

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

Frisco: (252) 475-5878

#### **REPAIR**

REPAIR#:	REPA	R-12	976
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09/06/2022

Parcel Number:

023652000

Location:

174 C B DANIELS SR RD - WANCHESE

Subdivision:

WILLETT TILLETT SUBDIVISION

Legal Description:

LOT: C BLK: SEC:

Owner Name:

**RAYMOND D HOUCK** 

Owner Mail Address:

116 NORTHSHORE DR - BRIDGEWATER, VA 22812

Owner Contact Information:

Contractor Name:

JES CONSTRUCTION LLC

**Contractor Mail Address:** 

1741 CORPORATE LANDING PKWY STE 101 - VIRGINIA BEACH, VA 234S4

Contractor Phone:

757-558-9909

Contractor NC License#:

69678

**DETAILS** 

RESIDENTIAL

Cost of Job:

\$37,000

**REPAIR FEE:** 

\$150.00

Comments: REPAIR FLOOR JOIST SISTERING & SUPPLEMENTAL BEAM. INSTALL INTELLIJACKS W/ PREFAB FOOTINGS

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

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

DocuSigned by:		
Applicant Signature Fayley Campbell		JES CONSTRUCTION LLC
7C4B1AA4BEB6423	9/6/2022	jesvbpermitting@jeswork.com
——DocuSigned by:		
Inspector Signature kuil Twiford		ALD
8F937CD3D827499	9/6/2022	



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#### REPAIR

REPAIR#:	REPAIR-13200	09/14/20	022

Parcel Number:

017711000

Location:

6548 HWY 64/264 -- MANNS HARBOR

Subdivision:

**SUBDIVISION - NONE** 

Legal Description:

LOT: BLK: SEC:

Owner Name:

**DAWN E GIBBS** 

Owner Mail Address:

6548 HIGHWAY 64/264 - MANNS HARBOR, NC 27953

**Owner Contact Information:** 

Contractor Name:

JES CONSTRUCTION LLC

Contractor Mail Address:

1741 CORPORATE LANDING PKWY STE 101 - VIRGINIA BEACH, VA 23454

Contractor Phone:

757-558-9909

Contractor NC License#:

69678

**DETAILS** 

RESIDENTIAL

Cost of Job:

\$40,000

REPAIR FEE:

\$150.00

**Comments:** MAIN BEAN REPLACEMENT, JOIST SISTER, 2 NEW CRAWLSPC DOORS ADD CRAWLSEAL & EXTREMEBLOC. DEHUMIDIFIER/ELECTRICAL.

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Applicant Signature Layley Campbell 75481AA4BEB8423	9/16/2022	_ JES CONSTRUCTION LLC jesvbpermitting@jeswork.com
Inspector Signature Lul Twiford 8F937CD3D827499	9/16/2022	_ ALD



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#### RESIDENTIAL BUILDING PERMIT

09/06/2022 **BUILDING PERMIT#: R-12997** 

Parcel Number:

025226019

Location:

308 AIRPORT RD - MANTEO

Subdivision:

**CAROLINA WOODS** 

Legal Description:

LOT: 7 BLK: SEC:

Owner Name:

DAVID NATHANIEL HATCHELL P O BOX 1083 MANTEO, NC 27954

Owner Phone and email:

Owner Mail Address:

252-305-3822 etwyne@yahoo.com

Contractor Name:

HATCHELL CONCRETE, INC

Contractor Mail Address:

PO BOX 2405, MANTEO, NC 27954

Contractor Phone:

252-473-6074

Contractor NC License#: 34205

**BUILDING INFORMATION** 

**Proposed Construction Use: Proposed Construction Type:**  SINGLE FAMILY DWELLING NEW, NEW CONSTRUCTION SFD

Finished Square Footage:

SFD 1503 Cost of Construction: CAMA Permit#:

\$250,000 YENA

Unfinished Square Footage:

379

Septic Permit#:

S8-11987

Stories: **Building Height:**  2.0 27'8"

Septic Permit Date: Survey/Site Plan:

7/19/22 YES

**Total Rooms:** 

9

Water Tap#:

NEED

Footing Type:

PILING VINYL SIDING Water Type: Flood Zone:

Central Water Х

**Exterior Finish: Proposed Finished Floor** 

12

Base Flood Elevation: Lot/Ground Elevation:

8.0 8

Elevation:

Bedrooms:

3

Baths/half baths:

2.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.

LOCAL AREA FLOOD ELEVATION OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE

REQUIRED BEFORE ROUGH IN, AS BUILT SURVEY AND FINAL ELEVATION CERTIFICATE REQUIRED

**PERMIT FEE** 

**TOTAL FEES:** 

**HOME OWNERS RECOVERY FEE** RESIDENTIAL ZONING APPROVAL \$1,279.00 10.00

\$1,389.00

100.00

BEFORE CO. DocuSigned by:

Jamie Hatchell for Hatchell Concrete

FAA7DA49D00F450... Applicant Signature:

HATCHELL CONCRETE, INC

Inspector Signature:

keil Twiford 8F937CD3D827499

9/6/2022

ALD



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#### **REPAIR**

REPAIR#: REPAIR-12990	09/06/2022
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Parcel Number:

025147000

Location:

100 AIRPORT RD - MANTEO

Subdivision:

**EVANSVILLE SUBDIV** 

Legal Description:

LOT: 1 BLK: SEC:

Owner Name:

JEFFREY L HATHAWAY

Owner Mail Address:

213 ROOSEVELT ST - MANTEO, NC 27954

Owner Contact Information:

Contractor Name:

**BOBBY WARE BUILDERS INC** 

Contractor Mail Address:

PO BOX 157 - MANTEO, NC 27954

Contractor Phone:

252-473-8846

Contractor NC License#:

61267

**DETAILS** 

RESIDENTIAL

Cost of Job:

\$69,000

REPAIR FEE:

\$150.00

**Comments:** REPAIR ROOF, REPLACE SHINGLES AND VINYL SIDING, UPDATE BATHROOMS AND KITCHEN. NO CHANGE TO FOOTPRINT.

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Applicant Signature:

**BOBBY WARE BUILDERS INC** 

Inspector Signature:

Keil Twiford / AD

\_ ALD



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09/09/2022

#### **ACCESSORY PERMIT**

ACCESSORY PERMIT#: ACC-13077	
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Parcel Number:

031116008

Location:

104 LIBBS WAY - MANTEO

Subdivision:

ISLAND WOODS

Legal Description:

LOT: 10 BLK: SEC:

Owner Name:

**BRIAN C DOLIBER** 

Owner Mail Address:

104 LIBBS WAY MANTEO, NC 27954 804-426-3181 bdoli001@yahoo.com

Contractor Name:

**BRIAN C DOLIBER** 

Contractor Mail Address:

Owner Phone and email:

104 LIBBS WAY, MANTEO, NC 27954

Contractor Phone:

804-426-3181

Contractor NC License#: OWNER/BLDR

**ACCESSORY INFORMATION** 

**Proposed Construction:** 

RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, STR

Description of Work

ADD 10X20 SHED ON CONCRETE BLOCKS

Cost of Construction:

\$7,000

Septic Permit Date: Septic Permit #:

CAMA Permit#: Flood Zone:

SHX

Footing Type:

0

Base Flood Elevation:

0.0

Unfinished Square Footage:

Finished Square Footage:

200

Lot/Ground Elevation:

**Comments: LOCAL AREA ELEVATION STANDARD** 

OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE

FLOOD VENTS. FINAL CONSTRUCTION

ELEVATION CERTIFICATE REQUIRED BEFORE CO.

**PERMIT FEE** 

FLOOD DEVELOPMENT BLDG PERMIT

\$80.00

75.00

**TOTAL FEES:** 

\$155.00

Applicant Signature: >

**BRIAN C DOLIBER** 

ALD

Inspector Signature: <u>Veil</u> Twiford



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#### RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-13084	09/09/2022

Parcel Number:

025226023

Location:

328 AIRPORT RD - MANTEO

Subdivision:

**CAROLINA WOODS** 

Legal Description:

LOT: 11 BLK: SEC:

Owner Name:

JOSE ANTONIO LOPEZ GUZMAN

Owner Mail Address:

P O BOX 332 MANNS HARBOR, NC 27953

Owner Phone and email:

Contractor Name:

JOSE ANTONIO LOPEZ GUZMAN

Contractor Mail Address:

P O BOX 332, MANNS HARBOR, NC 27953

Contractor Phone:

252-722-5827

Contractor NC License#: OWNER/BLDR

**BUILDING INFORMATION** 

**Proposed Construction Use:** 

SINGLE FAMILY DWELLING NEW, NEW CONSTRUCTION SFD ON PILINGS

**Proposed Construction Type:** 

SFD

Cost of Construction:

\$225,000

Finished Square Footage:

1297

CAMA Permit#:

NA

Unfinished Square Footage:

431

Septic Permit#:

S8-12406

Stories:

1.0

Septic Permit Date:

8/5/2022

**Building Height:** 

21'00"

Survey/Site Plan:

YES 53531

Total Rooms:

7

Water Tap#: Water Type:

Central Water

Footing Type:

**PILING** LAP SIDING

Flood Zone:

Х

**Exterior Finish:** Proposed Finished Floor

11

Base Flood Elevation:

8.0

Elevation:

Lot/Ground Elevation:

8.0

Bedrooms:

3

Baths/half baths:

2.00/0

**Comments:** Any deviation from the building plan

or site plan requires prior approval.

LOCAL AREA FLOOD ELEVATION OF 8' APPLIES, AREAS BELOW 8' WILL REQUIRE FLOOD VENTS. UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINAL ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO.

**PERMIT FEE** 

\$1,145.00

HOME OWNERS RECOVERY FEE **RESIDENTIAL ZONING APPROVAL** 

100.00

10.00

**TOTAL FEES:** 

\$1,255.00

Applicant Signature: KEITWIFORD NAME ALD



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# RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-13225	i		09/15/2022	
Parcel Number: Location:	025009000 109 OLD NC 345	025009000 109 OLD NC 345 – MANTEO		
Subdivision:	W S DOUGH HRS			
Legal Description:	LOT: PT 3 BLK: S	· · · · · · · · · · · · · · ·		
Owner Name:	MARK RECONNU			
Owner Mail Address: Owner Phone and email:	3833 BAKN2OAL	E DR WADE, NC 28395		
Contractor Name:	STAN WHITE REA	ALTY & CONSTRUCTION		
Contractor Mail Address:	2506 S CROATAI	N HWY, NAGS HEAD, NC 27959		
Contractor Phone:	252.441.1515	Contractor NC License#:		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY O	OWELLING NEW , NEW SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$1,076,000	
Finished Square Footage:	2785	CAMA Permit#:	NA	
Unfinished Square Footage:	1991	Septic Permit#:	S8-12792	
Stories:	1.0	Septic Permit Date:	08/25/22	
Building Height:	24'10"	Survey/Site Plan:	YES	
Total Rooms:	12	Water Tap#:	53543	
Footing Type:	COMBINATION	Water Type:	Central Water	
Exterior Finish:	MASONARY	Flood Zone:	Х	
Proposed Finished Floor	13	Base Flood Elevation:	8.0	
Elevation:	LJ	Lot/Ground Elevation:	10	
Bedrooms:	4	Baths/half baths:	2.00/1	
Comments: Any deviation from		PERMIT FEE	\$2,885.00	
or site plan requires prior appr		HOME OWNERS RECOVERY FEE	1 <b>0</b> .00	
AS BUILT SURVEY REQUIRED B	EFORE CO	RESIDENTIAL ZONING APPROVAL	100.00	
		TOTAL FEES:	\$2,995.00	
Applicant Signature:	Su say	STAN WHITE RE	ALTY & CONSTRUCTION	
Inspector Signature: KEIL TV	/IFOR <b>D</b>	AYT		

Application Reference # 8622 on 09/02/2022



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Frisco: (252) 475-5878

#### ACCESSORY PERMIT

	· · · · · · · · · · · · · · · · · · ·	
ACCESSORY PERMIT#: ACC-1	3076	09/09/2022
Parcel Number: Location: Subdivision: Legal Description:	025111000 121 LYDIA LN MANTEO SUBDIVISION - NONE LOT: PARCEL THREE BLK: SEC:	
Owner Name: Owner Mail Address: Owner Phone and email:	TRACY D TTEE TAYLOR 121 LYDIA LN MANTEO, NC 27954	
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION Proposed Construction: Description of Work	NORTHEASTERN MARINE INC PO BOX 42, KITTY HAWK, NC 27949 2522613682 Contractor NC License#: 30026  RESIDENTIAL - DOCKS; PIERS; BULKHDS, BOATLFTS, CONSTRUCT 50X5 WALKWAY, 30X5 PIER, 5X10 PLATFORM	
	Cost of Construction: \$25,000 CAMA Permit#: 86623 Flood Zone: Base Flood Elevation: 0.0 Lot/Ground Elevation:	
Comments:	PERMIT FEE	\$250.00
	TOTAL FEES:	\$250.00
Applicant Signature:	NORTHEASTERN MARINE INC	
Inspector Signature: Kcil	Twiford AMA ALD	



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Frisco: (252) 475-5878

# **ACCESSORY PERMIT**

ACCESSORY PERMIT#: ACC-1	3326				09/21/2022
Parcel Number: Location: Subdivision: Legal Description:	031114000 116 PAYNE RD – ISLAND WOODS LOT: 1 BLK: SEC:	MANTEO			
Owner Name: Owner Mail Address: Owner Phone and email:	RANDALL W WEII 116 PAYNE RD M		795 <b>4</b>		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	SOUTHERN SCAP PO BOX 359, JAR 252-491-5303	RVISBURG, NC	LANDSCAPE DESIG 27947 tor NC License#: 77270		
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - SW INSTALL POOL AN 08/10/2022 S22-12472		Cost of Construction: CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	\$59,440 NA 8.0 NA	
Comments:		PERMIT FEE			\$300.00
		TOTAL FEES:			\$300.00
Applicant Signature:			SOUTHERN SCAF	PES POOL AND LA	ANDSCAPE
Inspector Signature:			AYT		



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PREMIERE COASTAL CONTRACTING LLC

Frisco: (252) 475-5878

	MOVE BUILDING PE	RMIT	
MOVE BUILDING PERMIT#: R-	13014		09/07/2022
Parcel Number:	014227008 24251 SOUTH SHORE DR RODAN	JTHF	
Subdivision: Legal Description:	SOUTH SHORE PHASE 1 LOT: 8 BLK: SEC:	•••	
Owner Name: Owner Mail Address: Owner Contact Information:	CYNTHIA J DOUGHTY PO BOX 396 - RODANTHE, NC 2 <b>7</b> 9	68	
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#:	PREMIERE COASTAL CONTRACTIN PO BOX 2359 - MANTEO, NC 2795 2523058067 78086		
DETAILS	RESIDENTIAL		
CAMA Permit		Cost of Job:	\$65,000
Septic Permit	N/A	MOVE BUILDING PERMIT FEE:	\$200.00
Comments: RELOCATE HOUSE APPROVED.	TO FURTHEST WEST POINT ON SAME	LOT PER ZONING SET ON CRI	BS UNTIL PLAN ARE
construction and be certain to conformation on this permit is conshown on the submitted plans a	onsible to comply with all regulations omply with all zoning regulations and rect. That he is owner or duly author nd specifications that he understand the applicable regulations and laws.	l building setbacks. The applic ized agent of owner. That all (	ant certifies that the construction shall be as
Call Building Inspector (24 Hours Beach Office 252.475.5871 or Fr	s in advance) for inspections at Dare ( isco Office 252.475.5878	County Offices Manteo Office	252.475.5870, Northern
<b>.</b>	$\wedge$		

Inspector Signature: Crew Hayes / AD

Applicant Signature:



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

Frisco: (252) 475-5878

#### MOVE BUILDING PERMIT

MOVE BUILDING PERMIT#: R-13016

09/07/2022

Parcel Number:

014227009

Location:

24255 SOUTH SHORE DR – RODANTHE

Subdivision:

**SOUTH SHORE PHASE 1** 

Legal Description:

LOT: 9 BLK: SEC:

Owner Name:

AMY HOLLAND

Owner Mail Address:

71 STEWART WAY - ERIE, CO 80516

Owner Contact Information:

Contractor Name:

PREMIERE COASTAL CONTRACTING LLC

Contractor Mail Address:

PO BOX 2359 - MANTEO, NC 27954

Contractor Phone:

2523058067

Contractor NC License#:

78086

**DETAILS** 

**RESIDENTIAL** 

Cost of Job:

\$65,000

**CAMA Permit** 

Septic Permit

N/A

**MOVE BUILDING PERMIT** 

FEE:

\$200.00

**Comments:** RELOCATE HOUSE TO FURTHEST WEST POINT SAME LOT PER ZONING SET ON CRIBS UNTIL PLANS ARE APPROVED.

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

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Applicant Signature:

PREMIERE COASTAL CONTRACTING LLC

Inspector Signature:

Crew Hayes / AD

ALL



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Frisco: (252) 475-5878

#### **MECHANICAL PROJECT**

MECHANICAL PROJECT#:	MECH-13108
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09/12/2022

Parcel Number:

016333000

Location:

140 ROANOKE TRL – MANTEO

Subdivision:

**ROANOKE COLONY** 

Legal Description:

LOT: 17 BLK: SEC: 2

Owner Name:

JAMES P BEACH

Owner Mail Address:

140 ROANOKE TRL - MANTEO, NC 27954

Owner Contact Information:

Contractor Name:

R A HOY HEATING AND AIR CONDITIONING INC

Contractor Mail Address:

PO BOX 265 - KITTY HAWK, NC 27949

Contractor Phone:

252-261-8178

Contractor NC License#:

L13056

**DETAILS** 

RESIDENTIAL

**UNITS:** 

2.00

Cost of Job:

\$16,501

**Electrical Contractor ID:** 

22222-L

Units

2

MECHANICAL PROJECT FEE: \$150.00

Comments: DOUBLE C/O TWO TRANE 16 SEER 2 TON, SERVICES THE UPSTAIRS AN D DOWNSTAIRS

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

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

Applicant Signature Parton My for K l Hoy  030B0B8408D84A8	9/12/2022	R A HOY HEATING AND AIR CONDITIONING INC jessicad@rahoy.com
Inspector Signature buil wiford  BF937CD3DB27499	9/12/2022	ALD



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Frisco: (252) 475-5878

#### MECHANICAL PROJECT

MECHANICAL PROJECT#:	MECH-13251
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09/16/2022

Parcel Number:

024608004

Location:

963 DRIFTWOOD DR – MANTEO

Subdivision:

WALLO WOODS SUB.

Legal Description:

LOT: 1 BLK: SEC:

Owner Name:

**BARBARA MCCLEASE** 

Owner Mail Address:

P O BOX 2476 - MANTEO, NC 27954

Owner Contact Information:

Contractor Name:

R A HOY HEATING AND AIR CONDITIONING INC

Contractor Mail Address:

PO BOX 265 - KITTY HAWK, NC 27949

Contractor Phone:

252-261-8178

Contractor NC License#:

L13056

DETAILS

RESIDENTIAL

UNITS:

1.00

Cost of Job:

\$5,155

Electrical Contractor ID:

22222-L

Units

1

MECHANICAL PROJECT FEE:

\$150.00

Comments: SINGLE H/P C/O ONLY! TRANE 16 SEER 3-TON H/P ONLY THAT SERVI CES THE WHOLE HOUSE.

