



Town of Kill Devil Hills

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

SEP 29 2022

Planning and Inspection Department

BJ2022-236

PROJECT NAME: Dunwell Read Deck, Stairs, enclosure addition
SITE ADDRESS: 1307 ELIZABETH ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

APPLICANT: Elite Remodel LLC
113 Briggs St
JARVISBURG, NC 27947

OWNER: DUNWELL, NICHOLAS
807 RIVERSIDE DR 5A
NEW YORK, NY 10032

UNLICENSED - REMODELING: Elite Remodel LLC
113 Briggs St
JARVISBURG, NC 27947

License: 12345
Expires:

PARCEL:

PIN: 988312852245 **Parcel Number:** 022890000
Address: 1307 ELIZABETH ST KILL DEVIL HILLS
Addition: KILL DEVIL BEACH EXTENDED **Zoning:**
Block: AA **Lot(s):** 5 & 11-12
Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	194 Sq. Ft
Res. Building Permit Fee	\$77.70	\$0.00	Open Decks	1 EA
Totals :	\$227.70	\$0.00		

PROJECT DESCRIPTION: remove existing rear landing and stairs, add new back deck and stairs, and storage enclosure under existing house

BJ2022-236

PROJECT NAME: Dunwell Read Deck, Stairs, enclosure addition
SITE ADDRESS: 1307 ELIZABETH ST KILL DEVIL HILLS

BUILDING JOINT**ISSUED:** 09/28/2022**EXPIRES:** 03/27/2023**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	12.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	27656.56
SURVEYOR NAME AND NUMBER	Carlos Gomez 014071
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

PO BOX 1719
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Planning and Inspection Department

BJ2022-224

PROJECT NAME: Golasa Remodel and Deck Rebuild
SITE ADDRESS: 3119 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

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

OWNER: ISRAEL GOLASA
 3202 Bay Dr.
 KDH, NC 27948
 252-573-9033

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

License: 66982
Expires: 02/08/2023

PARCEL:

PIN: 987520825464

Parcel Number: 001019000

Address: 3119 BAY DR KILL DEVIL HILLS

Zoning:

Addition: MOOR SHORES

Block: 0 **Lot(s):** 69

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$446.25	\$0.00	Covered Porches/Decks	595 SQFT
Open Deck Fee	\$450.00	\$0.00	Open Decks	3 EA
Renovation/Remodel/Relocate	\$1,339.65	\$0.00	Remodel/Renovation	2082 SQFT
Totals :	\$2,235.90	\$0.00	Remodel/Renovation	895 SQFT

PROJECT DESCRIPTION: renovate existing home, repair replace windows, doors, siding, plumbing electrical, replace decks and stairs to same footprint, substantial improvement, shed to be moved 5' off of rear yard

SEP 28 2022

BJ2022-224**PROJECT NAME:** Golasa Remodel and Deck Rebuild
SITE ADDRESS: 3119 BAY DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/28/2022**EXPIRES:** 03/27/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	253000.00
LOT COVERAGE	37.30
LIVING SPACE (SQFT)	2082
COVERED PORCHES/DECKS (SQFT)	595
GARAGE (SQFT)	895
TOTAL SQUARE FOOTAGE	3572
SURVEYOR NAME AND NUMBER	Carlos Gomez 014071
ARCHITECT NAME AND LICENSE NUMBER	RICHARD CONTI 9490
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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PAID

SEP 29 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-226

PROJECT NAME: Group Holdings downstairs remodel, adding
bedroom 4 total
SITE ADDRESS: 402 ATLANTIC ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

APPLICANT: DUNSTAN, GARLAND
PO BOX 402
kitty hawk, nc 27949

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

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

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

License: 19436
Expires: 12/31/2022

PARCEL:

PIN: 988312856860

Parcel Number: 008204000

Address: 402 ATLANTIC ST W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

Block: V **Lot(s):** PT 7

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Renovation/Remodel/Relocate	\$432.00	\$0.00	Remodel/Renovation	960 SQFT
Res. Building Permit Fee	\$702.00	\$0.00	Residential Heated Space	936 sq. Ft.
Totals :	\$1,284.00	\$0.00	(.75)	

PROJECT DESCRIPTION: add bedroom, remodel downstairs, close in garage, 4 bedrooms total, revise driveway

BJ2022-226

PROJECT NAME: Group Holdings downstairs remodel, adding
 bedroom 4 total
SITE ADDRESS: 402 ATLANTIC ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S3-12858
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	10.60
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	35000.00
LOT COVERAGE	24.39
LIVING SPACE (SQFT)	1920
SURVEYOR NAME AND NUMBER	Jamie Furr
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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



Town of Kill Devil Hills

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PAID
 SEP 29 2022

Planning and Inspection Department

BJ2022-235

PROJECT NAME: Jolly Roger Addition
SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

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

OWNER: CHELLO INC
 P O BOX 2517
 KILL DEVIL HILLS, NC 27948

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

License: 66982
Expires: 02/08/2023

PARCEL:

PIN: 988406389793

Parcel Number: 002863000

Address: 1836 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: Croatan Shores Amended

Block: G **Lot(s):** 1,2,20,21

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$142.50	\$0.00	Covered Porches/Decks	190 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Renovation/Remodel/Relocate	\$52.20	\$0.00	Commercial Space	3993 Sq. Ft.
Com. Building Permit Fees	\$3,194.40	\$0.00	Remodel/Renovation	116 SQFT
Totals :	\$3,539.10	\$0.00		

PROJECT DESCRIPTION: new 4118 sq ft addition, new parking lot and drainage renovations

BJ2022-235

PROJECT NAME: Jolly Roger Addition

SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
# PARKING SPACES/BEDROOM	93
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial New
CONSTRUCTION TYPE	III
CONSTRUCTION COST	2200000.00
LOT COVERAGE	54.00
LIVING SPACE (SQFT)	4109
COVERED PORCHES/DECKS (SQFT)	190
OPEN DECK (SQFT)	78
TOTAL SQUARE FOOTAGE	4377
SURVEYOR NAME AND NUMBER	John Delucia
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
ARCHITECT NAME AND LICENSE NUMBER	Mark Kasten 7220
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly



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SEP 27 2022

Planning and Inspection Department

BJ2022-229

PROJECT NAME: DeMasi Addition
SITE ADDRESS: 1813 UPPER DUNE RD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

APPLICANT: DeMasi, Joseph
1813 Upper Dune Road
Kill Devil Hills, NC 27948

OWNER: DeMasi, Joseph
1813 Upper Dune Road
Kill Devil Hills, NC 27948

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

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

License: 32637
Expires: 01/01/2023

PARCEL:

PIN: 988409162978

Parcel Number: 002385000

Address: 1813 UPPER DUNE RD KILL DEVIL HILLS

Zoning:

Addition: SEA HOLLY RIDGE

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$277.50	\$0.00	Residential Heated Space	370 sq. Ft.
Totals :	\$277.50	\$0.00	(.75)	

PROJECT DESCRIPTION: addition of living space under existing house, 3 total bedrooms, additional driveway

BJ2022-229**PROJECT NAME:** DeMasi Addition**SITE ADDRESS:** 1813 UPPER DUNE RD KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/26/2022**EXPIRES:** 03/25/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S5-9192
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	10.70
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	70000.00
LOT COVERAGE	25.40
LIVING SPACE (SQFT)	370
TOTAL SQUARE FOOTAGE	370
SURVEYOR NAME AND NUMBER	William Yetzer
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



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SEP 27 2022

Planning and Inspection Department

BUILDING JOINT

BJ2022-233

PROJECT NAME: Miele Storage Room
SITE ADDRESS: 205 WALKER ST E KILL DEVIL HILLS

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

APPLICANT: Radford, Jeff
517 W. Archdale St.
Kill Devil Hills, NC 27948
252-207-2910

OWNER: SHOEMAKER, MARIANNE MIELE
584 GOLFPVIEW DRIVE
CHILLICOTHE, OH 45601

GENERAL, UNLICENSED: Jeff Radford
517 WEST Archdale St.
Kill Devil Hills, NC 27948
252-207-2910

License: 345
Expires:

PARCEL:

PIN: 988517128008

Parcel Number: 000375000

Address: 205 WALKER ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 4 **Lot(s):** 13-14

Legal Description:

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

PROJECT DESCRIPTION: storage room under existing house, matching existing storage area floorlevel

BJ2022-233

PROJECT NAME: Miele Storage Room
SITE ADDRESS: 205 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.50
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	12000.00
STORAGE (SQFT)	168
TOTAL SQUARE FOOTAGE	168
SURVEYOR NAME AND NUMBER	William S Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Storage

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * New Floor level shall match existing storage room levels.



Town of Kill Devil Hills

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SEP 26 2022

Planning and Inspection Department

BJ2022-223

PROJECT NAME: Gary and Susan Mason
SITE ADDRESS: 1420 West First Street Kill Devil Hills

BUILDING JOINT

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

APPLICANT: HASKETT, JEFFREY H.
P.O. Box 1024
4711 Lindberg Ave.
Kitty Hawk, NC 27949
267-1777

OWNER: Mason, Gary and Susan
621 Enterprise Way
MARYVILLE, TN 37801
865-640-2631

GENERAL: HASKETT, JEFFREY H.
P.O. Box 1024
4711 Lindberg Ave.
Kitty Hawk, NC 27949
267-1777

License: 14645
Expires:

PARCEL:

PIN: 988417118191

Parcel Number:

Address: 1420 West First Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 4, Pine Grove Subdivision

FEES:		Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,298.75	\$0.00		Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00		Residential Heated Space	1649 sq. Ft.
Land Disturbing	\$100.00	\$0.00		(.75)	
Covered Porch Residential	\$234.00	\$0.00		Covered Porches/Decks	312 SQFT
T-Pole	\$50.00	\$0.00		Residential Unheated (.40)	155 Sq. Ft
Totals :	\$1,832.75	\$0.00		# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T28430

BJ2022-223**PROJECT NAME:** Gary and Susan Mason
SITE ADDRESS: 1420 West First Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/26/2022**EXPIRES:** 03/25/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	29909
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
Proposed First Floor Elevation	5.80
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	498732.00
LOT COVERAGE	8.72
LIVING SPACE (SQFT)	1649
COVERED PORCHES/DECKS (SQFT)	312
STORAGE (SQFT)	155
OPEN DECK (SQFT)	160
TOTAL SQUARE FOOTAGE	2276
SURVEYOR NAME AND NUMBER	House Engineering
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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PAID

SEP 26 2022

Planning and Inspection Department

TOWN OF

BJ2022-230

PROJECT NAME: Hastings kitchen remodel
SITE ADDRESS: 1601 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

APPLICANT: Cornerstone Marine & Remodeling
PO BOX 2371
Manteo, NC 27954
252-455-0960

OWNER: HASTINGS, JAMES
42816 Crane Meadows Sq
ASHBURN, VA 20148

BUILDING LIMITED: Cornerstone Marine & Remodeling
PO BOX 2371
Manteo, NC 27954
252-455-0960

License: 84441
Expires: 01/01/2023

PARCEL:

PIN: 98841156647307

Parcel Number: 002781007

Address: 1601 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: B

Lot(s): UT 202 16-20

Legal Description:

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

PROJECT DESCRIPTION: demo and replace kitchen cabinets, relocate appliances

BJ2022-230

PROJECT NAME: Hastings kitchen remodel
SITE ADDRESS: 1601 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	50000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAYD

SEP 26 2022

Planning and Inspection Department

BJ2022-231

PROJECT NAME: Vaughan Remodel
SITE ADDRESS: 1601 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

APPLICANT: Cornerstone Marine & Remodeling
PO BOX 2371
Manteo, NC 27954
252-455-0960

OWNER: VAUGHAN, JOHN C III TRUSTEES
190 CEDAR ROAD
POQUOSON, VA 23662

BUILDING LIMITED: Cornerstone Marine & Remodeling
PO BOX 2371
Manteo, NC 27954
252-455-0960

License: 84441
Expires: 01/01/2023

PARCEL:

PIN: 98841156647313

Parcel Number: 002781013

Address: 1601 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: B

Lot(s): UT 303 16-20

Legal Description:

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

PROJECT DESCRIPTION: replace wood fireplace with electric, demo and replace kitchen cabinets, kitchen remodel

BJ2022-231**PROJECT NAME:** Vaughan Remodel**SITE ADDRESS:** 1601 VA DARE TRL N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/23/2022**EXPIRES:** 03/22/2023**DETAILS****Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	52000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

SEP 23 2022

Planning and Inspection Department

TC 107

BJ2022-232	BUILDING JOINT
PROJECT NAME: Dunwell Hottub	ISSUED: 09/23/2022
SITE ADDRESS: 1307 ELIZABETH ST KILL DEVIL HILLS	EXPIRES: 03/22/2023

