDATION: Monolithic slab	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 862	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: none	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS: match siding	ZONING PERMIT #: ZP21-000112
SEPTIC CAP. # OF PERSONS: 6	FIREPLACE:	DATE APPROVED: 11/08/2021
BATHS: 0 ½ BATHS: 0	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE: 561	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt): 301	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: s22 -5939
BASE FLOOD ELEVATION: PLUS 3FT or LES 8ft	WINDOWS TYPE: 2 Vivinco windows	DATE ISSUED: 09/10/2021

TOTAL CONSTRUCTION COST: \$32,000.00	
PERMIT FEES:	Total Cost
Description	
Non-Heated Areas Fee (Single Family)	258.60
Homeowners Recovery Fund	10.00
	TOTAL FEE: 268.60
	TOTAL FEE :282.10
	BALANCE DUE: 13.50

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; and the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

Kevin Clark
Applicant - Owner/Contractor (Please print and sign name)
Kevin Clark
Building/Code/Zoning Official *By MB*

09/17/2021
Date Approved
09/21/2021
Date Issued
3-18-2022



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**COMMERCIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000051

Parcel:	022521000	Owner:	SOUTHERN SHORES BUSINESS CENTER, LLC
PIN:	986720815543	Address:	8 JUNIPER TRL - UNIT 10A
Location:	8 JUNIPER TRL		KITTY HAWK, NC 27949
District:	C - General Commercial District	Phone #:	2524892200
Subdiv	SUBDIVISION - NONE		
Lot-Block-Sect:	LOT: C BLK: SEC:		

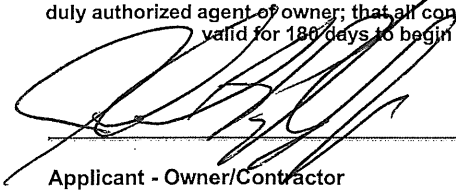
BUSINESS NAME:	CORNERSTONE MARINE & REMODELING LLC	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	DAVID PENNINGTON	NC G.C. LICENSE NUMBER:	84441
ADDRESS:	PO BOX 2371	LIMITATION:	LIMITED
CITY, STATE, ZIP:	MANTEO, NC 27954	CLASSIFICATION:	BUILDING
OFFICE#:		QUALIFIER:	
CELL#	(252) 455-0960	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	CORNERSTONEOBX@YAHOO.COM	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - BUILD A 8' WALL WITH METAL DOOR FOR XRAY ROOM WITH BEAD BACKED SHEETROCK AND A DOOR SHUT OFF- 2 X 4 STUDS & 5/8 DRYWALL
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo .		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMITTED/CONDITIONAL USE: Per ZA
HEATED/LIVING AREAS (SqFt):	HEAT:	COMMERCIAL USE: Per ZA
NON-HEATED AREAS (SqFt):	A/C:	PROPERTY USE: Commercial
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	BUILDING USE: Per BL
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$10,500.00	
PERMIT FEES:	Total Cost
Description	105.00
Remodel / Renovation / Repair Fee	TOTAL FEE: 105.00

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Applicant - Owner/Contractor (Please print and sign name)

Building/Code/Zoning Official

Kevin Clark By MB

Date Issued
03/22/2022
Date Approved
3-22-22

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Trade Contractor Permit

Date March 15, 2022

**TP22-000039
Mechanical Trade Permit**

Project Address: 106 OCEAN BLVD
Property Owner: MONKEY SKULL HOUSE, LLC

PIN #: 022529000
Mailing Address: PO BOX 82 OAKLAWN
EARLYSVILLE, VA 22936

Permit Types:

Plumbing Electrical Mechanical Gas
Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056

Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949

Description of Work: DOUBLE C/O BOTH 16 SEER 1.5 TON AND A 2.5 TON TRANE HEAT PUMP SYSTEMS.
REUSE EXISTING STAND, LINESETS, AND THE DUCT WORK.

Project Cost Estimate: \$15,274.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Bryan Lancaster
Signature of Licensee or Duly Authorized Representative

3/22/2022
Date

Kevin Clark
Signature of Permit Official

3-23-2022
Date

By me

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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Residential Trade Contractor Permit

Date March 22, 2022

**TP22-000042
Mechanical Trade Permit**

Project Address: 192 WAX MYRTLE TRL
Property Owner: BROWN, JERRY T TTEE

PIN #: 027294000
Mailing Address: 5114 GLENEAGLES WAY
SUFFOLK, VA 23435

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: All Seasons Heating & Cooling, Inc
Phone: (252) 491-9232
N. C. License Number: 19091

Qualifier: Joe Simpson
Address: P.O. Box 244
Point Harbor, NC 27964

Description of Work: REPLACE UPSTAIRS WITH A 3 TON & DOWNSTAIRS WITH A 2.5 TON SPLIT SYSTEM
HEAT PUMPS & AIR HANDLERS

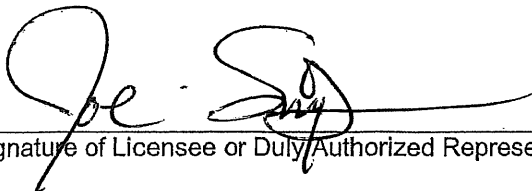
Project Cost Estimate: \$15,680.00

Permit Amount: 100.00

Payment:

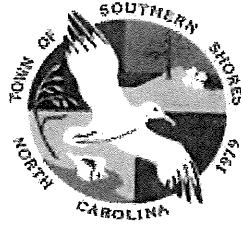
Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.