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

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# RESIDENTIAL BUILDING PERMIT

	KESIL	JENTIAL BUILDING PERIVIT		
BUILDING PERMIT#: REMD-1	3445		0	9/27/2022
Parcel Number:	024236000			
Location:	179 AIRPORT RD	- MANTEO		
Subdivision:	EVANSVILLE SUB	DIV		
Legal Description:	LOT: 64 BLK: SEC	:		
Owner Name:	JAMES O JR BASN	NIGHT		
Owner Mail Address:	P O BOX 532 MA	NTEO, NC 27954		
Owner Phone and email:				
Contractor Name:	BASNIGHT CONS	TRUCTION CO		
Contractor Mail Address:	P.O. BOX 1025, 1	MANTEO, NC 27954		
Contractor Phone:	252-473-3474	Contractor NC License#:		
BUILDING INFORMATION				
Proposed Construction Use:	REMODEL RES OF OUTSIDE SIDING	R COM , INSTALL NEW FLOORING, CENTR	AL HEAT / AIR, PAI <b>N</b> T,	AND
Proposed Construction Type:		Cost of Construction:	\$25,560	
Finished Square Footage:	0	CAMA Permit#:		
Unfinished Square Footage:	0	Septic Permit#:		
Stories:	0	Septic Permit Date:		
Building Height:		Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:		
Proposed Finished Floor		Base Flood Elevation:	0.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	0	Baths/half baths:	0/0	
<b>Comments:</b> Any deviation from or site plan requires prior appro	- ·	PERMIT FEE HOME OWNERS RECOVERY FEE		\$260.00 <b>1</b> 0.00

TOTAL FEES: \$270.00

pplicant Signature: BASNIGHT CONSTRUCTION CO

Inspector Signature: Lec Twiford NHW ALD



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

Frisco: (252) 475-5878

## **RESIDENTIAL BUILDING PERMIT**

BUILDING PERMIT#: R-13316					09/21/2022
Parcel Number: Location: Subdivision: Legal Description:	024655001 987 BURNSIDE RE BURNSIDE ESTAT LOT: 1 BLK: SEC:				
Owner Name: Owner Mail Address: Owner Phone and email:	BURNSIDE ESTAT 114 FORT HUGAR		O, NC 27954		
Contractor Name: Contractor Mail Address: Contractor Phone:	HADDON HOMES PO BOX 1868, NA 252-267-2287	AGS HEAD, NO	27959 or NC License#: 55566		
BUILDING INFORMATION					
Proposed Construction Use:	SINGLE FAMILY DY ONE CAR GARAGE		, CONSTRUCT NEW SFD O	N PILINGS WITH AT	TACHED
Proposed Construction Type:	SFD		Cost of Construction:	\$285,000	
Finished Square Footage:	1445		CAMA Permit#:	NΑ	
Unfinished Square Footage:	483		Septic Permit#:	S8-13125	
Stories:	1.0		Septic Permit Date:	9/12/2022	
Building Height:	21'3"		Survey/Site Plan:	YES	
Total Rooms:	7		Water Tap#:	NEED	
Footing Type:	PILING		Water Type:	Central Water	
Exterior Finish:	VINYL SIDING		Flood Zone:	Χ	
Proposed Finished Floor	44.6		Base Flood Elevation:	8.0	
Elevation:	11.6		Lot/Ground Elevation:	8.4	
Bedrooms:	3		Baths/half baths:	2.00/0	
Comments: Any deviation from or site plan requires prior approas BUILT SURVEY REQUIRED BEF	val.		RS RECOVERY FEE ZONING APPROVAL		\$1,277.00 10.00 100.00

TOTAL FEES: \$1,387.00

Applicant Signature: HADDON HOMES INC

Inspector Signature: Keil Twiford / AD ALD



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

Frisco: (252) 475-5878

# **ACCESSORY PERMIT**

ACCESSORY PERMIT#: REPAI	IR-13454	09/2 <b>7</b> /20 <b>2</b> 2
Parcel Number: Location: Subdivision: Legal Description:	030001000 106 FEARING PL – MANTEO BRAKEWOOD SEC. 3 LOT: 2 BLK: SEC: 3	
Owner Name: Owner Mail Address: Owner Phone and email:	TERRY C ST JOHN 106 FEARING PL MANTEO, NC 27954	
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	RAM JACK T/A FS, LLC, 4122 BENNETT MEMORIAL RD STE 304 DURHAM, NC 27705-12 919-309-9727 Contractor NC License#: L.81330	207
Proposed Construction: Description of Work	RESIDENTIAL - REPAIR, FOUNDATION REPAIR USING INSTALLATION OF THREE PIPE PIERS. REPAIR WIL ORIGINAL FOOTPRINT OF STRUCTURE.	L NOT ALTER
:	Cost of Construction: \$6,250  CAMA Permit#:  Flood Zone:  Base Flood Elevation: 0.0  Lot/Ground Elevation:	
Comments:	PERMIT FEE	\$150.00
	TOTAL FEES:	\$150.00
Applicant Signature:	RAM JACK	
Inspector Signature:	ALD	



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

Frisco: (252) 475-5878

# RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-13366	5				09/23/2022
Parcel Number:	024652035				
Location:	152 SHERWOOD	DR – MA <b>n</b> ti	<b>E</b> O		
Subdivision:	NOTTINGHAM F	PHASE 2			
Legal Description:	LOT: 24 BLK: SEG	C:			
Owner Name:	TED S SHANKS				
Owner Mail Address: Owner Phone and email:	152 SHERWOOE	DR MANTEC	), NC 27954		
Contractor Name:	AFFORDABLE BI	LL'S			
Contractor Mail Address:	300 WEST ALBE	MARLE DR, N	AGS HEAD, NC 27959		
Contractor Phone:	252-5 <b>7</b> 3-9336	Contra	ctor NC License#:		
BUILDING INFORMATION					
Proposed Construction Use:	RESIDENTIAL AD OVER ATTACHED		ACE EXISTING SECOND FLO REEN IN AREA.	OR DECKING, CON	ISTRUCT ROOF
Proposed Construction Type:	SFD		Cost of Construction:	\$28,5 <b>0</b> 0	
Finished Square Footage:	0		CAMA Permit#:	NA	
Unfinished Square Footage:	280		Septic Permit#:	NA	
Stories:	0.0		Septic Permit Date:	NA	
Building Height:			Survey/Site Plan:		
Total Rooms:	0		Water Tap#:		
Footing Type:			Water Type:		
Exterior Finish:			Flood Zone:		
Proposed Finished Floor			Base Flood Elevation:	0.0	
Elevation:			Lot/Ground Elevation:		
Bedrooms:	0		Baths/half baths:	0.00/0	
Comments: Any deviation fron or site plan requires prior appr	- •	PERMIT FEE HOME OWN	NERS RECOVERY FEE		\$150.00 10.00
		TOTAL FEES	•		\$160.00
	N 8 11				

AFFORDABLE BILL'S

Inspector Signature: LEIL TWIFORD

Applicant Signature:



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

Frisco: (252) 475-5878

# **RESIDENTIAL BUILDING PERMIT**

BUILDING PERMIT#: R-13297				09/20/2022
Parcel Number: Location: Subdivision: Legal Description:	025020005 110 BECKS CT – BECKONRIDGE T LOT: 5 BLK: SEC:	₩O		
Owner Name: Owner Mail Address: Owner Phone and email:	NEIL L MOSKOW 6 PIKE PL NEWA			
Contractor Name: Contractor Mail Address:		ALTY CONSTRUCTION LLC ANTEO, NC 27954		
Contractor Phone:	252-305-9982	Contractor NC License#: 73168		
BUILDING INFORMATION				
Proposed Construction Use: Proposed Construction Type: Finished Square Footage: Unfinished Square Footage: Stories: Building Height: Total Rooms: Footing Type: Exterior Finish: Proposed Finished Floor Elevation: Bedrooms:	SINGLE FAMILY E SFD 1917 708 1.0 28'3" 0 PILING VINYL SIDING 15	Cost of Construction: CAMA Permit#: Septic Permit Date: Survey/Site Plan: Water Tap#: Water Type: Flood Zone: Base Flood Elevation: Lot/Ground Elevation: Baths/half baths:	\$400,000 NA S8-13092 9/12/2022 YES YES Central Water X 8.0 12.8 0.00/0	
Comments: Any deviation from or site plan requires prior appro AS BUILT SURVEY REQUIRED BEI	val.	PERMIT FEE HOME OWNERS RECOVERY FEE RESIDENTIAL ZONING APPROVAL		\$1,721.00 10.00 100.00
Applicant Signature:		TOTAL FEES:  JD JOHNSON REAL	_TY CONSTRUCTIO	\$1,831.00 N LLC



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

Frisco: (252) 475-5878

#### **ACCESSORY STRUCT OVER 12 FT**

ACCESSORY STRUCT OVER 12 F	T#: ACC-13290		09/20/2022
Parcel Number: Location:	016581000 133 BRINKLY DR – WANCHESE		
Subdivision: Legal Description:	WHISTLING PINES LOT: 2 BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Information:	KEVIN MONDS S225 BLACKWATER RD - VIRGINIA 757-235-2795 kcckgm@gmail.com	·	
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#:	KEVIN MONDS 5225 BLACKWATER RD - VIRGINIA 757-235-2795 OWNER/BLDR	BEACH, VA 23457	
DETAILS	RESIDENTIAL		
CAMA Permit  Lot/Ground elevation (ft)	NA	Cost of Job:  ACCESSORY STRUCT OVER	\$13,000 \$280.00
		12 FT FEE:	F

Comments: METAL STORAGE BUILDING. NO POWER OR WATER TO STRUCTURE.

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

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

Applicant Signature:	Lewin Monds ODBAA6BFOA7942F	KEVIN MONDS	
	buil Twiford	0.0000000000000000000000000000000000000	kcckgm@gmail.com
	8F937CD3D827499	9/20/2022	
Inspector Signature:			ALD



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

Frisco: (252) 475-5878

#### COMMERCIAL ADDITION

COMMERCIAL ADDITION#: C-13459

09/27/2022

Parcel Number:

027254000

Location:

826 E R DANIELS RD - WANCHESE

Subdivision:

SUBDIVISION - NONE

Legal Description:

LOT: PARCEL A BLK: SEC:

Owner Name:

ASSEMBLY OF GOD

Owner Mail Address:

P O BOX 201 - WANCHESE, NC 27981

Owner Contact Information:

Contractor Name:

ALBANESE CONSTRUCTION

Contractor Mail Address:

1811 SEA SWEPT RD - KILL DEVIL HILLS, NC 27948

Contractor Phone:

252-202-1618

Contractor NC License#:

L.64199

**DETAILS** 

COMMERCIAL

Cost of Job:

\$25,000

**CAMA Permit** 

Septic Permit

522-12830

COMMERCIAL ADDITION

\$203.45

Comments: CONSTRUCT COVERED ENTRANCE OVER FRONT AND SIDE DOORS TO EXISTING STRUCTURE

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

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 2S2.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:

ALBANESE CONSTRUCTION jjalbanese@msn.com

Inspector Signature: KEIL TWIFORD

Application Reference # 8797 on 09/16/2022



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

## MECHANICAL PROJECT

Parcel Number:	029320011		
Location:	7041 CURRITUCK RD – I		
Subdivision:	MARTIN'S POINT SECTION 2		
Legal Description:	LOT: 11 BLK: 3 SEC: 2		
Owner Name:	TODD J GWALTNEY		
Owner Mail Address: Owner Contact Information:	7041 CURRITUCK RD - (	CHESAPEAKE, VA 23321	
Contractor Name:			***************************************
Contractor Mail Address:	-		
Contractor Phone:	NA		
Contractor NC License#:	NA		
DETAILS	RESIDENTIAL		
UNITS:	1.00	Cost of Job:	\$6,814
	**		
Electrical Contractor ID:	22217		
Comments: Replace HVAC S	1 ystem for North End of Hous	MECHANICAL PROJECT FEE: e with a York 2.5 T on HP and AH 14 SEEF	· · · · · · · · · · · · · · · · · · ·
Units  Comments: Replace HVAC S  The owner and builder are re construction and be certain t information on this permit is shown on the submitted plan	1 ystem for North End of Hous sponsible to comply with all o comply with all zoning reg correct. That he is owner or as and specifications that he	e with a York 2.5 T on HP and AH 14 SEEF regulations and laws, and should personal alations and building setbacks. The applic duly authorized agent of owner. That all our owners and strike and service agent of owners and service agent of owners. That all our owners are serviced agent of owners and serviced agent of owners.	sily inspect all ant certifies that the construction shall be as
Units  Comments: Replace HVACS  The owner and builder are re construction and be certain t information on this permit is shown on the submitted plar revoked for failure to comply	1  ystem for North End of House sponsible to comply with all o comply with all zoning regulations and specifications that he with applicable regulations ours in advance) for inspectic	e with a York 2.5 T on HP and AH 14 SEEF regulations and laws, and should personal alations and building setbacks. The applic duly authorized agent of owner. That all our owners and strike and service agent of owners and service agent of owners. That all our owners are serviced agent of owners and serviced agent of owners.	ally inspect all ant certifies that the construction shall be as onths and may be
Comments: Replace HVACS  The owner and builder are re construction and be certain t information on this permit is shown on the submitted plar revoked for failure to comply  Call Building Inspector (24 Hot	ystem for North End of House sponsible to comply with all o comply with all zoning regi correct. That he is owner or is and specifications that he with applicable regulations ours in advance) for inspection r Frisco Office 252.475.5878	re with a York 2.5 T on HP and AH 14 SEEF regulations and laws, and should personal lations and building setbacks. The applic duly authorized agent of owner. That all conderstands this permit is valid for six monand laws.	ally inspect all ant certifies that the construction shall be as on this and may be 252.475.5870, Norther



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

Frisco: (252) 475-5878

#### **ACCESSORY STRUCT OVER 12 FT**

ACCESSORY STRUCT OVER 12 F	09/20/2022		
Parcel Number:	016581000		
Location:	133 BRINKLY DR – WANCHESE		
Subdivision:	WHISTLING PINES		
Legal Description:	LOT: 2 BLK: SEC:		
Owner Name:	KEVIN MONDS		
Owner Mail Address:	5225 BLACKWATER RD - VIRGINIA	N BEACH, VA 23 <b>4</b> 57	
Owner Contact Information:	757-235-2795 kcckgm@gmail.co	•	
Contractor Name:	KEVIN MONDS		
Contractor Mail Address:	5225 BLACKWATER RD - VIRGINIA	N BEACH, VA 23457	
Contractor Phone:	757-235-2795		
Contractor NC License#:	OWNER/BLDR		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$13,000
CAMA Permit	NA		
Lot/Ground elevation (ft)		ACCESSORY STRUCT OVER 12 FT FEE:	\$280.00

**Comments:** METAL STORAGE BUILDING. NO POWER OR WATER TO STRUCTURE.

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

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.S870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:	Ewin Monds  ODBAA6BF0A7942F	KEVIN MONDS	
	Docusigned by: Luil Twiford 8F937CD3D827499	9/20/2022	kcckgm@gmail.com
Inspector Signature:			_ ALD



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

Frisco: (252) 475-5878

# RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-13510	)			09/29/2022
Parcel Number: Location: Subdivision: Legal Description:	025226031 D VICTOR MEEKI WEST SIDE LOT: 5RA BLK: SI	NS RD – MANTEO		
Owner Name: Owner Mail Address: Owner Phone and email:	WALTER H STELL P O BOX 514 TRO 334-268-3026 W			
Contractor Name: Contractor Mail Address: Contractor Phone:	, Contract	tor NC License#:		
BUILDING INFORMATION				
Proposed Construction Use: Proposed Construction Type: Finished Square Footage: Unfinished Square Footage: Stories: Building Height: Total Rooms: Footing Type: Exterior Finish: Proposed Finished Floor Elevation: Bedrooms:	SINGLE FAMILY D SFD 956 683 0.0 28 0 CONCRETE LAP SIDING 102	Cost of Construction: CAMA Permit#: Septic Permit Date: Survey/Site Plan: Water Tap#: Water Type: Flood Zone: Base Flood Elevation: Lot/Ground Elevation: Baths/half baths:	sge apartment \$300,000 NA \$8-13234 09/15/2022 YES 53552 Central Water X 8.0 10.2 0.00/1	
Comments: Any deviation from or site plan requires prior appr		PERMIT FEE HOME OWNERS RECOVERY FEE RESIDENTIAL ZONING APPROVAL		\$990.20 10.00 100.00
		TOTAL FEES:	-	\$1,100.20

Applicant Signature: June June Ocean Builders

Inspector Signature: Keil Twiford NHW ALD



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

Frisco: (252) 475-5878

# **ACCESSORY PERMIT**

ACCESSORY PERMIT#: REPA	IR-13575			09/30/2022
Parcel Number: Location: Subdivision: Legal Description:	024883000 4376 MILL LANDING RD – WA SUBDIVISION - NONE LOT: BLK: SEC:	NCHESE		
Owner Name: Owner Mail Address: Owner Phone and email:	MELODYE CANNADY P O BOX 187 WANCHESE, NC	27981		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	, Contractor NC Licens	e#:		
Proposed Construction: Description of Work :	RESIDENTIAL - REPAIR, SFD REP <b>A</b> IR EXISTING NO CHANGE	IN FLOOR PLAN AND FOOT Cost of Construction: CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	PRINT \$30,000 AE 0. <b>0</b>	
Comments:	PERMIT FEE			\$150.00
	TOTAL FEES			\$150.00
Applicant Signature:		MELODYE CANN	ADY	
Inspector Signature:		ALD		

# Issued Trade and DPA Monthly Permit Log

From Date: 09/01/2022 Town of Southern Shores

To Date:		09/30/202	2	own c	4	(	outhern	on	ores
Date	Permit	Project Address	Owner Name	Contractor	Use		it Work Description	Permit Cost	Total Project Cost
09/01/2022	TP22- 000156	5500 N CROATAN HWY	SOUTHERN SHORES OWNER, LLC - DR. MCGRIFF UNIT 28	Anderson Heating & Cooling	С	M	REPLACEMENT OF 3.5 TON 14 SEER COASTAL HEAT PUMP AND 3.5 TON FAN COIL MULITPURPOISE (ALUMINUM COIL) SYSTEM	150.00	10,604.00
09/01/2022	DPA22- 000158	270 HILLCREST DR	ARNOULT, WILLIAM S		R	R	REMODEL - REPLACE FRONT PORCH DECK, STAIR TREADS AND RAILINGS WITH SAME EXISITING FOOTPRINT	100.00	9,923,00
09/02/2022	DPA22- 000157	27 ELEVENTH AVE	REEVES, MICHAEL J TTEE	Frasca Custom Homes, LLC	R	R	REMODEL - REPLACEMENT OF EXISTING SIDING WITH NEW LP SMART PRE- PRIMED LAP SIDING SYSTEM, REMODEL REPLACING APPROXIMATELY 400 SQ FT OF DECKING FACE (DECK BOARDS ONLY) & 110 SQ FT OF STAIR DECKING BOARDS	693.00	68,296.00
09/06/2022	DPA22- 000159	28 ELEVENTH AVE	FEIDLER, JEFFREY L	Dan Osman	R	R	ADDITION - ADD 6 X 10 ADDITION ON BACK OF HOUSE TO CREATE NEW BATHROOM, RENOVATE EXISTING BATHROOM	396.00	50,000.00
09/07/2022	TP22- 000158	137 S DOGWOOD TRL	MORRIS, CHRISTY M	All Seasons Heating & Cooling, Inc	R	М	REPLACE EXISTING SYSTEM WITH A 4 TON SPLIT SYSTEM HEAT PUMP & AIR HANDLER	150.00	10,170.00
09/08/2022	TP22- 000157	90 DUCK WOODS DR	WEATHERLY, ERIC T	Claude Stuart Morris /DBA Air Handlers OBX	R	М	CHANGEOUT HVAC WITH NEW 15 SEER 2 TON & 16 SEER 2 TON AIR HANDLER	150.00	7,065.00
09/08/2022	DPA22- 000148	ALCOHOLOGICAL CONTRACTOR OF THE	READMAN, CRAIG	KJ Construction and Remodeling, Co.	R	R	REMODEL/ADDITION - Enclose existing screen porch (8"x8") with adjoining wall to allow for master bedroom closet enlargement. Existing closet is 8'x4". Pics of existing attached & enclose the other screen porch on the nw corner of home	533.20	38,400.00
09/08/2022	DPA22- 000161		BROWN, RICHARD A	691 Electric	R	R	Installing 26 Solar Panels on roof	100.00	28,500.00
09/09/2022	DPA22-	the party of the state of the s	BRADY, ROGER ALAN	Phoenix Restoration	R	R	REMODEL/ADDITION - Enclose area under house	3,453.40	320,000.00

Query Tool New

	000162						to add a recreation room, bathroom, and storage. Enclosing existing porch on elevated level to extend living room. Painting and floor covering replacement. Replacing existing water heater, tub / shower unit, and shower unit.		
09/09/2022	DPA22- 000160	50 S DOGWOOD TRL	DUCK WOODS COUNTRY	OUTER BANKS TENNIS CONTRACTORS LLC.	С	С	ACCESSORY - CONSTRUCT FOUR COURT PICKLEBALL COMPLEX TO INCLUDE SITE WORK, ASPHALT COURTS, FENCING, WOOD STEPS, SOD WALKWAY, WOOD WALKWAY AND WATER SERVICE	250.00	171,686.00
09/12/2022	DPA22- 000163	132 W HOLLY TRL	DONDERO, DAMIAN C		R	R	ADDITION - FINISH ROOM ABOVE GARAGE, ADDING OUTLETS, INSULATION AND DRYWALL.	750 KINE (8	6,000.00
09/12/2022	DPA22- 000153	109 OSPREY LN	VANN, JOHN ROBERT		R	R	NEW CONSTRUCTION - AMENDED PERMIT TO INCLUDE INSTALLATION OF INGROUND POOL ON 9/9/2022 NEW CONSTRUCTION RESIDENTIAL HOME	4,480.60	910,000.00
09/15/2022	TP22- 000064	13 FERN LN	NOPHSKER, CHRISTIAN		R	E	ACCESSORY - INSTALL A CONCRETE PAD APPROXIMATELY 10 X 20 IN BACK YARD TO SUPPORT HOT TUB, HOT TUBE REQUIRES A 220V ELECTRIC DISCONNECT THAT WILL NEED TO BE INSTALLED FOR THE POWER SUPPLY	100.00	5,000.00
09/15/2022	TP22- 000161	136 HIGH DUNE LOOP	STEVENS, CYNTHIA	AMERICAN REFRIGERATION	R	М	ADD 4 INCH FLEX RUN TO NEW CLOSET	150.00	600.00
09/15/2022	TP22- 000159	162 S DOGWOOD TRL	CLOWER, ASHLEY PEARL	Master Heating & Cooling	R	М	REPLACEMENT OF TOP LEVEL HVAC SYSTEM 1.5 TON LENNOX R410A 14 SEER SYSTEM	150.00	7,300.00
09/16/2022	TP22- 000160	265 WAX MYRTLE TRL	BECKHAM, JEAN-PIERRE	Delta T Heating & Air Conditioning, Inc	R	М	INSTALL MITZUBISHI 18,000 BTU 16 SEER DUCTLESS WALL MOUNTED HP SYSTEM	150.00	3,200.00
09/16/2022	DPA22- 000167	140 CROOKED BACK LOOP		CORNERSTONE MARINE & REMODELING LLC	R	R	REMODEL - REMOVE OLD DECKING AND RAILS, REPLACE WITH TREX DECKING & TIMBER TECH RAILS, AND REBUILD STAIRS TO MEET CODE	710.00	70,000.00

09/19/2022	DPA22- 000168	351 SEA OATS TRL	HODES, JAY M	Sandmark Custom Homes, Inc.	R	R	ADDITION - BUILD AN ADDITION SOUTHSIDE OF HOUSE FOR NEW BEDROOM, OFFICE, EXTENDED KITCHEN & NEW SOUTH SIDE DECKS	727.90	450,000.00
09/19/2022	DPA22- 000171	37 SKYLINE DR	BERRYMAN, GRAY LEE	OBRC, LLC	R	R	REMODEL - INSTALL NEW WINDOW IN KITCHEN, REPLACE CABINETS & COUNTER TOPS AND INSTALL NEW LIGHTING	410.00	40,000.00
09/19/2022	DPA22- 000140	8 NINTH AVE	DAVIS, JAMES LAWRENCE	Outer Banks Cottage Renovations, Inc.	R	R	ADDITION/REMODEL - REMODEL EXISITING LIVING ROOM, DINING ROOM, NEW KITCHEN, NEW SCREEN PORCH AND NEW WINDOWS	2,148.20	233,838.00
09/20/2022	DPA22- 000164	109 OSPREY LN	VANN, JOHN ROBERT	Northeastern Marine	R	R	ACCESSORY - INSTALLING 30 X 6 PIER & 16 X 16 PLATFORM WITH 4 X 20 L DROP DOWN & BOAT LIFT	150.00	28,000.00
09/20/2022	DPA22- 000166	127 TALL PINE LN	BLINKEN, KARI	Bredell Electrical Systems	R	R	ACCESSORY - INSTALL 24 KW STANDBY GENERATOR, INSTALL 200 AMP AUTO TRANSFER SWITCH AND BUILD STAND	150.00	8,500.00
09/20/2022	DPA22- 000172	57 DEER PATH LN	MORGAN, MICHAEL B	Soundside Construction Corp.	R	R	REMODEL - REMODEL WALL IN KITCHEN, REPLACE WITH ENGINEERED BEAM AND EXPAND OPENING BETWEEN FOYER AND KITCHEN, ADD ADDITIONAL ENGINEERED BEAM. REMOVE ALL CABINETS AND REPLACE WITH NEW CABINETS	510.00	50,000.00
09/20/2022	DPA22- 000174	18 OCEAN VIEW LOOP	CALABRESE, JOHN F	THE DESIGN LAB 7 INC.	R	R		1,910.00	190,000.00