APPLICANT: DUNWELL, NICHOLAS 807 RIVERSIDE DR 5A NEW YORK, NY 10032	OWNER: DUNWELL, NICHOLAS 807 RIVERSIDE DR 5A NEW YORK, NY 10032
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GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2022
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PARCEL:

PIN: 988312852245	Parcel Number: 022890000
Address: 1307 ELIZABETH ST KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL BEACH EXTENDED	Block: AA Lot(s): 5 & 11-12
Legal Description:	

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

PROJECT DESCRIPTION: hot tub adjacent to existing house on concrete slab

cost
8,800.00

BJ2022-232

PROJECT NAME: Dunwell Hottub

SITE ADDRESS: 1307 ELIZABETH ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
LOT COVERAGE	16.40
SURVEYOR NAME AND NUMBER	Carlos Gomez 014071
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

SEP 23 2022

Planning and Inspection Department

BJ2022-227

PROJECT NAME: DLC Properties Addition
SITE ADDRESS: 1521 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

APPLICANT: DLC Properties, LLC
450 Hwy. 461
Ahoskie, NC 27910
252-377-5100

OWNER: DLC Properties, LLC
450 Hwy. 461
Ahoskie, NC 27910
252-377-5100

GENERAL, UNLIMITED:

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

License: 49781
Expires: 01/01/2023

PARCEL:

PIN: 988410458359

Parcel Number: 002756002

Address: 1521 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: GEORGE LEE GRIMES JR SUBDIV

Block: 0 **Lot(s):** PAR. C

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$122.85	\$0.00	Remodel/Renovation	273 SQFT
Res. Building Permit Fee	\$567.75	\$0.00	Residential Heated Space	757 sq. Ft.
Totals :	\$690.60	\$0.00	(.75)	

PROJECT DESCRIPTION: enclosure under existing sfd, relocate driveway, 3 total bedrooms, remodel kitchen and bath, new siding and windows

BJ2022-227

PROJECT NAME: DLC Properties Addition
SITE ADDRESS: 1521 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	83000.00
LIVING SPACE (SQFT)	757
TOTAL SQUARE FOOTAGE	757
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Foundation survey will be required prior to rough-in inspection.
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.



Town of Kill Devil Hills

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PAID

SEP 22 2022

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

BJ2022-222	BUILDING JOINT
PROJECT NAME: Mendez New House	ISSUED: 09/22/2022
SITE ADDRESS: 501 INDIAN DR KILL DEVIL HILLS	EXPIRES: 03/21/2023

APPLICANT: J.D. Johnson Realty & Construction, LLC PO BOX 340 Wanchese, NC 27954 252-305-9982	OWNER: Mendez, Julio 1815 Wyandotte Street Kill Devil Hills, NC 27948
---	--

GENERAL LIMITED:	J.D. Johnson Realty & Construction, LLC PO BOX 340 Wanchese, NC 27954 252-305-9982	License: 73168 Expires:
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PARCEL:

PIN: 988410268178	Parcel Number: 002721000
Address: 501 INDIAN DR KILL DEVIL HILLS	
Addition: HIGH VIEW - HEDRICKS ADD	Zoning: Block: F Lot(s): 11
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$120.75	\$0.00	Covered Porches/Decks	161 SQFT
Res. Building Permit Fee	\$2,217.25	\$0.00	Residential Unheated (.40)	160 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	2871 sq. Ft.
Land Disturbing	(\$100.00)	\$0.00	# of Temporary Poles	1 EA
Land Disturbing	\$100.00	\$0.00		
Totals :	\$2,388.00	\$0.00		

PROJECT DESCRIPTION: new 4 bedroom single family dwelling

BJ2022-222**PROJECT NAME:** Mendez New House**SITE ADDRESS:** 501 INDIAN DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/22/2022**EXPIRES:** 03/21/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S3-12312
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	19.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	450000.00
LOT COVERAGE	39.37
LIVING SPACE (SQFT)	2871
COVERED PORCHES/DECKS (SQFT)	161
STORAGE (SQFT)	160
TOTAL SQUARE FOOTAGE	3192
SURVEYOR NAME AND NUMBER	Carlos Gomez 014071
ENGINEER AND LICENSE NUMBER	CARLOS GOMEZ 14671
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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Planning and Inspection Department

BJ2022-221

PROJECT NAME: LONGO HOT TUB
SITE ADDRESS: 415 WALKER ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/14/2022

EXPIRES: 03/13/2023

APPLICANT: LONGO, JAMES
PO Box 193
Kill Devil Hills, NC 27948

OWNER: LONGO, JAMES
PO Box 193
Kill Devil Hills, NC 27948

UNLICENSED BUILDER: ACE HARDWARE
4132 N Croatan Hwy
kitty hawk, nc 27949

License: XXXXXX
Expires:

PARCEL:

PIN: 988517010016

Parcel Number: 000656013

Address: 415 WALKER ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 53 **Lot(s):** 13,14,15

Legal Description:

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

PROJECT DESCRIPTION: INSTALL HOT TUB UNDER HOUSE FOOTPRINT

PAID
SEP 14 2022
TOWN OF
KILL DEVIL HILLS

BJ2022-221

PROJECT NAME: LONGO HOT TUB

SITE ADDRESS: 415 WALKER ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/14/2022

EXPIRES: 03/13/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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PAID

SEP 13 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-216

PROJECT NAME:

SITE ADDRESS: 304 PINE GROVE TRL KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/02/2022

EXPIRES: 03/01/2023

APPLICANT: Stoner, Paul
304 Pine Grove Trail
Kill Devil Hills, NC 27948
252-715-0387

OWNER: Stoner, Paul
304 Pine Grove Trail
Kill Devil Hills, NC 27948
252-715-0387

GENERAL: SWIMME & SON
184 Lowes Lane
ELIZABETH CITY, NC 27909
252-338-8443

License: 43338
Expires: 01/01/2023

PARCEL:

PIN: 988316846778

Parcel Number: 027000002

Address: 304 PINE GROVE TRL KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

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

Legal Description:

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

PROJECT DESCRIPTION: Remodel main level kitchen per provided plan.



PAID

9/12/22
Paul Paul

BJ2022-216

PROJECT NAME:

SITE ADDRESS: 304 PINE GROVE TRL KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/02/2022

EXPIRES: 03/01/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	42233.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In

Zoning Final

Final

CONDITIONS

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

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

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



Town of Kill Devil Hills

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

SEP - 9 2022

Planning and Inspection Department

BJ2022-211

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 513 Zen Lane Kill Devil Hills

BUILDING JOINT

ISSUED: 09/08/2022

EXPIRES: 03/07/2023

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988414227608

Parcel Number:

Address: 513 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 49, Phase 2, Water Oak Residential Community

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,332.40	\$0.00	Residential Unheated (.40)	301 Sq. Ft
Covered Porch Residential	\$91.50	\$0.00	Covered Porches/Decks	122 SQFT
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1616 sq. Ft.
Totals :	\$1,473.90	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: 125393

BJ2022-211**PROJECT NAME:** Water Oak Residential, LLC
SITE ADDRESS: 513 Zen Lane Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/08/2022**EXPIRES:** 03/07/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	300000.00
LOT COVERAGE	38.91
LIVING SPACE (SQFT)	1616
COVERED PORCHES/DECKS (SQFT)	122
GARAGE (SQFT)	301
TOTAL SQUARE FOOTAGE	2039
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Michael O'Steen 032628
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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PAID

SEP 12 2022

Planning and Inspection Department

BJ2022-218

PROJECT NAME: Frobes Porch Enclosure, new stairs, add compliant driveway

SITE ADDRESS: 1009 INDIAN DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

APPLICANT: PRESGRAVES, R ALLEN
1706 SEASWEPT
KILL DEVIL HILLS, NC 27948

OWNER: FORBES, LEONA ANNE
5720 ANGLER'S POND
JOHN'S ISLAND, SC 29455

GENERAL: PRESGRAVES CONSTRUCTION
UNKNOWN
UNKNOWN, XX 00000
256-2614

License: Unlicensed
Expires: 01/01/2023

PARCEL:

PIN: 988409153379

Parcel Number: 002631000

Address: 1009 INDIAN DR KILL DEVIL HILLS

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 24 **Lot(s):** 12

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Driveway Permit Fee	\$50.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: redeck and new handrails and stairs, enclose front covered porch, add driveway and compliant parking

BJ2022-218**PROJECT NAME:** Frobes Porch Enclosure, new stairs, add compliant driveway**SITE ADDRESS:** 1009 INDIAN DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/07/2022**EXPIRES:** 03/06/2023**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-12956
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	10.13
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
LOT COVERAGE	20.03
SURVEYOR NAME AND NUMBER	CP Lewis Jr L-2441
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final

CONDITIONS

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

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



Town of Kill Devil Hills

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

SEP - 9 2022

Planning and Inspection Department

BJ2022-220

PROJECT NAME:

SITE ADDRESS: 1720 VIRGINIA AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

APPLICANT: Schillizzi, Michael
1720 Virginia AVE
Kill Devil Hills, NC 27948

OWNER: Schillizzi, Michael
1720 Virginia AVE
Kill Devil Hills, NC 27948

UNLICENSED - REMODELING: Adams Handyman Services, LLC
121 Noahs LN
Point Harbor, NC 27964
252-455-1702

License: 2375450
Expires:

PARCEL:

PIN: 988409069050

Parcel Number: 002594000

Address: 1720 VIRGINIA AVE KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES SUBDIV

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

Legal Description:

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

PROJECT DESCRIPTION: Remove unpermitted living space below base flood elevation at ground floor level.

BJ2022-220

PROJECT NAME:

SITE ADDRESS: 1720 VIRGINIA AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	4800.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Foundation survey will be required prior to rough-in inspection.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.



Town of Kill Devil Hills

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PAID

SEP - 8 2022

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

BJ2022-210	BUILDING JOINT
PROJECT NAME: Manuel Calletano	ISSUED: 09/08/2022
SITE ADDRESS: 700 SIXTH AVE Kill Devil Hills	EXPIRES: 03/07/2023

APPLICANT: CALLETANO, MANUEL
 700 SIXTH AVE
 Kill Devil Hills, NC 27948

OWNER: CALLETANO, MANUEL
 700 SIXTH AVE
 Kill Devil Hills, NC 27948

CONTRACTOR: SAME AS OWNER
 UNKNOWN
 UNKNOWN, XX 00000

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

PARCEL:

PIN: 988307678596

Parcel Number:

Address: 700 SIXTH AVE Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 4, Block 37, Kill Devil Hills Realty Corp Addition

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$319.50	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	Residential Heated Space	3154 sq. Ft.
Res. Building Permit Fee	\$2,365.50	\$0.00	(.75)	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Totals :	\$2,885.00	\$0.00	Covered Porches/Decks	426 SQFT

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
 Water Charges

PAID

Water Tap #: 125395

BJ2022-210**PROJECT NAME:** Manuel Calletano
SITE ADDRESS: 700 SIXTH AVE Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/08/2022**EXPIRES:** 03/07/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S8-12800
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	325000.00
LOT COVERAGE	33.50
LIVING SPACE (SQFT)	3154
COVERED PORCHES/DECKS (SQFT)	426
OPEN DECK (SQFT)	204
TOTAL SQUARE FOOTAGE	3784
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

PAID

SEP - 7 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-217

PROJECT NAME: Owens Hot tub and Driveway
SITE ADDRESS: 417 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

APPLICANT: Owens, Andrew
417 W. Palmetto St.
Kill Devil Hills, NC 27948
252-202-4761

OWNER: Owens, Andrew
417 W. Palmetto St.
Kill Devil Hills, NC 27948
252-202-4761

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988517003366

**Parcel
Number:**

Address: 417 W. Palmetto St. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 5R, Recombination of Block 50, Virginia Dare Shores

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

PROJECT DESCRIPTION: add hot tub, remove portion of driveway for lot coverage

BJ2022-217

PROJECT NAME: Owens Hot tub and Driveway
SITE ADDRESS: 417 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
LOT COVERAGE	39.92
SURVEYOR NAME AND NUMBER	William S Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling
Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The required as-built survey shall provide a spot elevation at the location of the hot tub to verify the grade height at the hot tub.



