

PO BOX 1719 Kill Devil Hills, NC 27948

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



OCT - 7 2022

TO .10

# **Planning and Inspection Department**

BJ2022-254

PROJECT NAME: David Bender

SITE ADDRESS: 1516 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/06/2022

EXPIRES: 04/04/2023

APPLICANT:

RELIANT CONSTRUCTION LLC

4275 Worthington Lane kitty hawk, nc 27949 252-202-7007

OWNER:

BENDER, DAVID

**4025 FAUQUIER AVENUE** RICHMOND, VA 23227

**GENERAL, UNLIMITED:** 

RELIANT CONSTRUCTION LLC

4275 Worthington Lane kitty hawk, nc 27949 252-202-7007

License: 62339

Expires: 12/31/2022

PARCEL:

PIN:

988411556616

Parcel Number:

002833012

Address:

1516 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

**CROATAN SHORES** 

Block:

D

Lot(s): 12

Legal Description:

FEES:

Paid

Due

**BUILDING AREA:** 

Open Deck Fee

\$300.00

\$0.00

Open Decks

2 EA

Totals:

\$300.00

\$0.00

PROJECT DESCRIPTION:

Replace existing decking and rails and add new 6'X12' deck over existing deck. New deck must meet 8' side yard setback. Replace existing window with door. Add a new rear deck over existing concrete. Must meet 8' side yard setback.

**PROJECT NAME:** David Bender

SITE ADDRESS: 1516 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/06/2022

**EXPIRES: 04/04/2023** 

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Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N .
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	75000.00
SURVEYOR NAME AND NUMBER	Kirk Foreman
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* No change in lot coverage.
- \* New decks must meet 8' setback requirements. House and existing deck does not meet setback.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.



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

OCT 10 2022

## **Planning and Inspection Department**

BJ2022-249

PROJECT NAME: Bodner Addition

SITE ADDRESS: 904 NINTH AVE KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/06/2022

EXPIRES: 04/04/2023

APPLICANT:

Andrus Construction Co. LLC/ANDRUS, PAUL

PO Box 687 Kitty Hawk, NC 27949

252-216-8902

OWNER:

Bodmer, Greq

7713 Pine St

MANASSAS, VA 20111

**GENERAL:** 

Andrus Construction Co. LLC/ANDRUS, PAUL

PO Box 687

Kitty Hawk, NC 27949

252-216-8902

License: 77403

**Expires:** 

PARCEL:

PIN:

988311656909

Parcel Number: 004607000

Address:

904 NINTH AVE KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS REALTY CORP

Block:

55

Lot(s):

Legal Description:

FEES:

Paid

Due

**BUILDING AREA:** 

Res. Building Permit Fee

\$581.70

\$0.00

Resdiential Unheated (.40)

468 Sq. Ft

Totals:

\$581.70

\$0.00

Residential Heated Space (.75)

526 sq. Ft.

PROJECT DESCRIPTION:

enclose under existing house, add garage and living space, house staying 3 bedrooms, remodel kitchen island, replace decking boards and railings, add fence

BJ2022-249
PROJECT NAME: Bodner Addition
SITE ADDRESS: 904 NINTH AVE KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/06/2022

EXPIRES: 04/04/2023

Permit	
Name	Value
ZONING DISTRICT	LI-2
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-136633
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	12.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	100000.00
LOT COVERAGE	28.90
LIVING SPACE (SQFT)	526
GARAGE (SQFT)	468
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling



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

OCT 1 0 2022

### **Planning and Inspection Department**

BJ2022-225

PROJECT NAME: Preikszaitis Elevator

SITE ADDRESS: 434 CHOWAN ST W KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

APPLICANT:

ACS-OBX LLC

PO Box 1771

NAGS HEAD, NC 27959

252-599-2999

OWNER:

PREIKSZAITIS, GEORGE A

409 HOLLY DRIVE MARMORA, NJ 08223

**BUILDING LIMITED:** 

**ACS-OBX LLC** 

PO Box 1771

NAGS HEAD, NC 27959

252-599-2999

License: 80229

Expires: 01/05/2023

Lot(s):

PARCEL:

PIN:

987520921082

Parcel Number:

000679000

Address:

434 CHOWAN STW KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

Block:

58

36-38

**Legal Description:** 

FEES:

Paid

Due

Building Permit Fee - Minimum

\$0.00

Fee

Totals:

\$150.00

\$150.00

\$0.00

PROJECT DESCRIPTION: remove back deck and stairs, replace with elevator

PROJECT NAME: Preikszaitis Elevator

SITE ADDRESS: 434 CHOWAN ST W KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-13248
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	65000.00
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family

Dwelling

#### REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Framing

**Zoning Final** 

Rough In

### CONDITIONS

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



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## **Planning and Inspection Department**

BJ2022-234

**PROJECT NAME: Pintor New House** 

SITE ADDRESS: 2008 ELIZABETH CITY ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/04/2022

EXPIRES: 04/02/2023

APPLICANT:

Pintor, Raymundo

2007 Norfolk Street Kill Devil Hills, NC 27948 OWNER:

Pintor, Raymundo 2007 Norfolk Street

Kill Devil Hills, NC 27948

**GENERAL:** 

Self

UNKNOWN

UNKNOWN XX 00000

000-000-0000

License: Unlicensed

**Expires:** 12/31/2022

PARCEL:

PIN:

988405292338

Parcel

001200000

Number:

Address:

2008 ELIZABETH CITY ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

Lot(s):

743

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$302.25	\$0.00	Open Decks	1 EA
Land Disturbing	\$100.00	\$0.00	Covered Porches/Decks	403 SQFT
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space	2953 sq. Ft.
Res. Building Permit Fee	\$2,214.75	\$0.00	(.75)	2000 041 1
Totals :	\$2,767.00	\$0.00		

PROJECT DESCRIPTION: new 3 bedroom single family dwelling

Town of Kill Devil Hills Water Charges

PAID

Water Tap #: T25431

PROJECT NAME: Pintor New House SITE ADDRESS: 2008 ELIZABETH CITY ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/04/2022

EXPIRES: 04/02/2023

	DETAILS
Permit	
Name Value	
ZONING DISTRICT RL	
FRONT YARD SETBACK 15	
REAR YARD SETBACK 20% Depth >30	
SIDE YARD SETBACK 6	
HEALTH DEPARTMENT S8-13271 PERMIT #	
# PARKING 3 SPACES/BEDROOM	
CAMA PERMIT N	
CAMA EXEMPTION N	
FLOOD ZONE X	
BASE FLOOD ELEVATION 8	
Proposed First Floor Elevation 8.30	
SUBSTANTIAL NO IMPROVEMENT	
PURPOSE Residential New	
CONSTRUCTION COST 290000.00	
LOT COVERAGE 39.90	
LIVING SPACE (SQFT) 2956	
COVERED 403 PORCHES/DECKS (SQFT)	
OPEN DECK (SQFT) 109	
TOTAL SQUARE FOOTAGE 3468	
ENGINEER AND LICENSE Mike O'Steen NUMBER	
CULVERT N	
ROLL OUT CAN 1	
DRIVEWAY INVERT 2 Y	
OCCUPANCY TYPE One & Two Familia Dwelling	ly



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## **Planning and Inspection Department**

BJ2022-228

PROJECT NAME: Ocean Breeze Townhomes Building 4, 5 Units SITE ADDRESS: 902D VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/24/2022

EXPIRES: 04/22/2023

APPLICANT:

RM SAUNDERS GENERAL CONTRACTORS

OWNER:

OCEAN BREEZE DEVELOPMENT LLC

PO Box 1922

Kill Devil Hills, NC 27948

480-9477

2606 Meadowlark Hills Ct SPRING, TX 77389

**GENERAL BUILDING - UNLIMITED:** 

SAUNDERS, R.M.

P.O. box 1922

Kill Devil Hills, NC 27948

252-207-8710

License: 32380 Expires: 01/01/2023

PARCEL:

PIN:

988308982774D

Parcel

Number:

Address:

902D VA DARE TRLS KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 1a, Block 9, Sec 1, Kill Devil Hills Sec 1

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$7,251.95	\$0.00	Residential Heated Space	9257 sq. Ft.
Covered Porch Residential	\$3,440.25	\$0.00	(.75)	
Open Deck Fee	\$900.00	\$0.00	Covered Porches/Decks	4587 SQFT
Tatala .	£44 F00 00	60.00	Resdiential Unheated (.40)	773 Sq. Ft
Totals :	\$11,592.20	\$0.00	Open Decks	6 EA

PROJECT DESCRIPTION: Building 4, 5 Units, 17 total bedrooms new townhome

Town of Kill Devil Hills Water Charges

PAID

Water Tap #: T 25

Printed by: CTHUMAN on: 10/24/2022 02:28 PM

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PROJECT NAME: Ocean Breeze Townhomes Building 4, 5 Units SITE ADDRESS: 902D VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/24/2022

EXPIRES: 04/22/2023

Permit	
Name	Value
# OF DUMPSTERS	2.00
ZONING DISTRICT	C
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
# PARKING SPACES/BEDROOM	17
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2075285.00
LOT COVERAGE	50.70
LIVING SPACE (SQFT)	9257
COVERED PORCHES/DECKS (SQFT)	4587
STORAGE (SQFT)	773
OPEN DECK (SQFT)	1433
TOTAL SQUARE FOOTAGE	16050
SURVEYOR NAME AND NUMBER	Mike Robinson
ENGINEER AND LICENSE NUMBER	Ray Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

PROJECT NAME: Ocean Breeze Townhomes Building 4, 5 Units SITE ADDRESS: 902D VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/24/2022

**EXPIRES: 04/22/2023** 

#### **REQUIRED INSPECTIONS**

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* Foundation survey will be required prior to rough-in inspection.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- \* Submit UL Listing for the fire separation between the units to the Fire Marshal for approval prior to installation.
- \* All engineered truss design and layout drawing are required prior to installation.

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

Issued By:

Contractor or Authorized Agent:

Date: 10-24-22



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

OCT 25 2022

### **Planning and Inspection Department**

BJ2022-251

PROJECT NAME: Macko Construction New 4 Bedroom SFD SITE ADDRESS: 2102 NEW BERN ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/25/2022

EXPIRES: 04/23/2023

APPLICANT:

MACKO OBX CONSTRUCTION, INC.

P.O. BOX 3689

Kill Devil Hills, NC 27948

252-480-6411

OWNER:

Willowbrook Estates, LLC

PO Box 1653

Kill Devil Hillsl, NC 27948

**BUILDING UNLIMITED:** 

MACKO OBX CONSTRUCTION, INC.

P.O. BOX 3689

Kill Devil Hills, NC 27948

252-480-6411

License: 81540

Expires: 01/01/2023

PARCEL:

PIN:

988517214061

Parcel Number: 001683000

Address:

2102 NEW BERN ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH** 

Block: 0

Lot(s): 27

Legal Description:

T-Pole Open Deck Fee	\$50.00 \$150.00	\$0.00 \$0.00	Open Decks Resdiential Unheated (.40) Residential Heated Space	271 Sq. Ft 2102 sq. Ft.	
Land Disturbing  Totals:	\$100.00 \$2,164.90	\$0.00 <b>\$0.00</b>	(.75) # of Temporary Poles	1 EA	mode Armanida a

PROJECT DESCRIPTION: new 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges

PAID
Fep #: T25435

PROJECT NAME: Macko Construction New 4 Bedroom SFD SITE ADDRESS: 2102 NEW BERN ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/25/2022

EXPIRES: 04/23/2023

Permit	
Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S313260
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.60
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	550000.00
LOT COVERAGE	42.20
LIVING SPACE (SQFT)	2102
COVERED PORCHES/DECKS (SQFT)	240
GARAGE (SQFT)	271
OPEN DECK (SQFT)	160
TOTAL SQUARE FOOTAGE	2773
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	MIKE O'STEEN 032628
CULVERT	N
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



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



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## **Planning and Inspection Department**

BJ2022-267

PROJECT NAME: T&B Homes New 4 Bedroom SFD SITE ADDRESS: 2055 N VA DARE TRL Kill Devil Hills **BUILDING JOINT** 

ISSUED: 10/24/2022

EXPIRES: 04/22/2023

APPLICANT:

T&B Homes Inc 1706 Virginia Ave

Kill Devil Hills, NC 27948

OWNER:

Family Purchase

3236 Holly Road

VIRGINIA BEACH, VA 23451

757-617-5202

**BUILDING UNLIMITED:** 

T and B Homes, Inc. 1706 Virgina Ave.

Kill Devil Hills, NC 27948

252-207-9837

License: 80069

Expires: 02/23/2023

PARCEL:

PIN:

988518311044

Parcel

Number:

Address:

2055 N VA DARE TRL Kill Devil Hills

Zoning:

Addition:

MILES CLARK

Block:

Lot(s):

Legal Description: Lot 3, Miles Clark Subdivision

FEES:	Paid	Due	BUILDING AREA:	
Pool/Hot Tub	\$200.00	\$0.00	Covered Porches/Decks	825 SQFT
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	3365 sq. Ft.
Covered Porch Residential	\$618.75	\$0.00	(.75)	
Land Disturbing	\$100.00	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00		
Res. Building Permit Fee	\$2,523.75	\$0.00		
Totals :	\$3,692.50	\$0.00		

PROJECT DESCRIPTION: new 4 bedroom single family dwelling, pool, and dune deck

Town of Kill Devil Hills **Water Charges** 

Water Tap

Printed by : Marty Shaw on: 10/24/2022 09:09 AM

PROJECT NAME: T&B Homes New 4 Bedroom SFD SITE ADDRESS: 2055 N VA DARE TRL Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/24/2022

EXPIRES: 04/22/2023

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-11265
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	Υ
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12.0
Proposed First Floor Elevation	16.80
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	730000.00
LOT COVERAGE	40.10
LIVING SPACE (SQFT)	3365
COVERED PORCHES/DECKS (SQFT)	825
TOTAL SQUARE FOOTAGE	4190
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	RAYMOND PATE 13018
CULVERT	N
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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### **Planning and Inspection Department**

BJ2022-258

PROJECT NAME: East Coast Construction New 4 Bedroom SFD

SITE ADDRESS: 912 CONSOLE LN KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/13/2022

**EXPIRES: 10/11/2023** 

APPLICANT:

EAST COAST CONSTRUCTION GROUP

PO Box 329

KILL DEVIL HILLS, NC 27948

252-202-1600

OWNER:

LANE INVESTMENT PROPERTIES NC LLC

P.O. Box 329 KDH, NC 27948

PARCEL:

PIN:

988409078439

Parcel Number: 002299000

Address:

912 CONSOLE LN KILL DEVIL HILLS

Zoning:

Addition:

WRIGHT'S SHORES SEC 2

Block:

0

Lot(s):

82

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,718.25	\$0.00	Covered Porches/Decks	297 SQFT
T-Pole	\$50.00	\$0.00	Residential Heated Space	2291 sq. Ft.
Land Disturbing	\$100.00	\$0.00	(.75)	
Covered Porch Residential	\$222.75	\$0.00	# of Temporary Poles	1 EA
Totals :	\$2,091.00	\$0.00		

PROJECT DESCRIPTION: new 4 bedroom single family dwelling

PROJECT NAME: East Coast Construction New 4 Bedroom SFD

SITE ADDRESS: 912 CONSOLE LN KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/13/2022

EXPIRES: 10/11/2023

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-13645
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.20
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	545000.00
LOT COVERAGE	31.00
LIVING SPACE (SQFT)	2291
COVERED PORCHES/DECKS (SQFT)	297
TOTAL SQUARE FOOTAGE	2588
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	MELISSA MCALLISTER 028946
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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



### **Planning and Inspection Department**

**BJ2022-263** 

PROJECT NAME: Janes Bulkhead and Pier SITE ADDRESS: 1804 Bay Drive Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/14/2022

**EXPIRES: 04/12/2023** 

APPLICANT:

NORTHEASTERN MARINE CONSTRUCTION

P.O. Box 42

Kitty Hawk, NC 27949

261-3682

OWNER:

JANES, MARGARET 21 Wild Pony Ln

kitty hawk, nc 27949

LIMITED- SPECIALTY-MARINE CONSTR:

NORTHEASTERN MARINE CONSTRUCTION

P.O. Box 42

Kitty Hawk, NC 27949

261-3682

License: 30026

Expires: 12/31/2022

PARCEL:

PIN:

988409062112

Parcel

Number:

Address:

1804 Bay Drive Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 12, Block 21, Sec 1, Croatan Shores Inc Sec 1

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

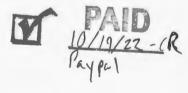
\$150.00

\$0.00

PROJECT DESCRIPTION: new bulkhead and pier

Totals:

"AE"
Looke



PROJECT NAME: Janes Bulkhead and Pier SITE ADDRESS: 1804 Bay Drive Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/14/2022

**EXPIRES: 04/12/2023** 

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
CAMA PERMIT	N
CAMA EXEMPTION	N
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	43000.00
CULVERT	N
DRIVEWAY INVERT 2	N

### **REQUIRED INSPECTIONS**

In-Slab Plumbing Insulation
Slab/Foundation/Piling Final

Framing Zoning Final

Rough In

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Zoning Final Inspection is required.
- \* All construction shall be done according to conditions identified on DEQ Permit 105-22.

Dec ID. 000564644--4740445760-0--7540-bed----0--



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

OCT 28 2022

### **Planning and Inspection Department**

BJ2022-277

PROJECT NAME: Aria Construction New 20 Bedroom House SITE ADDRESS: 1503 VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

APPLICANT:

Aria Construction and Development, Inc.

PO Box 321

CRESWELL, NC 27928

252-796-7737

OWNER:

Crutchfield, Michael

8443 HWY 1

**SOUTH HILL, VA 23970** 

**BUILDING-UNLIMITED:** 

Aria Construction and Development, Inc.