Query Tool New

10/3/22, 9:26			1	1	Que	ry Tool	APPLIANCES, AND PAINT	1	T.
		La Territoria					ALL IMPACTED AREAS	120	L. dreen
09/22/2022	DPA22- 000170	8 FIFTH AVE	KNAUPP, DANESSA	SECOTA CONTRACTING INC, T/A NEAL CONTRACTING	R	R	NEW CONSTRUCTION: RECONSTRUCT NEW 7 BEDROOM HOME. PREVIOUS HOME DESTROYED BY FIRE	10.00	850,000.00
09/22/2022	DPA22- 000178	163 OCEAN BLVD	BERRY, GEORGE H TRUSTEES		R	R	REMODEL/REPAIR - MODIFY POOL AREA/BARRIER AND ADD BAR TABLE	100.00	10,000.00
09/22/2022	TP22- 000162	3 MALLARD COVE LOOP	ETHERIDGE, LINDA S	PIEDMONT NATURAL GAS	R	Р	INSTALL TANKLESS WATER HEATER	150.00	6,796.00
09/23/2022	DPA22- 000177	11 THIRTEENTH AVE	HARDY, TIMOTHY J	Sea Thru Construction, Inc.	R	R	REMODEL - Replace mid level steps and rails to stair platform, install trex, install rails, install bracing for pilings east and west side.	100.00	5,705,79
09/26/2022	TP22- 000165	50 DUCK WOODS DR	DUCK WOODS COUNTRY	LoWire LLC	С	E	INSTALL A LIGHTING SYSTEM TO ILLUUMINATE FOUR PICKLEBALL COURTS	150.00	87,200.00
09/26/2022	TP22- 000167	5375 N VIRGINIA DARE TRL	TOWN OF SOUTHERN SHORES	Piedmont Service Group	С	М	REPLACE 4 TON HEAT PUMP AIR TO AIR CHANGEOUT	0.00	10,915.00
09/26/2022	TP22- 000168	165 OCEAN BLVD	STEINBRAKER, G DAVID	Electric-Al Inc.	R	Е	RELOCATE ELECTRIC SERVICE TO SOUTH SIDE OF HOUSE	150.00	6,500.00
09/27/2022	TP22- 000164	1 TENTH AVE	SWINDELL, GREGORY A	North Beach Services Heating and Cooling	R	М	Replacement of top level HVAC system (3 ton 14 Seer)	150.00	8,044.00
09/27/2022	TP22- 000171	9 KINGFISHER TRL	GABRIEL, ROMAN III	OBHC, Inc. dba One Hour Heating & Air Conditioning	R	М	REPLACE HVAC WITH 14 SEER 2 TON CARRIER AIR HANDLER & HEAT PUMP	150.00	6,675.00
09/27/2022	DPA22- 000180	18 WILD PONY LN	FULCHER, O C	Fulcher Homes	R	R	REMODEL - ADD BEDROOM AS SHOWN ON SKETCH PLAN - ALREADY HEATED SPACE - FOOT PRINT THE SAME	110.00	2,000.00
09/28/2022	DPA22- 000181	19 PERIWINKLE PL	RETZBACH, EDWARD J	Macko OBX Construction, Inc.	R	R	REMODEL - Replace windows and doors on east wall. Interior repairs, install steel beam to open up room and sheetrock.	810.00	80,000.00
09/28/2022	DPA22- 000165	187 DUCK	SALAMONE, ANTHONY J	Caribbean Pool and Spa of the Outer Banks, Inc	R	R	ACCESSORY - INSTALL IN GROUND 11 X 22 POOL	250.00	54,178.00
09/28/2022	TP22- 000169	53 NORTH DUNE LOOP	BOM LLC	Angel Advanced Technologies, LLC	R	E	Install circuit wiring for range/oven and tapping off existing refrigerator circuit for new under counter refrigerator	150.00	3,570.00
09/29/2022	TP22- 000170	POTESKEET	ALFRED F III	R.A. HOY HEATING & AIR CONDITIONING	R	М	SINGLE C/O TRANE 14 SEER 3-TON H/P SYSTEM	150.00	8,871.00

Query Tool New

10/3/22, 9.26 /	AIVI				Quer	y lool i	New		
							THAT SERVICES THE DOWNSTAIRS.		
09/29/2022	TP22- 000172	140 GRAY SQUIRREL LN	VEATOR, JOHN	R.A. HOY HEATING & AIR CONDITIONING	R	М	SINGLE H/P C/O ONLY! TRANE 16 SEER 2-TON H/P THAT SERVICES THE DOWNSTAIRS	150.00	4,235.00
09/29/2022	TP22- 000173	47 HONEYSUCKLE LN	SAVASTANO, ALFRED N	Delta T Heating & Air Conditioning, Inc	R	М	REPLACE SYSTEM WITH 3.5 TON 14 SEER AMERICAN STANDARD INDOOR & OUTDOOR HEAT PUMP SYSTEM	150.00	7,200.00
09/30/2022	DPA22- 000182	83 GRAVEY POND LN	NGEONJUKLIN, SCOTT N	Macko OBX Construction, Inc.	R	R	REMODEL - Replace front decking with Trex. Replace front rails with Trex. Replace front stairs.	210.00	20,000.00
09/30/2022	DPA22- 000183	243 DUCK RD	KIMMEL, DAVID L	Sea Thru Construction, Inc.	R	R	REMODEL - Bathroom Remodel to include removal of existing toilet, vanity and shower. Install all new with a tiles shower and shower doors.	220.00	21,000.00
Total All Permits	42							21,302.30	3,909,971.79
Development Permit Application	25							18,952.30	3,716,026.79
Trade Permit	17							2,350.00	193,945.00
Total Commercial	4							550.00	280,405.00
Total Residential	38							20,752.30	3,629,566.79

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# **Commercial Trade Contractor Permit**

**Date** August 31, 2022

TP22-000156	
<b>Mechanical Trade</b>	<b>Permit</b>

Property Owner: SOUTHERN SHORES MCGRIFF UNIT 28	Y OWNER, LLC - DR.	PIN #: 022510000  Mailing 610 E MOREHEAD ST STE 100  Address: CHARLOTTE, NC 28202
Permit Types:  Plumbing Electrical Mechar Contractor:	nical Gas	
Company Name: Anderson Heating & Co	oling	Qualifier: Gil Anderson
Phone: (252) 619-3105 N. C. License Number: 31438		Address: PO Box 396 Kitty Hawk, NC 27949
REPLACEMENT		
Description of Work: MULITPURPOISE	OF 3.5 TON 14 SEER C E (ALUMINUM COIL) SY	OASTAL HEAT PUMP AND 3.5 TON FAN COIL STEM
Project Cost Estimate: \$10,604.00	E (ALUMINUM COIL) SY  Permit Amount: 15  Payment:	STEM

Signature of Licensee or Duly Authorized Representative



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
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# **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

# **BUILDING PERMIT # DPA22-000158**

Parcel:	021549000		Owner:	ARNOULT, WILLIAM S		
PIN:	986814248079		Address:	270 HILLCREST DR		
Location: District:	270 HILLCREST DR	anidomiial District	DI #.	SOUTHERN SHORES, NC 27949		
Subdiv	RS1 - Single Family R SO/SH BEACH BLKS		Phone #:	301-980-8422		
_ot-Block-Sect:	LOT: 14 BLK: 83 SEC					
BUSINESS NAME: CONTRACTOR'S N ADDRESS: CITY, STATE, ZIP: OFFICE#:	JAME: ARNOULT, WI 270 HILLCRES		NC G.C. LICENSE NC G.C. LICENSE LIMITATION: CLASSIFICATION QUALIFIER:			
CELL#	301-980-8422		LIEN AGENT NAM	ME.		
FAX#:	001 000 0122		ENTRY#:			
EMAIL:		· ·	LIEN AGENT ADI	DRESS:		
DECK, STAIR TRE <i>I</i>	WORK – (Any deviation ADS AND RAILINGS WIT ONS - ALL WOOD BELC	H SAME EXISITING FO	OTPRINT	rior approval): REMODEL - REPLACE FRONT PORCH		
TYPE OF CONSTR	UCTION: New Const	ruction - Addition / E	xpansion - Remodel /	Renovation / Repair - Accessory - Other		
				Swimming Pools - Workshop - Gazebo		
- Carriery	jeneraly	, et roug	, marine a	withining roots - L. vvoiksilop - L. Gazebo		
Detached Garag	ge - Accessory Storage					
OCCUPANCY:		TYPE OF FOUND	ATION:	PERMIT TYPE: Residential		
HEATED/LIVING A		HEAT:		RESIDENCE TYPE: Residence		
NON-HEATED ARE	:AS (SqFt): 0	A/C:		BUILDING USE: Single Family		
NUMBER OF STOR	RIES:	INTERIOR WALLS	:	ZONING DISTRICT: RS1 - Single Family Residential District		
BEDROOMS:		EXTERIOR WALLS	S:	ZONING PERMIT #:		
SEPTIC CAP. # OF	PERSONS:	FIREPLACE:		DATE APPROVED:		
BATHS: ½ BATHS	:	ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling		
GARAGE - DETACI	HED: ATTACHED:	INSULATION:		CAMA PERMIT #:		
STORAGE ENCLO	SURE:	ELEVATOR (SqFt)		DATE ISSUED:		
POOL: SHED:		DECKS (SqFt):				
LOOD ZONE: Uns		WINDOWS MAKE:		SEPTIC PERMIT #:		
BASE FLOOD ELE	VATION: LES 8ft	WINDOWS TYPE:		DATE ISSUED:		
PERMIT FEES:		TOTAL CONST	RUCTION COST: \$9,923.0	30		
<b>Description</b> Remodel / Renovatio Minimum Permit Fee				Total Cost 27.00 73.00 TOTAL FEE: 100.00		
/ith all Ordinances o uly authorized agen	of the Town of Southern S	hores. The applicant cer uction shall be as show lay be revoked for failure	tifies that the information n on the submitted plans	onally inspect all construction and be certain to comply n on this permit is correct; that he/she is the owner or and specifications: the he/she understands this permit is		
		-		08/31/2022		
Applicant - Owner/C	Contractor	(Please	print and sign name)	Date Approved		
KOIMA	('Vark			08/31/2022		
Building/Code/Zoni	ng Official		and the second control of the second sec	Date Issued		
K	y NB			<i>d</i> 1 5 .		
•	( <i>)</i>			9.1.200		

Parcel:

Owner:



021251000

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

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

# RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

# **BUILDING PERMIT # DPA22-000157**

REEVES, MICHAEL J TTEE

PIN: Location: District: Subdiv Lot-Block-Sect:	986805280480 27 ELEVENTH RS1 - Single Fi SEA CREST V LOT: 16 BLK: 5	AVE amily Residential District ILLAGE	Address: Phone #:	27 ELEVENTH AV SOUTHERN SHO 252-255-1141	Æ
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL#	AME: William 2401 C Kill Dev	Custom Homes, LLC Frasca blington Rd il Hills, NC 27948 30-0515	NC G.C. LICEN NC G.C. LICEN LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT N.	ON:	Licensed General Contractor 72094 Building
FAX#: EMAIL:	frascaci	ustomhomes@gmail.com	ENTRY#: LIEN AGENT A	DDRESS:	
EXISTING SIDING W (DECK BOARDS ON) SPECIAL CONDITIO  ***DOCUMENT ALL  TYPE OF CONSTRU	ITH NEW LP SM LY) & 110 SQ FT NS - ALL WOOD ROT REPIAR W ICTION:	viation from the Building Plan of ART PRE-PRIMED LAP SIDING OF STAIR DECKING BOARDS DELOW RFPE (8) FT. SHALL EXTENDED PICTURES***  v Construction - Addition / Exp  Retaining Wall - Beach Access	SYSTEM, REPLACING BE TREATED  Pansion - Remodel	NG APPROXIMATELY 40	0 SQ FT OF DECKING FACE  Accessory - Other
A CONTRACT OF THE PARTY OF THE	- Accessory	Storage Building - Dune Deck			
OCCUPANCY:	lannen in the transport of the second of the	TYPE OF FOUNDAT	TON:	PERMIT TYPE	
HEATED/LIVING AR		НЕАТ:			YPE: Residence
NON-HEATED AREA	AS (SgFt): 0	A/C:			E: Single Family
NUMBER OF STORI	ES:	INTERIOR WALLS:			RICT: RS1 - Single Family trict
BEDROOMS:		EXTERIOR WALLS:			iiT #:
SEPTIC CAP. # OF P	ERSONS:	FIREPLACE:		DATE APPRO\	
BATHS: ½ BATHS:		ROOF:		PERMITTED/C Dwelling	ONDITIONAL USE: Single Family
GARAGE - DETACHI				CAMA PERMIT	
STORAGE ENCLOS	URE:	ELEVATOR (SqFt):		DATE ISSUED:	
POOL: SHED:		DECKS (SqFt):			
FLOOD ZONE: Unsh		WINDOWS MAKE:		SEPTIC PERM	
BASE FLOOD ELEV	AIIUN: LES 811	WINDOWS TYPE:		DATE ISSUED:	
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery	y Fund		UCTION COST: \$68,29		Total Cost 683.00 10.00 TOTAL FEE: 693.00
with all Ordinances of duly authorized a <del>ge</del> nt	the Town of Sou of owner, that all	the to comply with all regulations thern Shores. The applicant certificant construction shall be as shown a part may be revoked for failure to the construction of the	fies that the information the submitted plan to comply with application	on on this permit is corre is and specifications: the	ct; that he/she is the owner or he/she understands this permit is s.
Applicant Owner/C	nntractor			9-	08/31/2022
Applicant - Owner/Co	Clau	(Fiease pr	int and sign name)		Date Approved
Building/Code/Zonin	g Official	_			Date Issued
	Bum	<del>}</del>			9-2-20



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# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

## **BUILDING PERMIT # DPA22-000159**

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	021278000 986805280660 28 ELEVENTH AVE RS1 - Single Family F SEA CREST VILLAG LOT: 17 BLK: 57 SEC	E	Owner: FEIDLER, JEFFRI Address: 3706 OAKRIDGE WILMINGTON, DE Phone #:		RD		
BUSINESS NAME:  CONTRACTOR'S NAME: ADDRESS: ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# CELL# FAX#:  Dan Osman Dan Osman PO Box 7403 Kill Devil Hills, NC 2 (252) 202-4599 (252) 202-4599 FAX#:		9	NC G.C. LICENSED ON C G.C. LICENSE NO G.C. LICENSE NO LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#:		Licensed General Contractor 76259 Limited Building Daniel S. Osman Chicago Title Company, LLC 1762356		
EMAIL:	osmandanny@	gmail.com	LIEN AGENT ADI	DRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603		
BACK OF HOUSE SPECIAL CONDIT  TYPE OF CONST	TO CREATE NEW BATHI IONS - ALL WOOD BELC RUCTION: New Cons	ROOM, RENOVATE EXISON REPE (8) FT. SHALL truction - Addition / E	STING BATHROOM  BE TREATED  Expansion - Remodel /	Renovation / Repair -			
disease.	Piers/Docks - Retain			Swimming Pools - 🔲 \	Workshop - Gazebo		
	age - 📋 Accessory Storaç	Market and the Contract of the					
OCCUPANCY:		TYPE OF FOUND	ATION:	PERMIT TYPE			
	AREAS (SqFt): 60.0				YPE: 2nd Home		
NON-HEATED AR	EAS (SqFt): 0	A/C:		The second secon	E: Single Family		
NUMBER OF STO	MBER OF STORIES: INTERIOR WALLS		<b>3:</b>	ZONING DISTI Residential Dis	RICT: RS1 - Single Family		
BEDROOMS:		EXTERIOR WALL	S:		/IT #: ZP22-000087		
SEPTIC CAP. # OF	PERSONS:	FIREPLACE:			VED: 09/06/2022		
BATHS: ½ BATH	5:	ROOF:		PERMITTED/CONDITIONAL USE: 9 Dwelling			
	CHED: ATTACHED:	INSULATION:	CAMA PERMI		Γ#:		
STORAGE ENCLO	SURE:	ELEVATOR (SqFt)	:	DATE ISSUED:			
POOL: SHED:		DECKS (SqFt):					
LOOD ZONE: Un		WINDOWS MAKE		The second secon	SEPTIC PERMIT #: s22-12907		
3ASE FLOOD ELE	EVATION: LES 8ft	WINDOWS TYPE:	NDOWS TYPE:		DATE ISSUED: 08/31/2022		
PERMIT FEES: Description Heated/Living Area Remodel / Renovati Homeowners Recov	on / Repair Fee	TOTAL CONST	RUCTION COST: \$50,000	.00	Total Cost 36.00 350.00 10.00 TOTAL FEE: 396.00		
with all Ordinances July authorized age ralid for 180 days to	of the Town of Southern sent of owner; that all considered begin construction and in	Shores. The applicant cel ruction shall be as show nay be revoked for failur	tifies that the information n on the submitted plans	n on this permit is corre and specifications; the ple regulations and law	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is		
Applicant - Owner	/Contractor	(Please	print and sign name)		Date Approved		
Kluri (	land			The summer summy			
- Building/Code/Zor	ning Official				Date Issued		
Janumy/ Odde/201	ning Official By MB—				9.6-205		
	•						

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# **Residential Trade Contractor Permit**

Date September 07, 2022

TP22-000158 Mechanical Trade Permit

Project Address: 137 S DOGWOOD TRL

Property Owner: MORRIS, CHRISTY M

PIN #: 022329000

Mailing Address: 137 S DOGWOOD TRL

KITTY HAWK, NC 27949

Permit Types:

□Plumbing #E

Mechanical ...

Gas

Contractor:

Company Name: All Seasons Heating & Cooling, Inc

Phone: (252) 491-9232

N. C. License Number: 19091

Qualifier: Joe Simpson

Address: P.O. Box 244

Point Harbor, NC 27964

Description of Work: REPLACE EXISTING SYSTEM WITH A 4 TON SPLIT SYSTEM HEAT PUMP & AIR HANDLER

Project Cost Estimate: \$10,170.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

ignature of Licensee or Duly Authorized Representative

Date

Signature of Permit Officia

Data

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# Residential Trade Contractor Permit

Date September 06, 2022

TP22-000157 **Mechanical Trade Permit** 

Project Address: 90 DUCK WOODS DR Property Owner: WEATHERLY, ERIC T

PIN #: 030156000

Mailing Address: 90 DUCK WOODS DR

KITTY HAWK, NC 27949

**Permit Types:** 

Plumbing Contractor:

Electrical Mechanical

Gas

Company Name: Claude Stuart Morris /DBA Air Handlers OBX

Phone: (252) 491-8637

N. C. License Number: L.23577

Qualifier: Claude Morris

Address: 8788 Caratoke Hwy

Harbinger, NC 27947

Description of Work: CHANGEOUT HVAC WITH NEW 15 SEER 2 TON & 16 SEER 2 TON AIR HANDLER

Project Cost Estimate: \$7,065.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

**Authorized Representative** 



# **TOWN OF SOUTHERN SHORES**

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

# **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

## **BUILDING PERMIT # DPA22-000148**

		<del></del>	<del> </del>		· · · · · · · · · · · · · · · · · · ·	
Parcel: 022523068			Owner:	READMAN, CRA	READMAN, CRAIG	
PIN: Location:	986805083965 24 NORTH DUNE LOO		Address:	24 N DUNE LOOP SOUTHERN SHORES, NC 27949		
District:	RS1 - Single Family Res		Phone #:	406-531-4516	JRES, NC 27949	
ubdiv	SO/SH BLK 61-A LOTS	45-68 PH 3				
ot-Block-Sect:	LOT: 68 BLK: 61A SEC:					
USINESS NAME:		and Remodeling, Co.	NC G.C. LICENS	ED CONTRACTOR:	Licensed General Contractor	
CONTRACTOR'S NAME: Keith Dobie ADDRESS: P.O. Box 242			NC G.C. LICENSE NUMBER:		59936	
ITY, STATE, ZIP:	Kitty Hawk, NC 2	7949	LIMITATION: CLASSIFICATION	M•	Unlimited Building	
FFICE#:	(252) 207-6589	0 .0	QUALIFIER:		WILLIAM KEITH DOBIE. JR	
ELL#			LIEN AGENT NA	ME:	Fidelity	
AX#:			ENTRY#:		1760314	
MAIL: kjconstructionco@		eyahoo.com LIEN AGENT ADD		DRESS:	223 S. West St, Suite 900, Raleigh, NC 27603	
ics of existing attache PECIAL CONDITION  YPE OF CONSTRUC  Bulkhead - Pic	d & enclose the other so S - ALL WOOD BELOW  STION: New Constru  Pers/Docks - Retaining	for master bedroom closs reen porch on the nw cor / RFPE (8) FT. SHALL Bi etion - Addition / Expa Wall - Beach Access Building - Dune Deck	ner of home E TREATED  Insion - Remodel / Walkway/Stairs -	Renovation / Repair -	Accessory - Other Workshop - Gazebo	
OCCUPANCY:		TYPE OF FOUNDATION: Pile		PERMIT TYPE: Residential		
HEATED/LIVING AREAS (SqFt): 232.0		HEAT:		RESIDENCE TYPE: Residence		
NON-HEATED AREAS (SgFt): 0		A/C:		BUILDING USE: Single Family		
NUMBER OF STORIES:				ZONING DISTRICT: RS1 - Single Family		
		INTERIOR WALLS: drywall		Residential District		
BEDROOMS:		EXTERIOR WALLS: match siding		ZONING PERMIT #:		
SEPTIC CAP. # OF PERSONS:		FIREPLACE:		DATE APPROVED:		
BATHS: ½ BATHS:		ROOF: Asphalt		PERMITTED/CONDITIONAL USE: Single Family Dwelling		
GARAGE - DETACHED: ATTACHED:		INSULATION:		CAMA PERMIT#:		
STORAGE ENCLOSURE:		ELEVATOR (SqFt):		DATE ISSUED:		
OOL: SHED:	1 1 1 2	DECKS (SqFt):				
FLOOD ZONE: Unshaded X BASE FLOOD ELEVATION: LES 8ft		WINDOWS MAKE: Viwinco		SEPTIC PERMIT #:		
ASE FLOOD ELEVA	ION: LES 8ff	WINDOWS TYPE: Do	uble hung	DATE ISSUED:		
		TOTAL CONSTRU	CTION COST: \$38,400	.00		
PERMIT FEES: Description					Total Cost	
eated/Living Area Fee	(Single Family)				139.20	
emodel / Renovation / omeowners Recovery I	Repair Fee Fund			•	384.00	
oomioro recovery i	unu				10.00 TOTAL FEE: 533.20	
The owner and builde	r are responsible to com	ply with all regulations a	nd laws; should perso	nally inspect all constr	ruction and he cortain to comply	
in all Ordinances of the land	ie Town of Southern Sho fowner: that all construc	res. The applicant certific	es that the Informatior n the submitted plans ocomply with applicat	on this permit is corre	ect; that he/she is the owner or	
W keith Vol	u Jr	M VEITH DOD!	c 1	******	08/24/2022	
Applicant - Owner/Contractor		(Please print and sign name)			Date Approved	
V 1	1 (10)				2 2	
DWIO!	LUUL				9.8-21	
uilding/Code/Zoning	Official			<del></del> ,	Date Issued	
a.iig/Souc/Lonning	12 5.4					
	DIVITED					