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2022-208

PROJECT NAME: Zinovis Bathroom
SITE ADDRESS: 701 Cardinal St. UNKNOWN

BUILDING JOINT

ISSUED: 08/24/2022

EXPIRES: 02/20/2023

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

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

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

License: 80229
Expires: 01/05/2023

PARCEL:

PIN: 988307784279

Parcel Number:

Address: 701 Cardinal St. UNKNOWN

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 8, Block 19, Kill Devil Hills Realty Corp. Subdivision

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

PROJECT DESCRIPTION: convert office space to bathroom on ground floor

PAID
SEP - 6 2022

BJ2022-208

PROJECT NAME: Zinovis Bathroom
SITE ADDRESS: 701 Cardinal St. UNKNOWN

BUILDING JOINT

ISSUED: 08/24/2022

EXPIRES: 02/20/2023

DETAILS
Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	20000.00
LIVING SPACE (SQFT)	48
SURVEYOR NAME AND NUMBER	Timothy L Fish
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2022-219

PROJECT NAME: Perloth Addition
SITE ADDRESS: 201 ARCHDALE ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/08/2022

EXPIRES: 03/07/2023

APPLICANT: Joel & Penny Perloth
19918 Wyman Way
Germantown, MD 20874
301-540-5024

OWNER: Joel & Penny Perloth
19918 Wyman Way
Germantown, MD 20874
301-540-5024

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988517125296

Parcel Number: 000803000

Address: 201 ARCHDALE ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES AMD BLK 5

Zoning:

Block: 5 **Lot(s):** PT 8-9

Legal Description:

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

PROJECT DESCRIPTION: 18' new addition to front of house, enclose existing front porch, relocate front steps, new sun room. Owner contractor, previous permit Bj2021-246 canceled

PAID WITH CASH

SEP - 8 2022

BJ2022-219**PROJECT NAME:** Perloth Addition
SITE ADDRESS: 201 ARCHDALE ST E KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/08/2022**EXPIRES:** 03/07/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S22-5673
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	60000.00
LOT COVERAGE	44.10
LIVING SPACE (SQFT)	168
COVERED PORCHES/DECKS (SQFT)	120
TOTAL SQUARE FOOTAGE	288
SURVEYOR NAME AND NUMBER	JH Miller Jr
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2022-209

PROJECT NAME: Harrington Addition
SITE ADDRESS: 317 CANAL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/01/2022

EXPIRES: 02/28/2023

APPLICANT: HARRINGTON, JAMES
317 Canal Drive
Kill Devil Hills, NC 27948

OWNER: HARRINGTON, JAMES
317 Canal Drive
Kill Devil Hills, NC 27948

CONTRACTOR: Art Vandalay Industries, LLC
317 Canal Drive
Kill Devil Hills, NC 27948
252-599-2508

GENERAL - LIMITED: Art Vandalay Industries, LLC
317 Canal Drive
Kill Devil Hills, NC 27948
252-599-2508

License: 70729
Expires: 01/01/2023

PARCEL:

PIN: 988414440746

Parcel Number: 003300000

Address: 317 CANAL DR KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 1

Block: 0 **Lot(s):** 9

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$256.50	\$0.00	Residential Heated Space	1536 sq. Ft.
Res. Building Permit Fee	\$1,152.00	\$0.00	(.75)	
Renovation/Remodel/Relocate	\$433.35	\$0.00	Covered Porches/Decks	342 SQFT
Totals :	\$1,841.85	\$0.00	Remodel/Renovation	963 SQFT

PROJECT DESCRIPTION: new 2nd story living space addition, new front porch and stairs, new rear living space addition

SEP - 1 2022

BJ2022-209**PROJECT NAME:** Harrington Addition
SITE ADDRESS: 317 CANAL DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 09/01/2022**EXPIRES:** 02/28/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-12063
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	100000.00
LOT COVERAGE	32.48
LIVING SPACE (SQFT)	1536
COVERED PORCHES/DECKS (SQFT)	342
TOTAL SQUARE FOOTAGE	1878
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	Fredrick House 24740
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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

PAID

SEP - 2 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-213

PROJECT NAME: Foster Pool
SITE ADDRESS: 900 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/01/2022

EXPIRES: 02/28/2023

APPLICANT: DBD SERVICES, INC.
P.O. Box 2318
Kitty Hawk, NC 27959
252-255-1192

OWNER: FOSTER, THOMAS
13401 Shelbourne Drive
RICHMOND, VA 23233

GENERAL BUILDING - LIMITED: DBD SERVICES, INC.
P.O. Box 2318
Kitty Hawk, NC 27959
252-255-1192

License: 60217
Expires: 01/01/2023

PARCEL:

PIN: 988308889656

Parcel Number: 004211000

Address: 900 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 13 **Lot(s):** 1A

Legal Description:

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

PROJECT DESCRIPTION: pool, concrete deck and fence

BJ2022-213

PROJECT NAME: Foster Pool

SITE ADDRESS: 900 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/01/2022

EXPIRES: 02/28/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	30471
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	40507.00
LOT COVERAGE	35.27
SURVEYOR NAME AND NUMBER	Gloria J Rogers L-3531
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final Pool Bonding
Zoning Final

CONDITIONS

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

FDP2022-092

PROJECT NAME: ANNIE OBX KITCHEN AND BATH REMODEL

SITE ADDRESS: 2001 VA DARE TRL N KILL DEVIL HILLS

FLOOD DEVELOPMENT

ISSUED: 09/01/2022

* THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.

1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.

2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.

3. In the VE Zone, there shall be no fill used for structural support.

4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

DEVELOPER MUST OBTAIN ALL THE NECESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS PERMIT CAN BE ISSUED.

Gary Woodson

Applicant Signature

09 / 01 / 2022

Date



Town of Kill Devil Hills

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

PAID

SEP - 2 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2022-215

PROJECT NAME: ANNIE OBX KITCHEN AND BATH REMODEL
SITE ADDRESS: 2001 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/01/2022

EXPIRES: 02/28/2023

APPLICANT: ANNIE OBX KILL DEVIL HILLS LLC.
118 LAKE MEAD DR.
EAST BERLIN, PA 17316
717-259-9921

OWNER: ANNIE OBX KILL DEVIL HILLS LLC.
118 LAKE MEAD DR.
EAST BERLIN, PA 17316
717-259-9921

BUILDING UNLIMITED: NORTH RIVER PROPERTIES LLC.
124 SHORE DR
JARVISBURG, NC 27947
252-473-7240

License: 83956
Expires:

PARCEL:

PIN: 988406398819

Parcel Number: 002358000

Address: 2001 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: MILES CLARK

Block: 0 **Lot(s):** 57 & PT 55

Legal Description:

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

PROJECT DESCRIPTION: REMODEL KITCHEN AND MASTER BATH, GOING FROM FIBERGLASS TO TILE SHOWER, NEW FLOORING, RECESSED LIGHTING, FLOORING, AND APPLIANCES



PAID

Paypal 9/2/22

g/n

BJ2022-215

PROJECT NAME: ANNIE OBX KITCHEN AND BATH REMODEL
SITE ADDRESS: 2001 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/01/2022

EXPIRES: 02/28/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	130000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

SEP - 1 2022

Planning and Inspection Department

BJ2022-212

PROJECT NAME: BODET REMODEL, AND STRUCTURAL REPAIR
SITE ADDRESS: 1502 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/31/2022

EXPIRES: 02/27/2023

APPLICANT: BODET, PAUL
2756 WATER VISTA WAY
SANDY, UT 84093
801-618-8766

OWNER: BODET, PAUL
2756 WATER VISTA WAY
SANDY, UT 84093
801-618-8766

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988411557386

Parcel Number: 002837000

Address: 1502 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:

Block: D

Lot(s): 19 & PT 18

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Renovation/Remodel/Relocate	\$627.41	\$0.00	Remodel/Renovation 1394 SQFT
Totals :	\$627.41	\$0.00	

PROJECT DESCRIPTION: FULL INTERIOR REMODEL, INCLUDING STRUCTURAL BEAMS, WALL FRAMING, INSULATION, AND DRYWALL. EXTERIOR WALL FRAMING. DECKS AND STORAGE ROOM PERMITTED ON PREVIOUS PERMIT.

BJ2022-212**PROJECT NAME:** BODET REMODEL, AND STRUCTURAL REPAIR
SITE ADDRESS: 1502 VA DARE TRL N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 08/31/2022**EXPIRES:** 02/27/2023**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	55000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required to ensure compliance with Certificate of Appropriateness.
- * Structure not to be offered for rent or sale for 365 day from date of C.C.
- * All exterior work to maintain same finishes consistent with that of historic designation.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Storage room replacement approved per BJ2022-170.



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2022-214

PROJECT NAME:

SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/31/2022

EXPIRES: 02/27/2023

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

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

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

License: 32637
Expires: 01/01/2023

PARCEL:

PIN: 988405281256

Parcel Number: 002238128

Address: 406 PETER LN KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES SEC 2

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

Legal Description:

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

PROJECT DESCRIPTION: Enlarge living space on second floor, no changes to bedroom count or building footprint

AUG 31 2022

BJ2022-214**PROJECT NAME:****SITE ADDRESS:** 406 PETER LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 08/31/2022**EXPIRES:** 02/27/2023

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

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



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2022-064

PROJECT NAME: Jeremiah Stewart
SITE ADDRESS: 903 Swan Street KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 08/31/2022

EXPIRES: 02/27/2023

APPLICANT: STEWART, JEREMIAH
903 SWAN ST
Kill Devil Hills, NC 27948
252-305-1922

OWNER: STEWART, JEREMIAH
903 SWAN ST
Kill Devil Hills, NC 27948
252-305-1922

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

410-852-6582

PARCEL:

PIN: 988312776265

Parcel Number:

Address: 903 Swan Street KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 9, Block 27, Kill Devil Hill Realty Corp. S/D

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

PROJECT DESCRIPTION: Add to fence

PAID

SEP 28 2022

TOWN OF
KILL DEVIL HILLS

~~SEP 26 2022~~

ZP2022-064

PROJECT NAME: Jeremiah Stewart
SITE ADDRESS: 903 Swan Street KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 08/31/2022

EXPIRES: 02/27/2023

DETAILS

Permit Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	500.00
SURVEYOR NAME AND NUMBER	Seaboard
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* String line inspection required before installing the fence.

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

Issued By: *Donna Elliott*

Contractor or Authorized Agent: *[Signature]* Date: *9-26*



Town of Kill Devil Hills

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

SEP 27 2022

Planning and Inspection Department

ZP2022-073

PROJECT NAME: Sheren Fence
SITE ADDRESS: 1011 LISA CT KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

APPLICANT: Sheren, Benjamin
1011 Lisa Court
Kill Devil Hills, NC 27948

OWNER: Sheren, Benjamin
1011 Lisa Court
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988405075545

Parcel Number: 002181000

Address: 1011 LISA CT KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:
Block: 0 **Lot(s):** 85

Legal Description:

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

PROJECT DESCRIPTION: fence around rear and side yards

ZP2022-073

PROJECT NAME: Sheren Fence
SITE ADDRESS: 1011 LISA CT KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
PURPOSE	Residential Accessory
CONSTRUCTION COST	3500.00
LOT COVERAGE	27.80
SURVEYOR NAME AND NUMBER	Carlos Gomez
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 9/27/22



Town of Kill Devil Hills

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

PAID

SEP 23 2022

Planning and Inspection Department

ZP2022-071

PROJECT NAME: Edward Lenz
SITE ADDRESS: 2000 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

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

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

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988406395700

Parcel Number: 002359000

Address: 2000 VA DARE TRL N KILL DEVIL HILLS

Addition: MILES CLARK

Zoning:
Block: 0 **Lot(s):** 58

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2022-071

PROJECT NAME: Edward Lenz
SITE ADDRESS: 2000 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	200.00
SURVEYOR NAME AND NUMBER	Styons
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* Call for a string line inspection before installing the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: E.R. King

Date: 9-23-22



Town of Kill Devil Hills

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

PAID

SEP 16 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2022-070

PROJECT NAME: Thomas Newton
SITE ADDRESS: 414 HELGA ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/16/2022

EXPIRES: 03/15/2023

APPLICANT: NEWTON, THOMAS MICHAEL
414 W Helga St
Kill Devil Hills, NC 27948
757-630-5133

OWNER: NEWTON, THOMAS MICHAEL
414 W Helga St
Kill Devil Hills, NC 27948
757-630-5133

CONTRACTOR: Albemarle Fence Co.
PO Box 2023
ELIZABETH CITY, NC 27909
252-334-9671

UNLICENSED BUILDER: Albemarle Fence Co.
PO Box 2023
ELIZABETH CITY, NC 27909
252-334-9671

License: 0000000000
Expires: 12/31/2025

PARCEL:

PIN: 987516834333

Parcel Number: 000271000

Address: 414 HELGA ST W KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:
Block: 0 **Lot(s):** 186

Legal Description:

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

PROJECT DESCRIPTION: Replace fence within existing footprint

ZP2022-070

PROJECT NAME: Thomas Newton
SITE ADDRESS: 414 HELGA ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/16/2022

EXPIRES: 03/15/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	14436.00
SURVEYOR NAME AND NUMBER	William Jones
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

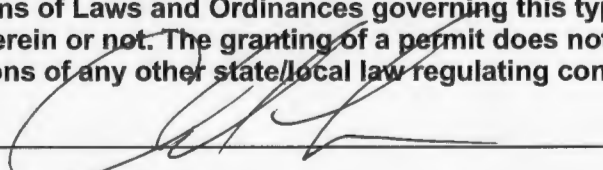
Stringline
Final

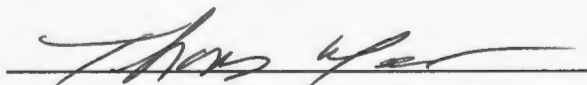
Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Call for a stringline inspection before installing your fence.