PO Box 321

CRESWELL, NC 27928

252-796-7737

License: 78928

Expires: 01/01/2023

PARCEL:

PIN:

989309151948

Parcel Number: 008234000

Address:

1503 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

OCEAN ACRES INC

Block:

0

Lot(s): PT PAR.A

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$7,547.25	\$0.00	Covered Porches/Decks	1370 SQFT
T-Pole	\$50.00	\$0.00	Open Decks	2 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	10063 sq. Ft.
Covered Porch Residential	\$1,027.50	\$0.00	(.75)	
Open Deck Fee	\$300.00	\$0.00	# of Temporary Poles	1 EA
Land Disturbing	\$100.00	\$0.00	SMYCOOTOOGYAL ISLAMING (III, y., yys.) issuotootootoo aanii islaming araan ya ta, aanii islaming ta' ayr	**************************************
Totals:	\$9,224.75	\$0.00		

PROJECT DESCRIPTION: new 20 bedroom single family dwelling, pool, pool decks, and dune walkway and gazebo

Town of Kill Devil Hills Water Charges

Printed by : Marty Shaw on: 10/28/2022 09:14 AM

PAID
TUS397
Water Tap #:

PROJECT NAME: Aria Construction New 20 Bedroom House SITE ADDRESS: 1503 VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	20
CAMA PERMIT	Υ
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10.0
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3000000.00
LOT COVERAGE	39.10
LIVING SPACE (SQFT)	10063
COVERED PORCHES/DECKS (SQFT)	1370
OPEN DECK (SQFT)	471
TOTAL SQUARE FOOTAGE	11904
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	BARRETT CROOK 027540
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



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

OCT 28 2022

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### **Planning and Inspection Department**

BJ2022-269

PROJECT NAME: Steven Daniel and Mara Durneva SITE ADDRESS: 701 SEVENTH AVE KILL DEVIL HILLS **BUILDING JOINT** 

ISSUED: 10/27/2022

**EXPIRES: 04/25/2023** 

APPLICANT:

DANIEL, STEVEN 8401 MARRIOT RD Richmond, VA 23229 804-921-9843

OWNER:

DANIEL, STEVEN 8401 MARRIOT RD Richmond, VA 23229 804-921-9843

**CONTRACTOR:** 

SAME AS OWNER UNKNOWN UNKNOWN, XX 00000 License: Same as Owner

Expires: 12/31/2023

PARCEL:

PIN:

988307677561

Parcel

Number:

Address:

701 SEVENTH AVE KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Subdivision - Kill Devil Hills Realty Corp

Lot: 5 Blk:37

Paid	Due	BUILDING AREA:	
\$150.00	\$0.00	Covered Porches/Decks	176 SQFT
\$100.00	\$0.00	Residential Heated Space	1533 sq. Ft.
\$132.00	\$0.00	(.75)	
\$1,200.55	\$0.00	Open Decks	1 EA .
\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals: \$1,632,55 \$0.00 Resdiential Ui		Resdiential Unheated (.40)	127 Sq. Ft
	\$150.00 \$100.00 \$132.00 \$1,200.55	\$150.00 \$0.00 \$100.00 \$0.00 \$132.00 \$0.00 \$1,200.55 \$0.00 \$50.00 \$0.00	\$150.00 \$0.00 Covered Porches/Decks \$100.00 \$0.00 Residential Heated Space \$132.00 \$0.00 (.75) \$1,200.55 \$0.00 Open Decks \$50.00 \$0.00 # of Temporary Poles

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges

Water Tap #: Tでくりつ

Printed by : Marty Shaw on: 10/27/2022 01:22 PM

Page 1 of 3

PROJECT NAME: Steven Daniel and Mara Durneva SITE ADDRESS: 701 SEVENTH AVE KILL DEVIL HILLS

BUILDING JOINT ISSUED: 10/27/2022

EXPIRES: 04/25/2023

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30539
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	250000.00
LOT COVERAGE	20.45
LIVING SPACE (SQFT)	1709
COVERED PORCHES/DECKS (SQFT)	176
OPEN DECK (SQFT)	176
TOTAL SQUARE FOOTAGE	2012
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ARCHITECT NAME AND LICENSE NUMBER	Mark Kasten 7220
CULVERT	N
ROLL OUT CAN	1
<b>DRIVEWAY INVERT 2</b>	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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OCT 3 1 2022

## **Planning and Inspection Department**

BJ2022-273

PROJECT NAME: MacKinnon Kitchen Bump out SITE ADDRESS: 1405 KETCH LN KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

APPLICANT:

MacKinnon, Jamie and Cheryl

517 Elm Ave. Takoma, Md 20912 240-882-5811 OWNER:

MacKinnon, Jamie and Cheryl

517 Elm Ave. Takoma, Md 20912 240-882-5811

GENERAL:

Self

UNKNOWN

UNKNOWN UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988414331870

Totals:

Parcel Number: 003591000

Address:

1405 KETCH LN KILL DEVIL HILLS

Zoning:

Addition:

LANDING SECTION 2, THE

Block:

0

Lot(s): 136

Legal Description:

FEES:

Due

Building Permit Fee - Minimum Fee

\$150.00

Paid

\$0.00

\$150.00

\$0.00

PROJECT DESCRIPTION: add 2'x16' cantilever to existing kitchen over rear deck



PROJECT NAME: MacKinnon Kitchen Bump out SITE ADDRESS: 1405 KETCH LN KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	7500.00
SURVEYOR NAME AND NUMBER	William S Jones L-2532
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

Framing	Final
Rough In	Zoning Final
Insulation	

### CONDITIONS

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

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



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

OCT 3 1 2022

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## **Planning and Inspection Department**

BJ2022-279

PROJECT NAME: Denny Addition

SITE ADDRESS: 1738 BAY DR KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/31/2022

EXPIRES: 04/29/2023

APPLICANT:

Denny, Michael

1738 Bay Dr.

Kill Devil Hills, NC 27948

261-8448

OWNER:

Denny, Michael

1738 Bay Dr.

Kill Devil Hills, NC 27948

261-8448

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2022

PARCEL:

PIN:

988409053816

Parcel Number: 002550000

Address:

1738 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

**CROATAN SHORES INC SEC 1** 

Block:

21

17-18 Lot(s):

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: convert existing front porch to living space

PROJECT NAME: Denny Addition

SITE ADDRESS: 1738 BAY DR KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/31/2022

**EXPIRES: 04/29/2023** 

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-7843
# PARKING SPACES/BEDROOM	5
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
LOT COVERAGE	27.06
SURVEYOR NAME AND NUMBER	Gloria Rogers L-3531
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family

### **REQUIRED INSPECTIONS**

Framing Final Zoning Final

Dwelling

Insulation

### CONDITIONS

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



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



OCT 2 1 2022

**Planning and Inspection Department** 

BJ2022-270

PROJECT NAME: William Kavanagh

SITE ADDRESS: 1401 1-A VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/18/2022

EXPIRES: 04/16/2023

APPLICANT:

SEA THRU CONSTRUCTION

PO BOX 2471

Kitty Hawk, NC 27949

252-491-6964

OWNER:

KAVANAGH, WILLIAM J 3812 HAWTHORNE AVENUE

RICHMOND, VA 23222

**GENERAL BUILDING-LIMITED:** 

SEA THRU CONSTRUCTION

PO BOX 2471

Kitty Hawk, NC 27949

252-491-6964

License: 57130

Expires: 01/01/2023

PARCEL:

PIN:

98841165410701

Parcel Number: 028116000

Address:

1401 1-A VA DARE TRL N KILL DEVIL HILLS

Zoning:

0

Addition:

Block:

Lot(s):

UNIT 1-A

Legal Description:

FEES:

Paid

\$150.00

Due

Building Permit Fee - Minimum

Totals:

\$0.00

\$150.00

\$0.00

PROJECT DESCRIPTION: Remodel bathroom/replace tub with shower

PROJECT NAME: William Kavanagh

SITE ADDRESS: 1401 1-A VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/18/2022

EXPIRES: 04/16/2023

-	-	- 4		-
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Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	V
CONSTRUCTION COST	13343.75
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	Residential

#### REQUIRED INSPECTIONS

Rough In

Final

Insulation

#### CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent: 2

Date:



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



OCT 2 1 2022

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## Planning and Inspection Department

BJ2022-274

PROJECT NAME: Watkins dock and boat lift

SITE ADDRESS: 1708 BAY DR KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/21/2022

**EXPIRES: 04/19/2023** 

APPLICANT:

Watkins, Richard

7005 Military Rd. AMELIA, VÁ 23002 804-301-8868

OWNER:

Watkins, Richard

7005 Military Rd. AMELIA, VA 23002

804-301-8868

GENERAL:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2022

PARCEL:

PIN:

988409055144

Parcel Number: 028501001

Address:

1708 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

SUBDIVISION - NONE

Block:

0

Lot(s): 0

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Dock and boat lift per CAMA permit.

**Permit** 

PROJECT NAME: Watkins dock and boat lift

SITE ADDRESS: 1708 BAY DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 10/21/2022

EXPIRES: 04/19/2023

### **DETAILS**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	5
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V

**CONSTRUCTION COST** 13440.00

CULVERT N **DRIVEWAY INVERT 2** 

One & Two Family **OCCUPANCY TYPE** 

Dwelling

### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling

Final

Framing

**Zoning Final** 

### CONDITIONS

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

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



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

## **Planning and Inspection Department**

BJ2022-280

PROJECT NAME:

SITE ADDRESS: 1724 SEMINOLE ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

APPLICANT:

Schmuck, Matthew

379 Valley Falls Rd. Fairmount, WV 26554 304-435-5474

OWNER:

Schmuck, Matthew

379 Valley Falls Rd. Fairmount, WV 26554

304-435-5474

**GENERAL:** 

Self

UNKNOWN UNKNOWN, XX 00000

License: Unlicensed Expires: 12/31/2022

000-000-0000

PARCEL:

PIN:

988410276087

Parcel

Number:

002671000

Address:

1724 SEMINOLE ST KILL DEVIL HILLS

Zoning:

Addition:

HIGH VIEW - HEDRICKS ADD

Block:

В

Lot(s): 26

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Renovate lower level to add 3rd bedroom.

OCT 28 2022

PROJECT NAME:

SITE ADDRESS: 1724 SEMINOLE ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

## **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	9000.00
LIVING SPACE (SQFT)	160
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Final

**Zoning Final** 

#### CONDITIONS

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

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

Issued By:

**Contractor or Authorized Agent:** 

Date: /C



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



OCT - 3 2022

**Planning and Inspection Department** 

TC: W

BJ2022-241

PROJECT NAME: TRIPLETT KITCHEN REMODEL SITE ADDRESS: 2022 FRANKLIN ST KILL DEVIL HILLS **BUILDING JOINT** 

ISSUED: 10/03/2022

EXPIRES: 04/01/2023

APPLICANT:

TRIPLETT, BAILEY 2022 FRANKLIN ST Kill Devil Hills, NC 27948 OWNER:

TRIPLETT, BAILEY 2022 FRANKLIN ST Kill Devil Hills, NC 27948

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

License: Unlicensed Expires: 12/31/2022

Lot(s):

000-000-0000

PARCEL:

PIN:

988405191199

Parcel Number: 001460000

Address:

2022 FRANKLIN ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

1331

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$150.00

\$0.00

Fee

Totals:

\$0.00

PROJECT DESCRIPTION:

REMOVE AND REPLACE KITCHEN CABINETS, COUTERTOPS, AND APPLIANCES, SAME

FOR SAME

**Permit** 

PROJECT NAME: TRIPLETT KITCHEN REMODEL

SITE ADDRESS: 2022 FRANKLIN ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/03/2022

**EXPIRES: 04/01/2023** 

### **DETAILS**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Χ
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential

CONSTRUCTION TYPE V

CONSTRUCTION COST 24000.00

CULVERT N
DRIVEWAY INVERT 2 N

OCCUPANCY TYPE One & Two Family

Dwelling

Repair/Remodel

#### REQUIRED INSPECTIONS

Rough In Final

Insulation Zoning Final

#### CONDITIONS

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



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

OCT - 5 2022

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**Planning and Inspection Department** 

BJ2022-248

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

**BUILDING JOINT** 

ISSUED: 10/03/2022

EXPIRES: 04/01/2023

APPLICANT:

Dan Osman

P. O. Box 7403

Kill Devil Hillsl, NC 27948

202-4599

OWNER:

BECKSTOFFER, WILLIAM H II

6 BRANDON ROAD

**NEWPORT NEWS, VA23601** 

**GENERAL BUILDING:** 

Dan Osman

P. O. Box 7403

Kill Devil Hillsl, NC 27948

252-202-4599

License: 76259

Expires: 01/01/2023

PARCEL:

PIN:

988419628317

Parcel Number:

003990000

Address:

113 FERRIS AVE KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

44

Lot(s): 19

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum Fee

\$150.00

\$0.00

Electrical Permit Fee

\$150.00

\$0.00

Totals:

\$300.00

\$0.00

PROJECT DESCRIPTION:

replace existing deck and stairs to same footprint, meter base change out from overhead to

underground

PROJECT NAME: Beckstoffer Deck Replacement SITE ADDRESS: 113 FERRIS AVE KILL DEVIL HILLS BUILDING JOINT ISSUED: 10/03/2022

EXPIRES: 04/01/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

**Zoning Final** 

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

<sup>\*</sup> Zoning Final Inspection is required.



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



OCT - 5 2022



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BJ2022-243

PROJECT NAME: Minh Nguyen

SITE ADDRESS: 601 AIRSTRIP RD W KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/04/2022

EXPIRES: 04/02/2023

APPLICANT:

CHAMBERS, TIM

219 W Windjammer Road nags head, nc 27959

252-599-6409

OWNER:

Nguyen, Minh

601 W. Airstrip Road Kill Devil Hills, NC 27948

910-859-0249

**UNLICENSED - REMODELING:** 

CHAMBERS, TIM

219 W Windjammer Road nags head, nc 27959 252-599-6409 License: 12345

**Expires:** 

PARCEL:

PIN:

988312767101

Parcel Number:

004520000

Address:

601 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS REALTY CORP

Block:

41

Lot(s): 4

Legal Description:

FEES:

**Paid** 

Due

BUILDING AREA:

Res. Building Permit Fee

\$198.00

\$0.00

Residential Heated Space

264 sq. Ft.

Totals:

\$198.00

\$0.00

(.75)

PROJECT DESCRIPTION:

Enclose under house for 4th bedroom/bath/gameroom/Add too existing parking pad to make

10X20 parking space

PROJECT NAME: Minh Nguyen SITE ADDRESS: 601 AIRSTRIP RD W KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/04/2022

EXPIRES: 04/02/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S22-13594
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	19000.00
LIVING SPACE (SQFT)	264
TOTAL SQUARE FOOTAGE	264
SURVEYOR NAME AND NUMBER	BILD
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

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



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

**Planning and Inspection Department** 

OCT - 5 2022

BJ2022-240

PROJECT NAME:

SITE ADDRESS: 431 Walker Street W Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/03/2022

EXPIRES: 04/01/2023

APPLICANT:

WILSON, RICHARD

9535 Plateau Place

Mechanicsville, VA 23116

OWNER:

WILSON, RICHARD

9535 Plateau Place

Mechanicsville, VA 23116

**GENERAL BUILDING-LIMITED:** 

SANDY BOTTOM HOMES

400 DaVinci Lane kitty hawk, nc 27949 757-448-8162

License: 67524

Expires: 01/01/2023

PARCEL:

PIN:

987520908947

Parcel

Number:

Address:

431 Walker Street W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 5-7, Block 53, Virginia Dare Shores

FEES:

Paid

Due

Pool/Hot Tub

\$200.00

\$0.00

Totals:

\$200.00

\$0.00

PROJECT DESCRIPTION: Inground pool

PROJECT NAME:

SITE ADDRESS: 431 Walker Street W Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/03/2022

**EXPIRES: 04/01/2023** 

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	30000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family

### REQUIRED INSPECTIONS

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

Rough In

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



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

OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-246

PROJECT NAME: Tides B6 Remodel

SITE ADDRESS: 709 N Va Dare Trl B6 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/06/2022

EXPIRES: 04/04/2023

PARENT PERMIT #: BJ2021-259

APPLICANT:

SAGA CONSTRUCTION INC.