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# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

CAROLINA						
	022519091 Owner:		Owner:	BROWN, RICHARD A		
	86718309892	,		PO BOX 565		
	∤GINGUITE TRL RS1 - Single Family I	Posidontial District	Db #-	KITTY HAWK, N	C 27949	
	SO/SH BLK 129 SEC		Phone #:	252-619-1082		
_	OT: 61 BLK: 129 SE			•		
BUSINESS NAME: 691 Electric CONTRACTOR'S NAME: Paul Kueck		NC G.C. LICENSED CONTRACTO		Electrical		
DDRESS:	Po Box 691		LIMITATION:	: NUMBER:	U.33016 Unlimited	
ITY, STATE, ZIP:	Nags Head, N	IC 27959	CLASSIFICATION	:	Offinitied	
FFICE#:			QUALIFIER:		Paul Kueck	
ELL# AX#:	(252) 548-267	78	LIEN AGENT NAM	Æ:		
MAIL:	paul@691ele	ctric.com	ENTRY#: LIEN AGENT ADD	RESS:	n/a - under 30K	
□ Bulkhead -    □ Pier     □ Detached Garage -	s/Docks - 📙 Retair	ing Wall - Beach Acce ge Building - Dune Dec	ss Walkway/Stairs - 🔲 S k - 🔲 Generator	Renovation / Repair -	Accessory - Other Workshop - Gazebo	
CCUPANCY:		TYPE OF FOUNDA		PERMIT TYP	F: Recidential	
EATED/LIVING AREA	S (SqFt): 0.0	HEAT:			TYPE: Residence	
ON-HEATED AREAS	(SqFt): 0	A/C:			BE: Single Family	
UMBER OF STORIES	•	INTERIOR WALLS:			RICT: RS1 - Single Family	
EDROOMS:		EXTERIOR WALLS	EXTERIOR WALLS:		MIT #:	
EPTIC CAP. # OF PER	SONS:	FIREPLACE:		DATE APPRO		
ATHS: ½ BATHS:		ROOF:		PERMITTED/0 Dwelling	CONDITIONAL USE: Single Famil	
ARAGE - DETACHED		INSULATION:		CAMA PERM	IT #:	
ORAGE ENCLOSUR	E:	ELEVATOR (SqFt):		DATE ISSUED	):	
OOL: SHED:		DECKS (SqFt):				
OOD ZONE: Unshade		WINDOWS MAKE:		SEPTIC PERM	AIT #:	
ASE FLOOD ELEVATI	ON: LES 8ft	WINDOWS TYPE:		DATE ISSUED	);	
ERMIT FEES: escription inimum Permit Fee			RUCTION COST: \$28,500.0		Total Cos 100.00 TOTAL FEE: 100.00	
ly authorized agent of did for 180 days to begin	owner: that all const	ruction shall be as shown may be revoked for failure	on the submitted plans	on this permit is corr	ruction and be certain to comply ect; that he/she is the owner or	
		/DI			09/06/2022	
plicant - Owner/Cont	ACTOR	(Please p	rint and sign name)		Date Approve	
Kun (					d-8-j	
uilding/Code/Zoning O				<del></del>	Date Issued	



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# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location:	98671 19 FO	010069012 086718405036 09 FOXWOOD CIR		Owner: Address:	19 FOXWOOD CI	RKER, BARBARA FOXWOOD CIRCLE DUTHERN SHORES, NC 27949	
District: Subdiv Lot-Block-Sect:	SOUT	Single Family Re HERN SHORES 12 BLK: SEC:		Phone #:			
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	DATE ON TRACTOR'S NAME: Dan Osman DORESS: PO Box 7403 TY, STATE, ZIP: Kill Devil Hills, NC 27 FFICE#: (252) 202-4599 LL# (252) 202-4599 LX#:		NC G.C. LICE LIMITATION: C 27948 CLASSIFICAT QUALIFIER: LIEN AGENT ENTRY#:		N: AME:	Licensed General Contractor 76259 Limited Building Daniel S. Osman	
NCLUSE GAS FIREF SPECIAL CONDITIO TYPE OF CONSTRU	NS - AL	L WOOD BELO  New Constr	W RFPE (8) FT. SHALL uction - Addition / Ex	REMODEL 2 BATHROO BE TREATED  xpansion - Remodel	MS & REPLACE COUN  / Renovation / Repair -	DEL - AMENDED PERMIT TO ITER TOPS IN KITCHEN  Accessory - Other Workshop - Gazebo	
Detached Garage	- 0	Accessory Storage	Building - Dune De	ck - Generator			
OCCUPANCY:			TYPE OF FOUND	ATION:	PERMIT TYPE	: Residential	
HEATED/LIVING AR			HEAT:		RESIDENCE TYPE: Residence		
NON-HEATED AREA	AS (SqF	(t): 0	A/C:		BUILDING USE: Single Family		
NUMBER OF STORI	ES:		INTERIOR WALLS		ZONING DIST Residential Dis	RICT: RS1 - Single Family	
BEDROOMS:			EXTERIOR WALLS:		ZONING PERI	MIT #:	
SEPTIC CAP. # OF P	PERSON	NS:	FIREPLACE:		DATE APPRO	VED:	
BATHS: ½ BATHS:			ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling		
GARAGE - DETACH		TACHED:	INSULATION:		CAMA PERMI	T #:	
STORAGE ENCLOS	URE:		ELEVATOR (SqFt):		DATE ISSUED:		
POOL: SHED:			DECKS (SqFt):		1 76 7 8		
FLOOD ZONE: Unsh	THE RESERVE AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE		WINDOWS MAKE:		SEPTIC PERMIT #:		
BASE FLOOD ELEV	ATION:	LES 8ft	WINDOWS TYPE:	DATE ISSUED			
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery		Fee	TOTAL CONST	RUCTION COST: \$27,50	0.00	Total Cost 275.00 10.00	
vith all Ordinances of Iuly authorized agent	of own	vn of Southern S er; that all constr	hores. The applicant cer uction shall <del>be as</del> show	tifies that the information	on on this permit is corr	TOTAL FEE: 285.00 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is s.  08/29/2022	
Applicant - Owner/C	ontract	or	(Please	print and sign name)		Date Approved	
Koorin P	00	h	No. of the last of			08/29/2022	
Building/Code/Zonin	ng Offic	ial 2 "	1 B			Date Issued	



### **TOWN OF SOUTHERN SHORES**

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

#### **RESIDENTIAL** BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

Parcel: PIN: Location:	021939000 986819601985 184 DUCK RD		Address:		BRADY, ROGER 2723 COOLEEM	EE DR	
District: Subdiv Lot-Block-Sect:	RS1 - SO/S				RALEIGH, NC 27608 252-561-5567		
USINESS NAME: ONTRACTOR'S NAME: DDRESS: Phoenix Restoration Pat Broom P.O. Box 2408 Kill Devil Hills, NC 2 (252) 480-1044 (252) 619-3555 AX#: (252) 480-0138 MAIL: Phoenix Restoration Pat Broom P.O. Box 2408 Kill Devil Hills, NC 2 (252) 480-1044 (252) 619-3555 (252) 480-0138		NC G.C. LICENSE NU LIMITATION: 27948 CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#:		E NUMBER: I: ME:	Licensed General Contractor 58038 limited building Patricia L Broom Chicago Title Company LLC 1766465 223 S. West Street, Suite 900 / Raleigh, NC 27603		
nder nouse to add a overing replacement PECIAL CONDITIO	recrea . Repla <b>NS - A</b> I	cion room, bathroom cing existing water LL WOOD BELOW	n, and storage. Enclosi heater, tub / shower ur RFPE (8) FT. SHALL	ng existing porch on elev nit, and shower unit. BE TREATED	ated level to extend liv	DEL/ADDITION - Enclose area ving room. Painting and floor  Accessory - Other	
→ Bulkhead - → F	ers/Do	cks - 🗌 Retaining	Wall - Beach Acce	ss Walkway/Stairs - 🔲 S	wimming Pools -	Workshop - Gazebo	
CCUPANCY:		Accessory Storage B	TYPE OF FOUNDA				
EATED/LIVING AR	FAS (S	aEt). 739.0	HEAT: Heat Pump	ITION: Pile		PERMIT TYPE: Residential	
ON-HEATED AREA			A/C: Heat Pump			RESIDENCE TYPE: 2nd Home BUILDING USE: Single Family	
UMBER OF STORIES: 2			INTERIOR WALLS: Drywall and paneling		ZONING DISTRICT: RS1 - Single Family Residential District		
BEDROOMS:		Board and Batten			MIT #: VED:		
SEPTIC CAP. # OF PERSONS:		FIREPLACE: Other					
ATHS: 3 ½ BATHS: ARAGE - DETACHE		TACUED.	ROOF: INSULATION: Batt		Dwelling	CONDITIONAL USE: Single Famil	
TORAGE ENCLOSE		IACHED.	ELEVATOR (SqFt):		CAMA PERMI		
OOL: SHED:	71\L.		DECKS (SqFt):		DATE ISSUED		
LOOD ZONE: Unsha	nded X		WINDOWS MAKE:		CEDTIC DEDI	UT 4.	
ASE FLOOD ELEVA			WINDOWS TYPE:		SEPTIC PERM DATE ISSUED		
	<del></del>		TOTAL CONSTR	UCTION COST: \$320,000	.00		
PERMIT FEES: Description Heated/Living Area Fee Remodel / Renovation / Homeowners Recovery	Repair	e Family) Fee				Total Cos 443.40 3,000.00 10.00	
uly authorized agent of	of owne	er: that all construct	ies. The applicant cert	ities that the information	on this permit is corre	TOTAL FEE: 3,453.4 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit s.	
		The Artist Control of the Control of	<del></del>		<del></del>	09/06/202	
pplicant - Owner/Co			(Please p	rint and sign name)		Date Approve	
uilding/Code/Zoning					<del></del>	Date Issued	
	•					0000	
Kevin (	la	UR a.m	B			9-8-20	
		RUTT					



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

# COMMERCIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location: District:	022352000 98671443685 50 S DOGWO			Owner: Address: Phone #:	DUCK WOODS ( 50 DOGWOOD T KITTY HAWK, NO	RL	
Subdiv Lot-Block-Sect:	SUBDIVISION			Frione #.	252-261-2744		
BUSINESS NAME:	LLC.	R BANKS TENNIS C	CONTRACTOR	S NC G.C. LICEN	SED CONTRACTOR:	Licensed General Contractor	
CONTRACTOR'S NAME: JOHN MCCANN ADDRESS: PO BOX 363 CITY, STATE, ZIP: ENFIELD, NC 27		X 363			SE NUMBER: ON:	67990 500,000.00 HIGHWAY	
OFFICE#: CELL# FAX#:	•	(252) 725-2979		QUALIFIER: LIEN AGENT N ENTRY#:	AME:	JOHN J. MCCANN JR	
EMAIL:	OUTE	RBANKSTENNIS@G	MAIL.COM	LIEN AGENT A	DDRESS:		
SPECIAL CONDITIO	NS - ALL WOOI	W Construction -	FT. SHALL BE Addition / Expar Beach Access	TREATED -		Accessory - Gazebo	
Detached Garage	- C Accessor	Storage Building -	Dune Deck -  PF FOUNDATION		PERMITTED/C	ONDITIONAL USE: TENNIS	
	- 10 /0 Hi		F FOUNDATION	ON:	COURTS		
HEATED/LIVING AR		HEAT:			COMMERCIAL	USE: COUNTRY CLUB	
ION-HEATED AREA	is (sqrt):	A/C:				SE: Commercial	
NUMBER OF STORII	ES:	INTERI	INTERIOR WALLS:		ZONING DISTI	RICT: C - General Commercial	
BEDROOMS:		EXTER	EXTERIOR WALLS:			IIT #: ZP22-000089	
EPTIC CAP, # OF P	ERSONS:	FIREPL	ACE:		DATE APPROV	/ED: 09/08/2022	
ATHS: 1/2 BATHS:		ROOF:			BUILDING USE		
ARAGE - DETACHE TORAGE ENCLOSE					CAMA PERMIT		
OOL: SHED:	JKE:	ELEVA	OR (SqFt):	•	DATE ISSUED:		
LOOD ZONE: Unsha	aded X	DECKS					
ASE FLOOD ELEVA			WINDOWS MAKE: WINDOWS TYPE:			SEPTIC PERMIT #: 30892 DATE ISSUED: 06/09/2021	
		Mindo	WO THE.		DATE ISSUED:	06/09/2021	
PERMIT FEES: Description Dennis Court				TION COST: \$171,68		Total Cos 250.00 TOTAL FEE: 250.00	
ily authorized agent	of owner; that al	construction shall i	applicant certi e as shown on	the submitted plan		truction and be certain to comply rect; that he/she is the owner or	
John J MS	Cann In		MFA	and			
oplicant - Owner/Co	ntractor		(Please print	t and sign name)		Date Issued	
uilding/Code/Zoning		vin Cla	ND			09/08/2022	
/	, =	Λ	MB			Date Approved	



## **TOWN OF SOUTHERN SHORES**

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

#### **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

Parcel:	022272000		Owner:	DONDERO, DAMIAN C	
PIN:	986706380517		Address:	132 W HOLLY TRL	
_ocation:	132 W HOLLY TRL			KITTY HAWK, NC 27949	
District:	RS1 - Single Family Re		Phone #:	252-489-8402	
Subdiv .ot-Block-Sect:	SO/SH SOUNDSIDE BI LOT: 19 BLK: 106 SEC:				
	LO1, 19 BEN, 100 SEO.				
BUSINESS NAME: CONTRACTOR'S NAME: DONDERO, DAMIAN C ADDRESS: CITY, STATE, ZIP:			NC G.C. LICENS LIMITATION: CLASSIFICATION		
FFICE#:	252-489-8402		QUALIFIER:	A A # III	
ELL# AX#:	252-489-8402		LIEN AGENT NA ENTRY#:	AME:	
MAIL:			LIEN AGENT A	DDRESS:	
SARAGE, ADDING ( BPECIAL CONDITIO  TYPE OF CONSTRU	DUTLETS, INSULATION A  DNS - ALL WOOD BELOV  JCTION: New Constru	AND DRYWALL. V RFPE (8) FT. SHALL  uction - Addition / E:	BE TREATED	prior approval): ADDITION - FINISH ROOM ABOVE  / Renovation / Repair - Accessory - Other	
Bulkhead -	Piers/Docks - Retainin	g Wall - 🔲 Beach Acce	ess Walkway/Stairs - 🗌	Swimming Pools - Workshop - Gazebo	
Detached Garage	e - Accessory Storage	Building - Dune De	ck - Generator		
OCCUPANCY:		TYPE OF FOUND	ATION:	PERMIT TYPE: Residential	
EATED/LIVING AF	REAS (SqFt): 700.0	HEAT: Heat Pump		RESIDENCE TYPE: Residence	
ON-HEATED ARE	AS (SgFt): 0	A/C: Heat Pump		BUILDING USE: Single Family	
NUMBER OF STORIES:		INTERIOR WALLS	:	ZONING DISTRICT: RS1 - Single Family Residential District	
EDROOMS: 1		EXTERIOR WALLS	3:	ZONING PERMIT #:	
		FIREPLACE:		DATE APPROVED:	
ATHS: ½ BATHS:		ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling	
ARAGE - DETACH	ED: ATTACHED:	. INSULATION: Batt		CAMA PERMIT #:	
TORAGE ENCLOS	URE:	ELEVATOR (SqFt)		DATE ISSUED:	
OOL: SHED:		DECKS (SqFt):			
LOOD ZONE: Shad	led X	WINDOWS MAKE:		SEPTIC PERMIT #:	
ASE FLOOD ELEV	ATION: LES 8ft	WINDOWS TYPE:		DATE ISSUED:	
PERMIT FEES: Description Heated/Living Area Fe	ee (Single Family)	. TOTAL CONS.	RUCTION COST: \$6,00	0.00 Total Cos 420.00	
-	,			TOTAL FEE: 420.00	
vith all Ordinances of uly authorized agent alid for 180 days to b	f the Town of Southern Sh of owner; that all constru- negin construction and ma	ores. The applicant cer ction shall be as show	tifies that the inf <del>ormati</del> n on the submitted plan	sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or and specifications; the he/she understands this permit is able regulations and laws.	
( and	an Lond	40 0	~	09/08/202	
pplicant - Owner/C	ontractor	(Please	print and sign name)	Date Approve	
Kurn	Clark				
uilding/Code/Zonir	on Official			Date Issue	
unumg/Code/Zonii				912-208	
	By Nib		•	91a-200	
	1 1/1				



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

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

#### **BUILDING PERMIT # DPA22-000153**

9-12-2022

Parcel: PIN: Location:	022256001 986709260872		Owner: Address:	4239 WORTHINGTO	VANN, JOHN ROBERT 4239 WORTHINGTON LN	
District: Subdiv Lot-Block-Sect:	109 OSPREY LN RS1 - Single Family Resi SUBDIVISION - NONE LOT: 2 BLK: SEC:	dential District	Phone #:	KITTY HAWK, NC 27 252-256-0778	949	
BUSINESS NAME: CONTRACTOR'S NAME: ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#:  VANN, JOHN ROE 4239 WORTHINGT KITTY HAWK, NC 252-256-0778 252-256-0778		OBERT NC G.C. LICENS GTON LANE LIMITATION:		ON: AME: C	hicago Title Company, LLC 536059 23 S. WEST ST SUITE 900	
EMAIL:			LIEN AGENT A	IUREOO:	ALEIGH N.C 27603	
SPECIAL CONDITION FROG***  ***UNFINISHED FROGE  TYPE OF CONSTRU  Bulkhead - F	NS - ALL WOOD BELOW G HAS BEEN PAID - FRO CTION: New Construction Viers/Docks - Retaining	RFPE (8) FT. SHALL G (1,113 SQ. FT.) *** tion - Addition / Ex Wall - Beach Acce	pansion - Remodel ss Walkway/Stairs -	CTION RESIDENTIAL HOI  IT AND INSPECTIONS RE  / Renovation / Repair -   Swimming Pools -   Wor	EQUIRED FOR FINISHING	
	- Accessory Storage B	The state of the s				
OCCUPANCY: 6	540 (O. EO. 4444 O	TYPE OF FOUNDA	TION: Pile		PERMIT TYPE: Residential	
HEATED/LIVING ARI	EAS (SqFt): 4444.0	HEAT: Heat Pump		RESIDENCE TYP		
NON-HEATED AREA	S (SqFt): 4,714	A/C: Heat Pump		BUILDING USE: S		
			Residential Dist			
BEDROOMS: 3	EDCONO.	EXTERIOR WALLS: SMART SIDING		ZONING PERMIT	#: ZP22-000082	
SEPTIC CAP. # OF P BATHS: 3 ½ BATHS:		FIREPLACE:  ROOF: Asphalt		PERMITTED/CON	DATE APPROVED:01/05/2021 08/25/2022 PERMITTED/CONDITIONAL USE: Single Famil	
GARAGE - DETACHE	D: ATTACHED: 1,677	INSULATION: Batt		Dwelling		
STORAGE ENCLOSE		ELEVATOR (SqFt):		CAMA PERMIT#:	,	
POOL: SHED:		DECKS (SqFt): 1,9		DATE ISSUED:		
FLOOD ZONE: AE - 4	1 ff	WINDOWS MAKE:		SERTIC PERMIT	- 20044	
BASE FLOOD ELEVA		WINDOWS TYPE: S		SEPTIC PERMIT #		
JAGE I LOOD LLLVA	ATION. LES 6 IL	IMINDOMS TAPE: 3	SINGLE HUNG	DATE ISSUED: 02	/08/2022	
DEDMIT FEES:		TOTAL CONSTR	UCTION COST: \$910,00	0.00		
PERMIT FEES: Description Plan Review Fee - Sing Heated/Living Area Fee Non-Heated Areas Fee Swimming Pools			,		Total Cost 150.00 2,666.40 1,414.20 250.00 TOTAL FEE: 4,480.60 PAID- \$4480.60 BALANCE DUE: \$250,00	
duly authorized agent	the Town of Southern Shor	es. The applicant cert tion shall be as shown	ifies that the information	n on this permit is correct;	on and he portain to comply	
				and an annual strategy	08/30/2022	
Applicant - Owner/Co	ntractor	(Please p	rint and sign name)		Date Approved	
Kevin (	lark				08/30/2022	
Building/Code/Zoning	g Official				Date Issued	