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 9/16/22



Town of Kill Devil Hills

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

PAID

SEP 13 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

ZP2022-069

PROJECT NAME: Ocean Atlantic Event Rentals
SITE ADDRESS: 1213 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

APPLICANT: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

OWNER: 1213 SVDT LLC
PO Box 90
Kill Devil Hills, NC 27948

CONTRACTOR: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

License: LEGACY UNKNOWN
Expires: 12/31/2022

PARCEL:

PIN: 989305073521

Parcel Number: 004276000

Address: 1213 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 5

Lot(s): 8 & PT 7

Legal Description:

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

PROJECT DESCRIPTION: Tent for wedding



PAID
9/13/22
paypal

ZP2022-069

PROJECT NAME: Ocean Atlantic Event Rentals
SITE ADDRESS: 1213 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

DETAILS

Permit

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

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* Call Fire Marshal for an inspection once tent is erected.

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

Issued By: Donna Elliot

Contractor or Authorized Agent: Samantha Blackwell **Date:** 09 / 13 / 2022



Town of Kill Devil Hills

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

SEP 13 2022

Planning and Inspection Department

ZP2022-067

PROJECT NAME: Gimbel Fence
SITE ADDRESS: 410 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

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

OWNER: Gimbel, Bonnie
3279 Ridgeview Rd
REVA, VA 22735

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

License: 26166
Expires: 01/01/2023

PARCEL:

PIN: 988410256261

Parcel Number: 009152207

Address: 410 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 207

Legal Description:

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

PROJECT DESCRIPTION: Fence around side and rear yards connecting to house

ZP2022-067

PROJECT NAME: Gimbel Fence
SITE ADDRESS: 410 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	10000.00
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

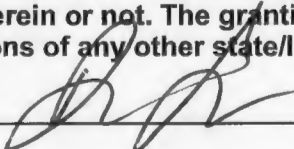
Stringline


Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 9/13/22



Town of Kill Devil Hills

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

PAID
SEP 13 2022
TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

ZP2022-068

PROJECT NAME: Barry Fence
SITE ADDRESS: 1102 CLAM SHELL DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

APPLICANT: BARRY, HOLLIANN
1102 Clam Shell Drive
Kill Devil Hills, NC 27948

OWNER: BARRY, HOLLIANN
1102 Clam Shell Drive
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988409064865

Parcel Number: 002556006

Address: 1102 CLAM SHELL DR KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES INC SEC 1

Block: 23 **Lot(s):** 6

Legal Description:

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

PROJECT DESCRIPTION: fence around rear and side yard

ZP2022-068

PROJECT NAME: Barry Fence
SITE ADDRESS: 1102 CLAM SHELL DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	8000.00
LOT COVERAGE	32.40
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 09/13/22



Town of Kill Devil Hills

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

PAID

SEP - 7 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2022-065

PROJECT NAME: Ocean Atlantic Rentals
SITE ADDRESS: 1213 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

APPLICANT: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

OWNER: 1213 SVDT LLC
PO Box 90
Kill Devil Hills, NC 27948

CONTRACTOR: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

License: LEGACY UNKNOWN
Expires: 12/31/2022

PARCEL:

PIN: 989305073521

Parcel Number: 004276000

Address: 1213 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 5 **Lot(s):** 8 & PT 7

Legal Description:

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

PROJECT DESCRIPTION: Tent for wedding

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
CULVERT	N
DRIVEWAY INVERT 2	N



PAID

8/7/22 Due
Paypal

ZP2022-065

PROJECT NAME: Ocean Atlantic Rentals
SITE ADDRESS: 1213 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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Issued By: Donna Elliot

Contractor or Authorized Agent: Samantha Blackwell **Date:** 09 / 07 / 2022



Town of Kill Devil Hills

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

PAID

SEP - 7 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

ZP2022-066

PROJECT NAME: Ocean Atlantic Rentals
SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

APPLICANT: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

OWNER: Kies, Kenneth & Kathleen
6109 RD
MCLEAN, VA 22101

CONTRACTOR: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

License: LEGACY UNKNOWN
Expires: 12/31/2022

PARCEL:

PIN: 988308990919

Parcel Number: 004232000

Address: 503 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Tent for wedding

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
CULVERT	N
DRIVEWAY INVERT 2	N



PAID

8/7/22 dk

paypal

ZP2022-066

PROJECT NAME: Ocean Atlantic Rentals
SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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Issued By: Donna Elliot

Contractor or Authorized Agent: Samantha Blackwell Date: 09 / 07 / 2022



Town of Kill Devil Hills

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

SEP 27 2022

Planning and Inspection Department

ZP2022-072

PROJECT NAME: Water Oak New Fence
SITE ADDRESS: 600 HARMONY LN Kill Devil Hills

ZONING PERMIT

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

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

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

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988413223951

**Parcel
Number:**

Address: 600 HARMONY LN Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 22, Water Oak Residential Community

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

PROJECT DESCRIPTION: Fence around side and rear yards connecting to house

*# Cost
\$7,500.00*

ZP2022-072

PROJECT NAME: Water Oak New Fence
SITE ADDRESS: 600 HARMONY LN Kill Devil Hills

ZONING PERMIT

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

DETAILS

Permit

Name	Value
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
LOT COVERAGE	30.80
SURVEYOR NAME AND NUMBER	Mike Robinson
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: Graceba Murch

Date: 9.27.22



Town of Kill Devil Hills

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

SEP 29 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2022-228

PROJECT NAME: Drake Piling Replacement
SITE ADDRESS: 206 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

APPLICANT: BARRETT & HABER, LLC Emanuelson & Dad
PO BOX 448
nags head, nc 27959
252-261-2212

OWNER: JAMES DRAKE
1205 Mill Ln. Quarter
Suffolk, VA 23434

RESIDENTIAL - LIMITED: BARRETT & HABER, LLC Emanuelson & Dad
PO BOX 448
nags head, nc 27959
252-261-2212

License: 87233
Expires: 02/22/2023

PARCEL:

PIN: 988517103674

Parcel Number: 003087000

Address: 206 SPORTSMAN DR W KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH

Block: 0 **Lot(s):** 143

Legal Description:

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

PROJECT DESCRIPTION: replace 2 8x8x16 pilings

PAID
9/29/22
pay pap

BP2022-228

PROJECT NAME: Drake Piling Replacement
SITE ADDRESS: 206 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Lorelei Lumbrunnen **Date:** 09 / 28 / 2022



Town of Kill Devil Hills

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

PAID

SEP 27 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-225

PROJECT NAME: Bobby Vick
SITE ADDRESS: 1619B PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

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

OWNER: Bobby Vick
P.O. Box 663
Franklin, VA 23851

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

License: Unlicensed
Expires: 01/26/2029

PARCEL:

PIN: 988410465579

Parcel Number: 003102000

Address: 1619B PRINCESS ANNE DR KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

Block: 1 **Lot(s):** PT 17 & Part 18

Legal Description:

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

PROJECT DESCRIPTION: Replace front and rear decks, handrails, steps, pilings within existing footprint

BP2022-225

PROJECT NAME: Bobby Vick

SITE ADDRESS: 1619B PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S22-9542
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18975.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Coastal Engineering
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

SEP 26 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-226

PROJECT NAME: WHIDDON WINDOWS, SIDING, DOORS
SITE ADDRESS: 107 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

APPLICANT: Whiddon, Christen and Paul
115 E ST CLAIR ST
Kill Devil Hills, NC 27948
757-676-4029

OWNER: BRYANT, W MIKE
943 FOREST LAKE CIRCLE
CHESAPEAKE, VA 23320

UNLICENSED BUILDER: Tightline Property Maintenance, LLC
PO BOX 351
Harbinger, NC 27941
252-562-4879

License: 000
Expires:

PARCEL:

PIN: 988420709945 **Parcel Number:** 003768000

Address: 107 MEMORIAL BLVD N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED **Zoning:**
Block: 27 **Lot(s):** 5

Legal Description:

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

PROJECT DESCRIPTION: REPLACE WINDOWS, SIDING, AND DOORS

BP2022-226PROJECT NAME: WHIDDON WINDOWS, SIDING, DOORS
SITE ADDRESS: 107 MEMORIAL BLVD N KILL DEVIL HILLS**BUILDING**

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	25000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2022-224

PROJECT NAME: Beckstoffer Remodel
SITE ADDRESS: 113 FERRIS AVE KILL DEVIL HILLS

BUILDING

ISSUED: 09/22/2022

EXPIRES: 03/21/2023

APPLICANT: Dan Osman
P. O. Box 7403
Kill Devil Hills, NC 27948
202-4599

OWNER: BECKSTOFFER, WILLIAM H II
6 BRANDON ROAD
NEWPORT NEWS, VA 23601

GENERAL BUILDING: Dan Osman
P. O. Box 7403
Kill Devil Hills, NC 27948
252-202-4599

License: 76259
Expires: 01/01/2023

PARCEL:

PIN: 988419628317

Parcel Number: 003990000

Address: 113 FERRIS AVE KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 44 **Lot(s):** 19

Legal Description:

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

PROJECT DESCRIPTION: replace siding, replace windows, deck boards, handrails and stairs to same footprint

PAID

SEP 23 2022

TOWN OF
KILL DEVIL HILLS

BP2022-224**PROJECT NAME:** Beckstoffer Remodel
SITE ADDRESS: 113 FERRIS AVE KILL DEVIL HILLS**BUILDING****ISSUED:** 09/22/2022**EXPIRES:** 03/21/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	70000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2022-222

PROJECT NAME: Payne Siding Replacement
SITE ADDRESS: 1101 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/20/2022

EXPIRES: 03/19/2023

APPLICANT: COASTAL ROOFING & SIDING
8181 Caratoke Hwy.
Unit A
Powels Point, NC 27966
252-480-0515

OWNER: Payne, Michael & Alexis
5651 GOSLING DR
CLIFTON, VA 20124

GENERAL: COASTAL ROOFING & SIDING
8181 Caratoke Hwy.
Unit A
Powels Point, NC 27966
252-480-0515

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988409076190

Parcel Number: 002265000

Address: 1101 FOURTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

Zoning:
Block: 0 **Lot(s):** 37

Legal Description:

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

PROJECT DESCRIPTION: replace siding

PAID
SEP 22 2022

BP2022-222

PROJECT NAME: Payne Siding Replacement
SITE ADDRESS: 1101 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/20/2022

EXPIRES: 03/19/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	29995.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 9/22/22



Town of Kill Devil Hills

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

PAID
9
SEP 18 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-220

PROJECT NAME: Giuliani Roof over existing deck
SITE ADDRESS: 309 WALLACE ST KILL DEVIL HILLS

BUILDING

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

APPLICANT: GIULIANI, MARK
309 WALLACE ST
Kill Devil Hills, NC 27948
252-256-3554

OWNER: GIULIANI, MARK
309 WALLACE ST
Kill Devil Hills, NC 27948
252-256-3554

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 987516932726

Parcel Number: 000255000

Address: 309 WALLACE ST KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:

Block: 0 **Lot(s):** 167

Legal Description:

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

Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: remove existing sun deck, add new roof over existing front porch

BP2022-220

PROJECT NAME: Giuliani Roof over existing deck
SITE ADDRESS: 309 WALLACE ST KILL DEVIL HILLS

BUILDING**ISSUED:** 09/19/2022**EXPIRES:** 03/18/2023**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
LOT COVERAGE	33.10
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

SEP 16 2022

BP2022-214

PROJECT NAME: Barbie decking, railings, stair replacement
SITE ADDRESS: 305 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

APPLICANT: Mark Edwards
1400 Harrington Ave.
Kill Devil Hills, NC 27948
252-996-0099

OWNER: JAMES & DIANE BARBIE
1806 Riggers Station Dr.
COLONIAL HEIGHTS, VA 23834

BUILDING: Mark Edwards
1400 Harrington Ave.
Kill Devil Hills, NC 27948
252-996-0099

License: 1234567
Expires: 01/01/2023

PARCEL:

PIN: 988405284074

Parcel Number: 007720000

Address: 305 FOURTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

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

Legal Description:

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

PROJECT DESCRIPTION: replace existing stairs, decking, and railings to same footprint

BP2022-214

PROJECT NAME: Barbie decking, railings, stair replacement
SITE ADDRESS: 305 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
LOT COVERAGE	39.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	C Robert Moore L4184
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2022-219

PROJECT NAME: SOUTHERN BANK ADA RAMP
SITE ADDRESS: 202 Croatan HWY S. KILL DEVIL HILLS

BUILDING

ISSUED: 09/16/2022

EXPIRES: 03/15/2023

APPLICANT: SOUTHERN BANK AND TRUST
P O BOX 729
MOUNT OLIVE, NC 28365

OWNER: SOUTHERN BANK AND TRUST
P O BOX 729
MOUNT OLIVE, NC 28365

UNLICENSED BUILDER: ALM Concrete, LLC
PO Box 205
kitty hawk, nc 27949

License: 1234
Expires: 04/30/2023

PARCEL:

PIN: 988307794829

Parcel Number: 029822000

Address: 202 Croatan HWY S. KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 64

Lot(s): PT 3&4-6,15-17& PT1

Legal Description:

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

PROJECT DESCRIPTION: REPLACE ADA CURB RAMP IN FRONT OF BUILDING

SEP 16 2022

BP2022-219

PROJECT NAME: SOUTHERN BANK ADA RAMP
SITE ADDRESS: 202 Croatan HWY S. KILL DEVIL HILLS

BUILDING

ISSUED: 09/16/2022

EXPIRES: 03/15/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Zoning Final

Final

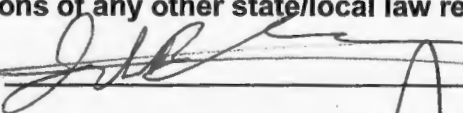
CONDITIONS

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

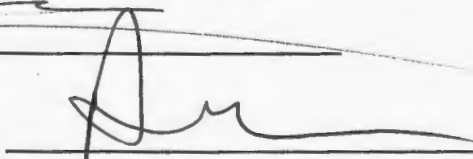
* Shall comply with ADA requirements.