1314 S Croatan Hwy, Suite 301

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416726545A6

Parcel

Number:

Address:

709 N Va Dare Trl B6 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 4 & 5, Kitty Hawk Shores Revised

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: remodel existing permitted building B6, Lot 12

PROJECT NAME: Tides B6 Remodel SITE ADDRESS: 709 N Va Dare Trl B6 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/06/2022

EXPIRES: 04/04/2023

# **DETAILS**

Permit				
Name	Value			
ZONING DISTRICT	OIR			
FRONT YARD SETBACK	30			
REAR YARD SETBACK	20% Depth >30			
SIDE YARD SETBACK	12			
# PARKING SPACES/BEDROOM	4			
CAMA PERMIT	N			
CAMA EXEMPTION	N			
FLOOD ZONE	VE			
BASE FLOOD ELEVATION	13			
SUBSTANTIAL IMPROVEMENT	NO			
PURPOSE Residential Repair/Remodel				
CONSTRUCTION TYPE	V			
CONSTRUCTION COST 20000.00				
LOT COVERAGE	54.18			
LIVING SPACE (SQFT)	2827			
COVERED PORCHES/DECKS (SQFT)	140			
ACCESSORY STRUCTURE (SQFT)	280			
STORAGE (SQFT)	47			
OPEN DECK (SQFT)	226			
TOTAL SQUARE FOOTAGE	3193			
SURVEYOR NAME AND NUMBER	Michael Robinson 18994			
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628			
CULVERT	N			
<b>DRIVEWAY INVERT 2</b>	N			
OCCUPANCY TYPE	One & Two Family Dwelling			



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



OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-244

PROJECT NAME: Tides A3 Remodel

SITE ADDRESS: 709 N. Va Dare Trl. A3 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416726508

Parcel

Number:

Address:

709 N. Va Dare Trl. A3 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 5, The Tides

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: remodel existing permitted building A3, Site 5

2 . 3

**PROJECT NAME: Tides A3 Remodel** 

SITE ADDRESS: 709 N. Va Dare Trl. A3 Kill Devil Hills

BUILDING JOINT ISSUED: 10/05/2022

EXPIRES: 04/03/2023

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	Ν .
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Mike Robinson
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### **REQUIRED INSPECTIONS**

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

Rough In

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

PROJECT NAME: Tides A3 Remodel

SITE ADDRESS: 709 N. Va Dare Trl. A3 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

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

Issued By:

Contractor or Authorized Agent: <u>Macelm Muck</u> Date: 10.14.22



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

OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-242

PROJECT NAME: Tides A1 Remodel

SITE ADDRESS: 709 N Va Dare Trail A1 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416725503

Parcel

Number:

Address:

709 N Va Dare Trail A1 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 1, The Tides

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: remodel existing permitted building A1, Site 1

3

PROJECT NAME: Tides A1 Remodel

SITE ADDRESS: 709 N Va Dare Trail A1 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

#### **DETAILS**

#### **Permit**

Name Value
ZONING DISTRICT OIR
FRONT YARD SETBACK 30
REAR YARD SETBACK CAMA
SIDE YARD SETBACK 12
CAMA PERMIT N
CAMA EXEMPTION N

FLOOD ZONE
SUBSTANTIAL
IMPROVEMENT

PURPOSE

Repair/Remodel CONSTRUCTION TYPE V

CONSTRUCTION COST 20000.00 LOT COVERAGE 54.18

SURVEYOR NAME AND NUMBER

NUMBER

**ENGINEER AND LICENSE** 

NUMBER

CULVERT N
DRIVEWAY INVERT 2 N

OCCUPANCY TYPE

One & Two Family

MIKE O'STEEN 032628

Dwelling

X

NO

Residential

Mike Robinson

# **REQUIRED INSPECTIONS**

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

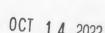
Rough In

#### CONDITIONS

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



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



# **Planning and Inspection Department**

TV SIE MILES IN

BJ2022-238

PROJECT NAME: Tides B4 Remodel

SITE ADDRESS: 709 N Va Dare Trail B4 Kill Devil Hills

BUILDING JOINT

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416726585

Parcel

Number:

Address:

709 N Va Dare Trail B4 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 8 The Tides

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: remodel existing permitted building B4, Site 8

PROJECT NAME: Tides B4 Remodel

SITE ADDRESS: 709 N Va Dare Trail B4 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

### **DETAILS**

Permit					
Name	Value				
ZONING DISTRICT	OIR				
FRONT YARD SETBACK	30				
REAR YARD SETBACK	CAMA				
SIDE YARD SETBACK	12				
CAMA PERMIT	N				
CAMA EXEMPTION	N				
FLOOD ZONE	X				
SUBSTANTIAL IMPROVEMENT	NO				
PURPOSE	Residential Repair/Remodel				
CONSTRUCTION COST	20000.00				
LOT COVERAGE	54.18				
SURVEYOR NAME AND Mike Robinson NUMBER					
CULVERT	N				
<b>DRIVEWAY INVERT 2</b>	N				
OCCUPANCY TYPE	One & Two Family Dwelling				

## **REQUIRED INSPECTIONS**

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

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



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

**Planning and Inspection Department** 

OCT 1 4 2022

BJ2022-247

PROJECT NAME: Tides B2 Remodel

SITE ADDRESS: 709 N Va Dare Trail B2 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

PARENT PERMIT #: BJ2022-160

APPLICANT:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416725580

Parcel Number:

Address:

709 N Va Dare Trail B2 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 4, The Tides

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: remodel existing permitted building B2, Site 4

PROJECT NAME: Tides B2 Remodel

SITE ADDRESS: 709 N Va Dare Trail B2 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

# **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Mike Robinson
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

# **REQUIRED INSPECTIONS**

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

### CONDITIONS

Printed by: CTHUMAN on: 10/05/2022 02:12 PM

Page 2 of 3

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



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

OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-250

PROJECT NAME: 709 NVDT LLC

SITE ADDRESS: 709 N. Va Dare Trail B5 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416727538

Parcel

Number:

Address:

709 N. Va Dare Trail B5 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 10, The Tides

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Remodel existing permitted building B5, Lot 10

PROJECT NAME: 709 NVDT LLC

SITE ADDRESS: 709 N. Va Dare Trail B5 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Michael Robinson
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

# **REQUIRED INSPECTIONS**

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

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





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

OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-252

**PROJECT NAME: 709 NVDT LLC** 

SITE ADDRESS: 709 N. Va. Dare Trl. A2 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/10/2022

EXPIRES: 04/08/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416725556

Parcel

Number:

Address:

709 N. Va. Dare Trl. A2 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 3, The Tides

FEES:

Fee

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Tides A2 Remodel

PROJECT NAME: 709 NVDT LLC

SITE ADDRESS: 709 N. Va. Dare Trl. A2 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/10/2022

EXPIRES: 04/08/2023

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	MIKE O'STEEN 032628
CULVERT	N .
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family

**Dwelling** 

## **REQUIRED INSPECTIONS**

In-Slab Plumbing Slab/Foundation/Piling Framing

Insulation

Final

Zoning Final

Rough In

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



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

OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-255

PROJECT NAME: Tides A5 Remodel

SITE ADDRESS: 709 N Va Dare Trl A5 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/10/2022

EXPIRES: 04/08/2023

APPLICANT:

SAGA CONSTRUCTION INC.

1314 S Croatan Hwy, Suite 301

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416727603

Parcel Number:

1

Address:

709 N Va Dare Trl A5 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

A5

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: remodel existing permitted building A5, Site 9

PROJECT NAME: Tides A5 Remodel

SITE ADDRESS: 709 N Va Dare Trl A5 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/10/2022

EXPIRES: 04/08/2023

#### **DETAILS**

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г	C	•	u	ı	ш	8	ι

Value Name ZONING DISTRICT OIR FRONT YARD SETBACK 30 **REAR YARD SETBACK** CAMA SIDE YARD SETBACK 12 **CAMA PERMIT** N **CAMA EXEMPTION** N

FLOOD ZONE SUBSTANTIAL **IMPROVEMENT PURPOSE** 

NO Residential

X

CONSTRUCTION COST

20000.00 54.18

LOT COVERAGE SURVEYOR NAME AND

Mike Robinson

Repair/Remodel

NUMBER

**ENGINEER AND LICENSE** 

**NUMBER** 

MIKE O'STEEN 032628

**CULVERT** 

N N

**DRIVEWAY INVERT 2 OCCUPANCY TYPE** 

One & Two Family Dwelling

# REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

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



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

OCT 1 4 2022

# **Planning and Inspection Department**

BJ2022-256

PROJECT NAME: 709 NVDT LLC - Tides B1 Remodel SITE ADDRESS: 709 N Va Dare Trail B1 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

**EXPIRES:** 

PARENT PERMIT #: BJ2022-163

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416725438

Totals:

Parcel

Number:

Address:

709 N Va Dare Trail B1 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 2, The Tides

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: Remodel existing permitted building B1, Lot 2

PROJECT NAME: 709 NVDT LLC - Tides B1 Remodel SITE ADDRESS: 709 N Va Dare Trail B1 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES:

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	13
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Michael Robinson
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

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

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



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

OCT 1 4 2022

### **Planning and Inspection Department**

BJ2022-257

PROJECT NAME: 709 NVDT LLC - Tides B3 Remodel SITE ADDRESS: 709 N. Va. Dare Trail B3 Kill Devil Hills **BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

PARENT PERMIT #: BJ2022-165

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416726533

Parcel Number:

Address:

709 N. Va. Dare Trail B3 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Site 6, The Tides

FEES:

Due

Building Permit Fee - Minimum

\$150.00

Paid

\$0.00

Fee

Totals:

\$150.00

\$0.00

Legal Description:

PROJECT DESCRIPTION: Remodel existing permitted building B3, Lot 6

PROJECT NAME: 709 NVDT LLC - Tides B3 Remodel SITE ADDRESS: 709 N. Va. Dare Trail B3 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Michael Robinson
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

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

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



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

OCT 1 4 2022

### **Planning and Inspection Department**

BJ2022-260

PROJECT NAME: 709 NVDT LLC - Tides A4 Remodel SITE ADDRESS: 709 N Va Dare Trail A4 Kill Devil Hills **BUILDING JOINT** 

ISSUED: 10/11/2022

**EXPIRES: 04/09/2023** 

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416726651

Totals:

Parcel

Number:

Address:

709 N Va Dare Trail A4 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Site 7, The Tides

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$150.00

\$0.00

Fee

\$0.00

PROJECT DESCRIPTION: Remodel existing permitted building A4, Lot 7

PROJECT NAME: 709 NVDT LLC - Tides A4 Remodel SITE ADDRESS: 709 N Va Dare Trail A4 Kill Devil Hills BUILDING JOINT ISSUED: 10/11/2022

EXPIRES: 04/09/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
HEALTH DEPARTMENT PERMIT #	KDHWWTP
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

## **REQUIRED INSPECTIONS**

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

Rough In

### CONDITIONS

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

Printed by: CTHUMAN on: 10/11/2022 08:32 AM



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

OCT 1 4 2022

### **Planning and Inspection Department**

BJ2022-261

- 7

PROJECT NAME: 709 NVDT LLC - Tides A6

SITE ADDRESS: 709 N Va Dare Trl A6 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/12/2022

EXPIRES: 04/10/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

709 NVDT LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988416727656

Parcel

Number:

Address:

709 N Va Dare Trl A6 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 4 & 5, Kitty Hawk Shores Revised

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Remodel existing permitted building A6, Lot 11

PROJECT NAME: 709 NVDT LLC - Tides A6

SITE ADDRESS: 709 N Va Dare Trl A6 Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/12/2022

EXPIRES: 04/10/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
HEALTH DEPARTMENT PERMIT #	KDHWWTP
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	20000.00
LOT COVERAGE	54.18
SURVEYOR NAME AND NUMBER	Michael Robinson
CULVERT	N
<b>DRIVEWAY INVERT 2</b>	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

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

<sup>\*</sup> Foundation survey will be required prior to rough-in inspection.



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

# **Planning and Inspection Department**

BJ2022-259

PROJECT NAME: Abbott House Raising and Deck Rebuild SITE ADDRESS: 1109 JEFFERY CT KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/12/2022

EXPIRES: 04/10/2023

APPLICANT:

BARRETT & HABER, LLC Emanuelson & Dad

PO BOX 448

nags head, nc 27959 252-261-2212

OWNER:

Abbott, Anne and Alexander

10124 Garfield Rd. Richmond, VA 23235 252-207-2632

**RESIDENTIAL - LIMITED:** 

BARRETT & HABER, LLC Emanuelson & Dad

PO BOX 448 nags head, nc 27959 252-261-2212

License: 87233

Expires: 02/22/2023

PARCEL:

PIN:

988409073465

Parcel Number: 009135000

Address:

1109 JEFFERY CT KILL DEVIL HILLS

Zoning:

Addition:

WRIGHT'S SHORES

Block:

0

Lot(s): 76

Legal Description:

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

PROJECT DESCRIPTION:

raise house 12', rebuild front deck and stairs to revised layout, rebuild back deck and stairs to smaller revised footprint

OCT 12 2022

10 41 " , = 10 m

Printed by: CTHUMAN on: 10/12/2022 08:46 AM

Page 1 of 3

PROJECT NAME: Abbott House Raising and Deck Rebuild SITE ADDRESS: 1109 JEFFERY CT KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/12/2022

EXPIRES: 04/10/2023

#### **DETAILS**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-13672
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	76500.00
LOT COVERAGE	38.70
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

### **REQUIRED INSPECTIONS**

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

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

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



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

OCT - 7 2022

1 11

## **Planning and Inspection Department**

BJ2022-253

PROJECT NAME: Brubaker Addition

SITE ADDRESS: 704 SWAN ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

APPLICANT:

WESLEY BRUBAKER

2654 Jamestown Ln Alexandria, VA 22314 OWNER:

WESLEY BRUBAKER

2654 Jamestown Ln Alexandria, VA 22314

GENERAL:

Self

UNKNOWN

UNKNOWN UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2022

PARCEL:

PIN:

988307771765

Parcel Number:

004634002

Address:

704 SWAN ST KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS RLTY CORP ADD

Block:

31

Lot(s): 2

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: extension of living space, enclosing portion of covered deck

PROJECT NAME: Brubaker Addition

SITE ADDRESS: 704 SWAN ST KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

#### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
LOT COVERAGE	25.10
LIVING SPACE (SQFT)	96
TOTAL SQUARE FOOTAGE	96
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

# REQUIRED INSPECTIONS

Framing Final
Rough In Zoning Final
Insulation

#### CONDITIONS

Printed by: CTHUMAN on: 10/07/2022 11:04 AM

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

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



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

OCT 1 4 2022

## **Planning and Inspection Department**

BJ2022-265

PROJECT NAME: Harris Addition

SITE ADDRESS: 103 MEADOWLARK ST E KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/14/2022

**EXPIRES: 04/12/2023** 

APPLICANT:

NATE HARRIS

103 E MEADOWLARK ST Kill Devil Hills, NC 27948

435-232-5508

OWNER:

NATE HARRIS

103 E MEADOWLARK ST Kill Devil Hills, NC 27948

435-232-5508

GENERAL:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988308799740

Totals:

Parcel

003812000

Number:

Address:

103 MEADOWLARK ST E KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

Block:

33

Lot(s): 14

Legal Description:

FEES: Res. Building Permit Fee Open Deck Fee

**Paid** \$288.00

Due \$0.00

**BUILDING AREA:** 

(.75)

Open Decks Residential Heated Space

1 EA 384 sq. Ft.

\$438.00

\$150.00

\$0.00 \$0.00

PROJECT DESCRIPTION: adding additional living space over existing deck, roof over existing stairs, staying 3 bedroom

" X" Flood 70re

PROJECT NAME: Harris Addition

SITE ADDRESS: 103 MEADOWLARK ST E KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 10/14/2022

EXPIRES: 04/12/2023

### **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S22-8876
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	30000.00
LOT COVERAGE	48.70
LIVING SPACE (SQFT)	384
OPEN DECK (SQFT)	30
TOTAL SQUARE FOOTAGE	414
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	Mike O'steen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

## **REQUIRED INSPECTIONS**

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

**Zoning Final** 

Rough in

## CONDITIONS

Printed by : CTHUMAN on: 10/14/2022 12:13 PM

Page 2 of 3



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

OCT 1 0 2022

## **Planning and Inspection Department**

BJ2022-237

PROJECT NAME: Water Oak Residential, LLC SITE ADDRESS: 509 Zen Lane Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 09/29/2023

APPLICANT:

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

OWNER:

Water Oak Residential, LLC

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

**GENERAL BUILDING - LIMITED:** 

SAGA CONSTRUCTION

1314 S Croatan Hwy, Suite 301

PO Box 90

Kill Devil Hills, NC 27948

252-441-9003

License: 62306

Expires: 12/31/2022

PARCEL:

PIN:

988414228714

Parcel

Number:

Address:

509 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

Lot 47, Water Oak Subdivision

FEES:	<u>Paid</u>	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,475.70	\$0.00	Covered Porches/Decks	41 SQFT
T-Pole	\$50.00	\$0.00	Resdiential Unheated (.40)	438 Sq. Ft
Covered Porch Residential	\$30.75	\$0.00	Residential Heated Space	1734 sq. Ft.
Totals :	\$1,556.45	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hill-Water Charges

PAID
Water Tap #: T25432

Printed by : Marty Shaw on: 10/07/2022 01:22 PM

Page 1 of 3

BJ2022-237

PROJECT NAME: Water Oak Residential, LLC SITE ADDRESS: 509 Zen Lane Kill Devil Hills

**BUILDING JOINT** 

ISSUED: 10/07/2022

EXPIRES: 09/29/2023

## **DETAILS**

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	KDHWWTP
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	325000.00
LOT COVERAGE	39.30
LIVING SPACE (SQFT)	1734
COVERED PORCHES/DECKS (SQFT)	41
GARAGE (SQFT)	438
TOTAL SQUARE FOOTAGE	2213
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	MIKE O'STEEN 032628
CULVERT	Υ
ROLL OUT CAN	1
<b>DRIVEWAY INVERT 2</b>	Υ
OCCUPANCY TYPE	One & Two Family Dwelling



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

## **Planning and Inspection Department**

BP2022-257

PROJECT NAME: 2023 NORFOLK DECK REPAIR

SITE ADDRESS: 2023 NORFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2022

**EXPIRES: 04/23/2023** 

APPLICANT:

2023 NORFOLK, LLC

2420 S. CROATAN HWY STE A

nags head, nc 27959

252-489-4677

OWNER:

2023 NORFOLK, LLC

2420 S. CROATAN HWY STE A

nags head, nc 27959 252-489-4677

GENERAL:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988405199674

Totals:

Parcel Number:

001222000

Address:

2023 NORFOLK ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

Lot(s): 768

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$0.00

PROJECT DESCRIPTION:

CORRECT CODE VIOLATIONS FROM UNPERMITTED DECK WORK, TO INCLUDE PILING

AND GIRDER REPLACEMENT

\$150.00

OCT 27 2022

- 44 -

Permit

PROJECT NAME: 2023 NORFOLK DECK REPAIR

SITE ADDRESS: 2023 NORFOLK ST KILL DEVIL HILLS

ISSUED: 10/25/2022

EXPIRES: 04/23/2023

### **DETAILS**

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

CERTIFICATE

CONSTRUCTION COST

CONSTRUCTION TYPE

OCCUPANCY TYPE

1500.00

One & Two Family Dwelling

## **REQUIRED INSPECTIONS**

Zoning Final

Final

Slab/Foundation/Piling

### CONDITIONS

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

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

Issued By:

**Contractor or Authorized Agent:** 

Printed by: Jordan Blythe on: 10/25/2022 02:38 PM



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

OCT 28 2022

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- . .



BP2022-262

PROJECT NAME:

SITE ADDRESS: 807 AVALON DR W KILL DEVIL HILLS

BUILDING

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

**APPLICANT:** 

Moran, Mike

PO Box 292

nags head, nc 27959

OWNER:

Moran, Mike

PO Box 292

nags head, nc 27959

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2022

PARCEL:

PIN:

988405092567

Parcel Number: 001591000

Address:

807 AVALON DR W KILL DEVIL HILLS

Zoning:

Addition:

AVALON BEACH

Block: \

0

Lot(s):

233

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace stairs same footprint

PROJECT NAME:

SITE ADDRESS: 807 AVALON DR W KILL DEVIL HILLS

BUILDING

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

#### **DETAILS**

**Permit** Name Value **CAMA PERMIT** N CAMA EXEMPTION ZONING DISTRICT RL **PURPOSE** Residential Repair/Remodel FLOOD ZONE **FINAL ELEVATION** CERTIFICATE CONSTRUCTION COST 850.00 CONSTRUCTION TYPE

One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Zoning Final

**OCCUPANCY TYPE** 

Final

### CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

Date:



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

# **Planning and Inspection Department**

BP2022-263

PROJECT NAME:

SITE ADDRESS: 1612 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

**APPLICANT:** 

GENSEL, RICHARD PHILIP

**TRUSTEES** 

5525 WOODBINE ROAD WOODBINE, MD 21797

OWNER:

GENSEL, RICHARD PHILIP

**TRUSTEES** 

5525 WOODBINE ROAD WOODBINE, MD 21797

**UNLICENSED - REMODELING:** 

Wernock, Robert 1603 Princess Anne

Kill Devil Hillsl, NC 27948

252-305-2640

License: 0000000 Expires: 02/28/2023

PARCEL:

PIN:

988410465282

Parcel Number:

003136011

Address:

1612 PRINCESS ANNE DR KILL DEVIL HILLS

Zoning:

Addition:

**DELRAY BEACH RESUBDIV** 

Block:

3

Lot(s): 11

Legal Description:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace stairs. Repair guard rails.