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



#### **Residential Trade Contractor Permit**

**Date** April 27, 2022

TP22-000064 Electrical Trade Permit	
Project Address: 13 FERN LN Property Owner: NOPHSKER, CHRISTIAN	PIN #: 022754000 Mailing Address: 13 FERN LN KITTY HAWK, NC 27949
Permit Types:  Plumbing Electrical Mechanical Contractor:	Gas
Company Name: Phone: 252-256-1372 N. C. License Number:	Qualifier: NOPHSKER, CHRISTIAN Address:
Description of Work: SUPPORT HOT TUB. HOT NEED TO BE INSTALLED F	CONCRETE PAD APPROXIMATELY 10 X 20 IN BACK YARD TO TUBE REQUIRES A 220V ELECTRIC DISCONNECT THAT WILL FOR THE POWER SUPPLY  ECTRICAL MUST BE AT OR ABOVE 8 FT. MSL ****
Paymen	amount: 100.00 t: ype Reference Receipt ReceivedFrom Amount
I hereby certify that all information in this application is other local laws and ordinances and regulations. The approved plans and specification for the project permi	s correct and all work will comply with the State Building Code and all Inspection Department will be notified of any changes in the tted herein.
Signature of Licensee or Duly Authorized Representate	ive Date Signature of Permit Official Date

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



#### **Residential Trade Contractor Permit**

Date September 15, 2022

TP22-00016	1	
Mechanical	<b>Trade</b>	<b>Permit</b>

Project Address: 136 HIGH DUNE LOOP Property Owner: STEVENS, CYNTHIA

**PIN #:** 022446000

Mailing Address: 136 HIGH DUNE LOOP

	KITTY HAWK, NC 27949
anical Gas	
ERATION	Qualifier: WILLIAM STOLTZ
	Address: PO BOX 835
	NAGS HEAD, NC 27959
LEX RUN TO NEW CLOSET	
	eration

other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



#### Residential Trade Contractor Permit

Date September 14, 2022

TP22-000159

Mechanical Trade Permit

Project Address: 162 S DOGWOOD TRL

Property Owner: CLOWER, ASHLEY PEARL

PIN #: 021716000

Mailing Address: 162 S DOGWOOD TRL

SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Contractor:

Electrical

Mechanical

Gas

Company Name: Master Heating & Cooling

Phone: (252) 255-0095

N. C. License Number: L.18066

Qualifier: Anthony Pritchett

Address: P.O. Box 707

Kitty Hawk, NC 27949

Description of Work:

REPLACEMENT OF TOP LEVEL HVAC SYSTEM 1.5 TON LENNOX R410A 14 SEER

SYSTEM

Project Cost Estimate: \$7,300.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

signature of Licensee or Duly Authorized Representative

210

ignature of Permit Official

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



### Residential Trade Contractor Permit

Date September 14, 2022

TP22-000160 Mechanical Trade Permit

Project Address: 265 WAX MYRTLE TRL

Property Owner: BECKHAM, JEAN-PIERRE

PIN #: 021534000

Mailing Address: 20825 MINTWOOD CT

ASHBURN, VA 20147

Permit Types:

Plumbing Contractor:

Electrical

Mechanical

Gas

Company Name: Delta T Heating & Air Conditioning, Inc.

Phone: (252) 261-0404

N. C. License Number: 35327

Qualifier: Lloyd Journigan

Address: PO Box 575

Kitty Hawk, NC 27949

Description of Work: INSTALL MITZUBISHI 18,000 BTU 16 SEER DUCTLESS WALL MOUNTED HP SYSTEM

Project Cost Estimate: \$3,200.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative



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

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Location: District: I Subdiv	RS1 - Single Fam CHICAHAUK	Address: 140 CROOKED B C CROOKED BACK LOOP KITTY HAWK, NO 11 - Single Family Residential District Phone #:		BACK LOOP		
BUSINESS NAME: CONTRACTOR'S NAM ADDRESS: CITY, STATE, ZIP: DFFICE#:	LLC IE: DAVID PE PO BOX 2	STONE MARINE & REMODELII NNINGTON 371 NC 27954	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATION QUALIFIER:		Licensed General Contractor 84441 LIMITED BUILDING	
CELL#	(252) 455-	0960	LIEN AGENT NA	ME:	FIDELITY NATIONAL TITLE CO	
AX#:			ENTRY#:		1770783	
EMAIL:	CORNERS	STONEOBX@YAHOO.COM	LIEN AGENT AD	DRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603	
YPE OF CONSTRUC  Bulkhead - Pie  Ottached Garage -	TION: New C	construction - Addition / Expansioning Wall - Beach Accessorage Building - Dune Deck -	nsion - Remodel / Walkway/Stairs - C	Swimming Pools -	Workshop - Gazebo	
OCCUPANCY:		TYPE OF FOUNDATION	ON:	PERMIT TYPE		
EATED/LIVING AREA		HEAT:		The same of the sa	YPE: Residence	
NON-HEATED AREAS	(SqFt): 0	A/C:			E: Single Family	
IUMBER OF STORIES	<b>5</b> :	INTERIOR WALLS:	INTERIOR WALLS:		RICT: RS1 - Single Family	
BEDROOMS:		EXTERIOR WALLS:		Residential Dis		
EPTIC CAP, # OF PE	RSONS:	FIREPLACE:	FIREPLACE:		VED:	
ATHS: ½ BATHS:		ROOF:	ROOF:		ONDITIONAL USE: Single Family	
ARAGE - DETACHED		INSULATION:	INSULATION:		Г#:	
TORAGE ENCLOSUR	RE:	ELEVATOR (SqFt):		DATE ISSUED	-	
OOL: SHED:		DECKS (SqFt):				
LOOD ZONE: Unshad	The second secon		WINDOWS MAKE:		SEPTIC PERMIT #:	
ASE FLOOD ELEVAT	ION: LES 8ft	WINDOWS TYPE:		DATE ISSUED		
PERMIT FEES: Description		TOTAL CONSTRU	CTION COST: \$70,000	.00	Total Cost 700.00 10.00	
Remodel / Renovation / R Homeowners Recovery F					TOTAL FEE: 710.00	
fomeowners Recovery F The owner and builder	e Town of Southe	to comply with all regulations are shores. The applicant certific struction shall be as shown or may be revoked for failure to	s that the information	an this parmit is carre	ruction and be certain to comply set; that he/she is the owner or he/she understands this permit is s.	
omeowners Recovery F The owner and builder th all Ordinances of the	e Town of Southe	M Mores. The applicant certific estruction shall be as shown or nd may be revoked for failure to	s that the information	an this parmit is carre	ct: that haleha is the owner or	
The owner and builder thall Ordinances of the light for 180 days to beg	e Town of Souther owner; they all co in construction a	M Shores. The applicant certific struction shall be as shown or and may be revoked for failure to	es that the information the submitted plans comply with applicat	an this parmit is carre	ect; that he/she is the owner or e he/she understands this permit is s. 09/16/2022	
The owner and builder th all Ordinances of the all ordinances of t	e Town of Souther owners that sufficiently and in construction at tractor	M Shores. The applicant certific struction shall be as shown or and may be revoked for failure to	es that the information in the submitted plans comply with application.	an this parmit is carre	ect; that he/she is the owner or a he/she understands this permit is s.  09/16/2022  Date Approved	
The owner and builder thall Ordinances of the output of the first that the first	e Town of Souther owners that sufficiently and in construction at tractor	M Shores. The applicant certific struction shall be as shown or and may be revoked for failure to	es that the information in the submitted plans comply with application.	an this parmit is carre	ect; that he/she is the owner or e he/she understands this permit is s. 09/16/2022 Date Approved	



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southemshores-nc.gov

#### RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

CAROLINA						
PIN: 98 Location: 35 District: RS Subdiv SC	029169000 986805088287 351 SEA OATS TRL RS1 - Single Family Residential District SO/SH BLK 61 LOT: 14 BLK: 61 SEC:		Owner: Address: Phone #:	HODES, JAY M 5214 LIGHTHOR BURKE, VA 2201 202-669-1140		
USINESS NAME: Sandmark Custom H ONTRACTOR'S NAME: Mark Martin DDRESS: 191 Wax Myrtle Trail ITY, STATE, ZIP: Southern Shores, NC IFFICE#: (252) 261-1123		Trail	NC G.C. LICENSE LIMITATION:		Licensed General Contractor 75383 Unlimited Residential Mark Wayne Martin	
CELL#			LIEN AGENT NA	AME:	STEWART TITLE GUARANTY	
FAX#:			ENTRY#:		COMPANY 1772821	
EMAIL:	mark@outerbar	ksbuilders.com	LIEN AGENT AD	DDRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603	
Bulkhead - Piers	/Docks - 🔲 Retainin	g Wall - Beach Acce Building - Dune De	ess Walkway/Stairs - 🗍	Swimming Pools -	Accessory - Other  Workshop - Gazebo	
OCCUPANCY: 8		TYPE OF FOUND	ATION: Pile	PERMIT TYPE	Control of the Contro	
HEATED/LIVING AREAS		HEAT: Electric		RESIDENCE TYPE: 2nd Home		
NON-HEATED AREAS (S		A/C: Electric		The state of the s	E: Single Family	
NUMBER OF STORIES:	3	INTERIOR WALLS		ZONING DISTRICT: RS1 - Single Fami Residential District		
BEDROOMS: 4	2010-0		S: FIBER CEMENT	BER CEMENT ZONING PERMIT #: ZP22-000094 DATE APPROVED: 09/19/2022		
SEPTIC CAP. # OF PERS	OUNS: 8	FIREPLACE:			VED: 09/19/2022 CONDITIONAL USE: Single Family	
BATHS: 3 1/2 BATHS: 1		ROOF: Asphalt		Dwelling		
GARAGE - DETACHED:		INSULATION: Batt			CAMA PERMIT#:	
STORAGE ENCLOSURE POOL: SHED:	∴ ∠48	ELEVATOR (SqFt)		DATE ISSUED	);	
FLOOD ZONE: Unshaded	чX	DECKS (SqFt): 45 WINDOWS MAKE		SEDTIC DEDA	MT #: S5-13128	
BASE FLOOD ELEVATION		WINDOWS TYPE:			0: 09/12/2022	
PERMIT FEES: Description Heated/Living Area Fee (Si Non-Heated Areas Fee (Sir Homeowners Recovery Fur	ngle Family)	TOTAL CONSTI	RUCTION COST: \$450,00		Total Cos 507.60 210.30 10.00 TOTAL FEE: 727.90	
vith all Ordinances of the	Town of Southern Sn wner; that all constru construction and ma	ores. The applicant cer ection shall be as show	rtifies that the information on the submitted plante to comply with application of the comply with application.	on on this permit is corr s and specifications: th	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is	
					09/19/202	
Applicant - Owner/Contr	actor ' n L	(Please	print and sign name)		Date Approve	
K-W	lk.				9-19-	
Building/Code/Zoning O	fficial				Date Issued	



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

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location:	022880000 986720925342 37 SKYLINE DR			Owner: Address:		BERRYMAN, GRAY LEE 37 SKYLINE RD		
District: Subdiv Lot-Block-Sect:	RS1 SO/S			A SEC 1		SOUTHERN SHORES, NC 27949 252-573-9503		
BUSINESS NAME: OBRC, LLC CONTRACTOR'S NAME: David Phillip Meg ADDRESS: P.O. Box 1916 CITY, STATE, ZIP: Kitty Hawk, NC 2 OFFICE#: (252) 305-4856 CELL# FAX#:		ggs NC G.C. LICE LIMITATION:						
EMAIL:		phillip@obx.ho	use	LIEN AGENT AD	DRESS:			
TYPE OF CONSTRU	ICTION	I: New Const	R TOPS AND INSTALL W RFPE (8) FT. SHALI ruction - Addition / E	NEW LIGHTING BE TREATED  xpansion - Remodel ess Walkway/Stairs -	/ Renovation / Repair -	DEL - INSTALL NEW WINDOW IN  Accessory - Other  Workshop - Gazebo		
	e - L_J	Accessory Storage	Building - Dune De					
OCCUPANCY: HEATED/LIVING AR	EAC /	*~E+ 0 0	TYPE OF FOUND	ATION:	PERMIT TYPE			
NON-HEATED AREA			HEAT: A/C:		CONTRACTOR OF THE PARTY OF THE	RESIDENCE TYPE: Residence BUILDING USE: Single Family		
		-1). 0	A/C:	AC.				
NUMBER OF STORI	ES:		INTERIOR WALLS	3: Drywall	Residential Dis	RICT: RS1 - Single Family		
BEDROOMS:			EXTERIOR WALL	S: HARDI PLANK	ZONING PER			
		FIREPLACE:		DATE APPRO				
BATHS: ½ BATHS:		ROOF:			ONDITIONAL USE: Single Family			
GARAGE - DEȚACH		TACHED:	INSULATION:		CAMA PERMI	Τ#:		
STORAGE ENCLOS	URE:		ELEVATOR (SqFt)	:	DATE ISSUED	-		
POOL: SHED:			DECKS (SqFt):					
FLOOD ZONE: Unsh	The second secon		WINDOWS MAKE		SEPTIC PERM			
BASE FLOOD ELEV	AHON:	LES 8ft	WINDOWS TYPE:		DATE ISSUED			
PERMIT FEES: Description Remodel / Renovation Homeowners Recover		r Fee	TOTAL CONST	RUCTION COST: \$40,00	0.00	Total Cost 400.00 10.00 TOTAL FEE: 410.00		
vith all Ordinances of luly authorized agent	of own	พn of Southern S er; that all constเ	hores. The applicant ce uction shall be as show	rtifies that the informatio	on on this permit is corress and specifications: the	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is		
Applicant - Owner/C	ontrac	tor	(Plazea	print and sign name)	^ /	09/19/2022		
OBRC, L	_		DAVIDA	Meggs 4	Jahn_	Date Approved		
				- <del>- 11 </del>	The state of the s	Date Issued		
Building/Code/Zonin		lal .	•	ί		9-(9)		
Ry: h	Al							



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

#### **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

CAROLINA						
Parcel: PIN:	02123 98680	34000 06373978		Owner: Address:	DAVIS, JAMES L 1615 KNOB HILL	
Location: District: Subdiv Lot-Block-Sect:	RS1 - SEA	ITH AVE · Single Family Re CREST VILLAGE 25 BLK: 55 SEC:	sidential District	Phone #:	ATLANTA, GA 30 404-697-8302	)329
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#:	AME:	Outer Banks Co Tom Stalheber PO Box 719 Kitty Hawk, NC (252) 207-7269	ottage Renovations, Inc. 27949	NC G.C. LICENSE NC G.C. LICENSE LIMITATION: CLASSIFICATION QUALIFIER:		Licensed General Contractor 79322 Limited Residential Thomas Stalhebar
CELL#		•		LIEN AGENT NAM	ΛE:	NORTH AMERICAN TITLE
FAX#:				ENTRY#:	<del></del> -	INSURANCE COMPANY 1747298
EMAIL:		tom@obxcottag	erenovations.com	LIEN AGENT ADDRESS:		223 S. WEST ST SUITE 900 RALEIGH N.C 27603
Bulkhead - F	Piers/Do	cks - 🔲 Retainin	uction - Addition / Expa g Wall - Beach Access Building - Dune Deck -	Walkway/Stairs - 🦳 S - 🗍 Generator	Swimming Pools -	Workshop - Gazebo
OCCUPANCY:		,	TYPE OF FOUNDATION	ON:	PERMIT TYPI	
HEATED/LIVING AR			HEAT:			TYPE: 2nd Home
NON-HEATED AREA NUMBER OF STORI		·t): 204	A/C: INTERIOR WALLS:			SE: Single Family FRICT: RS1 - Single Family
BEDROOMS:			EXTERIOR WALLS:		THE RESERVE THE PERSON NAMED IN COLUMN 2 I	MIT #: ZP22-00092
SEPTIC CAP. # OF F	ERSO	NS:	FIREPLACE:			OVED: 09/16/2022
BATHS: ½ BATHS:			ROOF:		PERMITTED/0 Dwelling	CONDITIONAL USE: Single Family
GARAGE - DETACH		TACHED:	INSULATION:		CAMA PERM	
TORAGE ENCLOS	URE:		ELEVATOR (SqFt):		DATE ISSUEI	):
OOL: SHED:	- J - J V		DECKS (SqFt):		OFDIA DED	HIT !!
FLOOD ZONE: Unsh BASE FLOOD ELEV			WINDOWS MAKE: Viv WINDOWS TYPE: Do		DATE ISSUED	MIT #: S22-13190
SAGE PLOOD ELLV.	ATION.	LES OIL	WINDOWS THE. DO	uble fluing	IDATE 1990EL	J: 09/14/2022
			TOTAL CONSTRUC	CTION COST: \$233,838	.00	
PERMIT FEES: Description Non-Heated Areas Fet Remodel / Renovation Homeowners Recover	/ Repai					Total Cost 61.20 2,077.00 10.00 TOTAL FEE: 2,148.20
vith all Ordinances of Iuly authorized agent	the 700 of pyon	พท of Southern Sh er; that all constri	nores. The applicant certification shall be as shown of ay be revoked for failure to	es that the information n the submitted plans	on this permit is corn and specifications; th	truction and be certain to comply rect; that he/she is the owner or ne he/she understands this permit i ws.
MIMIC	ĮV_		THOMAS OTO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		09/16/202
Applicant - Owner/C	ontract	or	(Please pri	nt and sign name)		Date Approved
Kenn	$\alpha$	urk				9-19-2
Building/Code/Zoni <u>ท</u>	g Offic	ial				Date Issue



TOWN OF SOUTHERN SHORES
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#### **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

CAROLINA	www.sodthemsnores-nc.g			BUILDING PERMI	I # DFA22-000 [04
Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	022256001 986709260872 109 OSPREY LN RS1 - Single Family Reside SUBDIVISION - NONE LOT: 2 BLK: SEC:	ential District	Owner: Address: Phone #:	VANN, JOHN ROE 4239 WORTHING KITTY HAWK, NC 252-423-0091	TON LN
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	P.O. Box 42 Kitty Hawk, NC 279 (252) 261-3682 (252) 261-3682 Julie@nemarinecor	nst.com	NC G.C. LICENSE LIMITATION: CLASSIFICATION QUALIFIER: LIEN AGENT NAM ENTRY#: LIEN AGENT ADE	I: ME: DRESS:	Licensed General Contractor 30026 Limited S (Marine Construction) EDDIE VALDIVEISIO
& 16 X 16 PLATFORM SPECIAL CONDITION	I WITH 4 X 20 L DROP DON  IS - ALL WOOD BELOW R  CTION: New Construction	VN & BOAT LIFT FPE (8) FT. SHALL E	BE TREATED		SORY - INSTALLING 30 X 6 PIER
	iers/Docks - Retaining W				
				owimming Moois - 😂 V	vorksnop Gazebo
	- Accessory Storage Bui	The second state of the se			
OCCUPANCY:		TYPE OF FOUNDAT	ION:	PERMIT TYPE	
HEATED/LIVING ARE		HEAT:			YPE: Residence
NON-HEATED AREA	5 (5qrt): U	A/C:			: Single Family
NUMBER OF STORIE	S:	INTERIOR WALLS:		ZONING DISTR Residential Dist	RICT: RS1 - Single Family
BEDROOMS:		EXTERIOR WALLS:			IIT #: ZP22-000090
SEPTIC CAP, # OF PE	ERSONS:	FIREPLACE:			/ED: 09/16/2022
					ONDITIONAL USE: Single Family
BATHS: ½ BATHS:		ROOF:		Dwelling	ONDITIONAL USE. Single Family
GARAGE - DETACHE	D: ATTACHED:	INSULATION:		CAMA PERMIT	#: 86731
STORAGE ENCLOSU	IRE:	ELEVATOR (SqFt):		DATE ISSUED:	
POOL: SHED:		DECKS (SqFt):			
LOOD ZONE: AE - 5		WINDOWS MAKE:		SEPTIC PERM	IT #:
BASE FLOOD ELEVA		WINDOWS TYPE:		DATE ISSUED:	
	30 Oct 170 200 - COL				
		TOTAL CONSTR	UCTION COST: \$28,000.	00	
PERMIT FEES:		IOIAL CONGIN	0001. #20,000.		
<b>Description</b> Bulkhead, Dock, Pier, R	etaining Wall Fee				Total Cost 150.00 TOTAL FEE: 150.00
vith all Ordinances of t luly authorized agent o	the Town of Southern Shore	s. The applicant certif on shall be as shown	ies that the information on the submitted plans	on this permit is corre	uction and be certain to comply ct; that he/she is the owner or he/she understands this permit is s.
1 britheast	en Marine	Julie Em	sory Julie	EEmay	09/16/2022
Applicant - Owner/Co	ntractor	(Please pr	int and sign name)	7	Date Approved
	0 ,		,		^ <del>-</del>
Lwin C	lark		•	-	4-20-21
Suilding/Code/Zoning	Larn Official Bumb		• •		9-20-20 Date Issued