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

Issued By:



Contractor or Authorized Agent:



Date:

9/16/22



Town of Kill Devil Hills

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

PAID

SEP 15 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-218

PROJECT NAME: Charlotte Williams
SITE ADDRESS: 213 AYCOCK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 09/14/2022

EXPIRES: 03/13/2023

APPLICANT: Adrian Pitts
801 Indian Dr
Kill Devil Hills, NC 27948

OWNER: Williams, Charlotte
7523 Foxview Dr.
WARRENTON, VA 20186
252-455-4692

GENERAL BUILDING, LIMITED: Pitts, Adrian/ADP Swimming Pools & Construction
801 Indian DR
Kill Devil Hills, NC 27948
305-8088
License: 53785
Expires:

PARCEL:

PIN: 988517210920

Parcel Number: 000357000

Address: 213 AYCOCK ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 3 **Lot(s):** 9-10

Legal Description:

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

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

BP2022-218

PROJECT NAME: Charlotte Williams
SITE ADDRESS: 213 AYCOCK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 09/14/2022

EXPIRES: 03/13/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10375.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Coastal Engineering
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

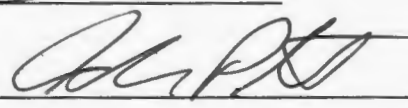
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9-15-22



Town of Kill Devil Hills

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

PAID

SEP 13 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-217

PROJECT NAME: Hensley Rebuild/Reconstruct (2) Decks
SITE ADDRESS: 3129 SEAGATE CT KILL DEVIL HILLS

BUILDING

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

APPLICANT: HENSLEY, MIKE
2812 North Lake Dr
RICHMOND, VA 23233

OWNER: HENSLEY, MIKE
2812 North Lake Dr
RICHMOND, VA 23233

UNLICENSED - REMODELING: Marshall, Darrell
201 Sea Village LN
Kill Devil Hills, NC 27948
252-256-3652

License: 00000
Expires:

PARCEL:

PIN: 988513039905

Parcel Number: 000970000

Address: 3129 SEAGATE CT KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 17

Legal Description:

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

PROJECT DESCRIPTION: Rebuild/Reconstruct east and west decks and stairs/landings

BP2022-217**PROJECT NAME:** Hensley Rebuild/Reconstruct (2) Decks
SITE ADDRESS: 3129 SEAGATE CT KILL DEVIL HILLS**BUILDING****ISSUED:** 09/13/2022**EXPIRES:** 03/12/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13000.00
LOT COVERAGE	39.10
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	M. Douglas Styons L- 3227
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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

PAID

SEP 12 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-215

PROJECT NAME: Bonzer Shack Sun Shades
SITE ADDRESS: 1200 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

APPLICANT: John Kirchmier
1200 S. Va. Dare Tr.
Kill Devil Hills, NC 27948
202-1049

OWNER: John Kirchmier
1200 S. Va. Dare Tr.
Kill Devil Hills, NC 27948
202-1049

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988308978589

Parcel Number: 004278000

Address: 1200 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 6 **Lot(s):** 1-3

Legal Description:

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

PROJECT DESCRIPTION: install 3 sail shades to outdoor dining area, attached to new pilings

BP2022-215

PROJECT NAME: Bonzer Shack Sun Shades
SITE ADDRESS: 1200 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
LOT COVERAGE	63.00
SURVEYOR NAME AND NUMBER	Mike Osteen

REQUIRED INSPECTIONS

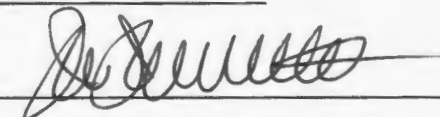
Slab/Foundation/Piling	Final
Zoning Final	

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9-12-22



Town of Kill Devil Hills

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

PAID
SEP - 6 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-213	PAID WITH CASH	BUILDING
PROJECT NAME: Kidwell Deck and Stair Replacement		ISSUED: 09/06/2022
SITE ADDRESS: 307 ST LOUIS ST KILL DEVIL HILLS		EXPIRES: 03/05/2023

APPLICANT: ANDREW KIDWELL III 2504 Hanover Ave. Richmond, VA 00000 804-339-6266	OWNER: ANDREW KIDWELL III 2504 Hanover Ave. Richmond, VA 00000 804-339-6266
---	---

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

PIN: 987516940382	Parcel Number: 000187082
Address: 307 ST LOUIS ST KILL DEVIL HILLS	
Addition: ORVILLE BEACH WEST	Zoning:
Legal Description:	Block: 0 Lot(s): 82

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

PROJECT DESCRIPTION: removal of rear deck, rear stairs to remain, repair front stair stringers and treads

BP2022-213**PROJECT NAME:** Kidwell Deck and Stair Replacement**SITE ADDRESS:** 307 ST LOUIS ST KILL DEVIL HILLS**BUILDING****ISSUED:** 09/06/2022**EXPIRES:** 03/05/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S22-12910
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
LOT COVERAGE	30.00
SURVEYOR NAME AND NUMBER	Robert Rogers

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

PAID

SEP - 7 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2022-212	BUILDING
PROJECT NAME: Howell Deck and Stair Replacement	ISSUED: 09/06/2022
SITE ADDRESS: 3106 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 03/05/2023

APPLICANT: Simple Side Construction 308 W. Helga St. Kill Devil Hills, NC 27948 252-564-8307	OWNER: HOWELL, WILLIAM L 12 CRESCENT CT MILTON, DE 19968-8507
--	--

BUILDING LIMITED: Simple Side Construction 308 W. Helga St. Kill Devil Hills, NC 27948 252-564-8307	License: 78583 Expires:
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PARCEL:

PIN: 988513132697	Parcel Number: 003044000
Address: 3106 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 32
Legal Description:	

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

PROJECT DESCRIPTION: replace decking, railing, stairs on top and middle decks, no change to footprint

BP2022-212

PROJECT NAME: Howell Deck and Stair Replacement
SITE ADDRESS: 3106 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	50000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	F Richard Quible
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

PAID

SEP - 2 2022

Planning and Inspection Department

BP2022-211

PROJECT NAME: Grant Deck demolition and rebuild
SITE ADDRESS: 1108 FIFTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/02/2022

EXPIRES: 03/01/2023

APPLICANT: Grant, Harper
1108 W. Fifth Street
Kill Devil Hills, NC 27948
252-423-1084

OWNER: Grant, Harper
1108 W. Fifth Street
Kill Devil Hills, NC 27948
252-423-1084

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988405070688

Parcel Number: 009134000

Address: 1108 FIFTH ST W KILL DEVIL HILLS

Zoning: RL

Addition: WRIGHT'S SHORES

Block: 0 **Lot(s):** 51

Legal Description:

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

PROJECT DESCRIPTION: rebuild existing front deck to same footprint, previous permit BP2022-187 canceled was to rebuild same deck

BP2022-211

PROJECT NAME: Grant Deck demolition and rebuild
SITE ADDRESS: 1108 FIFTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/02/2022

EXPIRES: 03/01/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	25000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William T Robbins
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

SEP - 2 2022

Planning and Inspection Department

DM2022-008

PROJECT NAME: Tumolo Demolition
SITE ADDRESS: 2038 SMITHFIELD ST KILL DEVIL HILLS

DEMOLITION

ISSUED: 09/02/2022

EXPIRES: 03/01/2023

APPLICANT: TUMOLO, RON
3916 Ivy Lane
kitty hawk, nc 27949

OWNER: TUMOLO, RON
3916 Ivy Lane
kitty hawk, nc 27949

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

License: Unlicensed
Expires: 12/31/2022

PARCEL:

PIN: 988405192617

Parcel Number: 001443000

Address: 2038 SMITHFIELD ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0

Lot(s): 1309, 1311 & 1313

Legal Description:

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

PROJECT DESCRIPTION: demolish existing house and shed and existing driveway

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FLOOD ZONE	X
CONSTRUCTION COST	5000.00

DM2022-008

PROJECT NAME: Tumolo Demolition

SITE ADDRESS: 2038 SMITHFIELD ST KILL DEVIL HILLS

DEMOLITION

ISSUED: 09/02/2022

EXPIRES: 03/01/2023

REQUIRED INSPECTIONS

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Zoning Final Inspection is required.
- * Site shall be completely clear of all development.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

9/2/22



Town of Kill Devil Hills

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

PAID
SEP - 1 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-210	BUILDING
PROJECT NAME: Hollowell Shed	ISSUED: 09/01/2022
SITE ADDRESS: 215 PALMETTO ST E KILL DEVIL HILLS	EXPIRES: 02/28/2023

APPLICANT: Hollowell, ROBIN 215 E Palmetto St Kill Devil Hills, NC 27948	OWNER: Hollowell, ROBIN 215 E Palmetto St Kill Devil Hills, NC 27948
---	---

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

PARCEL:

PIN: 988517212474	Parcel Number: 000341000
Address: 215 PALMETTO ST E KILL DEVIL HILLS	
Addition: VIRGINIA DARE SHORES	Zoning:
Legal Description:	Block: 1 Lot(s): 9-10

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

PROJECT DESCRIPTION: 10'x12' shed behind house

BP2022-210

PROJECT NAME: Hollowell Shed

SITE ADDRESS: 215 PALMETTO ST E KILL DEVIL HILLS

BUILDING

ISSUED: 09/01/2022

EXPIRES: 02/28/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Accessory
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
LOT COVERAGE	43.00
SURVEYOR NAME AND NUMBER	William S Jones L2532

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

* Zoning Final Inspection is required.

* Flood Vents are required to be installed.