OCT 28 2022

PROJECT NAME:

SITE ADDRESS: 1612 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/28/2022

EXPIRES: 04/26/2023

#### **DETAILS**

Permit Name

Value

**CAMA PERMIT** 

N

CAMA EXEMPTION

N

ZONING DISTRICT

RL

**PURPOSE** 

Residential

Repair/Remodel

FLOOD ZONE

**FINAL ELEVATION** 

N

CERTIFICATE

CONSTRUCTION COST

6000.00

**CONSTRUCTION TYPE** 

**OCCUPANCY TYPE** 

One & Two Family

**Dwelling** 

## REQUIRED INSPECTIONS

Zoning Final

Final

### CONDITIONS

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

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

Issued By:

**Contractor or Authorized Agent:** 

Date: 10-28-22



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



OCT 26 2022

**Planning and Inspection Department** 

TOWN 

BP2022-253

PROJECT NAME: McGonagle ground level deck

SITE ADDRESS: 1211 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2022

EXPIRES: 04/23/2023

APPLICANT:

Mcgonagle, Paul

456 Lynette Street

GAITHERSBURG, MD 20878

OWNER:

Mcgonagle, Paul

456 Lynette Street

GAITHERSBURG, MD 20878

CONTRACTOR: Bozarth, Frank

PO Box 912

nags head, nc 27959 252-256-0147

**UNLICENSED - REMODELING:** 

Bozarth, Frank

PO Box 912

nags head, nc 27959

252-256-0147

License: 000000000

**Expires:** 

PARCEL:

PIN:

988312978344

Parcel Number: 004282002

Address:

1211 MEMORIAL BLVD S KILL DEVIL HILLS

Zoning:

Addition:

**KILL DEVIL HILLS SEC 1** 

Block:

6

Lot(s): 20

Legal Description:

FEES: Open Deck Fee

Paid \$150.00

Due \$0.00

Open Decks

**BUILDING AREA:** 

1 EA

Pool/Hot Tub

\$200.00

\$0.00

Totals:

\$350.00

\$0.00

PROJECT DESCRIPTION: ground level 10'x10' deck and hottub at rear of house

PROJECT NAME: McGonagle ground level deck

SITE ADDRESS: 1211 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2022

EXPIRES: 04/23/2023

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	s22-13904
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1700.00
OPEN DECK (SQFT)	100
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Kirk Foreman L-2801
OCCUPANCY TYPE	One & Two Family Dwelling

### REQUIRED INSPECTIONS

Zoning Final Slab/Foundation/Piling Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Please obtain a piling inspection prior to installing pilings into the ground.



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

## **Planning and Inspection Department**

BP2022-260

PROJECT NAME: Gail Moody-Milteer

SITE ADDRESS: 402 HELGA ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/27/2022

**EXPIRES: 04/25/2023** 

APPLICANT:

H & W SERVICES GROUP

1053 MARTINS POINT RD.

kitty hawk, nc 27949 252-423-0744

OWNER:

MILTEER, MICHAEL A

413 MEADOW LANE FRANKLIN, VA 23851

**BUILDING LIMITED:** 

H & W SERVICES GROUP

1053 MARTINS POINT RD.

kitty hawk, nc 27949 252-423-0744

License: 81536

Expires: 12/01/2022

PARCEL:

PIN:

987516837486

Parcel Number: 000277000

402 HELGA ST W KILL DEVIL HILLS

Zoning:

Addition:

Address:

**ORVILLE BEACH WEST** 

Block:

0

192 Lot(s):

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace stairs, decking, handrails and two pilings on north side within existing footprint

OCT 27 2022

PROJECT NAME: Gail Moody-Milteer

SITE ADDRESS: 402 HELGA ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/27/2022

**EXPIRES: 04/25/2023** 

DE.	<b>TAILS</b>
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Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	24800.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Styons
OCCUPANCY TYPE	One & Two Family Dwelling

### REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Stairs and deck will be rebuilt within existing footprint.



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

## **Planning and Inspection Department**

BP2022-261

PROJECT NAME: NUGENT SHED

SITE ADDRESS: 2039 FRANKLIN ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/27/2022

**EXPIRES: 04/25/2023** 

APPLICANT:

NUGENT, GILBERT

2039 FRANKLIN ST

Kill Devil Hills, NC 27948

804-712-1840

OWNER:

NUGENT, GILBERT

2039 FRANKLIN ST

Kill Devil Hills, NC 27948

804-712-1840

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988405191621

Parcel Number: 001445000

Address:

2039 FRANKLIN ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

Lot(s): 1312

Legal Description:

FEES:

Paid

Due

Accessory Residential (MIN)

\$100.00

\$0.00

\$100.00

\$0.00

PROJECT DESCRIPTION: 8'X12' SHED IN REAR YARD

Totals:

OCT 2 7 2022

D. Bankin m h = 1 9 " 1

PROJECT NAME: NUGENT SHED

SITE ADDRESS: 2039 FRANKLIN ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/27/2022

**EXPIRES: 04/25/2023** 

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

#### REQUIRED INSPECTIONS

**Zoning Final** 

Final

#### CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent: \_\_

Date: 10-27 - 22



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



**Planning and Inspection Department** 

OCT 26 2022

BP2022-259

PROJECT NAME:

SITE ADDRESS: 604 CLAM SHELL DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2022

**EXPIRES: 04/23/2023** 

**APPLICANT:** 

Weller, Nathan

604 Clam Shell Drive Kill Devil Hills, NC 27948

252-256-1988

OWNER:

Weller, Nathan

604 Clam Shell Drive Kill Devil Hills, NC 27948

252-256-1988

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988409176458

Parcel Number:

002399000

Address:

604 CLAM SHELL DR KILL DEVIL HILLS

Zoning:

Addition:

SEA HOLLY RIDGE

Block:

Lot(s): 18

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Repair damaged piling per engineered detail.

BP2022-259 PROJECT NAME:

SITE ADDRESS: 604 CLAM SHELL DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2022

EXPIRES: 04/23/2023

D	EI	FA	IL	S
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**Permit** Name Value **CAMA PERMIT** N CAMA EXEMPTION N ZONING DISTRICT RL **PURPOSE** Residential Repair/Remodel **FLOOD ZONE** X **FINAL ELEVATION** N CERTIFICATE CONSTRUCTION COST 4000.00 CONSTRUCTION TYPE **OCCUPANCY TYPE** One & Two Family

Dwelling

### REQUIRED INSPECTIONS

Zoning Final

Final

### CONDITIONS

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

Issued By:

Contractor or Authorized Agent:

Date: \_10-26-22



PO BOX 1719
Kill Devil Hills, NC 27948
Phone: 252-449-5318 Fax: 252-4414102



OCT 2 4 2022

**Planning and Inspection Department** 

TOTAL

BP2022-254

PROJECT NAME: Bezek Deck and Stair Replacement SITE ADDRESS: 439 EDEN ST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/24/2022

**EXPIRES: 04/22/2023** 

APPLICANT:

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

OWNER:

BEZEK, JOHN 49 W Skyline Rd

kitty hawk, nc 27949

**BUILDING LIMITED:** 

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

License: 78583

**Expires:** 

PARCEL:

PIN:

987520909495

Totals:

Parcel Number: 000642000

51

Address:

439 EDEN ST ST W KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

\_. .

Block:

Lot(s): 1-2

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

Dullding Fermit Fee Williams

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: replace existing front deck, and two sets of side stairs to same footprint

PROJECT NAME: Bezek Deck and Stair Replacement SITE ADDRESS: 439 EDEN ST ST W KILL DEVIL HILLS BUILDING

ISSUED: 10/24/2022

EXPIRES: 04/22/2023

## **DETAILS**

Permit		
Name	Value	
CAMA PERMIT	N ·	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	15	
SIDE YARD SETBACK	6	
REAR YARD SETBACK	20% Depth >30	
STREET SIDE SETBACK	7.5	
FLOOD ZONE	X	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	20000.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	

## **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

### **CONDITIONS**

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

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



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

# **Planning and Inspection Department**

BP2022-256

PROJECT NAME: HARRIS FENCE AND SHED

SITE ADDRESS: 700 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2022

**EXPIRES: 04/19/2023** 

APPLICANT:

HARRIS, NANCY

403 Pineview Drive

ELIZABETH CITY, NC 27909

OWNER:

HARRIS, NANCY

403 Pineview Drive

ELIZABETH CITY, NC 27909

**GENERAL:** 

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988419724236

Parcel Number: 003729000

Address:

700 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

KITTY HAWK SHORES - REVISED

2011119

Block: 21

Lot(s):

Legal Description:

FEES:

**Paid** 

Due

Fence

\$100.00

\$0.00

Accessory Residential (MIN)

\$100.00

\$0.00

Totals:

\$200.00

\$0.00

PROJECT DESCRIPTION: CONSTRUCT FENCE ALONG WEST PROPERTY LINE, 12X8 SHED IN REAR YARD

OCT 2 1 2022

PROJECT NAME: HARRIS FENCE AND SHED

SITE ADDRESS: 700 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2022

EXPIRES: 04/19/2023

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3600.00
CONSTRUCTION TYPE	V

One & Two Family

Dwelling

### **REQUIRED INSPECTIONS**

**Zoning Final** 

OCCUPANCY TYPE

Final

#### CONDITIONS

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

Issued By:

**Contractor or Authorized Agent:** 

Date:

11/21/02



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



OCT 2 4 2022

**Planning and Inspection Department** 

TODICE

BP2022-249

**PROJECT NAME: HARRISON STAIRS** 

SITE ADDRESS: 207 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/18/2022

**EXPIRES: 04/16/2023** 

APPLICANT:

**DONNA & JAMES HARRISON** 

920 Northwood Dr.

CHESAPEAKE, VA 23322

OWNER:

**DONNA & JAMES HARRISON** 

920 Northwood Dr.

CHESAPEAKE, VA 23322

**UNLICENSED - REMODELING:** 

Marshall, Darrell 201 Sea Village LN

Kill Devil Hills, NC 27948

252-256-3652

License: 00000

**Expires:** 

PARCEL:

PIN:

988513130445-4164

Parcel Number: 003042000

Address:

207 SEA VILLAGE LN KILL DEVIL HILLS

Zoning:

Addition:

Block:

0

Lot(s): 29

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR IN SAME LOCATION

**PROJECT NAME: HARRISON STAIRS** 

SITE ADDRESS: 207 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/18/2022

**EXPIRES: 04/16/2023** 

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1700.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family

**Dwelling** 

#### REQUIRED INSPECTIONS

**Zoning Final** 

Final

#### CONDITIONS

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

Issued By:

Contractor or Authorized Agent:

late: /



OCT 2 1 2022

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

## **Planning and Inspection Department**

BP2022-241

PROJECT NAME: Martin Shed

SITE ADDRESS: 328 EDEN ST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2022

EXPIRES: 04/19/2023

APPLICANT:

Martin, William

328 W Eden Street

Kill Devil Hills, NC 27948

OWNER:

WILLIAM MARTIN

328 W Eden Street

Kill Devil Hills, NC 27948

252-202-8612

GENERAL:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988517004992

Parcel Number: 000611000

Address:

328 EDEN ST ST W KILL DEVIL HILLS

Zoning:

Addition:

**VIRGINIA DARE SHORES** 

Block:

47

Lot(s): 35-36

Legal Description:

FEES:

Paid

Due

Accessory Residential (MIN)

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: add 10x14 shed

PROJECT NAME: Martin Shed

SITE ADDRESS: 328 EDEN ST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2022

EXPIRES: 04/19/2023

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
LOT COVERAGE	40.00
ACCESSORY STRUCTURE (SQFT)	140
SURVEYOR NAME AND NUMBER	Marty Barnette

### REQUIRED INSPECTIONS

Zoning Final Final

Storage

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

**OCCUPANCY TYPE** 



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



Planning and Inspection Department

OCT 19 2022

BP2022-250

**PROJECT NAME:** 

SITE ADDRESS: 415 COOKE PL KILL DEVIL HILLS

BUILDING

ISSUED: 10/19/2022

EXPIRES: 04/17/2023

APPLICANT:

HARRIS, JACKIE L

P O BOX 3301

KILL DEVIL HILLS, NC 27948

OWNER:

HARRIS, JACKIE L

P O BOX 3301

KILL DEVIL HILLS, NC 27948

**UNLICENSED - REMODELING:** 

Salt Side Construction 402 Clamshell Drive

Kili Devil Hills, NC 27948

License: 12345

Expires:

PARCEL:

PIN:

988414248736

Totals:

Parcel

Number:

003378000

Address:

415 COOKE PL KILL DEVIL HILLS

Zoning:

Addition:

FIRST FLIGHT VILLAGE SEC 1

20111119

Block:

0

Lot(s): 109

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

Can

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: 7' DECK ADDITION TO PREVIOUSLY PERMITTED DECK

COST 12,000.00

PROJECT NAME:

SITE ADDRESS: 415 COOKE PL KILL DEVIL HILLS

BUILDING

ISSUED: 10/19/2022

**EXPIRES: 04/17/2023** 

П	E	ГΛ	III	LS
н			ч	

**Permit** 

Name

**CAMA PERMIT** CAMA EXEMPTION

**ZONING DISTRICT** 

**PURPOSE** 

**FLOOD ZONE FINAL ELEVATION** 

CERTIFICATE

**CONSTRUCTION TYPE** 

**OCCUPANCY TYPE** 

N N RL Residential Accessory

Value

X

N

One & Two Family Dwelling

## REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

### CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:



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

OCT 2 1 2022

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## **Planning and Inspection Department**

BP2022-255

**PROJECT NAME: PITCO 1 LLC** 

SITE ADDRESS: 1209 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2022

**EXPIRES: 04/19/2023** 

APPLICANT:

PITCO1 LLC

1956 Laskin Rd

VIRGINIA BEACH, VA 23454

757-633-7842

OWNER:

PITCO 1, LLC

1956 Laskin Road

Virginia Beach, Va 23454

**GENERAL**:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2022

PARCEL:

PIN:

988312978329

Parcel

004282001

Number:

Address:

1209 MEMORIAL BLVD S KILL DEVIL HILLS

Zoning:

Addition:

KILL DEVIL HILLS SEC 1

Block:

6

Lot(s): 21

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: REMOVE FRONT EXTERIOR STAIR, REBUILD SOUTH AND EAST STAIR AND LANDING

PROJECT NAME: PITCO 1 LLC

SITE ADDRESS: 1209 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 10/21/2022

**EXPIRES: 04/19/2023** 

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3175.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

## **REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

### CONDITIONS

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



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

## **Planning and Inspection Department**

BP2022-251

PROJECT NAME: szymanski deck, stairs and storage room

replacement

SITE ADDRESS: 1718 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 10/19/2022

EXPIRES: 04/17/2023

APPLICANT:

Mark Edwards

1400 Harrington Ave. Kill Devil Hills, NC 27948

252-996-0099

OWNER:

SUSAN AND RICK SZYMANSKI

6340 dartmouth way va beach, va 23464 757-270-8450

BUILDING:

Mark Edwards

1400 Harrington Ave.

Kill Devil Hills, NC 27948

252-996-0099

License: 1234567 Expires: 01/01/2023

PARCEL:

PIN:

989313049852

Parcel Number: 008269000

Address:

1718 MEMORIAL BLVD S KILL DEVIL HILLS

Zoning:

Addition:

**OCEAN ACRES INC** 

Block:

Lot(s):

97 & 98

Legal Description:

FEES: Open Deck Fee Paid \$150.00 Due

BUILDING AREA:

1 EA

Res. Building Permit Fee

\$64.00

\$0.00

Open Decks

. . . .

\$0.00 Resdiential Unheated (.40)

160 Sq. Ft

Totals:

\$214.00

\$0.00

PROJECT DESCRIPTION: replace existing decks, bench seats, stairs and storage area under deck to same footprint

OCT 20 2022

"X" Flood Zone

PROJECT NAME: szymanski deck, stairs and storage room

replacement

SITE ADDRESS: 1718 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 10/19/2022

EXPIRES: 04/17/2023

#### **DETAILS**

Permit				
Name	Value			
CAMA PERMIT	N			
CAMA EXEMPTION	N			
ZONING DISTRICT	С			
PURPOSE	Residential Repair/Remodel			
FRONT YARD SETBACK	30			
SIDE YARD SETBACK	10			
REAR YARD SETBACK	20% Depth >30			
FINAL ELEVATION CERTIFICATE	N			
CONSTRUCTION COST	10000.00			

#### REQUIRED INSPECTIONS

Slab/Foundation/Piling

OCCUPANCY TYPE

Zoning Final

Final

## CONDITIONS

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

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

One & Two Family

Dwelling

\* Zoning Final Inspection is required.