### **TOWN OF SOUTHERN SHORES**

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

#### **RESIDENTIAL** BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	98670 127 T RS1 - SO/S	36000 05188184 ALL PINE LN Single Family Resic H SOUNDSIDE BLK 5 BLK: 125 SEC:		Owner: Address: Phone #:	BLINKEN, KARI 127 TALL PINE LAI SOUTHERN SHOR 	
BUSINESS NAME: CONTRACTOR'S N ADDRESS: CITY, STATE, ZIP: DFFICE#: CELL# FAX#:	IAME:	Bredell Electrical S Paul Bredell 100 S Dogwood Southern Shores, I	-	NC G.C. LICENSE NC G.C. LICENSE LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAM ENTRY#:	NUMBER:	Electrical 20220 \$60,000 Limited Paul Bredell
EMAIL:		W28@sbcglobal.ne	et	LIEN AGENT ADD	RESS:	
SPECIAL CONDITION AT LEAST 8FT. ALL WOOD BELOW TYPE OF CONSTR Bulkhead -	ONS - ABOV W RFPE UCTION Piers/Do	***DOCUMENTA E SEA LEVEL** (8) FT. SHALL BE T  : New Constructi cks - Retaining V	TION FROM SUF * REATED on - Addition / Exp	ansion - Remodel / R s Walkway/Stairs - Sv	enovation / Repair -	
OCCUPANCY:	,	Accessory Storage Du	TYPE OF FOUNDAT		PERMIT TYPE:	Posidontial
HEATED/LIVING A	REAS (S	αFt)- 0 0	HEAT:	ION.	RESIDENCE TY	
NON-HEATED ARE			A/C:			
NUMBER OF STOR		.y. o	INTERIOR WALLS:		BUILDING USE  ZONING DISTRI  Residential Distr	CT: RS1 - Single Family
BEDROOMS:			EXTERIOR WALLS:		ZONING PERMI	T#: ZP22-000093
SEPTIC CAP. # OF	PERSO	NS:	FIREPLACE:		DATE APPROVI	<b>ED</b> : 09/19/2022
BATHS: ½ BATHS:			ROOF:	·	PERMITTED/CO Dwelling	NDITIONAL USE: Single Family
GARAGE - DETACI		TACHED:	INSULATION:		CAMA PERMIT	#:
STORAGE ENCLOS	SURE:		ELEVATOR (SqFt):		DATE ISSUED:	
POOL: SHED:	William to the control of the contro		DECKS (SqFt):			
LOOD ZONE: AE -			WINDOWS MAKE:		SEPTIC PERMIT	<sup>-</sup> #:
BASE FLOOD ELEV	VATION:	LES 8 ft	WINDOWS TYPE:		DATE ISSUED:	
PERMIT FEES: Description Generator Fee			TOTAL CONSTR	UCTION COST: \$8,500.00	)	Total Cost 150.00 TOTAL FEE: 150.00
ith all Ordinances ouly authorized agen alld for 180 days to	of the Tov ≴ of own	vn of Southern Shore er; that all constructi nstruction and may l	es. The applicant certif on shall be as shown	ies that the information	on this permit is correc and specifications: the l	ction and be certain to comply t; that he/she is the owner or ne/she understands this permit is G-20-22
.pplicant - Owner/0	Contract	or	(Please pr	int and sign name)	** ***	Date Approved
Kevin (	la	M	•			9-211-22
uilding/Code/Zoni	ng Offic	ial MS			<del>regions</del>	Date Issued



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

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Location: District: Subdiv Lot-Block-Sect:	RS1 - Si CHICAH	331382 R PATH LN ngle Family Resid	lential District	Owner: Address: Phone #:	MORGAN, MICH 57 DEER PATH L SOUTHERN SHO 252-202-5550	N
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	<b>AME:</b> S F <i>N</i> (	Soundside Constri Sam Moore P.O. Box 956 Manteo, NC 2795 <sup>2</sup> 252) 305-2526 am@mooreisland	ı	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD	N: ME:	Licensed General Contractor 26579 500,000.00 RESIDENTIAL SAM A. MOORE
KITCHEN, REPLACE BEAM. REMOVE ALI SPECIAL CONDITIO ***NOT A SUBSTAN	WITH EN CABINE NS - ALL	IGINEERED BEAI IS AND REPLAC WOOD BELOW F ROVEMENT***	M AND EXPAND OPEN E WITH NEW CABINE RFPE (8) FT. SHALL B	NING BETWEEN FOY TS E TREATED	ER AND KITCHEN, AD	DEL - REMODEL WALL IN D ADDITIONAL ENGINEERED
						Accessory - Other
1	y				Swimming Pools - U	Workshop - 🗍 Gazebo
	e - LJ Acc	essory Storage Bu	ilding - U Dune Deck	Charles and the second	4	
OCCUPANCY: HEATED/LIVING AR	EAC/CaE	*\.	TYPE OF FOUNDAT	ION:	PERMIT TYPE	
ON-HEATED AREA			HEAT: A/C:			YPE: Residence
						E: Single Family
IUMBER OF STORI	ES:		INTERIOR WALLS:		Residential Dis	RICT: RS1 - Single Family
BEDROOMS:	adianista a lakuskaa Coordonadora		EXTERIOR WALLS:		ZONING PER	
EPTIC CAP. # OF P	ERSONS:		FIREPLACE:		DATE APPRO	
BATHS: ½ BATHS:		-	ROOF:		PERMITTED/C Dwelling	ONDITIONAL USE: Single Famil
GARAGE - DETACH	ED: ATTA	CHED:	INSULATION:		CAMA PERMI	Γ#:
STORAGE ENCLOS	URE:		ELEVATOR (SqFt):		DATE ISSUED	
POOL: SHED:			DECKS (SqFt):			
LOOD ZONE: AE - 4	The second second second second		WINDOWS MAKE:		SEPTIC PERM	IIT #:
BASE FLOOD ELEV	ATION: L	ES8ft	WINDOWS TYPE:		DATE ISSUED	•
DAGE FLOOD ELEV		- Manager	, , , , , , , , , , , , , , , , , , , ,			
SASE FLOOD ELEV			TOTAL CONOTH	ICTION COOT ATS SES		
PERMIT FEES:	<del></del>		TOTAL CONSTRU	ICTION COST: \$50,000	0.00	
		н <del>е</del>	TOTAL CONSTRU	JCTION COST: \$50,000	0.00	Total Cos 500.0 10.0
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery The owner and build with all Ordinances of uly authorized agent	y Fund der are res the Town of owner;	ponsible to comp of Southern Shore that all constructi	ly with all regulations a es. The applicant certifi on shall be as shown c	and laws; should person les that the information on the submitted plans o comply with applical	onally inspect all const	500.0 10.0 TOTAL FEE: 510.0 ruction and be certain to comply ect; that he/she is the owner or
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery *The owner and build ith all Ordinances of uly authorized agent	y Fund der are res the Town of owner;	ponsible to comp of Southern Shore that all constructi	ly with all regulations a es. The applicant certifi on shall be as shown c	and laws; should persites that the information on the submitted plans	onally inspect all const n on this permit is corre	TOTAL FEE: 510.0 TOTAL FEE: 510.0 ruction and be certain to comply ect; that he/she is the owner or a he/she understands this permit s.
PERMIT FEES: Description Remodel / Renovation Homeowners Recover The owner and build ith all Ordinances of uly authorized agent alid for 180 days to b	y Fund der are res the Town of owner; egin const	ponsible to comp of Southern Shore that all constructi	ly with all regulations a es. The applicant certifi on shall be as shown o be revoked for failure to Son A	and laws; should person les that the information on the submitted plans o comply with applical	onally inspect all const n on this permit is corre	TOTAL FEE: 510.0  TOTAL FEE: 510.0  ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit s.
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery The owner and build with all Ordinances of uly authorized agent	y Fund der are res the Town of owner; egin const	ponsible to comp of Southern Shore that all constructi	ly with all regulations a es. The applicant certifi on shall be as shown o be revoked for failure to Son A	and laws; should person les that the information on the submitted plans to comply with applical Moore	onally inspect all const n on this permit is corre	500.0 10.0 TOTAL FEE: 510.0 ruction and be certain to comply ect; that he/she is the owner or
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery The owner and build with all Ordinances of uly authorized agent alid for 180 days to b	y Fund  der are res the Town of owner; egin const	ponsible to comp of Southern Shore that all constructi	ly with all regulations a es. The applicant certifi on shall be as shown o be revoked for failure to Son A	and laws; should person les that the information on the submitted plans to comply with applical Moore	onally inspect all const n on this permit is corre	TOTAL FEE: 510.0  TOTAL FEE: 510.0  ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit s.
PERMIT FEES: Description Remodel / Renovation Homeowners Recover The owner and build with all Ordinances of uly authorized agent alid for 180 days to b	der are res the Town of owner; egin const	ponsible to comp of Southern Shore that all constructi	ly with all regulations a es. The applicant certifi on shall be as shown o be revoked for failure to Son A	and laws; should person les that the information on the submitted plans to comply with applical Moore	onally inspect all const n on this permit is corre	TOTAL FEE: 510.0  TOTAL FEE: 510.0  ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit s.



### **TOWN OF SOUTHERN SHORES**

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

#### **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	9867 18 O RS1 - LYNE	19135 16938280 CEAN VIEW LOOI - Single Family Re TTE B LENARD F 1 BLK: SEC:	sidential District	Owner: Address: Phone #:	CALABRESE, JC 236 E 47TH ST A NEW YORK, NY 252-599-2212	NPT 12E
BUSINESS NAME: CONTRACTOR'S N ADDRESS: CITY, STATE, ZIP: OFFICE#:	AME:	THE DESIGN L RICHARD E SE 252 SEA OATS SOUTHERN SH	SSOMS	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER:		Licensed General Contractor 85985 LIMITED BUILDING RICHARD SESSOMS
CELL#		(252) 599-2212		LIEN AGENT NA	AME:	First American Title Insurance
AX#:			ENTRY#:		Company 1774621	
EMAIL:		THEDESIGNLA	B7@GMAIL.COM			223 S. WEST ST SUITE 900 RALEIGH N.C 27603
& REPLACE KITCHI SPECIAL CONDITION  TYPE OF CONSTR  Bulkhead -	EN CAB ONS - A	INETS & APPLIAN LL WOOD BELOV : New Constructs - Retainin	NCES, AND PAINT ALL I W RFPE (8) FT. SHALL I  uction - Addition / Exp g Wall - Beach Acces	IMPACTED AREAS BE TREATED  Dansion - Remodel as Walkway/Stairs -	/ Renovation / Repair - 〔	M IMPACTED AREAS, DEMOLISH  Accessory - Other  Workshop - Gazebo
Detached Garag	e- ∟.)	Accessory Storage	Building - Dune Deck	CANCEL CHANGE CONTRACTOR OF THE PARTY OF THE	PERMIT TYPE	- Pacidontial
HEATED/LIVING AF	REAS (S	igFt): 0.0	HEAT: Heat Pump	TION.		TYPE: Rental > 30 days
NON-HEATED ARE			A/C: Heat Pump			E: Single Family
NUMBER OF STOR	IES:		INTERIOR WALLS:	KNOCKDOWN	<b>ZONING DIST</b> Residential Dis	RICT: RS1 - Single Family
BEDROOMS:	***************************************		EXTERIOR WALLS:	: HARDI PLANK	ZONING PERI	
SEPTIC CAP. # OF	PERSO	NS:	FIREPLACE:		DATE APPRO	
BATHS: ½ BATHS:	0		ROOF: Asphalt		PERMITTED/O	CONDITIONAL USE: Single Family
GARAGE - DETACI	IED: AT	TACHED:	INSULATION: Batt		CAMA PERMI	Т#:
STORAGE ENCLOS	SURE:		ELEVATOR (SqFt):		DATE ISSUED	
POOL: SHED:		The state of the s	DECKS (SqFt):			
FLOOD ZONE: Uns			WINDOWS MAKE: /		SEPTIC PERM	
BASE FLOOD ELEV	VATION:	LES 8ft	WINDOWS TYPE: 4	00 SERIES	DATE ISSUED	):
PERMIT FEES:			TOTAL CONSTR	UCTION COST: \$190,00	00.00	
<b>Description</b> Remodel / Renovation Homeowners Recove		r Fee				Total Cost 1,900.00 10.00 TOTAL FEE: 1,910.00
vith all Ordinances of July authorized agen	of the To	√n of Southern Sh er:∕that all constru	ores. The applicant certi uction shall be as shown ay be revoked for failure	ifies that the information on the submitted plane to comply with application	on on this permit is corr is and specifications; th able regulations and law	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is /s.
1 224	D	<b>'</b>	FICHARDE	. SESSOMS	UIL.	09/19/2022
Applicant - Owner/C	Contract	tor	(Please p	rint and sign name)		Date Approved
Klur		lark				9-20-2
Building/Code/Zoni	ng Offic	ial /	B			Date Issued



### **TOWN OF SOUTHERN SHORES**

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

#### RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

Location: District: Subdiv Lot-Block-Sect: BUSINESS NAME: CONTRACTOR'S NA	8 FIFTH AVE RS1 - Single Family Re SEA CREST VILLAGE LOT: 20 BLK: 50 SEC:	sidential District		MIDLOTHIAN, VA	
	LO 1, 20 DEN. 00 OLO.		Phone #:	804-381-8638	
CONTRACTORIC M.	SECOTA CONT	RACTING INC. T/A NEAL	NC G.C. LICENSEI	CONTRACTOR:	Licensed General Contractor
ADDRESS: CITY, STATE, ZIP:		27949	NC G.C. LICENSE LIMITATION: CLASSIFICATION:		88083 Unlimited Building
OFFICE#:	(252) 564-9780		QUALIFIER:		Matthew Neal
ELL#			LIEN AGENT NAM	E: .	Old Republic National Title Insurance Company
AX#:			ENTRY#:		1773677
MAIL:	matt@nealcont	acting.com	LIEN AGENT ADD	RESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603
SPECIAL CONDITION  TYPE OF CONSTRU	SCTION: New Constr	DESTROYED BY FIRE W RFPE (8) FT. SHALL BE uction - Addition / Expans g Wall - Beach Access W	sion - Remodel / R	•	•
		Building - Dune Deck -			
OCCUPANCY: 14	S - C. Accessory Glorage	TYPE OF FOUNDATIO		PERMIT TYPI	E: Residential
	EAS (SqFt): 2926.0	HEAT: Electric			TYPE: Vacation Cottage < 30 days
ON-HEATED ARE		A/C: Electric		BUILDING US	E: Single Family
UMBER OF STOR	<b>ES:</b> 3	INTERIOR WALLS: Dry		ZONING DIST Residential Di	RICT: RS1 - Single Family strict
EDROOMS: 7		EXTERIOR WALLS: LF	Smart Side		MIT #: ZP22-000095
EPTIC CAP. # OF I		FIREPLACE:			OVED:09/19/2022 CONDITIONAL USE: Vacation
BATHS: 7 ½ BATHS		ROOF: Other		Cottage	
	ED: ATTACHED: 47	INSULATION: Other		CAMA PERM	
TORAGE ENCLOS OOL: SHED:	URE:	ELEVATOR (SqFt):		DATE ISSUED	);
LOOD ZONE: Unst	andod V	DECKS (SqFt): 434 WINDOWS MAKE: Stell	raie	SERTIC BEDI	MIT #: S22-13193
ASE FLOOD ELEV		WINDOWS TYPE: Mixe		DATE ISSUED	
AGE I LOOD LLLY	ATION. LEG ON	WINDOWS I'II E. MIXE		DAIL 1000LL	
PERMIT FEES:		TOTAL CONSTRUC	TION COST: \$850,000.	00	
Heated/Living Area Fe Non-Heated Areas Fe Homeowners Recove	e (Single Family) ry Fund /	on OME AFTER HOUSE FIRE			Total Cost 150.00 1,755.60 156.60 10.00 -2,062.20 TOTAL FEE: 10.00
vith all Ordinances of luly authorized agent	f the Town of Southern S t of owner; that all constr pegin construction and m	nores. The applicant certifies uction shall be as showing near be revoked for fallure to	s that the information the submitted plans a	on this permit is corn and specifications; th	truction and be certain to comply rect; that he/she is the owner or ne he/she understands this permit is
KORMA					1000
KU/I N Building/Code/Zonio				<del></del>	Data Issued



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

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN:	021918000 986707699783	<del>ил на достория в достория в достория достория достория достория достория достория достория достория достория д</del>	Owner: Address:	BERRY, GEORGE H TRUSTEES 239 N DOGWOOD TRL	
Location: District: Subdiv Lot-Block-Sect:	163 OCEAN BLVD RS1 - Single Family R SO/SH AMENDED PL LOT: 5 6 BLK: 30 SEC	AT B SEC 3	Phone #:	SOUTHERN SHORES, NC 27949 703-473-0528	
BUSINESS NAME		RGE H TRUSTEES	NC G.C. LICENS NC G.C. LICENS	ED CONTRACTOR:	
DDRESS:	239 N DOGWC		LIMITATION:	E NOMBER.	
CITY, STATE, ZIP:		HORES, NC 27949	CLASSIFICATIO	N:	
OFFICE#:	703-473-0528		QUALIFIER:		
CELL# FAX#:			LIEN AGENT NAME:		
MAIL:				ENTRY#: LIEN AGENT ADDRESS:	
TYPE OF CONSTR	Piers/Docks - Retaini	ruction - Addition / Ex	xpansion - Remodel /	Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo	
	age - Accessory Storag				
OCCUPANCY:		TYPE OF FOUNDA	ATION:	PERMIT TYPE: Residential	
	AREAS (SqFt): 0.0	HEAT:		RESIDENCE TYPE: Vacation Cottage < 30 days	
ION-HEATED AR	EAS (SqFt): 0	A/C:		BUILDING USE: Single Family	
UMBER OF STO	RIES:	INTERIOR WALLS	:	ZONING DISTRICT: RS1 - Single Family Residential District	
EDROOMS:		EXTERIOR WALLS	):	ZONING PERMIT #:	
EPTIC CAP. # OF	PERSONS:	FIREPLACE:		DATE APPROVED:	
ATHS: 1/2 BATHS	3:	ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling	
	HED: ATTACHED:	INSULATION:		CAMA PERMIT #:	
TORAGE ENCLO	SURE:	ELEVATOR (SqFt):		DATE ISSUED:	
OOL: SHED:		DECKS (SqFt):			
LOOD ZONE: Un		WINDOWS MAKE:		SEPTIC PERMIT #:	
ASE FLOOD ELE	EVATION: LES 8ft	WINDOWS TYPE:		DATE ISSUED:	
		TOTAL CONST	RUCTION COST: \$10,000	0.00	
PERMIT FEES:			. , ,		
<b>Description</b> Remodel / Renovatio	on / Repair Fee			Total Cost 100,00	
	/ topan 1 00			TOTAL FEE: 100.00	
ith all Ordinances uly authorized age	of the Town of Southern S	thores. The applicant cer ruction shall be as show nay be revoked for failure	tifies that the informatio n on the submitted plans	onally inspect all construction and be certain to comply in on this permit is correct; that he/she is the owner or s and specifications: the he/she understands this permit is	
<u> </u>	2	George	Berm	09/22/2022	
pplicant - Owner	/Contractor	(Please )	orint and sign name)	Date Approved	
Kevir	i Clark			9-22 - 26	
Building/Code/Zon	ning Official			Date Issued	
	Kes				

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax <a href="https://www.southernshores-nc.gov">www.southernshores-nc.gov</a>



#### **Residential Trade Contractor Permit**

Date September 20, 2022

TP22-000162	
Plumbing Trade	Permit

Project Address: 3 MALLARD COVE LOOP

Property Owner: ETHERIDGE, LINDA S

**PIN #:** 022519003

Mailing Address: 3 MALLARD COVE LOOP

SOUTHERN SHORES, NC 27949

Permit Types: Plumbing Electrical Mech Contractor:	anical Gas
Company Name: PIEDMONT NATURA	L GAS Qualifier: EDMUND FIRTH
Phone: (252) 331-9063	Address: 105 IMPACT BLVD
N. C. License Number: L-32562	ELIZABETH CITY, NC 279
Description of Work: INSTALL TAN	(LESS WATER HEATER
Description of Work: INSTALL TANK	(LESS WATER HEATER
Description of Work: INSTALL TANI  Project Cost Estimate: \$6,796.00	(LESS WATER HEATER  Permit Amount: 150.00

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

#### RESIDENTIAL BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

		and the second district the second	okani mani yimi,asi jemis sassanoonii yiyaan, iigiima aango		
Parcel: PIN: Location:	021297000 986806296228 11 THIRTEENTH AVE		Owner: Address:	HARDY, TIMOTHY J 2605 SANDY VALLEY RD VIRGINIA BEACH, VA 23452	
District: Subdiv _ot-Block-Sect:	RS1 - Single Family Re SEA CREST VILLAGE LOT: 8 BLK: 58 SEC:		Phone #:	757-567-0001	
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: DFFICE#: (ELL# AAX#: EMAIL:	PO Box 2471 Kitty Hawk, NC (252) 491-6964 (252) 491-6965	27949	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIC QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AL	N: ME:	al Contractor
alls to stair platform, I	ORK – (Any devlation i install trex, install ralls, in NS - ALL WOOD BELO	istall bracing for pilings	s east and west side.	orior approval): REMODEL - Replace mi	d level steps and
Bulkhead - C P		g Wall - 🔲 Beach Acc	cess Walkway/Stairs - 📋	/ Renovation / Repair - Accessory - Swimming Pools - Workshop - G	
CCUPANCY:	- Coll Accessory Giorage	TYPE OF FOUND		PERMIT TYPE: Residential	
EATED/LIVING ARI	EAS (SqFt): 0.0	HEAT:		RESIDENCE TYPE: 2nd Home	
ON-HEATED AREA		A/C:		BUILDING USE: Single Family	
UMBER OF STORI	ES;	INTERIOR WALL	S:	ZONING DISTRICT: RS1 - Singl Residential District	e Family
EDROOMS:		EXTERIOR WALL	.S:	ZONING PERMIT #:	
EPTIC CAP. # OF P	ERSONS:	FIREPLACE:		DATE APPROVED:	
ATHS: 1/2 BATHS:		ROOF:		PERMITTED/CONDITIONAL US Dwelling	E: Single Family
ARAGE - DETACHI TORAGE ENCLOSI	<u> </u>	INSULATION:	N -	CAMA PERMIT #:	
OOL: SHED:	JRE:	ELEVATOR (SqFt DECKS (SqFt):	i) <b>:</b>	DATE ISSUED:	
LOOD ZONE: Unsha	aded X	WINDOWS MAKE	Maranemona, i por ma muse de ministra de mario de mario de mario. A se	SEPTIC PERMIT #:	
ASE FLOOD ELEV		WINDOWS TYPE		DATE ISSUED:	
				DATE TOUCH,	
PERMIT FEES: Description Remodel / Renovation Minimum Permit Fee	l Repair Fee	TOTAL CONS	STRUCTION COST: \$5,70		Total Cosi 58.00 42.00 TAL FEE: 100.00
ith all Ordinances of ulv authorized agent	the Town of Southern Sh of owner: that all constri	ores. The applicant ce action shall be as show ay be revoked for failu	ertifies that the information	onally inspect all construction and be cen n on this permit is correct; that he/she is and specifications; the he/she understa ble regulations and laws.	tain to comply the owner or nds this permit is
Applicant - Owner/Co	ontractor	(Please	print and sign name)	roesile autor	09/22/2022
Komo	Clark	i iedas	kunt and sign name)		Date Approved
Building/Code/Zoning	Official - 1		and the second	<del>internati</del>	Date Issued
<u>-</u>	134 N	NO			-
	$\cup$				