Town of Kill Devil Hills

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

PAID

SEP - 1 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2022-208	BUILDING
PROJECT NAME: SMITH DECK PILINGS	ISSUED: 08/29/2022
SITE ADDRESS: 3213 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 02/25/2023

APPLICANT: SMITH, WILLIAM P. O. BOX 83 BARSTOW, MD 20610 410-474-2168	OWNER: SMITH, WILLIAM P. O. BOX 83 BARSTOW, MD 20610 410-474-2168
---	---

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

PARCEL:

PIN: 988513048885	Parcel Number: 000095000
Address: 3213 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH BLK 6	Block: 6 Lot(s): PT 2 & 3
Legal Description:	

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

PROJECT DESCRIPTION: ADD 4 ADDITIONAL PILINGS TO DECK

PAID
RL 9/1/22
Rus Pal

BP2022-208

PROJECT NAME: SMITH DECK PILINGS

SITE ADDRESS: 3213 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 08/29/2022

EXPIRES: 02/25/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1600.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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



Town of Kill Devil Hills

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

PAID

SEP 27 2022

Planning and Inspection Department

TOWN OF

DW2022-013

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

DRIVEWAY

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

APPLICANT: Albemarle Landscapes
PO Box 209
kitty hawk, nc 27949
252-256-1883

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

UNLICENSED BUILDER: Albemarle Landscapes
PO Box 209
kitty hawk, nc 27949
252-256-1883

License: 123456
Expires: 01/01/2023

PARCEL:

PIN: 988316736218

Parcel Number: 004890002

Address: 1502 HEATHER LN KILL DEVIL HILLS

Zoning:

Addition: WHISPERING PINES SEC 2 & 3

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

Legal Description:

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

PROJECT DESCRIPTION: gravel driveway addition, not going into right of way



PAID

9/27/22
pay per

DW2022-013

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

DRIVEWAY

ISSUED: 09/26/2022

EXPIRES: 03/25/2023

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Gloria Rogers
CONSTRUCTION COST	4080.00
FLOOD ZONE	X
LOT COVERAGE	24.16
TOTAL SQUARE FOOTAGE	780

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: *Ryan Lang*

Contractor or Authorized Agent: *Sharon Stevens* **Date:** 09 / 26 / 2022



Town of Kill Devil Hills

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

PAD
SEP 29 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2022-068	OCCUPANCY
PROJECT NAME: Cutbirth Remodel Mixed Use into (6) Bedroom SFD	ISSUED: 09/29/2022
SITE ADDRESS: 1518 MEMORIAL BLVD S KILL DEVIL HILLS	EXPIRES:

PARENT PERMIT #: BJ2022-107

APPLICANT: CUTBIRTH, CANDACE 900 Ninth Avenue Kill Devil Hills, NC 27948	OWNER: CUTBIRTH, CANDACE 900 Ninth Avenue Kill Devil Hills, NC 27948
---	---

GENERAL BUILDING-LIMITED:	J. A. HART GENERAL CONTRACTOR LLC UNKNOWN UNKNOWN, XX 00000	License: 61800 Expires: 01/01/2023
----------------------------------	---	---

PARCEL:

PIN: 989309056359	Parcel Number: 008281000
Address: 1518 MEMORIAL BLVD S KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES INC	Block: 0 Lot(s): 120-122
Legal Description:	

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

PROJECT DESCRIPTION: Remodel existing mixed use (office and 2 bedroom dwelling) into a (6) bedroom single family dwelling

OP2022-068

PROJECT NAME: Cutbirth Remodel Mixed Use into (6) Bedroom SFD
SITE ADDRESS: 1518 MEMORIAL BLVD S KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/29/2022

EXPIRES:

DETAILS

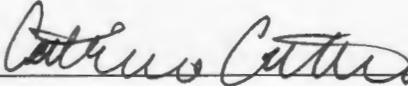
Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9-29-22



Town of Kill Devil Hills

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

SEP 28 2022

Planning and Inspection Department

OP2022-067

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

OCCUPANCY

ISSUED: 09/28/2022

EXPIRES:

PARENT PERMIT #: BJ2021-275

APPLICANT: CARL WORSLEY & ASSOCIATES, INC
PO BOX 188
nags head, nc 27959

OWNER: CARL WORSLEY & ASSOCIATES, INC
PO BOX 188
nags head, nc 27959

GENERAL, UNLIMITED: CARL WORSLEY & ASSOCIATES
PO Box 188
Nags Head, NC 27959
252-423-0445

License: 58569
Expires: 01/01/2023

PARCEL:

PIN: 988414346399

**Parcel
Number:**

Address: 406 CANAL DR Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 165, First Flight Village Sec 1

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

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

OP2022-067

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

OCCUPANCY

ISSUED: 09/28/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 



Town of Kill Devil Hills

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

SEP 28 2022

Planning and Inspection Department

OP2022-066

PROJECT NAME: Simple Side Construction
SITE ADDRESS: 315 WILBUR CT KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/28/2022

EXPIRES:

PARENT PERMIT #: BJ2022-039

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

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

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

License: 78583
Expires:

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

License: 78583
Expires:

PARCEL:

PIN: 988405281524

Parcel Number: 002119000

Address: 315 WILBUR CT KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:
Block: 0 **Lot(s):** 159

Legal Description:

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

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

OP2022-066

PROJECT NAME: Simple Side Construction
SITE ADDRESS: 315 WILBUR CT KILL DEVIL HILLS

OCCUPANCY
ISSUED: 09/28/2022

EXPIRES:

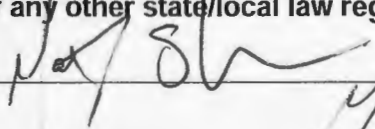
DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9-28-22



Town of Kill Devil Hills

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

PAID
SEP 21 2022
TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

OP2022-064	OCCUPANCY
PROJECT NAME: New 3 Bedroom Single Family Dwelling	ISSUED: 09/19/2022
SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS	EXPIRES:

PARENT PERMIT #: BJ2022-054

APPLICANT: RM SAUNDERS GENERAL CONTRACTORS PO Box 1922 Kill Devil Hills, NC 27948 480-9477	OWNER: ALEXANDRA, LLC 1525 EAST OCEAN ACRES DRIVE KILL DEVIL HILLS, NC 27948
--	---

GENERAL BUILDING - UNLIMITED:	SAUNDERS, R.M. P.O. box 1922 Kill Devil Hills, NC 27948 252-207-8710	License: 32380 Expires: 01/01/2023
--------------------------------------	---	---

PARCEL:

PIN: 989313231995	Parcel Number: 008506000
Address: 2033 VA DARE TRL S KILL DEVIL HILLS	Zoning:
Addition: NAGS HEAD SHORES AMENDED SEC 4	Block: 3 Lot(s): 8
Legal Description:	

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

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling up front on property, replaces fire damaged house that was destroyed by fire

OP2022-064

PROJECT NAME: New 3 Bedroom Single Family Dwelling
SITE ADDRESS: 2033 VA DARE TRL S KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/19/2022

EXPIRES:

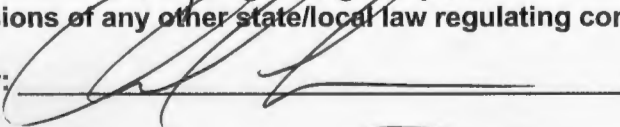
DETAILS

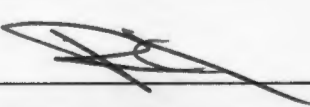
Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9-21-22



Town of Kill Devil Hills

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

PAID

SEP 22 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2022-065

PROJECT NAME: Simple Side Construction
SITE ADDRESS: 1106 FIFTH ST W KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/22/2022

EXPIRES:

PARENT PERMIT #: BJ2022-101

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

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

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

License: 78583
Expires:

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

License: 78583
Expires:

PARCEL:

PIN: 988405071731

Parcel Number: 002156000

Address: 1106 FIFTH ST W KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES

Block: 0 **Lot(s):** 50

Legal Description:

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

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

OP2022-065

PROJECT NAME: Simpleside Construction
SITE ADDRESS: 1106 FIFTH ST W KILL DEVIL HILLS

OCCUPANCY
ISSUED: 09/22/2022

EXPIRES:

DETAILS

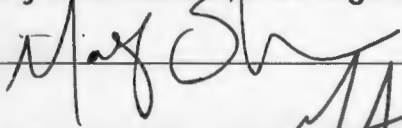
Permit

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

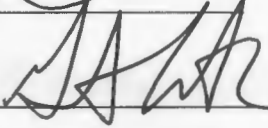
CONDITIONS

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

9-22-22



Town of Kill Devil Hills

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

PAID

SEP 16 2022

Planning and Inspection Department

TOWN OF

OP2022-063

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

OCCUPANCY
ISSUED: 09/16/2022

EXPIRES:

PARENT PERMIT #: BJ2021-266

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

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

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

License: 62306
Expires: 12/31/2022

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

License: 62306
Expires: 12/31/2022

PARCEL:

PIN: 988413223808

Parcel Number:

Address: 602 Harmony Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

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

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

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

OP2022-063

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

OCCUPANCY

ISSUED: 09/16/2022

EXPIRES:

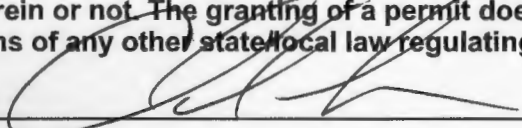
DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: Gracyn Munch Date: 9.16.22



Town of Kill Devil Hills

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

Planning and Inspection Department

OP2022-062

PROJECT NAME: Nick Bakopoulos
SITE ADDRESS: 605 HOLLY ST W KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/06/2022

EXPIRES:

PARENT PERMIT #: BJ2021-257

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

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

CONTRACTOR: HUGHES, RYLAND J SR
15200 MIDLOTHIAN TURNPIKE
MIDLOTHIAN, VA 23113

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

License: 76503
Expires: 01/01/2023

PARCEL:

PIN: 988316844935

Parcel Number: 008232000

Address: 605 HOLLY ST W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

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

Legal Description:

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

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

PAID

SEP - 6 2022

OP2022-062

PROJECT NAME: Nick Bakopoulos
SITE ADDRESS: 605 HOLLY ST W KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/06/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

9-6-22



Town of Kill Devil Hills

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

Planning and Inspection Department

OP2022-060

PROJECT NAME: Jennings New House
SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS

OCCUPANCY
ISSUED: 09/01/2022

EXPIRES:

PARENT PERMIT #: BJ2021-271

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

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

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

License: 32637
Expires: 01/01/2023

PARCEL:

PIN: 988405281256

Parcel Number: 002238128

Address: 406 PETER LN KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

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

Legal Description:

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

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

PAID
SEP - 1 2022

OP2022-060

PROJECT NAME: Jennings New House
SITE ADDRESS: 406 PETER LN KILL DEVIL HILLS

OCCUPANCY

ISSUED: 09/01/2022

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 9-1-22



Town of Kill Devil Hills

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

SEP - 1 2022

Planning and Inspection Department

OP2022-061

OCCUPANCY

PROJECT NAME: Starbucks - CONDITIONAL CERTIFICATE OF OCCUPANCY - VALID UNTIL DECEMBER 1, 2022.

ISSUED: 09/01/2022

SITE ADDRESS: 1208 CROATAN HWY S KILL DEVIL HILLS

EXPIRES:

PARENT PERMIT #: BJ2022-114

APPLICANT: Starbucks Coffee Co
319 Elaines Court
DODGEVILLE, WI 53533

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

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

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

License: 80962
Expires: 01/01/2023

PARCEL:

PIN: 988312961635

Parcel Number: 004331000

Address: 1208 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 7

Lot(s): 11-12 & PT 5
-6

Legal Description:

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

PROJECT DESCRIPTION: CONDITIONAL CERTIFICATE OF OCCUPANCY ONLY. See attached permit conditions.

DETAILS

CONDITIONS

* ADA permeable pavers shall be installed in the handicap spaces as designed by Quible and Associates per the approved site plan. Recertification is required once pavers have been installed.

OP2022-061

PROJECT NAME: Starbucks - CONDITIONAL CERTIFICATE OF
OCCUPANCY - VALID UNTIL DECEMBER 1, 2022.
SITE ADDRESS: 1208 CROATAN HWY S KILL DEVIL HILLS

OCCUPANCY
ISSUED: 09/01/2022

EXPIRES:

- * Stormwater basins shall have permanent stabilization achieved. Once stabilization is complete, contractor shall clean out all structures and pipes at the site to remove sediment build up.
- * Sidewalk truncated domes shall be installed at both ends of sidewalk along driveway from US158.
- * Crosswalk, Stop Bar, and Lettering across driveway from US158 shall be painted with white thermoplastic markings.
- * Speed Bump installed as shown on the approved site plan at rear of parking lot adjacent to drive thru aisle.
- * Construction debris shall be removed from NW Property line.
- * This Conditional Certificate of Occupancy is valid thru December 1, 2022. All required conditions above shall be met to obtain standard C.O.