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

Issued By:

Contractor or Authorized Agent: -

Date: 10 . 20 . 27



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

## **Planning and Inspection Department**

BP2022-252

PROJECT NAME: Munden Patio

SITE ADDRESS: 605 SUFFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/20/2022

**EXPIRES: 04/18/2023** 

APPLICANT:

Munden, Clarence

605 Suffolk Street Kill Devil Hills, NC 27948

252-339-7519

OWNER:

Munden, Clarence

605 Suffolk Street

Kill Devil Hills, NC 27948

252-339-7519

CONTRACTOR: SAM PERKINS

kitty hawk, nc 27949

252-207-4545

PO BOX 2911

**BUILDING LIMITED:** 

SAM PERKINS

PO BOX 2911

kitty hawk, nc 27949

252-207-4545

License: 65169

Expires: 12/31/2023

PARCEL:

PIN:

988405098672

Parcel Number: 001965000

Address:

605 SUFFOLK ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

Lot(s): 926

Legal Description:

FEES:

Due

Building Permit Fee - Minimum

\$150.00

Paid

\$0.00

Fee

Totals:

\$150.00

\$0.00

1 JE

PROJECT DESCRIPTION: 12'x6' ground level patio at rear of house

OCT 20 2022

21 -

PROJECT NAME: Munden Patio

SITE ADDRESS: 605 SUFFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/20/2022

**EXPIRES: 04/18/2023** 

### **DETAILS**

Permit				
Name	Value			
CAMA PERMIT	N			
CAMA EXEMPTION	N			
ZONING DISTRICT	С			
PURPOSE	Residential Accessory			
FRONT YARD SETBACK	15			
SIDE YARD SETBACK	6			
REAR YARD SETBACK	20% Depth >30			
FLOOD ZONE	X			
FINAL ELEVATION CERTIFICATE	N			
CONSTRUCTION COST	800.00			
LOT COVERAGE	33.00			
CONSTRUCTION TYPE	V			
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592			
OCCUPANCY TYPE	One & Two Family			

Dwelling

## **REQUIRED INSPECTIONS**

Zoning Final

Final

### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Patio to be flush with grade otherwise construction shall conform to standards of the North Carolina Building Code for decks.





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

## **Planning and Inspection Department**

MC2022-307

PROJECT NAME: Millard HVAC

SITE ADDRESS: 1100 Cambridge Rd Unit D Kill Devil Hills

**MECHANICAL** 

ISSUED: 10/11/2022

EXPIRES: 04/09/2023

APPLICANT:

Millard, Dean

8925 Peoria Ct

Springfield, Va 22153

OWNER:

Millard, Dean

8925 Peoria Ct

Springfield, Va 22153

**MECHANICAL H-3 CLASS 1:** 

NORTH BEACH SERVICES

P.O. Box 181

Kitty Hawk, NC 27949

252-491-2878

License: 22053

Expires: 12/31/2022

PARCEL:

PIN:

98830648123804

Parcel

Number:

Address:

1100 Cambridge Rd Unit D Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

3 bedroom townhome

FEES:

Paid

Due

Mechanical Permit Fee

\$150.00

\$0.00

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: C/O HVAC

OCT 18 2022

MC2022-307

PROJECT NAME: Millard HVAC

SITE ADDRESS: 1100 Cambridge Rd Unit D Kill Devil Hills

**MECHANICAL** 

ISSUED: 10/11/2022

EXPIRES: 04/09/2023

### **DETAILS**

**Permit** 

Name

Value

**PURPOSE** 

Residential Repair/Remodel

CONSTRUCTION COST

12229.00

CONSTRUCTION TYPE

V

FLOOD ZONE

X

NATURAL GAS SIGNOFF

N

OCCUPANCY TYPE

Residential

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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

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

Issued By:

**Contractor or Authorized Agent:** 

Tom Jany

Date: 10-18-22



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



**Planning and Inspection Department** 

OCT 18 2022

BP2022-248

PROJECT NAME: HESS STAIRS AND LANDING

SITE ADDRESS: 2022 NORFOLK ST KILL DEVIL HILLS

TOWN OF SUCAL BUILDING ISSUED: 10/17/2022

**EXPIRES: 04/15/2023** 

APPLICANT:

edward p hess

512 ridge ave

new kensington, pa 15068

OWNER:

edward p hess

512 ridge ave

new kensington, pa 15068

GENERAL:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988405198547

Totals:

Parcel Number:

001221000

Address:

2022 NORFOLK ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 2 & 3** 

Block:

0

Lot(s): 767

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: REBUILD 2 SETS OF EXTERIOR STAIRS

PROJECT NAME: HESS STAIRS AND LANDING

SITE ADDRESS: 2022 NORFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/17/2022

EXPIRES: 04/15/2023

### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family

Dwelling

### REQUIRED INSPECTIONS

**Zoning Final** 

Lorning i ma

Final

Slab/Foundation/Piling

#### CONDITIONS

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

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

Issued By:

**Contractor or Authorized Agent:** 

Date: 10/18/27



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

OCT 1 4 2022

# **Planning and Inspection Department**

BP2022-245

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

ISSUED: 10/13/2022

EXPIRES: 04/11/2023

PARENT PERMIT #: BP2022-212

APPLICANT:

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

OWNER:

HOWELL, WILLIAM L

12 CRESCENT CT

MILTON, DE 19968-8507

**BUILDING LIMITED:** 

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

**BUILDING LIMITED:** 

Simple Side Construction

308 W. Helga St.

Kill Devil Hillsl, NC 27948

252-564-8307

License: 78583

Expires:

License: 78583

**Expires:** 

PARCEL:

PIN:

988513132697

Parcel Number: 003044000

Address:

3106 VA DARE TRL N KILL DEVIL HILLS

Zoning:

0

Addition:

Block:

Lot(s):

32

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: New deck joist and girders, no change to footprint

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

BUILDING

ISSUED: 10/13/2022

EXPIRES: 04/11/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	20000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	F Richard Quible
OCCUPANCY TYPE	One & Two Family Dwelling

#### **REQUIRED INSPECTIONS**

Zoning Final Final

#### CONDITIONS

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



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



OCT 13 2022

**Planning and Inspection Department** 

TOYAL OF

BP2022-244

PROJECT NAME: Joynes Piling Replacement

SITE ADDRESS: 302 THIRD ST W KILL DEVIL HILLS

BUILDING ISSUED: 10/12/2022

**EXPIRES: 04/10/2023** 

APPLICANT:

BARRETT & HABER, LLC Emanuelson & Dad

PO BOX 448 nags head, nc 27959

252-261-2212

OWNER:

Joynes, Michael 302 Third St W

Kill Devil Hills, NC 27948

**RESIDENTIAL - LIMITED:** 

BARRETT & HABER, LLC Emanuelson & Dad

PO BOX 448 nags head, nc 27959

252-261-2212

License: 87233

Expires: 02/22/2023

PARCEL:

PIN:

988410278401

Parcel Number: 002480000

Address:

302 THIRD ST W KILL DEVIL HILLS

Zoning:

Addition:

**CROATAN SHORES INC SEC 1** 

Block:

1

Lot(s): 2

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

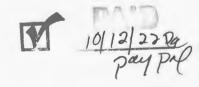
Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: replace 7 8x8x16' pilings

Totals:



PROJECT NAME: Joynes Piling Replacement

SITE ADDRESS: 302 THIRD ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/12/2022

**EXPIRES: 04/10/2023** 

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	7000.00
OCCUPANCY TYPE	One & Two Family

#### REQUIRED INSPECTIONS

Slab/Foundation/Piling

**Zoning Final** 

Final

#### CONDITIONS

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

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

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

Issued By: Charles Thuman

**Contractor or Authorized Agent:** 

Lorelei Zumbrunnen

Date: 10 / 12 / 2022



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



**Planning and Inspection Department** 

OCT 13 2022

BP2022-231

PROJECT NAME: Smith Back Stair and Deck Rebuild SITE ADDRESS: 111 OREGON AVE W KILL DEVIL HILLS BUILDING

ISSUED: 10/13/2022

EXPIRES: 04/11/2023

APPLICANT:

SMITH, BRADLEY

211 Outrigger Drive Kill Devil Hills, NC 27948 OWNER:

SMITH, BRADLEY 211 Outrigger Drive

Kill Devil Hills, NC 27948

**GENERAL**:

Self

UNKNOWN

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed Expires: 12/31/2022

PARCEL:

PIN:

988307793698

Parcel

004026007

Number:

111 OREGON AVE W KILL DEVIL HILLS

Zoning:

Addition:

Address:

KITTY HAWK SHORES - REVISED

Block:

65

Lot(s): 8 & PT 7

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: rear deck and stair rebuild

PROJECT NAME: Smith Back Stair and Deck Rebuild SITE ADDRESS: 111 OREGON AVE W KILL DEVIL HILLS

BUILDING

ISSUED: 10/13/2022

EXPIRES: 04/11/2023

#### **DETAILS**

Value
N
N
С
Commercial Repair/Remodel
30
10
20% Depth >30
X
N
6000.00
V
Micheal D Sadler L- 5029
Business

#### **REQUIRED INSPECTIONS**

Zoning Final Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Deck/stairs/railings shall be as required by the 2018 NCBC.



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

## **Planning and Inspection Department**

BP2022-234

**PROJECT NAME:** Jackie Harris

SITE ADDRESS: 415 COOKE PL KILL DEVIL HILLS

BUILDING

ISSUED: 10/04/2022

**EXPIRES: 04/02/2023** 

APPLICANT:

Salt Side Construction

402 Clamshell Drive

Kill Devil Hills, NC 27948

OWNER:

HARRIS, JACKIE L

P O BOX 3301

**KILL DEVIL HILLS, NC 27948** 

**UNLICENSED - REMODELING:** 

Salt Side Construction 402 Clamshell Drive

Kill Devil Hills, NC 27948

License: 12345

**Expires:** 

PARCEL:

PIN:

988414248736

Parcel Number: 003378000

Address:

415 COOKE PL KILL DEVIL HILLS

Zoning:

Addition:

FIRST FLIGHT VILLAGE SEC 1

Zormig

Block:

0

Lot(s): 109

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$150.00

\$0.00

Fee

Totals:

\$0.00

PROJECT DESCRIPTION: Add deck on rear of house

OCT 11 2022

and the

**PROJECT NAME:** Jackie Harris

SITE ADDRESS: 415 COOKE PL KILL DEVIL HILLS

BUILDING

ISSUED: 10/04/2022

EXPIRES: 04/02/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S22-13242
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
LOT COVERAGE	29.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Styons
OCCUPANCY TYPE	One & Two Family Dwelling

# **REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

#### **CONDITIONS**

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



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



#### **Planning and Inspection Department**

BP2022-227

PROJECT NAME: Oceans East NE Deck Rebuild

SITE ADDRESS: 103 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING

ISSUED: 09/28/2022

**EXPIRES: 03/27/2023** 

APPLICANT:

MACKO OBX CONSTRUCTION, INC

P.O. BOX 3689

Kill Devil Hills, NC 27948

252-480-6411

OWNER:

OCEAN EAST PROPERTY OWNERS

14200 Long Gate Rd Midlothian, VA 23112

**BUILDING UNLIMITED:** 

MACKO OBX CONSTRUCTION, INC.

P.O. BOX 3689

Kill Devil Hills, NC 27948

252-480-6411

License: 81540

Expires: 01/01/2023

PARCEL:

PIN:

98842070987100

Parcel Number: 003771999

27

Address:

103 MEMORIAL BLVD N KILL DEVIL HILLS

Zoning:

Addition:

**OCEANS EAST CONDOS** 

Block:

Lot(s):

PT 7&8

COMM. PROP.

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals: \$150.00

\$0.00

PROJECT DESCRIPTION: rebuild existing NE decks to same existing footprint

PROJECT NAME: Oceans East NE Deck Rebuild

SITE ADDRESS: 103 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING

ISSUED: 09/28/2022

EXPIRES: 03/27/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
LOT COVERAGE	73.30
SURVEYOR NAME AND NUMBER	William Yetzer L-5274

#### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling

Final

Zoning Final

# CONDITIONS

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



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



OCT 1 0 2022

# **Planning and Inspection Department**

BP2022-240

PROJECT NAME: Kailos Deck and Stairs

SITE ADDRESS: 204 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/07/2022

**EXPIRES: 04/05/2023** 

APPLICANT:

Marshall, Darrell 201 Sea Village LN Kill Devil Hills, NC 27948

252-256-3652

OWNER:

Kailos, Nicholas 3421 Deerlope Trail Williamsburg, Va 23188

**UNLICENSED - REMODELING:** 

Marshall, Darrell 201 Sea Village LN Kill Devil Hills, NC 27948

252-256-3652

License: 00000

**Expires:** 

PARCEL:

PIN:

988513130648

Parcel Number:

000965000

Address:

204 SEA VILLAGE LN KILL DEVIL HILLS

Zoning:

0

Addition:

Block:

Lot(s): 8

Legal Description:

FEES:		Paid	Due	BUILDING AREA:	
Open Deck Fee		\$150.00	\$0.00	Open Decks	1 EA
Covered Porch Res	sidential	\$90.00	\$0.00	Covered Porches/Decks	120 SQFT
	Totals :	\$240.00	\$0.00		

PROJECT DESCRIPTION: replace existing deck to new footprint

PROJECT NAME: Kailos Deck and Stairs

SITE ADDRESS: 204 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	Ν .
CONSTRUCTION COST	16000.00
LOT COVERAGE	28.80
OPEN DECK (SQFT)	200
COVERED PORCHES/DECKS (SQFT)	120
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	WL Norris L-4554
OCCUPANCY TYPE	One & Two Family

#### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling

Final

Zoning Final

#### CONDITIONS

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

Dwelling

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



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

OCT 1 0 2022

# **Planning and Inspection Department**

BP2022-239

**PROJECT NAME:** Scott and Kristine Thomas

SITE ADDRESS: 1903 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/07/2022

**EXPIRES: 04/05/2023** 

APPLICANT:

Griggs & Co. Homes Inc.

P. O. Box 125

Point Harbor, NC 27964

207-8450

OWNER:

THOMAS, KRISTINE M

3594 Beeler St **DENVER, CO 80238** 

**GENERAL UNLIMITED:** 

Griggs & Co. Homes Inc. P. O. Box 125

Point Harbor, NC 27964

207-8450

License: 48170

**Expires:** 

PARCEL:

PIN:

988406492055

Parcel Number: 002817000

Address:

1903 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Croatan Shores Amended

Block:

E

Lot(s): 18

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: 432 square foot dune deck

**PROJECT NAME:** Scott and Kristine Thomas

SITE ADDRESS: 1903 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/07/2022

EXPIRES: 04/05/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
LOT COVERAGE	38.83
OPEN DECK (SQFT)	432
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	House Engineering
OCCUPANCY TYPE	One & Two Family Dwelling

#### **REQUIRED INSPECTIONS**

Zoning Final Final

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Pilings in VE zone require min. 16' embedment or as required by code.



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

## **Planning and Inspection Department**

BP2022-238

PROJECT NAME: Harkema Piling Replacement

SITE ADDRESS: 100 CHARLOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/06/2022

EXPIRES: 04/04/2023

APPLICANT:

BARRETT & HABER, LLC Emanuelson & Dad

PO BOX 448

nags head, nc 27959 252-261-2212

OWNER:

Harkema, Michael

404 Victoria Way

STEVENSVILLE, MD 21666

**RESIDENTIAL - LIMITED:** 

BARRETT & HABER, LLC Emanuelson & Dad

PO BOX 448

nags head, nc 27959 252-261-2212

License: 87233

Expires: 02/22/2023

PARCEL:

PIN:

988406296627

Parcel

001938000

Number:

Address:

100 CHARLOTTE ST KILL DEVIL HILLS

Zoning:

Addition:

**AVALON BEACH ANNEX 1** 

Block:

Lot(s):

Legal Description:

FEES:

**Paid** 

Due

**Building Permit Fee - Minimum** 

\$150.00

\$0.00

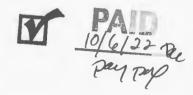
Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: replace 21 8x8x16 and 4 6x6x16 pilings



PROJECT NAME: Harkema Piling Replacement

SITE ADDRESS: 100 CHARLOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/06/2022

**EXPIRES: 04/04/2023** 

#### **DETAILS Permit** Name Value **CAMA PERMIT** N **CAMA EXEMPTION** N ZONING DISTRICT C **PURPOSE** Residential Repair/Remodel 15 FRONT YARD SETBACK 6 SIDE YARD SETBACK REAR YARD SETBACK 20% Depth >30 FLOOD ZONE X **FINAL ELEVATION** N CERTIFICATE CONSTRUCTION COST 21400.00 CONSTRUCTION TYPE **OCCUPANCY TYPE** One & Two Family **Dwelling**

#### CONDITIONS

REQUIRED INSPECTIONS

Final

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be compiled with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.    Marky Shaw   Issued By:			
Contractor or Authorized Agent:	Lorelei Zumbrunnen	Date: 10 / 06 / 2022	

Zoning Final

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



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

## **Planning and Inspection Department**

BP2022-223

PROJECT NAME: John and Susan Mesaros

SITE ADDRESS: 903 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/22/2022

**EXPIRES: 03/21/2023** 

APPLICANT:

**SEAN GRAVES** 

507 W. FOURTH ST

Kill Devil Hills, NC 27948

252-455-6857

OWNER:

Mesaros, John and Susan

903 W. First St.

Kill Devil Hills, NC 27948

724-699-4720

**GENERAL, UNLICENSED:** 

**SEAN GRAVES** 

507 W. FOURTH ST

Kill Devil Hills, NC 27948

252-455-6857

License: XXXXXX

Expires:

PARCEL:

PIN:

988413138133

Parcel Number:

003621000

Address:

903 FIRST ST W KILL DEVIL HILLS

Zoning:

0

Addition:

LANDING SECTION 3, THE

Block:

Lot(s):

105

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

Totals:

\$150.00

\$0.00

PROJECT DESCRIPTION: Replace existing decking and railings within existing footprint

OCT - 6 2022

- she

PROJECT NAME: John and Susan Mesaros

SITE ADDRESS: 903 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 09/22/2022

**EXPIRES: 03/21/2023** 

#### **DETAILS**

**Permit** Value Name **CAMA PERMIT** N CAMA EXEMPTION N RL ZONING DISTRICT **PURPOSE** Residential Repair/Remodel X FLOOD ZONE **FINAL ELEVATION** N CERTIFICATE 8655.00 CONSTRUCTION COST **CONSTRUCTION TYPE OCCUPANCY TYPE** One & Two Family

Dwelling

#### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

#### CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:

**Contractor or Authorized Agent:** 

Sean Me

Date: 10/6/22



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

OCT - 5 2022

Planning and Inspection Department AID WITH

CASH

BP2022-237

**PROJECT NAME: VILLAGE LANE STORAGE SHED** SITE ADDRESS: 1620 VILLAGE LN KILL DEVIL HILLS BUILDING

ISSUED: 10/05/2022

**EXPIRES: 04/03/2023** 

APPLICANT:

Village Lane LLC

35 Ballast Pt Dr Manteo, NC 27954 OWNER:

Village Lane LLC

35 Ballast Pt Dr Manteo, NC 27954

**GENERAL:** 

Self

**UNKNOWN** 

UNKNOWN, XX 00000

000-000-0000

License: Unlicensed

Expires: 12/31/2022

PARCEL:

PIN:

988410256627

Parcel

003245004

Number:

Address:

1620 VILLAGE LN KILL DEVIL HILLS

Zoning:

Addition:

FIRST FLIGHT VILLAGE SEC 2

Block:

0

268 Lot(s):

Legal Description:

FEES:

Paid

Due

Accessory Residential (MIN)

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: CONSTRUCT 8'X10' STORAGE SHED NE OF HOME

PROJECT NAME: VILLAGE LANE STORAGE SHED SITE ADDRESS: 1620 VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2022

**EXPIRES: 04/03/2023** 

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
<b>CONSTRUCTION COST</b>	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family

Dwelling

#### REQUIRED INSPECTIONS

**Zoning Final** 

**Final** 

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

I hereby certify that I have read and examined this application and know the same to be true and correct.