Signature of Licensee or Duly Authorized Representative 3-22-22 Date


Signature of Permit Official 3-22-22 Date
By MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
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Trade Contractor Permit

Date March 25, 2022

**TP22-000043
Mechanical Trade Permit**

Project Address: 235 HILLCREST DR

PIN #: 022174000

Property Owner: HANSEN, EARL WILLIAM JR

Mailing Address: 235 HILLCREST DR
SOUTHERN SHORES, NC 27949

Permit Types:

- Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C

Qualifier: Douglas Wakeley

Phone: (252) 261-2008

Address: P.O. Box 179

N. C. License Number: 13056

Kitty Hawk, NC 27949

Description of Work: INSTALL DUCTLESS H/P SYSTEM

Project Cost Estimate: \$4,657.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Brian Lancaster
Signature of Licensee or Duly Authorized Representative

3/25/2022
Date

Kevin Clark
Signature of Permit Official

3/25/22
Date

By: mg



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000039

Parcel: 021188000
PIN: 986810376285
Location: 8 EIGHTH AVE
District: RS1 - Single Family Residential District
Subdiv: SEA CREST VILLAGE
Lot-Block-Sect: LOT: 5 BLK: 53 SEC:

Owner: JORDAN, JOHN CHARLES
Address: 5501 NORTHWOOD DR
CENTER VALLEY, PA 18034
Phone #: 843-609-9218

BUSINESS NAME: Costin Creations, LLC
CONTRACTOR'S NAME: Travis Costin
ADDRESS: 109 Scarborough Ln.
CITY, STATE, ZIP: Duck, NC 27949
OFFICE#: (252) 261-5177
CELL#
FAX#:
EMAIL: travis@costincreations.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 68905
LIMITATION: Unlimited
CLASSIFICATION: Building
QUALIFIER: Travis Thomas Costin
LIEN AGENT NAME: First American Title Insurance Company
ENTRY#: 1641804
LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): NEW CONSTRUCTION - CONSTRUCTION OF NEW 5 BEDROOM SINGLE FAMILY HOME WITH POOL
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 10	TYPE OF FOUNDATION: Pile	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 3762.0	HEAT: Heat Pump	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 2,514	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES: 3	INTERIOR WALLS: Drywall	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 5	EXTERIOR WALLS: Cedar Shakes	ZONING PERMIT #: ZP22-000023
SEPTIC CAP. # OF PERSONS: 10	FIREPLACE: Gas	DATE APPROVED: 03/18/2022
BATHS: 4 ½ BATHS: 1	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 820	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE: 225	ELEVATOR (SqFt): 25	DATE ISSUED:
POOL: 108 SHED:	DECKS (SqFt): 876	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: S3-8154
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 01/10/2022

TOTAL CONSTRUCTION COST: \$940,000.00	
PERMIT FEES:	
Description	Total Cost
Plan Review Fee - Single Family New Construction	150.00
Heated/Living Area Fee (Single Family)	2,257.20
Non-Heated Areas Fee (Single Family)	754.20
Swimming Pools	125.00
Homeowners Recovery Fund	10.00
	TOTAL FEE: 3,296.40

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Travis Costin *Tou*

Applicant - Owner/Contractor (Please print and sign name)

Kevin Clark

Building/Code/Zoning Official

By MB

03/18/2022

Date Approved

3/25/2022
Date Issued



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000050

Parcel: 021679000
PIN: 986705293387
Location: 150 S DOGWOOD TRL
District: RS1 - Single Family Residential District
Subdiv: SO/SH SOUND BLKS 112 122 123
Lot-Block-Sect: LOT: 6 BLK: 112 SEC:

Owner: SS DOGWOOD LLC
Address: 7 LARK LN
LANCASTER, PA 17603
Phone #: 717-925-7756

BUSINESS NAME:
CONTRACTOR'S NAME: SS DOGWOOD LLC
ADDRESS: 7 LARK LN
CITY, STATE, ZIP: LANCASTER, PA 17603
OFFICE#: 717-925-7756
CELL#: 717-925-7756
FAX#:
EMAIL:

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL 13' OF ALUMINUM FENCE INCLUDING GATE ACCORDING TO NC POOL CODE
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$1,388.00
Description		Total Cost
Minimum Permit Fee		100.00
		TOTAL FEE: 100.00

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Catherine B Schultz (Catherine B Schultz)

Applicant - Owner/Contractor (Please print and sign name)

Kevin Clark

Building/Code/Zoning Official *By MB*

03/22/2022

Date Approved

3-29-2022

Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000057

Parcel:	022388000	Owner:	KITTRICK, KATHLEEN A
PIN:	986712852015	Address:	77 LANDFALL LOOP
Location:	77 LANDFALL LOOP		KITTY HAWK, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	571-278-0318
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 215 BLK: SEC:		