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



### **Commercial Trade Contractor Permit**

Date September 21, 2022

Electrical Trade Permit	
Project Address: 50 DUCK WOODS DR	PIN #: 022352000
Property Owner: DUCK WOODS COUNTRY	<b>Mailing Address:</b> 50 DOGWOOD TRL KITTY HAWK, NC 27949
Permit Types:  Plumbing Electrical Mechanical Contractor:	Gas
Company Name: LoWire LLC	Qualifier: Daniel Parsons
<b>Phone:</b> (252) 480-1998	Address: P O Box 2751
N. C. License Number: 19403-U	Kill Devil Hills, NC 27948
Project Cost Estimate: \$87,200.00	Permit Amount: 150.00
F	ayment:
F	
F  I hereby certify that all information in this applicat	Payment: Date Type Reference Receipt ReceivedFrom Amount ion is correct and all work will comply with the State Building Code and all The Inspection Department will be notified of any changes in the

ByMB

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



#### **Commercial Trade Contractor Permit**

Date September 26, 2022

TP22-00016	1	
Mechanical	Trade	Permit

Project Address: 5375 N VIRGINIA DARE TRL PIN #: 022868000

**Property Owner:** TOWN OF SOUTHERN SHORES **Mailing Address:** 5375 N. Virginia Dare Trl.

	SOUTHERŇ SHORES, NC 27949
Permit Types:  Plumbing Electrical Mechanic Contractor:	cal □Gas
Company Name: Piedmont Service Group	Qualifier: Bryan West
<b>Phone:</b> (252) 355-5051	Address: 102-B Regency Blvd
N. C. License Number: 29539	Greenville, NC 27834
Description of Work: REPLACE 4 TON I	HEAT PUMP AIR TO AIR CHANGEOUT
Project Cost Estimate: \$10,915.00	Permit Amount: 0.00  Payment:  Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

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



#### **Residential Trade Contractor Permit**

Date September 26, 2022

TP22-000168				
<b>Electrical</b>	Trade	<b>Permit</b>		

Project Address: 165 OCEAN BLVD	<b>PIN #:</b> 02	1919000
Property Owner: STEINBRAKER, G DAVID		9 EDITH DR OCKVILLE, MD 20850
Permit Types: Plumbing Delectrical Mechanica Contractor:	al Gas	
Company Name: Electric-Al Inc.	Qualifie	: Allen M Bell
<b>Phone:</b> (252) 261-4500	Address	: P.O. Box 2114
N. C. License Number: 12292-1		Kitty Hawk, NC 27949
Description of Work: RELOCATE ELECT	RIC SERVICE TO SOUTH SIDE C	OF HOUSE
Project Cost Estimate: \$6,500.00	Permit Amount: 150.00  Payment: Date Type Reference Receipt I	ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

9/21/22, 8:48 AM

### TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

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



### **Residential Trade Contractor Permit**

Date September 21, 2022

TP22-000164	4	
Mechanical '	Trade	<b>Permit</b>

Project Address: 1 TENTH AVE

Property Owner: SWINDELL, GREGORY A

**PIN #:** 021215000

Mailing Address: 531 THOMAS BRANSBY

WILLIAMSBURG, VA 23185

Permit Types:  Plumbing Selectrical Mecha Contractor:	anical Gas	
Company Name: North Beach Services Phone: (252) 491-2878 N. C. License Number: 22053	Heating and Cooling	Qualifier: Jimmy Weaver Address: PO Box 181 Kitty Hawk, NC 27949
Description of Work: Replacement o	f top level HVAC system (3 to	on 14 Seer)

other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

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



#### Residential Trade Contractor Permit

Date September 27, 2022

TP22-00017	1	
Mechanical	Trade	<b>Permit</b>

Project Address: 9 KINGFISHER TRL Property Owner: GABRIEL, ROMAN III

**PIN #:** 022523007

Mailing Address: 9 KINGFISHER TRL

SOUTHERN SHORES, NC 27949

Permit Types:  Plumbing Electrical Mech Contractor:	nanical Gas		
Company Name: OBHC, Inc. dba One Phone: (252) 441-1740 N. C. License Number: 12643	Hour Heating & Air Conditioning		: Brian McDonald PO Box 2600 Kill Devil Hills, NC 27948
•			
Description of Work: REPLACE HV	AC WITH 14 SEER 2 TON CARRIER	AIR HANDLER	R & HEAT PUMP

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

Data

Signature of Permit Official

Dato



## TOWN OF SOUTHERN SHORES

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

#### RESIDENTIAL BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

Parcel: PIN:					
	026790000 986720921432		Owner: Address:	FULCHER, O C 179 CHICAHAUK	TRI
ocation; district:	18 WILD PONY LN			KITTY HAWK, NO	27949
ubdly	RS1 - Single Family Res	idential District	Phone #:	252-207-1952	
ot-Block-Sect:	LOT: 329 BLK; SEC:				
USINESS NAME: ONTRACTOR'S NA	Fulcher Homes		NC G.C. LICENSI NC G.C. LICENSI	ED CONTRACTOR:	Licensed General Contractor
DDRESS:	P.O. Box 543		LIMITATION:	= NUMBER!	17852 Unlimited
TY, STATE, ZIP:	Kitty Hawk, NC 2	7949	CLASSIFICATION	<b>l:</b>	Bullding
FICE#: LL#	(252) 261-3316		QUALIFIER:		O.C. Fulcher
X#:			LIEN AGENT NAI ENTRY#:	VIE;	
IAIL:	fulcheroc@earthl	nk.net	LIEN AGENT ADI	ORESS:	
ECIAL CONDITION	NS - ALL WOOD BELOW	RFPE (8) FT. SHALL E	BE TREATED		DEL - ADD BEDROOM AS
PE OF CONSTRU	CTION: New Construc	tion - L Addition / Exp	ansion - 🌃 Remodel / :	Renovation / Repair - C	Accessory - Other
」Bulkhead - し」 P	lers/Docks - 🔲 Retaining	Wall - 🔲 Beach Acces	is Walkway/Stairs - 🔲 S	Swimming Pools - 🔲 ۱	Workshop - Gazebo
J Detached Garage	- Accessory Storage E	ullding - 🔲 Dune Deck	c- Generator		fr
CUPANCY:		TYPE OF FOUNDAT	TON:	PERMIT TYPE	Residential
ATED/LIVING ARE	EAS (SgFt): 0.0	HEAT:		RESIDENCE T	YPE: 2nd Home
N-HEATED AREA	S (SgFt): 0	A/C:			: Single Family
MBER OF STORIE	<b>is</b> ;	INTERIOR WALLS:		ZONING DIST	RICT: RS1 - Single Family
DROOMS: 4		EXTERIOR WALLS:		Residential Dis	
PTIC CAP. # OF PI	ERSONS:	FIREPLACE:		DATE APPROV	
THS: 1/2 BATHS:		ROOF:		PERMITTED/C	ONDITIONAL USE: Single Family
RAGE - DETACHE	D: ATTACHED:	INSULATION:		Dwelling	
		ELEVATOR (SqFt):	***************************************	CAMA PERMIT	
		DECKS (SqFt):		DATE ISSUED:	
DRAGE ENCLOSU					
ORAGE ENCLOSU OL: SHED:	ided X			SEPTIC DEDM	T # 640 42027
ORAGE ENCLOSU OL: SHED: DOD ZONE: Unsha		WINDOWS MAKE: WINDOWS TYPE:		SEPTIC PERM	
ORAGE ENCLOSU OL: SHED: OOD ZONE: Unsha		WINDOWS MAKE:		SEPTIC PERM DATE ISSUED:	
ORAGE ENCLOSU DOL: SHED: OOD ZONE: Unsha ISE FLOOD ELEVA	TION: LES 8ft	WINDOWS MAKE: WINDOWS TYPE;	UCTION COST: \$2,000.0	DATE ISSUED:	
ORAGE ENCLOSE OOL: SHED: OOD ZONE: Unsha ISE FLOOD ELEVA  RMIT FEES: scription model / Renovation / meowners Recovery	TION: LES 8ft Repair Fee	WINDOWS MAKE: WINDOWS TYPE;	UCTION COST: \$2,000,0	DATE ISSUED:	09/07/2022 Total Cost 20,00
ORAGE ENCLOSU OOL: SHED: OOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription model / Renovation / meowners Recovery nimum Permit Fee	TION: LES 8ft  Repair Fee Fund	WINDOWS MAKE: WINDOWS TYPE: TOTAL CONSTR		DATE ISSUED:	09/07/2022  Total Cost 20.00 10.00 80.00
ORAGE ENCLOSE OL: SHED; OOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: seription model / Renovation / meowners Recovery almum Parmit Fee he owner and build all Ordinances of t	Repair Fee Fund er are responsible to complete Town of Southern Sho	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR	and laws; should persor	DATE ISSUED:	Total Cost 20,00 10,00 TOTAL FEE: 110,00 section and be certain to comply
DRAGE ENCLOSE OL: SHED: DOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription neowners Recovery Imum Permit Fee ne owner and build all Ordinances of to all Ordinances of to	Repair Fee Fund er are responsible to comple Town of Southern Shot	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations are applicant certificant certific	and laws; should person les that the information	DATE ISSUED:  O  nally inspect all construent the construent to the construent th	Total Cost 20,00 10,00 80,00 TOTAL-FEE: 110,00 section and be certain to comply ct; that he/she is the owner or
DRAGE ENCLOSE OL: SHED: DOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription nodel / Renovation / neowners Recovery Imum Permit Fee ne owner and build all Ordinances of to authorized agent of	Repair Fee Fund er are responsible to complete Town of Southern Sho	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations a es. The applicant certifi ion shall be as shown cobe revoked for failure to	and laws; should persor les that the Information on the submitted plans a o comply with applicabl	DATE ISSUED:  O  nally inspect all construent the construent to the construent th	Total Cost 20,00 10,00 80,00 TOTAL-FEE: 110,00 section and be certain to comply ct; that he/she is the owner or
ORAGE ENCLOSE OL: SHED: OOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription neowners Recovery Imum Permit Fee he owner and build all Ordinances of to	Repair Fee Fund er are responsible to comple Town of Southern Shot	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations are applicant certificant certific	and laws; should persor les that the information on the submitted plans a o comply with applicabl	DATE ISSUED:  O  nally inspect all construent in the permit is corrected and specifications; the ergulations and laws	Total Cost 20,00 10,00 80,00 TOTAL FEE: 110,00 retion and be certain to comply ct; that he/she is the owner or he/she understands this permit is
ORAGE ENCLOSE OL: SHED; OOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription model / Renovation / meowners Recovery almum Permit Fee he owner and build all Ordinances of to authorized agent of for 180 days to be	Repair Fee Fund  er are responsible to comple Town of Southern Shouthern Sho	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations a es. The applicant certifi ion shall be as shown of be revoked for failure to  CLEO FO	and laws; should persor les that the Information on the submitted plans a o comply with applicabl UCHER	DATE ISSUED:  O  nally inspect all construent the construent to the construent th	Total Cost 20,00 10,00 80,00 TOTAL FEE: 110,00 Iction and be certain to comply ct; that he/she is the owner or he/she understands this permit is
ORAGE ENCLOSU OL: SHED: OOD ZONE: Unsha SE FLOOD ELEVA RMIT FEES: scription model / Renovation / meowners Recovery ilmum Permit Fee he owner and build all Ordinances of to	Repair Fee Fund  er are responsible to comple Town of Southern Shouthern Sho	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations a es. The applicant certifi ion shall be as shown of be revoked for failure to  CLEO FO	and laws; should persor les that the information on the submitted plans a o comply with applicabl	DATE ISSUED:  O  nally inspect all construent in the permit is corrected and specifications; the ergulations and laws	Total Cost 20,00 10,00 80,00 TOTAL FEE: 110,00 Jection and be certain to comply ct; that he/she is the owner or he/she understands this permit is
DRAGE ENCLOSE OL: SHED: DOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription model / Renovation / mecwners Recovery imum Permit Fee he owner and builde all Ordinances of to authorized agent of for 180 days to be	Repair Fee Fund  er are responsible to comple Town of Southern Shouthern Sho	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations a es. The applicant certifi ion shall be as shown of be revoked for failure to  CLEO FO	and laws; should persor les that the Information on the submitted plans a o comply with applicabl UCHER	DATE ISSUED:  O  nally inspect all construent in the permit is corrected and specifications; the ergulations and laws	Total Cost 20,00 10,00 80,00 TOTAL-FEE: 110,00 section and be certain to comply ct; that he/she is the owner or he/she understands this permit is
DRAGE ENCLOSE OL: SHED: DOD ZONE: Unsha SE FLOOD ELEVA  RMIT FEES: scription model / Renovation / mecwners Recovery imum Permit Fee he owner and builde all Ordinances of to authorized agent of for 180 days to be	Repair Fee Fund  er are responsible to comple Town of Southern Shouthern Sho	WINDOWS MAKE: WINDOWS TYPE:  TOTAL CONSTR  Oly with all regulations a es. The applicant certifi ion shall be as shown of be revoked for failure to  CLEO FO	and laws; should persor les that the Information on the submitted plans a o comply with applicabl UCher	DATE ISSUED:  O  nally inspect all construent in the permit is corrected and specifications; the ergulations and laws	Total Cost 20,00 10,00 80,00 TOTAL-FEE: 110,00 section and be certain to comply ct; that he/she is the owner or he/she understands this permit is
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TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

#### **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

Location:	021669000 986815524772 19 PERIWINKLE PL		Owner: Address:	RETZBACH, EDV 63 TWIN PONDS SEWELL, NJ 080	DR	
Olstrict: Subdiv _ot-Block-Sect:	RS1 - Single Family Re SO/SH BLK 44 LOT: 3 BLK: 44 SEC:	sidential District	Phone #:	609-636-4162	au	
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: DFFICE#: CELL#	Macko OBX Co John Macko PO Box 3689 Kill Devil Hills, N (252) 480-6411		NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT NA	N:	Licensed General Contractor 81540 Unlimited Building John Macko Chicago Title Company, LLC	
AX#: :MAIL:	(252) 449-0772 info@mackocor	struction.com	ENTRY#: LIEN AGENT AD	DRESS:	1767809 223 S. West Street, Suite 900, Raleigh, NC 27603	
Bulkhead - B		g Wall - 🔲 Beach Acce	ess Walkway/Stairs -		Accessory - Other  Workshop - Gazebo	
OCCUPANCY:	- Cally Accessory Otorage	TYPE OF FOUND		PERMIT TYPE	: Residential	
EATED/LIVING ARI	EAS (SaFt): 0.0	HEAT:	NION.		TYPE: 2nd Home	
ION-HEATED AREA		A/C:		The state of the s	E: Single Family	
IUMBER OF STORII	ES:	INTERIOR WALLS	3:	Charles and the state of the st	RICT: RS1 - Single Family	
BEDROOMS:	4)40	EXTERIOR WALL:	S:	ZONING PER	MIT #:	
EPTIC CAP. # OF P	ERSONS:				DATE APPROVED:	
ATHS: 1/2 BATHS:		ROOF:		Dwelling	CONDITIONAL USE: Single Family	
ARAGE - DETACHI		INSULATION:		CAMA PERMI		
TORAGE ENCLOSI	JRE:	ELEVATOR (SqFt)	•	DATE ISSUED		
COUNT APPEUL	odad Y	DECKS (SqFt): WINDOWS MAKE		CENTIC DEDI	N TY _1.	
		WINDOWS TYPE:	•	SEPTIC PERM DATE ISSUED	Military Company of the Company of t	
FLOOD ZONE: Unsh	ATION: LES 8ft				AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	
FLOOD ZONE: Unshing SASE FLOOD ELEVA	ATION: LES 8ft		RUCTION COST: \$80,00	0.00		
PERMIT FEES: Description Remodel / Renovation Homeowners Recover	/ Repair Fee y Fund	TOTAL CONST			Total Cos 800.0 10.0 TOTAL FEE: 810.0	
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery  "*The owner and built  //th all Ordinances of uly authorized agent	/ Repair Fee y Fund der are responsible to co the Town of Southern Si	TOTAL CONST mply with all regulation nores. The applicant cel uction shall be as show	ns and laws; should pers rtifies that the information on the submitted plan	sonally inspect all consi on on this permit is corr s and specifications: th	Total Cos 800.0 10.00 TOTAL FEE: 810.0 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit	
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery  "*The owner and built  //th all Ordinances of uly authorized agent	/ Repair Fee y Fund der are responsible to co the Town of Southern Sl of owner; that all constr	TOTAL CONST mply with all regulation nores. The applicant ce uction shall be as show ay be revoked for failur	ns and laws; should pers rtifies that the information on the submitted plan	sonally inspect all consi on on this permit is corr s and specifications: th	Total Cos 800.0 10.0 TOTAL FEE: 810.0 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit i	
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery With all Ordinances of July authorized agent alid for 180 days to b	/ Repair Fee y Fund der are responsible to co the Town of Southern Si of owner; that all constr egin construction and m	TOTAL CONST	ns and laws; should pers rtifies that the information on the submitted plan e to comply with applica	sonally inspect all consi on on this permit is corr s and specifications: th	Total Cos 800.0 10.00 TOTAL FEE: 810.0 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit i	
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery **The owner and built vith all Ordinances of luly authorized agent	/ Repair Fee y Fund der are responsible to co the Town of Southern Si of owner; that all constr egin construction and m	TOTAL CONST	ns and laws; should persitifies that the information on the submitted planse to comply with application.	sonally inspect all consi on on this permit is corr s and specifications: th	Total Cos 800.0 10.0 TOTAL FEE: 810.0 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is s. 09/27/202	
PERMIT FEES: Description Remodel / Renovation Homeowners Recovery With all Ordinances of July authorized agent alid for 180 days to b	/ Repair Fee y Fund  der are responsible to co the Town of Southern Si of owner; that all constr egin construction and m  ontractor	TOTAL CONST	ns and laws; should persitifies that the information on the submitted planse to comply with application.	sonally inspect all consi on on this permit is corr s and specifications: th	Total Cos 800.0 10.0 TOTAL FEE: 810.0 ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit /s.	



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#### **RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

CAROLINA					20,221.10 1 2.1111	11 11 DI ALL-000 103
Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	187 D RS1 - SO/SI	9508982	B SEC 3	Owner: Address: Phone #:	SALAMONE, AN 35 VILLAGE GRE RHINEBECK, NY 845-705-7725	EEN DR APT D
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	ME:	Caribbean Pool and Inc Pete Kelly 6024 Currituck Ro Kitty Hawk, NC 27 (252) 480-2900  pete@caribbeanol	949	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AC	N: AME:	Licensed General Contractor 73571 Limited Residential Peter Franklin Kelly
X 22 POOL SPECIAL CONDITION TYPE OF CONSTRU	NS - AL	L WOOD BELOW	RFPE (8) FT. SHALL BE T	on - Remodel	/ Renovation / Repair -	
			Wall - Beach Access Wa uilding - Dune Deck - TYPE OF FOUNDATION	Generator	Swimming Pools - PERMIT TYPE	
HEATED/LIVING ARE	AS (S	r <b>Ft):</b> 0.0	HEAT:			YPE: Residence
NON-HEATED AREA			A/C:			
NUMBER OF STORIE			INTERIOR WALLS:			E: Single Family RICT: RS1 - Single Family
BEDROOMS:			EXTERIOR WALLS:			MIT #: ZP22-000091
SEPTIC CAP. # OF P	ERSON	S:	FIREPLACE:			VED: 09/16/2022
BATHS: ½ BATHS:		A Maria de Companyo de Caracteria de Caracteria de Caracteria de Caracteria de Caracteria de Caracteria de Car	ROOF:		The same of the sa	CONDITIONAL USE: Single Family
GARAGE - DETACHE	D: AT	TACHED:	INSULATION:		CAMA PERMI	Т#:
TORAGE ENCLOSU	JRE:	AND	ELEVATOR (SqFt):		DATE ISSUED	
OOL: SHED:			DECKS (SqFt):			
LOOD ZONE: Unsha	aded X		WINDOWS MAKE:		SEPTIC PERM	I <b>T #:</b> S22-12772
BASE FLOOD ELEVA	TION:L	.ES 8ft	WINDOWS TYPE:		DATE ISSUED	
PERMIT FEES: Description			TOTAL CONSTRUCT	ION COST: \$54,178	3.00	Table
Swimming Pools						Totał Cost 250.00 TOTAL FEE: 250.00
vith all Ordinances of t uly authorized agent o	the Tow of owne	n of Southern Shor r; that all construct	es. The applicant certifies	that the informatio he submitted plans	on on this permit is corre	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit i
Applicant - Owner/Co	ntracto	or	(Please print a	and sign name)		Date Approved
rem C	W				·	$Q - \mathcal{L} \mathcal{S} - \mathcal{L}$
Building/Code/Zoning	Officia	al			•	Date issuet

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



#### **Residential Trade Contractor Permit**

Date September 26, 2022

TP22-000	169	
Flactrical	Trade	Permit

9/26/22, 2:19 PM

Project Address: 53 NORTH DUNE LOOP

Property Owner: BOM LLC

PIN #: 022523059

Mailing Address: 18 CURTIS ST

SCITUATE, MA 02066

Permit Types: Plumbing Electi Contractor:	rical Mechanical	☐Gas		
Company Name: Angel Phone: (252) 256-2773 N. C. License Number:		ies, LLC		Matius Antonio Florez 9138 Carotoke Hwy Point Harbor, NC 27964
Description of Work:	Install circuit wiring under counter refrig	for range/oven and tapping o	off existing	refrigerator circuit for new
Project Cost Estimate:	\$3,570.00	Permit Amount: 150.00 Payment: Date Type Reference Receip	t Received	iFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

1-00-0

Signature of Permit Office

TP22-000170

**Mechanical Trade Permit** 

### TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax <a href="https://www.southernshores-nc.gov">www.southernshores-nc.gov</a>



#### Residential Trade Contractor Permit

Date September 27, 2022

Project Address: 154 POTESKEET LOOP Property Owner: CHATTERTON, ALFRED F III TTEE	PIN #: 022383526  Mailing Address: 3518 JEAN ST FAIRFAX, VA 22030
Permit Types:  Plumbing Electrical Mechanical Gas Contractor:	
Company Name: R.A. HOY HEATING & AIR CONDITIONIN Phone: (252) 261-2008 N. C. License Number: 35329	G Qualifier: JAYDEN CHUTSKOFF  Address: P.O. BOX 179  KITTY HAWK, NC 27949
Description of Work: SINGLE C/O TRANE 14 SEER 3-TO	ON H/P SYSTEM THAT SERVICES THE DOWNSTAIRS.