All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By

**Contractor or Authorized Agent:** 

Michela ar Kerman

Date: 10.5.22



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

OCT - 5 2022

#### **Planning and Inspection Department**

BP2022-236

PROJECT NAME: Rivera Shed

SITE ADDRESS: 602 PALMETTO ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

APPLICANT:

RIVERA, ANGELA

602 Palmetto St W

Kill Devil Hills, NC 27948

OWNER:

RIVERA, ANGELA

602 Palmetto St W Kill Devil Hills, NC 27948

CONTRACTOR: Shawn's Sheds and Outdoor Structures

2916 Raven Ave

VA Beach, VA 23453

**UNLICENSED - REMODELING:** 

Shawn's Sheds and Outdoor Structures

2916 Raven Ave

VA Beach, VA23453

License: 12345

Expires:

PARCEL:

PIN:

987520903090

Parcel

000775007

Number:

Address:

602 PALMETTO ST W KILL DEVIL HILLS

Zoning:

Addition:

VIRGINIA DARE SH BLK 77 RECOMB

Block:

77

Lot(s):

Legal Description:

FEES:

Paid

Due

Accessory Residential (MIN)

\$100.00

\$0.00

Totals:

\$100.00

\$0.00

PROJECT DESCRIPTION: 8x10 shed in rear yard

PROJECT NAME: Rivera Shed

SITE ADDRESS: 602 PALMETTO ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2022

EXPIRES: 04/03/2023

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	Χ
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4800.00
LOT COVERAGE	33.00
SURVEYOR NAME AND NUMBER	John Mayne L-4567

#### **REQUIRED INSPECTIONS**

Zoning Final Final

Storage

#### CONDITIONS

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Flood vents required in shed.

**OCCUPANCY TYPE** 



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

OCT - 5 2022

1

### **Planning and Inspection Department**

BP2022-233

PROJECT NAME: Pam Jordan

SITE ADDRESS: 108 COVE CT KILL DEVIL HILLS

BUILDING

ISSUED: 10/03/2022

EXPIRES: 04/01/2023

**APPLICANT:** 

Set Wave Construction

po box 1652

Kill Devil Hills, NC 27948

440-725-1203

OWNER:

LEE JORDON

18214 Farmview Ln

Windsor, VA23487

**UNLICENSED - REMODELING:** 

Set - Wave Construction

1400 Harrington Ave

PO Box 1652

Kill Devil Hills, NC 27948

440-725-1203

License: 0000000 Expires: 06/28/2024

PARCEL:

PIN:

988415546954

Totals:

Parcel Number:

003533000

Address:

108 COVE CT KILL DEVIL HILLS

Zoning:

Addition:

LANDING SECTION 1, THE

Block:

0

Lot(s): 25

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: Remove rear deck and replace with 8' X 14' deck

PROJECT NAME: Pam Jordan

SITE ADDRESS: 108 COVE CT KILL DEVIL HILLS

BUILDING

ISSUED: 10/03/2022

EXPIRES: 04/01/2023

#### **DETAILS**

**Permit** 

Name

Value

**CAMA PERMIT** 

N

**CAMA EXEMPTION** 

N

ZONING DISTRICT

RL

**PURPOSE** 

Residential

Repair/Remodel

FLOOD ZONE

X

**FINAL ELEVATION** 

N

CERTIFICATE

CONSTRUCTION COST

10000.00

CONSTRUCTION TYPE

V

OCCUPANCY TYPE

One & Two Family

Dwelling

#### REQUIRED INSPECTIONS

**Zoning Final** 

Final

#### CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

1-2

Date: 16-5-22



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



OCT - 4 2022

TOWN

### **Planning and Inspection Department**

BP2022-229

PROJECT NAME: Waldick Deck and Stair Repair SITE ADDRESS: 1719 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 09/29/2022

EXPIRES: 03/28/2023

APPLICANT:

ASHTON HARRELL CONSTRUCTION

4144 Poor Ridge Road kitty hawk, nc 27949 252-207-1247 OWNER:

KEN WALDICK

1719 Bay Dr.

KILL DEVIL HILLS, NC 27948

**BUILDING LIMITED:** 

ASHTON HARRELL CONSTRUCTION

4144 Poor Ridge Road kitty hawk, nc 27949 252-207-1247 License: 82429

**Expires**:

PARCEL:

PIN:

988409056675

Totals:

Parcel Number: 002532016

Address:

1719 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

CROATAN SHORES INC SEC 1

Block:

20

Lot(s): 16

Legal Description:

FEES:

Paid

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION: replace decking, handrails and stairs, no change to footprint

PROJECT NAME: Waldick Deck and Stair Repair SITE ADDRESS: 1719 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 09/29/2022

**EXPIRES: 03/28/2023** 

#### **DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	17850.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	C Robert Moore L4184
OCCUPANCY TYPE	One & Two Family

**Dwelling** 

#### REQUIRED INSPECTIONS

Zoning Final

Final

#### CONDITIONS

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

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



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



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Was Filter I - A

#### **Planning and Inspection Department**

BP2022-221

PROJECT NAME: Marshall Deck and Stair Replacement SITE ADDRESS: 1705 CREEK ST KILL DEVIL HILLS

BUILDING

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

APPLICANT:

**CONCRETE & LANDSCAPE DESIGNS** 

171 Owens Beach Road Harbinger, NC 27941 OWNER:

MARSHALL, ARTHUR C

119 GREEN ST NE GAINESVILLE, GA 30501

**UNLICENSED - REMODELING:** 

**CONCRETE & LANDSCAPE DESIGNS** 

171 Owens Beach Road Harbinger, NC 27941 License: 12345

Expires:

PARCEL:

PIN:

988410268468

Totals:

Parcel Number:

002659011

Address:

1705 CREEK ST KILL DEVIL HILLS

Zoning:

Addition:

HIGH VIEW - HEDRICKS ADD

Block:

B

Lot(s): 11

Legal Description:

FEES:

**Paid** 

Due

Building Permit Fee - Minimum

\$150.00

\$0.00

Fee

\$150.00

\$0.00

PROJECT DESCRIPTION:

replace existing decks and stairs to same footprint, enclosed decks replacing decks and

handrails only

PROJECT NAME: Marshall Deck and Stair Replacement SITE ADDRESS: 1705 CREEK ST KILL DEVIL HILLS

BUILDING

ISSUED: 09/19/2022

EXPIRES: 03/18/2023

#### **DETAILS**

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

#### **REQUIRED INSPECTIONS**

Zoning Final Final

#### CONDITIONS

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



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

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

# RESIDENTIAL BUILDING PERMIT

		CHF	AYES	Inspector Signature: CREW HAYES
	IAN	DEBRA C GOODMAN		Applicant Signature:
\$1,973.55		TOTAL FEES:		
				AS-BUILT NEEDED
75.00		FLOOD DEVELOPMENT BLDG PERMIT	<u> </u>	[2UZZ-U9-Z6 14:U1:Z9 631KJaCK]:
10.00		HOME OWNERS RECOVERY FEE	oval.	or site plan requires prior approval.
\$1,788.55			ז the building p	Comments: Any deviation from the building plan
	0.00/0	Baths/half baths:	0	Bedrooms:
		Lot/Ground Elevation:		Elevation:
	8.0	Base Flood Elevation:		Proposed Finished Floor
	AE	Flood Zone:		Exterior Finish:
		Water Type:		Footing Type:
	53528	Water Tap#:	0	Total Rooms:
		Survey/Site Plan:		Building Height:
	07/30/2020	Septic Permit Date:	0.0	Stories:
	29845	Septic Permit#:	187	Unfinished Square Footage:
		CAMA Permit#:	2285	Finished Square Footage:
	\$425,000	Cost of Construction:	SFD	Proposed Construction Type:
	ELLING	SINGLE FAMILY DWELLING NEW , NEW SINGLE FAMILY DWELLING	SINGLE FAMI	Proposed Construction Use:
				BUILDING INFORMATION
		Contractor NC License#:	Con	Contractor Phone:
			•	Contractor Mail Address:
				Contractor Name:
				Owner Phone and email:
		14070 BLUNTS BRIDGE RD ASHLAND, VA 23005	14070 BLUN	Owner Mail Address:
		DODMAN	DEBRA C GOODMAN	Owner Name:
		t: SEC:	LOT: 25 BLK: SEC:	Legal Description:
		₹ WAVES	WIND OVER WAVES	Subdivision:
		26148 TURTLE CT – SALVO	26148 TURT	Location:
			012821025	Parcel Number:
10/05/2022			_	BUILDING PERMIT#: R-13689



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

Frisco: (252) 475-5878

10/04/2022

# MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13653

Location: Parcel Number: 57031 LIGHTHOUSE CT - HATTERAS 025516004

Subdivision: CAPTAIN'S BEACH

Legal Description: LOT: 4 BLK: SEC:

Owner Name: ROBERT JR BUTTERICK

Owner Mail Address: 800 NORTHBROOK PL - MONROEVILLE, NJ 08343

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 -**AVON, NC 27915** 

Contractor Phone: 252-564-4031

Contractor NC License#: L31244

DETAILS RESIDENTIAL

Electrical Contractor ID: ST.PH.32045

:SLIND

Units **MECHANICAL PROJECT FEE:** \$150.00

Cost of Job:

\$4,400

Comments: Replace HVAC Equipment

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

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

Inspector Signature: Applicant Signature FEST WINE STEVENSON 10/4/2022 DocuSigned by: F2004D2AC07C413. 07C36C4EE 10/4/2022 유 cbreeze247@gmail.com C-BREEZE HEATING AND AIR CONDITIONING LL



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

Frisco: (252) 475-5878

# MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13651

10/04/2022

Parcel Number: 015172015

Location: 54053 TIDES EDGE LN - FRISCO

Subdivision: TIDESEDGE

Legal Description: LOT: 15 BLK: SEC:

Owner Name: JAMES J MULLER

Owner Mail Address: PO BOX 719 - FRISCO, NC 27936

Owner Contact Information:

Contractor Name C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 -**AVON, NC 27915** 

Contractor Phone: 252-564-4031

Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: ST.PH.32045 Cost of Job:

\$3,700

Electrical Contractor ID:

**MECHANICAL PROJECT FEE:** 

\$150.00

Comments: Replace HVAC Equipment

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

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

Inspector Signature: Applicant Signature: ARM WEST F2004D2AC07C413.. DocuSigned by: )82807C36C4EE. Signed by: STEVENSON 10/4/2022 10/4/2022 윆 cbreeze247@gmail.com C-BREEZE HEATING AND AIR CONDITIONING LL



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

# REMODEL RES OR COM

REMODEL RES OR COM#: REMD-13766	MD-13766	10/10/2022
Parcel Number:	012819008	
Location:	26014 COLONY DR - SALVO	
Subdivision: Legal Description:	OCEAN BREAKERS SUB. LOT: 1B-2 BLK: SEC:	
Owner Name: Owner Mail Address: Owner Contact Information:	SHEBA I LLC 3235 OAK RIDGE RD - MOUNT CRAWFORD, VA 22841	
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#:	HATTERAS ISLAND CONSTRUCTION PO BOX 947 - AVON, NC 27915 252-305-2143 58774	
DETAILS	RESIDENTIAL	
CAMA Permit	Cost of Job: \$60,000	
Septic Permit	REMODEL RES OR COM \$600.00	
Comments: ADD ELEVATOR AND TWO NEW BATHROOMS	AND TWO NEW BATHROOMS	
The owner and builder are resp construction and be certain to information on this permit is co shown on the submitted plans revoked for failure to comply w	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.	tall as that the on shall be as may be
Call Building Inspector (24 Hours in advance) for inspectic Beach Office 252.475.5871 or Frisco Office 252.475.5878	ons at Dare County Offices Manteo Office 252.47	5.5870, Northern
Applicant Signature:	HATTERAS ISLAND CONSTRUCTION	2
Inspector Signature:	CHF	



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

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

# RESIDENTIAL BUILDING PERMIT

13765		10	10/10/2022
014754000			
40258 ANTILLAS RD – AVON			
WINDWARD ISLE			
LOT: 12 BLK: SEC:			
JUSTEN DANIEL PITCHES			
10840 1ST ST FAIRFAX, VA 22030			
HATTERAS ISLAND CONSTRUCTIO	Z	man de la companya de	
PO BOX 947, AVON, NC 27915			
252-305-2143 Contractor	NC License#: 58774		
REPAIR, REPLACE SIDING			
c <sub>o</sub>		2,500	
	\MA Permit#:		
	ptic Permit#:		
	ptic Permit Date:		
	rvey/Site Plan:		
0 W	ater Tap#:		
W	ater Type:		
Fic	ood Zone:		
Ва		U	
Lo	t/Ground Elevation:		
0 Ba		0	
building plan	RECOVERA CEE		\$150.00
/ TOTAL FEES:	The state of the s		\$160.00
M Highen	HATTERAS ISLAND CON	ISTRUCTION	
	14754000 0258 ANTILLAS RD VINDWARD ISLE OT: 12 BLK: SEC:  STEN DANIEL PITCH 0840 1ST ST FAIRFAX ATTERAS ISLAND COI 0 BOX 947, AVON, N 52-305-2143  EPAIR , REPLACE SIDIN 1 HON 1 HON 1 HON	A754000  A754000  A7558 ANTILLAS RD – AVON  INDWARD ISLE  STEN DANIEL PITCHES  B40 1ST ST FAIRFAX, VA 22030  BOX 947, AVON, NC 27915  2-305-2143 Contractor NC Lic  CAMA PE  Septic Pe  Survey/Si  Water Ta  Water Ty  Flood Zoi  Base Floc  Lot/Grou  Baths/ha  building plan PERMIT FEE  HOMIE OWNERS RECON	### ATTERAS ISLAND CONSTRUCTION  Daniel Pitches  ### Contractor NC License#: 58774  ### Septic Permit#:  Septic Permit#:  Septic Permit Date:  Survey/Site Plan:  Water Tap#:  Water Tap#:

Inspector Signature:

CREW HAYES

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

Frisco: (252) 475-5878

10/10/2022

# **ELECTRICAL PERMIT**

ELECTRICAL PERMIT#: ELEC-13762

Parcel Number: 014861000

Subdivision: Location: ASKINS CREEK SEC 1 & 2 42186 PARK DR - AVON

Legal Description: LOT: 34 BLK: SEC: 1

Owner Name: NORMANN CONSULTING LLC

Owner Mail Address: 3000 MILLS LAKE WYND - HOLLY SPRINGS, NC 27540

Owner Contact Information:

Contractor Name KENNETH M BRITE

Contractor Phone: Contractor Mail Address: PO BOX 95 - AVON, NC 27915 252-996-0432

Contractor NC License#:

DETAILS RESIDENTIAL

Amp Increase: 0

Service Amps: 200 **ELECTRICAL PERMIT FEE:** \$150.00

Cost of Job:

\$3,800

Comments: REPLACE MB MAIN PANEL & SERVICE CONDUCTORS

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

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

Inspector Signature Applicant Signature: bemarth Briti DocuSigned by: 8C235AE207AB4DA... 2082807C36C4EE 10/10/2022 10/10/2022 욲 KENNETH M BRITE



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Frisco: (252) 475-5878

10/07/2022

# **RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-13741** 

Legal Description: Subdivision: Location: Parcel Number: LOT: 119 BLK: SEC: 1 **HATTERAS COLONY SEC 1** 40250 S BEACHCOMBER DR - AVON 013506000

Owner Phone and email: Owner Mail Address: Owner Name: 55 ST ANDREWS DR LEXINGTON, VA 24450 OMAR PAREDES

Contractor Mail Address: Contractor Name: PO BOX 42, KITTY HAWK, NC 27949 NORTHEASTERN MARINE INC

**BUILDING INFORMATION** Contractor Phone: 2522613682 Contractor NC License#: 30026

Proposed Construction Type: **Proposed Construction Use:** REPAIR, REPLACE 8-6X6 WITH NEW 8X8 PILINGS Cost of Construction:

Finished Square Footage: 0 00 Septic Permit Date: Septic Permit#: CAMA Permit#: \$11,500

Elevation: Proposed Finished Floor Exterior Finish: Footing Type: Total Rooms: **Building Height:** Stories: Unfinished Square Footage: 0 Water Type: Base Flood Elevation: Flood Zone: Water Tap#: Survey/Site Plan: Lot/Ground Elevation: 0.0

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

Bedrooms:

0

Baths/half baths:

%

\$150.00

DocuSigned by: TOTAL FEES: \$150.00

Inspector Signature: Applicant Signature: sorzeuroccurc Julie Emory DocuSigned by: )BA388CB41E2434 10/11/2022  $\frac{\Omega}{\pi}$ NORTHEASTERN MARINE INC

10/10/2022



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Frisco: (252) 475-5878

# RESIDENTIAL BUILDING PERMIT

**BUILDING PERMIT#: R-13738** 

Subdivision: Location: Parcel Number: SUBDIVISION - NONE 25486 NC 12 HWY - WAVES 014284000 10/07/2022

Owner Mail Address: Owner Name: PO BOX 217 RODANTHE, NC 27968 CHRISTOPHER S GARBER