BUSINESS NAME:	Dare Repairs LLC	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	Kenneth Werth	NC G.C. LICENSE NUMBER:	81517
ADDRESS:	448 Old Wharf rd	LIMITATION:	limited
CITY, STATE, ZIP:	Wanchese, NC 27981	CLASSIFICATION:	building
OFFICE#:	(252) 423-0548	QUALIFIER:	Kenneth Werth
CELL#:		LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	kennethw@darerepairsllc.com	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL convert outdoor bathroom to indoor
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

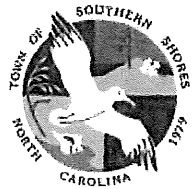
TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 2	TYPE OF FOUNDATION: Monolithic slab	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT: Electric	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C: Electric	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: sheetrock	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 4	EXTERIOR WALLS: siding	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: 4 1/2 BATHS: 0	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$15,000.00	
PERMIT FEES:	Total Cost
Description	
Remodel / Renovation / Repair Fee	150.00
Homeowners Recovery Fund	10.00
	TOTAL FEE: 160.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

Kenneth Werth *Kevin Clark*
 Applicant - Owner/Contractor (Please print and sign name)
 Kevin Clark
 Building/Code/Zoning Official *By MB*

03/29/2022
 Date Approved
 3-30-2022
 Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000058

Parcel: 021858000
PIN: 986708786337
Location: 135 OCEAN BLVD
District: RS1 - Single Family Residential District
Subdiv: SO/SH AMENDED PLAT B SEC 2
Lot-Block-Sect: LOT: A BLK: 24 SEC: 2

Owner: DELBIANCO, DAVID J
Address: 835 CHERRY LN
WRIGHTSTOWN, PA 18940
Phone #: 267-496-1690

BUSINESS NAME: Coastal Roofing and Siding, Inc.
CONTRACTOR'S NAME: Bill Frasca
ADDRESS: 2401 Colington Road
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 256-1814
CELL#:
FAX#:
EMAIL: coastalrands@hotmail.com

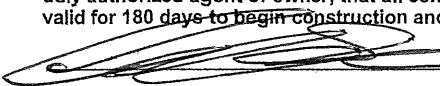
NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REPAIR - REPLACEMENT OF DECKING SURFACE AT FOUR (4) DECKS 8 X 12 AND ONE LANDING SURFACE, APPROXIMATELY 410 SQ FT TOTAL OF DECKING
SPECIAL CONDITIONS - ALL WOOD BELOW RFPF (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$28,200.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	282.00
Homeowners Recovery Fund	10.00
	TOTAL FEE: 292.00

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Applicant - Owner/Contractor

Cristina Hughes
(Please print and sign name)

Kevin Clark
Building/Code/Zoning Official *By MB*

03/29/2022
Date Approved

3-30-2022
Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000055

Parcel:	026763000	Owner:	STANNECK, DENISE M
PIN:	986809176240	Address:	334 SEA OATS TRL
Location:	334 SEA OATS TRL		KITTY HAWK, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	973-945-6108
Subdiv:	SO/SH BLK 60		
Lot-Block-Sect:	LOT: 8 BLK: 60 SEC:		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	STANNECK, DENISE M	NC G.C. LICENSE NUMBER:	
ADDRESS:	334 SEA OATS TR	LIMITATION:	
CITY, STATE, ZIP:	SOUTHERN SHORES, NC 27949	CLASSIFICATION:	
OFFICE#:	973-945-6108	QUALIFIER:	
CELL#:	973-945-6108	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:		LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - CONSTRUCT 8 X 10 ARBOR/PERGOLA
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 80	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000024
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/28/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$5,300.00	
PERMIT FEES:	Total Cost
Description	
Non-Heated Areas Fee (Single Family)	24.00
Minimum Permit Fee	76.00
Misc. Fee VIOLATION FEE	100.00
	TOTAL FEE: 200.00

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DM Stanneck DENISE M. STANNECK

Applicant - Owner/Contractor (Please print and sign name)

03/28/2022

Date Approved

Kevin Clark

3/30/2022
Date Issued

Building/Code/Zoning Official *By MB*

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Residential Trade Contractor Permit

Date March 29, 2022

**TP22-000044
Mechanical Trade Permit**

**Project Address: 2 GINGUITE TRL
Property Owner: PIDDINGTON, MICHAEL S**

**PIN #: 022519090
Mailing Address: 2 GINGUITE TRL
KITTY HAWK, NC 27949**

Permit Types:

Plumbing Electrical Mechanical Gas
Contractor:

**Company Name: Master Heating & Cooling
Phone: (252) 255-0095
N. C. License Number: L.18066**

**Qualifier: Anthony Pritchett
Address: P.O. Box 707
Kitty Hawk, NC 27949**

Description of Work: REPLACEMENT OF 3 TON 14 SEER R410A LENNOX HEAT PUMP SYSTEM FOR LOWER UNIT

Project Cost Estimate: \$7,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Susan Pritchett 3/31/22
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-31-2022
Signature of Permit Official Date
By ymb