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Date Type Reference Receipt ReceivedFrom Amount

Permit Amount: 150.00

Payment:

Signature of Licensee or Duly Authorized Representative

Project Cost Estimate: \$8,871.00

Date

Signature of Permit Official

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



#### **Residential Trade Contractor Permit**

Date September 27, 2022

TP22-000172	
Mechanical Trade	Permit

Project Address: 140 GRAY SQUIRREL LN

Property Owner: VEATOR, JOHN

PIN #: 022383514

Mailing Address: 140 GRAY SQUIRREL LN

SOUTHERN SHORES, NC 27949

Permit Types:  Plumbing Belectrical M Contractor:	echanical Gas	
Company Name: R.A. HOY HEATIN Phone: (252) 261-2008 N. C. License Number: 35329	IG & AIR CONDITIONING	Qualifier: JAYDEN CHUTSKOFF Address: P.O. BOX 179 KITTY HAWK, NC 27949
Description of Work: SINGLE H/F	P C/O ONLY! TRANE 16 SEER 2-	TON H/P THAT SERVICES THE DOWNSTAIRS
Description of Work: SINGLE H/F	P C/O ONLY! TRANE 16 SEER 2-	TON H/P THAT SERVICES THE DOWNSTAIRS

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

VION Sig

Signature of Permit Official

Data

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



### Residential Trade Contractor Permit

Date September 28, 2022

TP22-00017	3	
Mechanical	Trade	Permit

Project Address: 47 HONEYSUCKLE LN Property Owner: SAVASTANO, ALFRED N

PIN #: 022226000

Mailing Address: 704 N FLORIDA ST

		ARLINGTON, VA 22205
Permit Types:  Plumbing Ele Contractor:	ectrical Gas	
Company Name: Deli Phone: (252) 261-040 N. C. License Numbe		Qualifier: Lloyd Journigan  Address: PO Box 575  Kitty Hawk, NC 27949
Description of Work:	REPLACE SYSTEM WITH 3.5 TON 14 S HEAT PUMP SYSTEM	EER AMERICAN STANDARD INDOOR & OUTDOOR
	,	

Project Cost Estimate: \$7,200.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative



### TOWN OF SOUTHERN SHORES

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

#### RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

Parcel: PIN:	022518000 986711652236	and the second s	Owner: Address:	NGEONJUKLIN, 83 GRAVEY PON	IDLN
pocation: Strict: SS1 - Single Family Residential District Abdiv CHICAHAUK LOT: 445 BLK: SEC:		SOUTHERN SHORES, NC 27949 Phone #: 252-722-2952		DRES; NC 27949	
BUSINESS NAME: Macko OBX Construction, Inc. CONTRACTOR'S NAME: John Macko ADDRESS: PO Box 3689 CITY, STATE, ZIP: Kill Devil Hills, NC 27948 OFFICE#: (252) 480-6411 CELL# FAX#: (252) 449-0772 EMAIL: info@mackoconstruction.com		NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AC	N: ME:	Licensed General Contractor 81540 Untimited Building John Macko N/A N/A N/A	
Trex. Replace front representation of the second of the se	alls with Trex, Replace for the NS - ALL WOOD BELC  UCTION: New Cons Piers/Dooks - Retain	ont stairs. DW RFPE (8) FT. SHALL	BE TREATED  Expansion - Remodel  Ess Walkway/Stairs -	/Renovation / Repair	DEL - Replace front decking with  Accessory - Other  Workshop - Gazebo
OCCUPANCY:	g Cap Hoodsadiy dorde	TYPE OF FOUND		PERMIT TYPE	≣: Residential
HEATED/LIVING AF		HEAT:		**************************************	TYPE: Residence
NON-HEATED ARE	AS (SqFt): 0	A/C:			E: Single Family
NUMBER OF STOR	IES:	INTERIOR WALLS		ZONING DIST Residential Di	RICT: RS1 - Single Family strict
BEDROOMS:		EXTERIOR WALL:	3:	ZONING PER	
SEPTIC CAP. # OF	PERSONS:	FIREPLACE:		DATE APPRO	to the transport of the comment of the contract of the contrac
IATHS: 1/2 BATHS:		ROOF:		Dwelling	CONDITIONAL USE: Single Family
SARAGE - DETACH		INSULATION:	<del></del>	CAMA PERMI	
TORAGE ENCLOS	URE	ELEVATOR (SqFt)	K K Tarangan dan salah s	DATE ISSUED	):
POOL: SHED; FLOOD ZONE: Unsl	andod V	DECKS (SqFt); WINDOWS MAKE		SESTIONES	Fire H
BASE FLOOD ELEV	CONTRACTOR OF THE PROPERTY OF	WINDOWS TYPE:		SEPTIC PERM DATE ISSUED	
):	ATION PLOON	INITIONIC TELE		DATE 1000EE	*
PERMIT FEES:	<del>nagi mbada mji dilin na aga que ma palaca</del> ani	TOTAL CONST	RUCTION COST: \$20,00	0.00	
Description Remodel / Renovation Homeowners Recove	ry-Fund				Total Cost 200.00 10.00 TOTAL FEE: 210.00
vith all Ordinances of luly authorized agentalid for 180 days to	f the Town of Southern t of owner; that all cons begin construction and	Shores. The applicant cer	tifies that the information on the submitted plan	on on this permit is con s and specifications: th	truction and be certain to comply ect; that he/she is the owner or se he/she understands this permit is vs.
Lyan Flack	<u> </u>			<del></del>	09/29/2022
Applicant - Owner/C	CONTRACTOR	(Please	print and sign name)		Date Approved
By'. W	g Official	y Acomorphic en estado en estado en estado en estado en estado en estado en el estado en el estado en el estad	an masangan an kibarah bahar bahar bahar an kibarah bahar	and on the second of the secon	Date Issued



### **TOWN OF SOUTHERN SHORES**

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

#### RESIDENTIAL BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

PIN: Location; District: Subdiv	021618000 986814431210 243 DUCK RD RS1 - Single Family Re	dential District	Owner: Address: Phone #:	KIMMEL, DAVID L 418 W ORANGE ST LITITZ, PA 17543 717-472-6471	
oundry _ot-Block-Sect:	SO/SH BEACH BLK 64 , LOT: 6 BLK: 64 SEC;	AMENDED		7 (7-472-047)	
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: DFFICE#; CELL# AX#:	PO Box 2471 Kitty Hawk, NC 2 (252) 491-6964 (252) 491-6965 office@seathruco	7949 nstruction.com	NC G.C. LICENSED NC G.C. LICENSE N LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAME ENTRY#; LIEN AGENT ADDR	IUMBER: 5	icensed General Contractor 7130
ESCRIPTION OF W moval of existing toil PECIAL CONDITION	ORK – (Any deviation fro liet, vanity and shower. Insi NS - ALL WOOD BELOW	om the Building Plan or tall all new with a tiles sh RFPE (8) FT. SHALL BI	Site Plan requires prior ower and shower doors. E TREATED	r approval): REMODEL	Bathroom Remodel to includ
	CTION: New Constructions New Constructions New Constructions New Construction New Construct	Wall - 🔝 Beach Access	Walkway/Stairs - Swi	novation / Repair - A	ccessory - Other
CCUPANCY:		TYPE OF FOUNDATION			
EATED/LIVING ARE	AS (SgFt): 0.0	HEAT:	UN:	PERMIT TYPE: Re	esidential
ON-HEATED AREA	S (SqFt): 0	A/C:		RESIDENCE TYPE	: Residence
JMBER OF STORIE				BUILDING USE: S	ingle Family
	.g.	INTERIOR WALLS:		LONING DISTRICT	r: RS1 - Single Family
DROOMS:		EXTERIOR WALLS:		Residential District	ı.
PTIC CAP. # OF PE	ERSONS:	FIREPLACE:		ZONING PERMIT # DATE APPROVED	• •
ATHS: 1/4 BATHS:	į.	ROOF:			: DITIONAL USE: Single Family
- the state of the				Dwelling	PHIONAL USE: Single Family
ARAGE - DETACHE 'ORAGE ENCLOSU	D: ALIACHED:	INSULATION:		CAMA PERMIT #:	
OCAGE ENGLOSU DOL: SHED:	KE:	ELEVATOR (SqFt):		DATE ISSUED:	
OOD ZONE: Unsha	And V	DECKS (SqFt):			
ASE FLOOD ELEVA	TION: 150.00	WINDOWS MAKE:		SEPTIC PERMIT #:	The state of the s
	HOW: LES SIT	WINDOWS TYPE:		DATE ISSUED:	
NAME OF THE OWNER OWNER OF THE OWNER OWN		TOTAL CONOCCU			
ERMIT FEES:		TOTAL CONSTRUC	CTION COST: \$21,000.00		
escription emodel / Renovation / omeoWhers Recovery	Fund				Total Cost 210.00 10.00 TOTAL FEE: 220.00
h all Ordinances of the	er are responsible to comp the Town of Southern Short of owner; that all constructi gin construction and may be the famous Ta	on shall be as shown on be revoked for failure to	- with the michiliation off	uns permit is correct: ti	TOTAL FEE: 220.00 on and be certain to comply nat he/she is the owner or she understands this permit is
id for 180 days to be				MANY	00/00/0000
SCOTTL				_	09/29/2022
SCOTTL		(Place nelat	and alon sines		
SCOTTL		(Please print	t and sign name)		Date Approved
id for 180 days to beg	ntractor Clark	(Please print	t and sign name)		Date Approved



5257 BUILDING PERMIT QUALANCE
PERMIT NUMBER: 525 (DATE: 8/3/0022
OWNER: Philip Haman Follows  Address: 300 Buddam St.  City: Manto State: Ni (Zip: 245)  City: Manto State: Ni (Zip: 245)  City: Manto State: Ni Zip: 21454  Phone: 662 365 2000
LOCATION OF BUILDING SITE: 310 BANGE PHONE: 162-365 FORTH ZONING DISTRICT: 10  PARCEL NUMBER: 12476900 FLOOD ZONE: BFE: FFE:  NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE)  ERECT: ALTER: REPAIR:
SQUARE FOOTAGE OF HEATED SPACE:UNHEATED SPACE: S7  NUMBER OF STORIES: ROOMS: BATHS; FIREPLACES:  FINISHES:
EXTERIOR WALLS: ROOF TYPE AND MATERIAL: HEAT TYPE: INSULATION & R VALUE: FLOORING: FOOTING: FOUNDATION:
ADDITIONAL NOTES: 12x 13 decx + 10 23 vovered deck expansion with treated himber - trid into example something.
EACH APPLICATION MUST BE ACCOMPANIED BY:  SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPROVALS CAMA PERMIT IF REQUIRED
*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.
Estimated or Contract Cost: 10, 150  Date of Issuance: Permit Cost: 183.50  Seals: Applicant Inspector Zoning Official
Conditions of Permit:



**BUILDING PERMIT** PERMIT NUMBER: \_0258 DATE: 911 2022 OWNER: Wall Spruill
ADDRESS: POPT 997
CITY: Manteo State: NC ZIP: 47954 BUILDER: NE Marine CONTRACTOR LICENSE #: NC 3002 ADDRESS: PO BOX 42 CITYKITY HOWK STATE:NC ZIP:27

PHONE: 261-3682

LOCATION OF BUILDING SITE: 6 BOLLOS FORD DY ZONING DISTRICT: 45 PARCEL NUMBER: 025699363 FLOOD ZONE: BFE: FFE: NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) ERECT: REPAIR: SQUARE FOOTAGE OF HEATED SPACE: UNHEATED SPACE: NUMBER OF STORIES: ROOMS: BATHS: FIREPLACES: FINISHES: OR WALLS:\_\_\_\_\_\_INTERIOR WALLS:\_\_\_\_\_ROOF TYPE AND MATERIAL:\_\_\_\_\_HEAT TYPE:\_\_\_\_\_INSULATION & R VALUE:\_\_\_\_\_FLOORING:\_\_\_\_\_ EXTERIOR WALLS: FOOTING: \_\_\_\_\_ FOUNDATION: \_\_ ADDITIONAL NOTES: Instrulling Exp pier & 16x16 Platform EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING ☐ TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPROVALS CAMA PERMIT IF REQUIRED \*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\* This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector. Estimated or Contract Cost: 3300

Date of Issuance: 9/6/22 \$133 Conditions of Permit:



	SIGN PERMIT
PERMIT NUMBER: 5-59	DATE 09 07-2022
APPLICANT: Ad Light Signs  ADDRESS: 600 West Boundary Street  Kill Devil Hills NC 27948	
PHONE: 252 449 2800  THIS PERMIT IS TO: ERECT X. ALTER:	REPAIR: A SIGN. (PLEASE CHECK ONE.)
TYPE OF SIGN: Non-Illuminated Formed Plastic Wall Mount	
LOCATION OF SIGN; 110 S Hwy 64/264Manteo, NC 2795	54 - East Facing Facade
PARCEL NUMBER: 025591000	
ZONING DISTRICT: B-2 SQUARE F	FOOTAGE OF SIGN: 23.69
THIS PERMIT MUST BE ACCOMPANIED BY:  DRAWING OF SIGN TO SCALE  LOCATION OF PROPOSED SIGN AND ANY  DRAWING TO SCALE OF FACE OF BUILDIN	OTHER SIGNS ON THE SAME LOT NG IF THE SIGN IS TO BE MOUNTED ON THE FACE OF A BUILDING
2022 09 07 08 46.08 - 04'00' CONTRACTOR/OWNER SIGNATURE	09 07 2022 DATE
BUILDING INSPECTOR	9/1/22 DATE
COMMENTS:	
COST OF PERMIT SO. ON	Cootsign_270000



**BUILDING PERMIT** DATE: 9-7-22 PERMIT NUMBER: 5260 OWNER: WCA/ Montes Water Caros Builder: Water Troofing / Referating of //
ADDRESS: P.O. Box 1465 CONTRACTOR LICENSE #: NC BL 107399 CONTRACTOR LICENSE #: \_\_\_\_\_\_NC BL 107399057-1
ADDRESS: 8018 Howkin Industrial Park 80 87 CITY: KH STATE: NK ZIP: 27949 CITY: 70010 STATE: V2 ZIP: 2316 8 Jeffshields/Agant far WCA LOCATION OF BUILDING SITE: 201 Quan Eliz Ave ZONING DISTRICT:

PARCEL NUMBER: 201999 FLOOD ZONE: BFE: FFE:

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) ERECT: \_\_\_\_ ALTER: \_\_\_ REPAIR: SQUARE FOOTAGE OF HEATED SPACE: UNHEATED SPACE: NUMBER OF STORIES: ROOMS: BATHS: FIREPLACES: FINISHES: INTERIOR WALLS: \_\_\_ ROOF TYPE AND MATERIAL: HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_ ADDITIONAL NOTES: Repair parking garage certing por/design plan Proof commacel courtyans EACH APPLICATION MUST BE ACCOMPANIED BY: D SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING ☐ TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE □ RESTAURANTS: HEALTH DEPARTMENT APPROVALS CAMA PERMIT IF REQUIRED \*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\* This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector. Estimated or Contract Cost: 12 K & 70 K = 82 K, Pe Permit Cost Zoning Official Conditions of Permit:



### **MECHANICAL PERMIT**

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

\* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED\* **DATE:** 9/12/2022 PERMIT NUMBER: 5261 CONTRACTOR: RA HOY HEATING AND AIR CONDITIONING LLC OWNER: TERRELL AND SUSAN THOMAS \_\_ ADDRESS: PO BOX #179 ADDRESS: 77 BALLAST POINT DR CITY: KITTY HAWKSTATE: NC ZIP: 27949 CITY: MANTEO STATE: NC ZIP: 27954 PHONE: 252-261-2008 PHONE: LOCATION: 77 BALLAST POINT DR PARCEL NUMBER: 025694462 BUILDER: NUMBER OF AIR HANDLERS:\_\_\_\_\_ Number of Heating Units: 1 Number of Number of Registers: Tonnage: 2 TON WORK ORDER NUMBER: LICENSE NUMBER: 13056 \_\_\_\_\_\_ PERMIT COST: 15000 Cost: \$7,063.00 \_\_\_\_ IF REPAIRING OR ALTERING, PLEASE DESCRIBE WORK: SINGLE C/O TRANE 16 SEER 2-TON H/P SYSTEM THAT SERVICES THE MID AND DOWN LVLS \*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\* DATE OF ISSUANCE: 9/19/22 SEALS: Parton Nix (APPLICANT)



BUILDING PERMIT

PERMIT NUMBER: 5262	DOLDING I ENWIT	DATE:9-8-2022
OWNER:         Old Tom Properties LLC           ADDRESS:         P.O. Box 2405           CITY:         Manteo         STATE:         NC ZIP:         279:	BUILDER: HCI	
ADDRESS: P.O. Box 2405	CONTRACTOR LICE	ENSE #: 34205
CITY: Manteo STATE: NC ZIP: 279	54 ADDRESS: P.O. B	ox 2405
	PHONE: 252-473	STATE: NC ZIP: 27954 -6074
LOCATION OF BUILDING SITE: 100 Old Tom A PARCEL NUMBER: 024798001	Venue ZONE: AE BFI	NING DISTRICT: B1 E: 4 FFE: 8.1
NC POWER WORK REQUEST NUMBER OR POWE	R METER NUMBER (IF APPLIC	ABLE)
	ALTER:	
	TED SPACE: 13,432 sq π UNI	
Number of stories: 3	FINISHES:	
EXTERIOR WALLS: smartboard INTERI HEAT TYPE: HVAC INSULA	OR WALLS: sheetrock ROO	OF TYPE AND MATERIAL:membrane/wood -R15FL CORING: LPV-tile
	ncrete FOUNDATION: pil	
ADDITIONAL NOTES: 3-story strucure with apartment to feature 2-bedrooms. R	16 motel rooms -office on first 30 insulation in for ceilings. R	
each apartment to readure 2-bedrooms.		
EACH APPLICATION MUST BE ACCOMPANIED  SITE PLAN SHOWING ACTUAL DIMENS TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT CAMA PERMIT IF REQUIRED	SIONS OF THE LOT. ALL STR	
*** CALL BUILDING INSPECTO	OR 24 HOURS IN ADVANCE F	FOR ALL INSPECTIONS***
This building is to be erected or altered in accordance amendments as adopted by the Town of Manteo. This responsibility of the undersigned applicant. Any change and Zoning Department and the Building Inspector.	s permit is valid for six (6) months ge in construction or site plans wi	Compliance with Building Regulations is the
Estimated or Contract Cost: S2.5 million  Date of	-   (41)	mit Cost: \$ 17,148,70 57ALCUST \$ 22,032,22
Seals: Applicant -	To specific	Zoning Official
Conditions of Permit:		



**BUILDING PERMIT** 

PERMIT NUMBER: 5263	DATE: 09/27/2022
OWNER: G Steven & Carol Kreisher	Builder:
ADDRESS: 627 Pine Creek Road	BUILDER: CONTRACTOR LICENSE #: Self
CITY: Woodward STATE: PA ZIP: 16882	ADDRESS: 24 Sailfish Drive (local address)
Office Moderate	CITY: Manteo STATE: NC ZIP: 27954
	PHONE: 579-716-3234
LOCATION OF RUILDING SITE: 24 Sailfish Drive, NC 27954	ZONING DISTRICT: 01
LOCATION OF BUILDING SITE: 24 Sailfish Drive, NC 27954 PARCEL NUMBER: 025694332 FLOC	DO ZONE: AE BEE: FEE:
NC POWER WORK REQUEST NUMBER OR POWER METE	FR NUMBER (IE APPLICABLE) N/A
ERECT: AL	ER NUMBER (IF APPLICABLE) N/A TER: X REPAIR:
4-95-4	
SQUARE FOOTAGE OF HEATED SPACE	: 2,100 UNHEATED SPACE: 326
NUMBER OF STORIES: 2 ROOM	:: 2,100 UNHEATED SPACE: 326  MS: 10 BATHS: 3 FIREPLACES: 0
-	FINISHES:
EXTERIOR WALLS: Wood Siding INTERIOR WA	LLS: Drywall ROOF TYPE AND MATERIAL: Asphalt Shingles
HEAT TYPE: Heat Pump INSULATION &	R VALUE: Unknown FLOORING: Carpet/Tile
FOOTING:	FOUNDATION: Pier Foundation
location change of 3 outlets, addition of recessed lighting, remove existing  EACH APPLICATION MUST BE ACCOMPANIED BY:	remove carpet on 1st floor living area and replace with wood flooring, addition and gas fireplace, remove existing pantry.
SITE PLAN SHOWING ACTUAL DIMENSIONS OF TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPLIES CAMA PERMIT IF REQUIRED	OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING ROVALS
*** CALL BUILDING INSPECTOR 24 H	OURS IN ADVANCE FOR ALL INSPECTIONS***
amendments as adopted by the Town of Manteo. This permit i	latest edition of the General Building Laws of North Carolina and all is valid for six (6) months. Compliance with Building Regulations is the struction or site plans will be subject to prior notification of the Planning
Estimated or Contract Cost: 50 000  Date of Issue	Permit Cost: \$ 500.00  Homeown 5 Fund 10.00  \$560.0.2
Seals: See Kreiskie Applicant	Inspector Zoning Official
Conditions of Permit:	