Legal Description:

LOT: BLK: SEC:

Owner Phone and email: 252-256-0832 CHRIS.GERBER27972@GMAIL.COM

Contractor Name:

Contractor Mail Address:

Contractor Phone: Contractor NC License#:

**BUILDING INFORMATION** 

**Proposed Construction Use:** RESIDENTIAL ADDITION, DECK ADDITION TO FRONT OF HOUSE 12' X 26'

Finished Square Footage: Proposed Construction Type: SFD O CAMA Permit#: Cost of Construction: \$3,000

Unfinished Square Footage: Stories: 312 0.0 Septic Permit#: Septic Permit Date: 09/16/2022 S22-13252

**Building Height:** Bedrooms: Elevation: Proposed Finished Floor Exterior Finish: Footing Type: Total Rooms: 0 0 Survey/Site Plan: Baths/half baths: Lot/Ground Elevation: Base Flood Elevation: Flood Zone: Water Type: Water Tap#: 0.00/0 0,8 Ä

[2022-10-03 15:30:25 631kjack]: or site plan requires prior approval. Comments: Any deviation from the building plan PERMIT FEE FLOOD DEVELOPMENT BLDG PERMIT HOME OWNERS RECOVERY FEE \$124.80 75.00 10.00

AS-BUILT NEEDED

Applicant Signature: BFCACA724D6 gned by: TOTAL FEES: 10/10/2022 CHRISTOPHER S GARBER

\$209.80

Inspector Signature:

irum Kamps 90726647C4CC47C

10/10/2022

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## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13655

10/04/2022

Parcel Number: 014783000

Location: 40312 TIGRONE BLVD – AVON

Subdivision: THOMAS GRAY ESTATE

Legal Description: LOT: 1 BLK: SEC:

Owner Name: JEFFREY F WITTE

Owner Mail Address: 2810 JUTLAND RD - KENSINGTON, MD 20895

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: \$8,851

Electrical Contractor ID: 22222-L

MECHANICAL PROJECT FEE: \$150.00

Comments: SINGLE C/O TRANE 16 SEER 3-TON H/P SYSTEM THAT SERVICES THE DOWSTAIRS

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

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

Inspector Signature: Unit Hauts	Applicant Signature PIXTON MX
Docusigned by:  (JYLIN Hayes  —90726647C4CC47C	PLXTPN MX  — 030B0B840BD84A6
10/10/2022	10/10/2022
_ CHF	R A HOY HEATING AND AIR CONDITIONING INC paxtonn@rahoy.com

DocuSign Envelope ID: F22FE8E3-B184-4DC8-AE05-8BD132E1A306



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

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#### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13654

10/04/2022

Parcel Number: 013232000

Location: 27214 DORY RD - SALVO

Subdivision: SPIN-DRIFT BANKS SEC 1

Legal Description: LOT: 27 BLK: SEC: 1

Owner Name: STEVEN S SWEET

Owner Mail Address: Ъ O BOX 377 - RODANTHE, NC 27968

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 - AVON, NC 27915

Contractor Phone: 252-564-4031

Contractor NC License#:

DETAILS RESIDENTIAL

**Electrical Contractor ID:** ST.PH.32045

Cost of Job:

\$7,800

Units MECHANICAL PROJECT FEE:

\$150.00

Comments: Replace HVAC Equipment

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

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

Inspector Signature: Applicant Signature Crue Rayes JESU MURE DocuSigned by: 90726647C4CC47C.. DocuSigned by: F2004D2AC07C413,. STEVENSON 10/10/2022 10/10/2022 욲 cbreeze247@gmail.com C-BREEZE HEATING AND AIR CONDITIONING LL



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10/04/2022

#### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13652

Location: Parcel Number: 029575000

Subdivision: 42205 GREENWOOD PL - AVON KINNAKEET SHORES PHASE 1

Legal Description: LOT: 76 BLK: SEC:

Owner Name: NICKEL PLATE LLC

Owner Mail Address: 401 W WINTER AVE - DANVILLE, IL 61832

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 - AVON, NC 27915

Contractor Phone: 252-564-4031

Contractor NC License#:

DETAILS RESIDENTIAL

Electrical Contractor ID: ST.PH.32045

1.00

Cost of Job:

\$4,100

UNITS:

**MECHANICAL PROJECT FEE:** \$150.00

Comments: Replace HVA Equipment

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

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

Inspector Signature: Applicant Signature: Jam Hayes FESH WINE STEVENSON 10/10/2022 DocuSigned by: 90726647C4CC47C.. DocuSigned by: 2004DZAC07C413... 10/10/2022 유 cbreeze247@gmail.com C-BREEZE HEATING AND AIR CONDITIONING LL



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#### **ELECTRICAL PERMIT**

ELECTRICAL PERMIT#: ELEC-13763

10/10/2022

Parcel Number: 014822807

41198 FATHOM CT - AVON

Subdivision: **KINNAKEET SHORES PH 8** 

Legal Description: LOT: 807 BLK: SEC: 8

Owner Name: ANDREW J DIMARTINO

Owner Mail Address: 18 AUBURN AVE - BAY SHORE, NY 11706

Owner Contact Information:

Contractor Name: KENNETH M BRITE

Contractor Mail Address: PO BOX 95 -**AVON, NC 27915** 

Contractor Phone: 252-996-0432

Contractor NC License#: L.19608

DETAILS

RESIDENTIAL

Amp Increase: 0

Service Amps: 200 **ELECTRICAL PERMIT FEE:** 

Cost of Job:

\$700

\$150.00

Comments: REPLACE 200 AMP MB & RISER

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

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

Inspector Signature: Applicant Signature: remark Brit DocuSigned by: 8C235AE207AB4DA... 082807C36C4EE 10/10/2022 10/10/2022 CHF KENNETH M BRITE



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

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# RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-13798	3798		10/11/2022
Parcel Number:	031123000		
Location:	27289 S SUNRISE CT – SALVO		
Subdivision:	SOUTH BEACH		
Legal Description:	LOT: 7 BLK: SEC:		
Owner Name:	HEAD START CAPITAL LLC		
Owner Mail Address:	6 TALL OAKS RD WILTON, CT 06897	6897	
Owner Phone and email:	203-962-3941 jsaldutti6@gmail.com	ail.com	
Contractor Name:	HATTERAS ISLAND SOUND CONSTRUCTION INC	NSTRUCTION INC	
Contractor Mail Address:	PO BOX 157, FRISCO, NC 27936	6	
Contractor Phone:	252-995-5961 Contract	Contractor NC License#: 55637	
BUILDING INFORMATION			
Proposed Construction Use:	<b>REMODEL RES OR COM</b> , REMODEL, INCLUDING SIDING, NEW DOORS, WINDOWS & NEW DECKING	DEL, INCLUDING SIDING, NEV	N DOORS, WINDOWS & NEW
Proposed Construction Type:		Cost of Construction:	\$350,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	S22-13668
Stories:	0	Septic Permit Date:	10-04-22
Building Height:	45'1	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	Central Water
Exterior Finish:		Flood Zone:	×
Proposed Finished Floor		Base Flood Elevation:	8.0
Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0
Comments: Any deviation from the building plan or site plan requires prior approval. [2022-10-10 10:26:28 631kjack]:	the building plan PERMIT FEE wal. REPAIR <):		\$3,500.00 150.00
AS-BUILT NEEDED			
	TOTAL FEES:	The state of the s	\$3,650.00
Applicant Signature: (MAN)	Blow Palle	HATTERAS ISLAND	HATTERAS ISLAND SOUND CONSTRUCTION INC
Inspector Signature: CREW HAYES	AYES	유	



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Frisco: (252) 475-5878

10/13/2022

#### **ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-13846** 

Legal Description: LOT:	LOT: 3 BLK: 3 SEC:
	TOWER BEACH SUBD BLK 3
Location: 4621	46211 TOWER CIRCLE RD – BUXTON
Parcel Number: 0172	017244000

Owner Contact Information: Owner Mail Address: Owner Name: 540-675-1099 jsbmlb@comcast.net 12759 LEE HWY - WASHINGTON, VA 22747 BROWN INVESTMENTS BEACH HOUSE LLC

Contractor Phone: Contractor Mail Address: Contractor Name: 2523055060 PO BOX 264 - HATTERAS, NC 27943 **MEEKINS ELECTRIC** 

Contractor NC License#: L-15935

DETAILS RESIDENTIAL

Service Amps: Amp increase: 200 **ELECTRICAL PERMIT FEE:** Cost of Job: \$1,000 \$150.00

Comments: REPLACE METER BASE AND DISCON

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

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

Inspector Signature:	Applicant Signature:
Inspector Signature: WAYLAND JENNETTE	Ruchard Muchus
CH	MEEKINS ELECTRIC ginnyobx@gmail.com

Inspector Signature: WAYLAND JENNETTE



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Frisco: (252) 475-5878

#### MECHANICAL PROJECT

10/14/2022

MECHANICAL PROJECT#: MECH-13884

Parcel Number: 017011000 Location: 47175 NC 12 HWY – BUXTON

Subdivision: SUBDIVISION - NONE

Legal Description: LOT: BLK: SEC:

Owner Name: DARREN T BURRUS

Owner Mail Address: P O BOX 735 - BUXTON, NC 27920

Owner Contact Information:

Contractor Name: AUGUST AIR LLC

Contractor Mail Address: PO BOX 726 - AVON, NC 27915

Contractor Phone: 252-423-9101

Contractor NC License#: L33886

**DETAILS** COMMERCIAL

UNITS: 1.00 Cost of Job: \$3,400

Electrical Contractor ID: 15935

Units

MECHANICAL PROJECT FEE: \$150.00

Comments: Indoor and outdoor - mini split

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

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

Inspector Signature: WAYLAND JENNETTE

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AUGUST AIR LLC augustair@charter.net



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Frisco: (252) 475-5878

## RESIDENTIAL BUILDING PERMIT

Building Height: **Unfinished Square Footage:** AS-BUILT NEEDED [2022-10-06 11:43:26 631kjack]: or site plan requires prior approval. Comments: Any deviation from the building plan Bedrooms: Elevation: **Proposed Finished Floor Exterior Finish:** Footing Type: Total Rooms: Stories: Finished Square Footage: **Proposed Construction Type: Proposed Construction Use: BUILDING INFORMATION** Contractor Phone: Contractor Mail Address: Contractor Name: Owner Phone and email: Owner Mail Address: Owner Name: Legal Description: Subdivision: Location: Parcel Number: **BUILDING PERMIT#: R-13894** Applicant Signature: 0 0 34'8 0.0 655 1872 SFD SINGLE FAMILY DWELLING NEW, SINGEL FAMILY DWELLING NEW WITH DETACHED POOL 235 ROANOKE DR, KILL DEVIL HILLS, NC 27948 9040 PINE RD UNIT 5 PHILADELPHIA, PA 19115 ZING PROPERTIES LLC HATTERAS COLONY SEC D 26317 NC 12 HWY - SALVO 012953000 Joseph Edward Rhodes, Jr. LOT: 48 BLK: SEC: D Contractor NC License#: 23949 FLOOD DEVELOPMENT BLDG PERMIT SWIMMING POOLS;HOT TUBS RESIDENTIAL ZONING APPROVAL HOME OWNERS RECOVERY FEE PERMIT FEE TOTAL FEES: Survey/Site Plan: Flood Zone: Water Type: Water Tap#: Septic Permit Date: Septic Permit#: CAMA Permit#: Baths/half baths: Lot/Ground Elevation: Base Flood Elevation: Cost of Construction: Joseph Edward Rhodes, Jr. 0.00/0 8.0 XHS YES ΥES N N \$315,000 Central Water 10/03/2022 S8-13601 10/14/2022 \$1,666.00 \$2,151.00 300.00 100.00 10.00

Inspector Signature:

CREW HAYES

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Frisco: (252) 475-5878

10/14/2022

# COMMERCIAL BUILDING PERMIT

BUILDING PERMIT#: C-13901

Finished Square Footage: or site plan requires prior approval. [2022-10-12 Comments: Any deviation from the building plan Sprinkler System: **Building Height:** Stories: Unfinished Square Footage: Subdivision: **Proposed Construction Type:** Occupancy: **BUILDING INFORMATION** Contractor Name: Owner Mail Address: Owner Name: Legal Description: AS-BUILT NEEDED 10:40:30 631kjack]: Bedrooms: Proposed Finished Floor Elev: Exterior Finish: Footing Type: Total Rooms: Proposed Construction Use: Contractor Phone: Contractor Mail Address: Owner Phone and email: Location: Parcel Number: 0 0.0 0 0 1115 0 349 WATER PLANT RD, UNIT -F MANTEO, NC 27954 WEATHERTEK CONSTRUCTION & RESTORATION LL PO BOX 1071 BUXTON, NC 27920 SUBDIVISION - NONE COMBINATION **BUSINESS**, ADDITION AND REMODEL CAROLINE A GASKILL LOT: BLK: SEC: 46903 NC 12 HWY -- BUXTON 023773000 Contractor NC License#: L.87244 FLOOD DEVELOPMENT BLDG PERMIT PERMIT FEE TOTAL FEES: Water Type: Water Tap#: Survey/Site Plan: Septic Permit Date: Septic Permit#: Cost of Construction: Baths/half baths: Base Flood Elevation: Flood Zone: CAMA Permit#: Lot/Ground Elevation: 0.00/0 N A 9.0 Æ Æ S22-13723 10/06/2022 \$181,000 \$799.75 \$724.75 75.00

Inspector Signature:

WAYLAND JENNETTE

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WEATHERTEK CONSTRUCTION & RESTORATION

Applicant Signature:

DocuSign Envelope ID: D1A4137D-8CFE-417B-94D1-EC6B2764D7A4



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10/13/2022

## **MECHANICAL PROJECT**

MECHANICAL PROJECT#: MECH-13865

Parcel Number: 012001000

Subdivision: Location: **INDIANTOWN SHORES** 50413 TIMBER TRL - FRISCO

Legal Description: LOT: PT 23 24 BLK: A SEC:

Owner Name: SCOTT ZOOK

Owner Mail Address: 6608 EDGEWOOD RD - NEW MARKET, MD 21774

Owner Contact Information:

Contractor Name: PAMLICO AIR INC

Contractor Mail Address: PO BOX 579 -**BUXTON, NC 27920** 

Contractor Phone: 252-995-5435

Contractor NC License#: L15259

DETAILS RESIDENTIAL

1.00 Cost of Job:

\$4,500

15259

**Electrical Contractor ID:** 

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACED AIR HANDLER

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

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

Inspector Signature Applicant Signature HOSOF B6D52F9C68E9435.. DocuSigned by: 2082807C36C4EE 10/13/2022 10/14/2022 유 PAMLICO AIR INC

DocuSign Envelope ID: 515ED6B4-4712-4F75-84B5-D3D7C08EED16



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

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Frisco: (252) 475-5878

10/13/2022

#### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13866

Parcel Number: 029648000
Location: 46792 NC 12 HWY – BUXTON

Location: 46792 NC 12 HWY – BUXTON Subdivision: SUBDIVISION - NONE

Legal Description: LOT: BLK: SEC:

Owner Name: KATHLEEN D JARVIS

Owner Mail Address: P O BOX 503 - BUXTON, NC 27920

Owner Contact Information:

Contractor Name: PAMLICO AIR INC

Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920

Contractor Phone: 252-995-5435

Contractor NC License#: L1525

**DETAILS** COMMERCIAL

UNITS: 1.00 Cost of Job: \$8,350

Electrical Contractor ID: 15259

**MECHANICAL PROJECT FEE:** \$150.00

Comments: REPLACE AIR HANDLER AND HEAT PUMP

shown on the submitted plans and specifications that he understands this permit is valid for six months and may be 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 The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all 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

Inspector Signature Applicant Signature MASSAF DocuSigned by: B6D52F9C68E9435. 082807C36C4EE.. Signed by: 10/13/2022 10/14/2022 유 PAMLICO AIR INC

DocuSign Envelope ID: 19EE5786-2782-4E2E-B296-842287BF80AF



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Frisco: (252) 475-5878

10/13/2022

## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13862

Parcel Number: 015027000

Location: 53137 SUNSET STRIP – FRISCO

Subdivision: SUBDIVISION - NONE

Legal Description: LOT: PARCEL 1A BLK: SEC:

Owner Name: BARBARA M GRAY

Owner Contact Information:

PO BOX 1 - AVON, NC 27915

Owner Mail Address:

Contractor Name: HATTERAS ISLAND AIR INC

Contractor Mail Address: 40462 NORTH END RD - AVON, NC 27915

Contractor Phone: 252-305-1671

Contractor NC License#:

DETAILS RESIDENTIAL

**Electrical Contractor ID:** UNITS: U.30633 1.00 Cost of Job: \$5,000

**MECHANICAL PROJECT FEE:** 

\$150.00

Comments: INSTALL 2 ZONE MINI SPLIT

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

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

Inspector Signature Applicant Signature Warren Gaskins 0E23B5EAD8894D1... DocuSigned by: Signed by: 807C36C4EE. 10/13/2022 10/14/2022 웆 HATTERAS ISLAND AIR INC

DocuSign Envelope ID: 203B0204-399D-4B8E-9172-E4A7F543D812



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

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

Frisco: (252) 475-5878

10/11/2022

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13782

Parcel Number: 013200010

27239 FARROW DR - SALVO

Subdivision: **FARROW SHORES** 

Legal Description: LOT: 10 BLK: SEC:

Owner Name: SUNSHINE SHACK ENTERPRISES LLC

Owner Mail Address: 2880 SWAN CIR - DUNEDIN, FL 34698

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:

**Electrical Contractor ID:** 22222-L

**MECHANICAL PROJECT FEE:** \$150.00

\$7,516

Comments: SINGLE C/O TRANE 16 SEER 1.5 TON H/P SYSTEM THAT SERVICES THE DOWNSTAIRS

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

Beach Office 252.475.5871 or Frisco Office 252,475.5878 Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern

Inspector Signature: Applicant Signature Crew Stayes XWNSLXIN DocuSigned by: DocuSigned by: 90726647C4CC47C. 0308088408D84A6... 10/13/2022 10/13/2022 웃 R A HOY HEATING AND AIR CONDITIONING INC paxtonn@rahoy.com

DocuSign Envelope ID: E259205E-4BE8-416A-94B2-C60775BB3391



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

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Frisco: (252) 475-5878

10/13/2022

## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13859

Parcel Number: 013140000 Location: 26791 COLONY DR – SALVO

Subdivision: 26/91 COLONY DR - SALVO

HATTERAS COLONY SEC A

Legal Description: LOT: 38 BLK: SEC: A

Owner Name: JAMES V CABALLERO

Owner Mail Address: 616 E BROADWAY APT SE - LONG BEACH, NY 11561

Owner Contact Information:

Contractor Name: VILLAGE AIR INC

Contractor Mail Address: PO BOX 421 -RODANTHE, NC 27968

Contractor Phone: 252-305-6149

Contractor NC License#: L31489

**DETAILS** RESIDENTIAL

:SLINO 1.00 Cost of Job:

\$6,800

**Electrical Contractor ID:** 9801 **MECHANICAL PROJECT FEE:** \$150.00

Comments: Install 2.5 Ton Coastal Heat pump system.