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

9-1-22



Town of Kill Devil Hills

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

SEP 29 2022

Planning and Inspection Department

MC2022-298

PROJECT NAME: HUDSON HVAC
SITE ADDRESS: 300 CAMERON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/29/2022

EXPIRES: 03/28/2023

APPLICANT: HUDSON, CECIL T
2121 SOUTH MILITARY HWY
CHESAPEAKE, VA 23320

OWNER: HUDSON, CECIL T
2121 SOUTH MILITARY HWY
CHESAPEAKE, VA 23320

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

License: 12643
Expires: 12/31/2022

PARCEL:

PIN: 987516941845

Parcel Number: 000128000

Address: 300 CAMERON ST KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:
Block: 0 **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2022-298

PROJECT NAME: HUDSON HVAC

SITE ADDRESS: 300 CAMERON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/29/2022

EXPIRES: 03/28/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5416.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 9/29/22



Town of Kill Devil Hills

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

SEP 29 2022

Planning and Inspection Department

MC2022-297	MECHANICAL
PROJECT NAME: CHERRY HVAC	ISSUED: 09/29/2022
SITE ADDRESS: 2029 NEWPORT NEWS ST KILL DEVIL HILLS	EXPIRES: 03/28/2023

APPLICANT: CHERRY, EILEEN 13741 BRADLEY BRIDGE RD CHESTERFIELD, VA 23838 804-564-5189	OWNER: CHERRY, EILEEN 13741 BRADLEY BRIDGE RD CHESTERFIELD, VA 23838 804-564-5189
---	---

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

PIN: 988405196685	Parcel Number: 000939000
Address: 2029 NEWPORT NEWS ST KILL DEVIL HILLS	
Addition: AVALON BEACH ANNEX 2 & 3	Zoning:
Legal Description:	Block: 0 Lot(s): 1226

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2022-297

PROJECT NAME: CHERRY HVAC

SITE ADDRESS: 2029 NEWPORT NEWS ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/29/2022

EXPIRES: 03/28/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8466.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

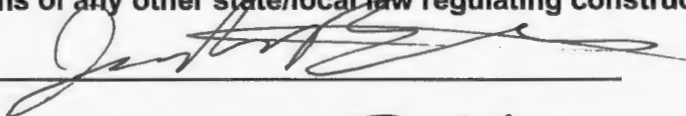
REQUIRED INSPECTIONS

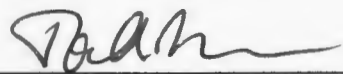
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 9-29-22



Town of Kill Devil Hills

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

SEP 26 2022

Planning and Inspection Department

MC2022-295

PROJECT NAME: Drames HVAC
SITE ADDRESS: 522 Aycock St. W. Kill Devil Hills

MECHANICAL

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

APPLICANT: Drames, Timothy
4061 Manning Rd
Suffolk, Va 23437

OWNER: Drames, Timothy
4061 Manning Rd
Suffolk, Va 23437

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

License: 22222-L
Expires: 08/31/2023

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 987520904684

Parcel Number: 000724031

Address: 522 Aycock St. W. Kill Devil Hills

Zoning:


Addition: VIRGINIA DARE SHORES

Block: 72 **Lot(s):** 31&32

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HAVC system

 **PAID**
9/26/22
paid pap

MC2022-295

PROJECT NAME: Drames HVAC
SITE ADDRESS: 522 Aycock St. W. Kill Devil Hills

MECHANICAL

ISSUED: 09/23/2022

EXPIRES: 03/22/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8469.52
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: PAXTON NEX Date: 09 / 23 / 2022



Town of Kill Devil Hills

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

PAID

SEP 22 2022

Planning and Inspection Department

MC2022-291

PROJECT NAME:

SITE ADDRESS: 1007 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/20/2022

EXPIRES: 03/19/2023

APPLICANT: DFLP 1007, LLC
PO Box 1986
LA PLATA, MD 20646

OWNER: DFLP 1007, LLC
PO Box 1986
LA PLATA, MD 20646

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

License: 15578
Expires: 12/31/2022

PARCEL:

PIN: 988415733245

Parcel Number: 003704001

Address: 1007 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: Air handler change out



PAID

9/22/22 to
paypal

MC2022-291

PROJECT NAME:

SITE ADDRESS: 1007 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/20/2022

EXPIRES: 03/19/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Paul Smith **Date:** 09/21/2022



Town of Kill Devil Hills

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

PAID

SEP 23 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-292	MECHANICAL
PROJECT NAME:	ISSUED: 09/22/2022
SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 03/21/2023

APPLICANT: L & H Enterprises, INC 305 SOUTH VIRGINIA DARE TR Kill Devil Hills, NC 27948	OWNER: L & H Enterprises, INC 305 SOUTH VIRGINIA DARE TR Kill Devil Hills, NC 27948
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MECHANICAL:	AUGUST AIR LLC 40105 Harbor Road Avon, NC 27915	License: 33886 Expires:
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PARCEL:

PIN: 988420806295	Parcel Number: 008112000
Address: 305 VA DARE TRL S KILL DEVIL HILLS	Zoning:
Addition: SUBDIVISION - NONE	Block: 0 Lot(s): PAR 1
Legal Description:	

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

PROJECT DESCRIPTION: Heat Pump change out

PAID
9/23/22
paypal

MC2022-292

PROJECT NAME:

SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/22/2022

EXPIRES: 03/21/2023

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	III
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: James C. Thomas, Jr. **Date:** 09 / 22 / 2022



Town of Kill Devil Hills

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

PAID

SEP 23 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-293

PROJECT NAME:

SITE ADDRESS: 524 Walker St. K D H

MECHANICAL

ISSUED: 09/22/2022

EXPIRES: 03/21/2023

APPLICANT: WILLIAM AND RUTH NAGLE
2232 North Bugle Drive
CHESAPEAKE, VA 23321
757-399-5678

OWNER: WILLIAM AND RUTH NAGLE
2232 North Bugle Drive
CHESAPEAKE, VA 23321
757-399-5678

MECHANICAL, H-2, H-3:

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

License: 34340
Expires: 12/31/2022

PARCEL:

PIN: 987520903847

Parcel Number: 000723001

Address: 524 Walker St. K D H

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 71 **Lot(s):** 31,32 & 33

Legal Description:

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

PROJECT DESCRIPTION: HVAC change out

PAID
9/23/22 me
paypal

MC2022-293

PROJECT NAME:

SITE ADDRESS: 524 Walker St. K D H

MECHANICAL

ISSUED: 09/22/2022

EXPIRES: 03/21/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6100.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Andrew L Buchanan **Date:** 09 / 22 / 2022



Town of Kill Devil Hills

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

PAID

SEP 23 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-294

PROJECT NAME:

SITE ADDRESS: 3148 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/22/2022

EXPIRES: 03/21/2023

APPLICANT: Shaud, Karen
300 Salisbury St.
REHOBOTH BEACH, DE 19971
302-423-3328

OWNER: SHAUD, KAREN
300 SALISBURY ST
REHOBOTH BEACH, DE 19971

MECHANICAL, H-3, I: AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

License: 23577
Expires: 12/31/2022

PARCEL:

PIN: 987516821959

Parcel Number: 000310000

Address: 3148 BAY DR KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 231

Legal Description:

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

PROJECT DESCRIPTION: HVAC change out



PAID

9/23/22
pay pal

MC2022-294

PROJECT NAME:

SITE ADDRESS: 3148 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/22/2022

EXPIRES: 03/21/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	13874.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	5
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Linda Burgess **Date:** 09 / 23 / 2022



Town of Kill Devil Hills

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

PAID

SEP 21 2022

Planning and Inspection Department

MC2022-290	MECHANICAL
PROJECT NAME: THOMPSON HVAC	ISSUED: 09/20/2022
SITE ADDRESS: 1406 HARRINGTON AVE KILL DEVIL HILLS	EXPIRES: 03/19/2023

APPLICANT: THOMPSON, JOSEPH C/O ANNE WOOD 1406 HARRINGTON AVE Kill Devil Hills, NC 27948 252-202-3378	OWNER: THOMPSON, JOSEPH C/O ANNE WOOD 1406 HARRINGTON AVE Kill Devil Hills, NC 27948 252-202-3378
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H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2022
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PARCEL:

PIN: 988316849550	Parcel Number: 027003000
Address: 1406 HARRINGTON AVE KILL DEVIL HILLS	Zoning:
Addition: WHISPERING PINES SEC 2 & 3	Block: E Lot(s): 1
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2022-290

PROJECT NAME: THOMPSON HVAC

SITE ADDRESS: 1406 HARRINGTON AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/20/2022

EXPIRES: 03/19/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5377.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

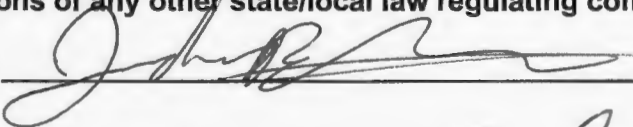
REQUIRED INSPECTIONS

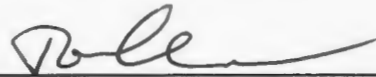
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 9.21.22



Town of Kill Devil Hills

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

PAID

SEP 19 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-287

PROJECT NAME:

SITE ADDRESS: 107 DURHAM ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/16/2022

EXPIRES: 03/15/2023

APPLICANT: Pefley, David & Takako
16371 Prince Frederick RD
Hughesville, NC 20637

OWNER: Pefley, David & Takako
16371 Prince Frederick RD
Hughesville, NC 20637

PARCEL:

PIN: 988406299441

Parcel Number: 001920000

Address: 107 DURHAM ST E KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:
Block: 0 **Lot(s):** 478

Legal Description:

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

PROJECT DESCRIPTION: HVAC change out

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9003.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

MC2022-287

PROJECT NAME:

SITE ADDRESS: 107 DURHAM ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/16/2022

EXPIRES: 03/15/2023

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

SEP 20 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-288

PROJECT NAME: Lubin HVAC
SITE ADDRESS: 330 CANAL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

APPLICANT: Robert Lubin
159 Whisper Wood Dr.
Dingman's Ferry, PA 18328

OWNER: Robert Lubin
159 Whisper Wood Dr.
Dingman's Ferry, PA 18328

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

License: 22222-L
Expires: 08/31/2023

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 988414348679

Parcel Number: 003424000

Address: 330 CANAL DR KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 1

Block: 0 **Lot(s):** 170

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
12/9/20/22
Pgs Pal

MC2022-288

PROJECT NAME: Lubin HVAC
SITE ADDRESS: 330 CANAL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7705.42
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Paxton Nix Date: 09 / 19 / 2022



Town of Kill Devil Hills

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

PAID

SEP 19 2022

Planning and Inspection Department

MC2022-289

PROJECT NAME:

SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

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

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

H3, CLASS 1:

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

License: 12643
Expires: 12/31/2022

PARCEL:

PIN: 988308886310

Parcel Number: 008529000

Address: 907 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 3

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC change out

MC2022-289

PROJECT NAME:

SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	8865.00
CONSTRUCTION TYPE	III
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

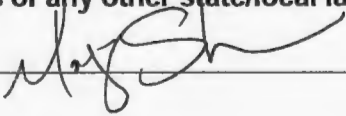
Final

CONDITIONS

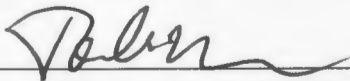
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

9-19-22



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2022-286

PROJECT NAME: Cook HVAC
SITE ADDRESS: 1107 SEVENTH AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/15/2022

EXPIRES: 03/14/2023

APPLICANT: Cook, James
1107 Seventh Ave
Kill Devil Hills, NC 27948

OWNER: Cook, James
1107 Seventh Ave
Kill Devil Hills, NC 27948

MECHANICAL H-3, CLASS 1: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

License: 35327
Expires: 12/31/2022

PARCEL:

PIN: 988312757702

Parcel Number: 004525000

Address: 1107 SEVENTH AVE KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 41 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: C/O 3 Ton H/P system

PAID
By g/j/g/m
Check # 11105

MC2022-286

PROJECT NAME: Cook HVAC

SITE ADDRESS: 1107 SEVENTH AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/15/2022

EXPIRES: 03/14/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

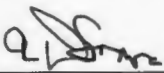
Final

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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 09 / 16 / 2022



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2022-283	MECHANICAL
PROJECT NAME: Odom HVAC	ISSUED: 09/14/2022
SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 03/13/2023

APPLICANT: Odom, Daniel
29309 Victoria Way
PETERSBURG, VA 23805

OWNER: Odom, Daniel
29309 Victoria Way
PETERSBURG, VA 23805

MECHANICAL H-3, CLASS 1: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

License: 35327
Expires: 12/31/2022

PARCEL:

PIN: 98841157138107

Parcel Number: 028090000

Address: 1701 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: C

Lot(s): UNIT 3A LT
17-19

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton air handler only



PAID
9/19/22
@ check # 11106

MC2022-283

PROJECT NAME: Odom HVAC

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/14/2022

EXPIRES: 03/13/2023

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

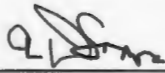
Final

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Issued By: Charles Thuman

Contractor or Authorized Agent:  **Date:** 09 / 15 / 2022



Town of Kill Devil Hills

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

PAID

SEP 16 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-285

PROJECT NAME: Williams HVAC
SITE ADDRESS: 1102 Cambridge Rd 302-G Kill Devil Hills

MECHANICAL

ISSUED: 09/15/2022

EXPIRES: 03/14/2023

APPLICANT: Williams, Sam
3100 Shore Dr Apt 851
VIRGINIA BEACH, VA 23451

OWNER: Williams, Sam
3100 Shore Dr Apt 851
VIRGINIA BEACH, VA 23451

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

License: 22222-L
Expires: 08/31/2023

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 98830648123815

**Parcel
Number:**

Address: 1102 Cambridge Rd 302-G Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot: Unit 302-g Blk: Sec:

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

PROJECT DESCRIPTION: C/O 3 Ton H/P system



PAID
MC 9/14/22
By Pcl

MC2022-285

PROJECT NAME: Williams HVAC

SITE ADDRESS: 1102 Cambridge Rd 302-G Kill Devil Hills

MECHANICAL

ISSUED: 09/15/2022

EXPIRES: 03/14/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8006.73
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: Paxton Nix **Date:** 09 / 16 / 2022



Town of Kill Devil Hills

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

PAID

SEP 16 2022

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2022-284	MECHANICAL
PROJECT NAME: Childress HVAC	ISSUED: 09/15/2022
SITE ADDRESS: 2040 HIGHVIEW ST KILL DEVIL HILLS	EXPIRES: 03/14/2023

APPLICANT: Childress, Carol P. O. Box 84 NEW CANTON, VA 23123	OWNER: Childress, Carol P. O. Box 84 NEW CANTON, VA 23123
--	--

ELECTRICAL - LIMITED:	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	License: 22222-L Expires: 08/31/2023
MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	License: 13056 Expires: 12/31/2022

PARCEL:

PIN: 988405095334	Parcel Number: 001517000
Address: 2040 HIGHVIEW ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 1401
Legal Description:	

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

PROJECT DESCRIPTION: Install 2ton heat pump system with duct work

PAID
M 9/16/22
Pg Ba

MC2022-284

PROJECT NAME: Childress HVAC
SITE ADDRESS: 2040 HIGHVIEW ST KILL DEVIL HILLS

MECHANICAL
ISSUED: 09/15/2022
EXPIRES: 03/14/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	13524.17
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: Paxton Nix Date: 09 / 16 / 2022



Town of Kill Devil Hills

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

PAID

SEP 15 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-282	MECHANICAL
PROJECT NAME:	ISSUED: 09/14/2022
SITE ADDRESS: 801 EIGHTH AVE KILL DEVIL HILLS	EXPIRES: 03/13/2023

APPLICANT: Masterson, Thomas
2824 Woodmark CT
RICHMOND, VA 23233

OWNER: Masterson, Thomas
2824 Woodmark CT
RICHMOND, VA 23233

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

PARCEL:

PIN: 988311666993 **Parcel Number:** 030497001
Address: 801 EIGHTH AVE KILL DEVIL HILLS
Addition: KILL DEVIL HILLS RLTY CORP ADD **Zoning:**
Block: 44 **Lot(s):** 10
Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2022-282

PROJECT NAME:

SITE ADDRESS: 801 EIGHTH AVE KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/14/2022

EXPIRES: 03/13/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7720.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 9-15-22



Town of Kill Devil Hills

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

SEP 15 2022

Planning and Inspection Department

MC2022-281

PROJECT NAME: Brody HVAC
SITE ADDRESS: 1721 APACHE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

APPLICANT: Brody, Wayne
1721 Apache St
Kill Devil Hills, NC 27948

OWNER: Brody, Wayne
1721 Apache St
Kill Devil Hills, NC 27948

PARCEL:

PIN: 988409168469

Parcel Number: 002704000

Address: 1721 APACHE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton heat pump only

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4885.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

MC2022-281

PROJECT NAME: Brody HVAC

SITE ADDRESS: 1721 APACHE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/13/2022

EXPIRES: 03/12/2023

REQUIRED INSPECTIONS

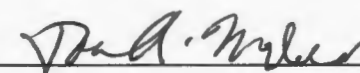
Final

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Issued By: 

Contractor or Authorized Agent:  Date: 9-15-22



Town of Kill Devil Hills

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

PAID

SEP 13 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-280

PROJECT NAME: 10 Above HVAC
SITE ADDRESS: 606 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/12/2022

EXPIRES: 03/11/2023

APPLICANT: 10 Above, LLC
7429 Fort Boykin Trl
SMITHVILLE, VA 23430

OWNER: 10 Above, LLC
7429 Fort Boykin Trl
SMITHVILLE, VA 23430

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

License: 19091
Expires: 12/31/2022

PARCEL:

PIN: 988419724187

Parcel Number: 003739000

Address: 606 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system



PAID
9/12/22 P
pay pvt

MC2022-280

PROJECT NAME: 10 Above HVAC
SITE ADDRESS: 606 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/12/2022

EXPIRES: 03/11/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 09 / 12 / 2022



Town of Kill Devil Hills

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

PAID

SEP 12 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-276

PROJECT NAME: Luliucci HVAC
SITE ADDRESS: 301 FRESH POND DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

APPLICANT: Luliucci, Carl
536 Pond Path
EAST SETAUKET, NY 11733

OWNER: Luliucci, Carl
536 Pond Path
EAST SETAUKET, NY11733

MECHANICAL H-3, CLASS 1: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

License: 35327
Expires: 12/31/2022

PARCEL:

PIN: 989313143230

Parcel Number: 004942009

Address: 301 FRESH POND DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2

Zoning:
Block: 0 **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton heat pump only



PAID

9/12/22 De
ck #1096

MC2022-276

PROJECT NAME: Luliucci HVAC

SITE ADDRESS: 301 FRESH POND DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

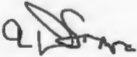
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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 09 / 07 / 2022



Town of Kill Devil Hills

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

PAID

SEP 12 2022

Planning and Inspection Department

TOWN OF

MC2022-275

PROJECT NAME:

SITE ADDRESS: 1101 Cambridge Rd Kill Devil Hills

MECHANICAL

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

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

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

MECHANICAL H-3, CLASS 1: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

License: 35327
Expires: 12/31/2022

PARCEL:

PIN: 988306387222

Parcel Number:

Address: 1101 Cambridge Rd Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 300 Recreation, Sunset Bay

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

PROJECT DESCRIPTION: HVAC



PAID

9/12/22 D
CK#11095

MC2022-275

PROJECT NAME:

SITE ADDRESS: 1101 Cambridge Rd Kill Devil Hills

MECHANICAL

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Marty Shaw

Contractor or Authorized Agent: _____

[Signature]

Date: 09 / 06 / 2022



Town of Kill Devil Hills

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

PAID

SEP - 9 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-277	MECHANICAL
PROJECT NAME: UNIT 13	ISSUED: 09/07/2022
SITE ADDRESS: 2035 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 03/06/2023

APPLICANT: DEPUTY, THOMAS M
15796 LAZY DAY LANE
DUMFRIES, VA 22026

OWNER: DEPUTY, THOMAS M
15796 LAZY DAY LANE
DUMFRIES, VA 22026

MECHANICAL, H-3, I:

AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

License: 23577
Expires: 12/31/2022

PARCEL:

PIN: 98931323283913

Parcel Number: 015549000

Address: 2035 VA DARE TRL S KILL DEVIL HILLS

Addition:

Zoning:

Block: 3

Lot(s): 9-10 UNIT
13

Legal Description:

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

PROJECT DESCRIPTION: HVAC



PAID

9/9/22
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MC2022-277

PROJECT NAME: UNIT 13

SITE ADDRESS: 2035 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/07/2022

EXPIRES: 03/06/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6498.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Linda Burgess Date: 09 / 08 / 2022



Town of Kill Devil Hills

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

PAID

SEP - 9 2022

Planning and Inspection Department

MC2022-278

PROJECT NAME: 701 G Unit 22
SITE ADDRESS: 701 BERMUDA BAY BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/09/2022

EXPIRES: 03/08/2023

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

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

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2022

PARCEL:

PIN: 988307695235-7282

**Parcel
Number:**

Address: 701 BERMUDA BAY BLVD KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

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

PROJECT DESCRIPTION: Replace mini-split system

MC2022-278

PROJECT NAME: 701 G Unit 22
SITE ADDRESS: 701 BERMUDA BAY BLVD KILL DEVIL HILLS

MECHANICAL
ISSUED: 09/09/2022
EXPIRES: 03/08/2023

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	3800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

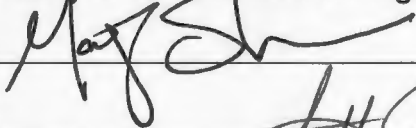
REQUIRED INSPECTIONS

Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 9/9/22



Town of Kill Devil Hills

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

PAID

SEP - 1 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2022-273

PROJECT NAME: Newton HVAC
SITE ADDRESS: 414 HELGA ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/30/2022
EXPIRES: 02/26/2023

APPLICANT: NEWTON, THOMAS MICHAEL
414 W Helga St
Kill Devil Hills, NC 27948
757-630-5133

OWNER: NEWTON, THOMAS MICHAEL
414 W Helga St
Kill Devil Hills, NC 27948
757-630-5133

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

License: 13056
Expires: 12/31/2022

PARCEL:

PIN: 987516834333

Parcel Number: 000271000

Address: 414 HELGA ST W KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 186

Legal Description:

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

PROJECT DESCRIPTION: Install mini split and stand

PAID
8/31/22
pay pd

MC2022-273

PROJECT NAME: Newton HVAC

SITE ADDRESS: 414 HELGA ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/30/2022

EXPIRES: 02/26/2023

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3828.28
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Paxton Nix

Contractor or Authorized Agent: Charles Thuman Date: 08 / 31 / 2022



Town of Kill Devil Hills

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

PAD

Planning and Inspection Department

SEP - 9 2022

DM2022-007

PROJECT NAME: CRUTCHFIELD DEMO
SITE ADDRESS: 1503 VA DARE TRL S KILL DEVIL HILLS

DEMOLITION

ISSUED: 08/24/2022

EXPIRES: 02/20/2023

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

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

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

License: 78928
Expires: 01/01/2023

PARCEL:

PIN: 989309151948

Parcel Number: 008234000

Address: 1503 VA DARE TRL S KILL DEVIL HILLS

Addition: OCEAN ACRES INC

Zoning:

Block: 0

Lot(s): PT PAR.A

Legal Description:

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

PROJECT DESCRIPTION: DEMOLISH EXISTING HOUSE AND DRIVEWAY

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
FLOOD ZONE	VE
CONSTRUCTION COST	25450.00

DM2022-007

PROJECT NAME: CRUTCHFIELD DEMO

SITE ADDRESS: 1503 VA DARE TRL S KILL DEVIL HILLS

DEMOLITION

ISSUED: 08/24/2022

EXPIRES: 02/20/2023

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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Issued By: 

Contractor or Authorized Agent:  Date: 9/9/22



Town of Kill Devil Hills

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

PAID
SEP 27 2022

Planning and Inspection Department

EL2022-051

PROJECT NAME: Beach Club Electrical
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 09/27/2022

EXPIRES: 03/26/2023

APPLICANT: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

OWNER: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

ELECTRICAL, LIMITED:

UNIVERSAL WIRING ELECTRICAL SERVICE
617 Canal Dr
Kill Devil Hills, NC 27948

License: 20673-L
Expires: 08/01/2023

PARCEL:

PIN: 98930508005501

Parcel Number: 027867000

Address: 1110 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 4

Lot(s): 1-8/CONDO-BLDGS 1-2

Legal Description:

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

PROJECT DESCRIPTION: Remove bathroom steamer breaker and abandoned cable install blanks and cover plates. Building #7

EL2022-051

PROJECT NAME: Beach Club Electrical
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL
ISSUED: 09/27/2022
EXPIRES: 03/26/2023

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 09/27/2022



Town of Kill Devil Hills

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

PAID
SEP - 6 2022

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2022-050

PROJECT NAME: Carnill Electric
SITE ADDRESS: 2018 NEW BERN ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

APPLICANT: Carnill, Jonathan
2018 New Bern St
Kill Devil Hills, NC 27948

OWNER: Carnill, Jonathan
2018 New Bern St
Kill Devil Hills, NC 27948

ELECTRICAL INTERMEDIATE: ELECTRIC AL
P.O. Box 2114
Kitty Hawk, NC 27949
252-202-5713

License: 12292
Expires: 11/30/2022

PARCEL:

PIN: 988406390966

Parcel Number: 001884000

Address: 2018 NEW BERN ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:
Block: 0 **Lot(s):** 440

Legal Description:

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

PROJECT DESCRIPTION: C/O meter and service entrance cable

EL2022-050

PROJECT NAME: Carnill Electric

SITE ADDRESS: 2018 NEW BERN ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 09/06/2022

EXPIRES: 03/05/2023

DETAILS

Permit

Name	Value
NCP PROJECT #	33449798
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

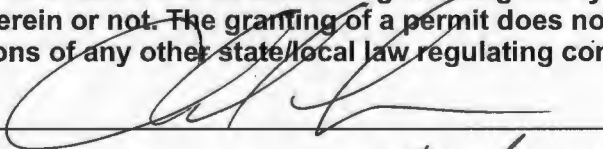
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Issued By: 

Contractor or Authorized Agent: 

Date: 9-6-22