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

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

Inspector Signature: Applicant Signature Cru Kayes Bryan Philips DocuSigned by: DocuSigned by: 90726647C4CC47C.. 34ACB70EC04145B... 10/17/2022 10/17/2022 유 VILLAGE AIR INC



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

Frisco: (252) 475-5878

## MECHANICAL PROJECT

10/13/2022

MECHANICAL PROJECT#: MECH-13856

Parcel Number:

Location: 26202 BLUEBEARD RD — SALVO

013179000

Subdivision: HATTERAS COLONY SEC A

Legal Description: LOT: 79 BLK: SEC: A

Owner Name: ARTHUR L THORNE

Owner Mail Address: 161 NEMEC LN - WEST NEWTON, PA 15089

Owner Contact Information:

Contractor Name: VILLAGE AIR INC

Contractor Mail Address: PO BOX 421 -RODANTHE, NC 27968

Contractor Phone: 252-305-6149

Contractor NC License#: L31489

**DETAILS** RESIDENTIAL

**Electrical Contractor ID:** 

9801

UNITS: 2.00 Cost of Job:

\$7,400

N MECHANICAL PROJECT FEE: \$150.00

Comments: Install 1.5 Ton and 2 Ton Coastal Heat Pump Units.

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

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

Inspector Signature (Litel Hayes	Applicant Signature Prysis Philips
Urul Hayes	EXHAMA Philips
10/17/2022	10/17/2022
CHE	VILLAGE AIR INC

DocuSign Envelope ID: AD089D71-115A-4328-8121-E0F8149B2BCC



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

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Frisco: (252) 475-5878

## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13858 10/13/2022

Parcel Number: 014250001

Location: 25219 ISLAND PINES DR – WAVES

Subdivision: ISLAND PINES

Legal Description: LOT: 1 BLK: SEC:

Owner Name: JUAN CARLOS MATA

Owner Mail Address: 381 BROOK AVE - N PLAINFIELD, NJ 07062

Owner Contact Information:

Contractor Name: VILLAGE AIR INC

Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968

Contractor Phone: 252-305-6149

Contractor NC License#: L31489

**DETAILS** RESIDENTIAL

UNITS: 2.00 Cost of Job: \$7,600

Electrical Contractor ID: 9801

MECHANICAL PROJECT FEE: \$150.00

Comments: Install Two 2.5 Ton Coastal Heat Pump Units.

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

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

Inspector Signature: (pr.u. thaus.	Applicant Signature Bryan Philips
	Bryain Philips  344CB70EC041458
10/17/2022	10/17/2022
CHF	VILLAGE AIR INC

DocuSign Envelope ID: 9E7DA4E1-8BEF-4C10-B663-458DEE745AF7



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

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

Frisco: (252) 475-5878

10/13/2022

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13855

Parcel Number: 012758000

Location: 24159 SEABREEZE DR – RODANTHE Subdivision: TRADE WINDS BEACHES

Legal Description: LOT: 19 BLK: SEC:

Owner Name: JOSEPH K HARPSTRITE

Owner Mail Address: P O BOX 464 - RODANTHE, NC 27968

Owner Contact Information: 808-721-7321 joharpstrite@gmail.com

Contractor Name: VILLAGE AIR INC

Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968

Contractor Phone: 252-305-6149

Contractor NC License#: L31489

**DETAILS** RESIDENTIAL

:SLINO 1.00 Cost of Job: \$4,500

Electrical Contractor ID: 9801

MECHANICAL PROJECT FEE: \$150.00

Comments: Install 3.5 Ton Coastal Heat Pump Unit.

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

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

Inspector Signature: Applicant Signature Jam Kayes Bryan Philips DocuSigned by: 90726647C4CC47C 34ACB70EC04145B... DocuSigned by 10/17/2022 10/17/2022 유 VILLAGE AIR INC

DocuSign Envelope ID: 3D498F6F-55FF-48BF-AFAD-76A6A6DA21AA



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

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Frisco: (252) 475-5878

10/13/2022

## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13857

Parcel Number: 013161000

Location: 26842 COLONY DR – SALVO Subdivision: HATTERAS COLONY SEC A

Legal Description: LOT: 59 BLK: SEC: A

Owner Name: MICHAEL CARL KASKI

Owner Mail Address: 4006 TWEEDSMOORR RD - MOSELEY, VA 23120

Owner Contact Information:

Contractor Name: VILLAGE AIR INC

Contractor Mail Address: PO BOX 421 -RODANTHE, NC 27968

Contractor Phone: 252-305-6149

Contractor NC License#: L31489

**DETAILS** RESIDENTIAL

1,00 Cost of Job:

\$5,800

Electrical Contractor ID: 0

0 MECHANICAL PROJECT FEE: \$150.00

Comments: Install 2 Ton Coastal Heat Pump Unit and replace Ductwork.

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

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

Inspector Signature (m.m. Hauns	Applicant Signature Expan Pullys
Docusigned by:  [VILW Hayds  80728647C4CC47C	Exagua Philips 344CB70EC04145B
10/17/2022 CHF	10/17/2022 VILLAGE AIR INC



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

Frisco: (252) 475-5878

10/18/2022

#### **ELECTRICAL PERMIT**

ELECTRICAL PERMIT#: ELEC-13948

Parcel Number: 011548000

Location: 23252 SUDIE PAYNE RD - RODANTHE

Subdivision: ATLANTIC SHORES

Legal Description: LOT: 5 BLK: SEC:

Owner Name: YITZHAK MILLER

Owner Mail Address: 1818 DEERFIELD RD - BOONE, NC 28607

Owner Contact Information:

Contractor Name: BURKE ELECTRIC

Contractor Mail Address: 119 PETTIE SHORE RD - COFIELD, NC 27922

Contractor Phone: 2522877143

Contractor NC License#: L-26844

**DETAILS** RESIDENTIAL

Amp Increase: 0

Service Amps: 200 **ELECTRICAL PERMIT FEE:** \$150.00

Cost of Job:

\$3,000

Comments: REPLACE METER BASE DISCONNECT

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

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

Applicant Signature:

CREW HAYES

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Inspector Signature:

BURKE ELECTRIC

gdaddyburke@yahoo.com



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

Frisco: (252) 475-5878

10/18/2022

**MECHANICAL PROJECT** 

MECHANICAL PROJECT#: MECH-13945

Parcel Number: 015606000

Subdivision: Location: SUBDIVISION - NONE 56181 BORGOBELLO LN - HATTERAS

Legal Description: LOT: BLK: SEC:

Owner Name: JOSEPH AL HODGES

Owner Mail Address: P O BOX 29 - HATTERAS, NC 27943

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 -**AVON, NC 27915** 

Contractor Phone: 252-564-4031

Contractor NC License#: L31244

DETAILS RESIDENTIAL

Electrical Contractor ID: ST.PH. 32045 Cost of Job:

Units **MECHANICAL PROJECT FEE:** 

\$150.00

\$4,850

Comments: Replace HVAC Equipment

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

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

Inspector Signature Applicant Signature: FEST WILL F2004D2AC07C413.. DocuSigned by: STEVENSON 10/18/2022 10/18/2022 cbreeze247@gmail.com 욲 C-BREEZE HEATING AND AIR CONDITIONING LL

\$2082807C36C4EE



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

Frisco: (252) 475-5878

# RESIDENTIAL BUILDING PERMIT

or site plan requires prior approval. Comments: Any deviation from the building plan **Building Height:** Finished Square Footage: Bedrooms: Elevation: Proposed Finished Floor Footing Type: **Unfinished Square Footage:** Contractor Mail Address: Owner Name: Exterior Finish: Total Rooms: Proposed Construction Type: Proposed Construction Use: **BUILDING INFORMATION** Contractor Phone: Contractor Name: Owner Phone and email: Owner Mail Address: Legal Description: Subdivision: Location: Parcel Number: **BUILDING PERMIT#: R-13993** ω LAP SIDING PILING 0.0 240 2800 ДUP EXTERIOR SHELL ONLY (SCALLOP) SINGLE FAMILY DWELLING NEW , REBUILD PART OF HOME FORM FIRE DAMAGE 252-256-1814 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948 PO BOX 2127 VIRGINIA BEACH, VA 23450 COTTAGES AT THE CAPE LLC LOT: BLK: SEC: SUBDIVISION - NONE 46118A CAPE HATTERAS LN LOT11 - BUXTON 016831003 FRASCA CUSTOM HOMES LLC 757-468-7557 PERMIT FEE FLOOD DEVELOPMENT BLDG PERMIT RESIDENTIAL ZONING APPROVAL HOME OWNERS RECOVERY FEE Contractor NC License#: 72094 Flood Zone: Water Type: Septic Permit#: Baths/half baths: Lot/Ground Elevation: Base Flood Elevation: Water Tap#: Survey/Site Plan: Septic Permit Date: CAMA Permit#: Cost of Construction: 2.00/1 8.0 **EXISTING** 09/22/2022 S22-13354 \$250,000 10/19/2022 \$2,196.00 100.00 75.00 10.00

Inspector Signature:

WAYLAND JENNETTE

묶

FRASCA CUSTOM HOMES LLC

Applicant Signature:

TOTAL FEES:

\$2,381.00



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

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

# RESIDENTIAL BUILDING PERMIT

	•	
012574000		
23918 NC 12 HWY	- RODANTHE	
SUBDIVISION - NO	NE	
LOT: BLK: SEC:		
JAMES E HAYES		
PO BOX 252 ROD/	NTHE, NC 27968	
FARRELL & FAMIL	Y CONSTRUCTION LLC	
P O BOX 351, P O	BOX 351 NAGS HEAD, NC 27959	
252-216-8810	Contractor NC License#: 86449	
SINGLE FAMILY DV GARAGE	<b>VELLING NEW</b> , NEW SINGLE FAMILY DWI	ELLING WITH ATTACHED
SFD	Cost of Construction:	\$781,225
3086	CAMA Permit#:	N/A
2720	Septic Permit#:	28681
0.0	Septic Permit Date:	04/30/2019
42	Survey/Site Plan:	YES
0	Water Tap#:	520244
	Water Type:	Central Water
	Flood Zone:	AE
	Base Flood Elevation:	8.0
	Lot/Ground Elevation:	
0	Baths/half baths:	0.00/0
Comments: Any deviation from the building plan	PERMIT FEE	\$3,402.50
or site plan requires prior approval.	HOME OWNERS RECOVERY FEE	10.00
[2022-10-10 15:08:52 631KJacK]:	FLOOD DEVELOPMENT BLDG PERMIT	100.00 75.00
1 1	TOTAL FEES:	\$3,587.50
2-0		
	י י י י י י י י י י י י י י י י י י י	CONSTRUCTION FEC
	23918 NC 12 HWY 23918 NC 12 HWY SUBDIVISION - NC LOT: BLK: SEC:  JAMES E HAYES PO BOX 252 RODA PO BOX 351, P O 252-216-8810  SINGLE FAMILY DV GARAGE SFD 3086 27720 0.0 42 0 0 he building plan al. :	

\_\_Inspector Signature:

CREW HAYES

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

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

10/19/2022

# RESIDENTIAL BUILDING PERMIT

**BUILDING PERMIT#: REPAIR-14001** 

Applicant Signature:	Comments: Any deviation from the building plan or site plan requires prior approval.	Bedrooms:	Elevation:	exterior Finish:	Footing Type:	Total Rooms:	Building Height:	Stories:	Unfinished Square Footage:	Finished Square Footage:	Proposed Construction Type:	Proposed Construction Use:	<b>BUILDING INFORMATION</b>	Contractor Name: Contractor Mail Address: Contractor Phone:	Owner Name: Owner Mail Address: Owner Phone and email:	Parcel Number: Location: Subdivision: Legal Description:
FARREIL & FAMILY CONSTRUCTION LLC	\$150.00 \$150.00 \$150.00 \$150.00 \$150.00 \$150.00	0 Baths/half baths: 0/0	••	Rase Flood Floortion:	Water Type:	0 Water Tap#:	Survey/Site Plan:	O Septic Permit Date:	0 Septic Permit#:	O CAMA Permit#:	Cost of Construction: \$28,500	<b>REPAIR</b> , REMOVE EXISTING DECKS AND DECK PILINGS ON N, E, & S REPAIR STAIRS AND SECTION OF SOUTH DECK		FARRELL & FAMILY CONSTRUCTION LLC P O BOX 351, P O BOX 351 NAGS HEAD, NC 27959 252-216-8810 Contractor NC License#: 86449	HEATHER EVANS 7708 AQUATIC DR NO A FAR ROCKAWAY, NY 11692	012744000 24131 OCEAN DR – RODANTHE TRADE WINDS BEACHES LOT: 3 BLK: SEC:

\_ Inspector Signature:

CREW HAYES

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

SWIMMING POOLS;HOT TUBS

SWIMMING POOLS;HOT TUBS#: ACC-14000

10/19/2022

Parcel Number: 014297008

25213 SEA ISLE SHORES LN – WAVES SEA ISLE SHORES

Subdivision:

Legal Description: LOT: 8 BLK: PH: 2

Owner Mail Address: Owner Name: PADGE & ASSOCIATES LLC 5219 MELBOURNE RD - RALEIGH, NC 27606

Owner Contact Information:

Contractor Name: SOUNDSIDE POOLS INC

Contractor Mail Address: PO BOX 2996 - KILL DEVIL HILLS, NC 27948

Contractor Phone: 2522562684

Contractor NC License#: 62035

DETAILS RESIDENTIAL

**CAMA Permit** 

Lot/Ground elevation (ft)

Cost of Job:

\$55,000

SWIMMING POOLS;HOT

\$250.00

TUBS FEE:

Comments: INSTALL DETACHED POOL

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:

Inspector Signature:

CREW HAYES

Application Reference # 9085 on 10/10/2022



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

Frisco: (252) 475-5878

## RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-13943

10/18/2022

Parcel Number: 013279014

Subdivision: Location: 27244 HATTIE CREEF LANDING CT - SALVO

HATTIE CREEF LANDING

Legal Description: LOT: 13 BLK: SEC:

Owner Name: CS VENTURE GROUP LLC

Owner Phone and email: Owner Mail Address: PO BOX 90 KILL DEVIL HILLS, NC 27948

Contractor Name: SAGA CONSTRUCTION INC

Contractor Mail Address: STE 301, 1314 S CROATAN HWY KILL DEVIL HILLS, NC 27948

Contractor Phone: 252-441-9003 Contractor NC License#: 62306

**BUILDING INFORMATION** 

Proposed Construction Use: SINGLE FAMILY DWELLING NEW, New construction of a 10 bedroom, 11.2 bath SFD with

pool, c oncrete pool deck, hot tub and 8.3'x8.3 concrete pad

Unfinished Square Footage: Finished Square Footage: Proposed Construction Type: 1553 4997 GFS CAMA Permit#: Cost of Construction: N/A \$8-13511 \$850,000

Total Rooms: **Building Height:** Stories: 0 0 Water Tap#: Septic Permit#: Survey/Site Plan: Septic Permit Date: yes ΥES 09/29/2022

Proposed Finished Floor Exterior Finish: Footing Type: Water Type: Base Flood Elevation: Flood Zone: 0.8 Central Water

Bedrooms: Elevation: 0 Baths/half baths: Lot/Ground Elevation: 0,00/0

[2022-10-10 11:07:18 631kjack]: or site plan requires prior approval Comments: Any deviation from the building plan AS-BUILT NEEDED TOTAL FEES: FLOOD DEVELOPMENT BLDG PERMIT SWIMMING POOLS;HOT TUBS RESIDENTIAL ZONING APPROVAL HOME OWNERS RECOVERY FEE PERMIT FEE \$4,368.95 \$4,853.95 100.00 300.00 75.00 10.00

Applicant Signature:

Gracelyn Minch C4E83F8707A94D6 ..

DocuSigned by:

10/20/2022 SAGA CONSTRUCTION INC

Jan Hays Docusigned by:

Inspector Signature:

-90726847C4CC47C

10/20/2022 유



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

Frisco: (252) 475-5878

10/20/2022

#### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14029

Parcel Number: 016055000

Location: 56821 NC 12 HWY 37 – HATTERAS

Subdivision: OCEAN DUNES CONDOMINIUMS

Legal Description: LOT: APT SPACE 37 BLK: SEC:

Owner Name: MICHAEL G HUMES

Owner Mail Address: 425 FAIRMONT ST - WHEELING, WV 26003

Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC

Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943

Contractor Phone: 252-986-2367

Contractor NC License#: L.17651

**DETAILS** RESIDENTIAL

UNITS: 1.00

Cost of Job:

\$4,800

Electrical Contractor ID: SP PH 32484

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE OUTSIDE HEEAT PUMP

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

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

Applicant Signature Cleving of 39688A67DBF44E8. DocuSigned by: THE DESTRICTION 10/20/2022 CARTWRIGHTS HEATING AND AIR INC

Inspector Signature:

082807C36C4EE

10/20/2022

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

Frisco: (252) 475-5878

MECHANICAL PROJECT

10/20/2022

**MECHANICAL PROJECT#: MECH-14030** 

Parcel Number: 004791014

Subdivision: Location: HATTERAS BY THE SEA 57445 LIGHTHOUSE RD - HATTERAS

Legal Description: LOT: 14 BLK: SEC:

Owner Name: STEFAN CRACIUNEAC

Owner Mail Address: 12011 SOUTH CIRCLE DR - WHITTIER, CA 90601

Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC

Contractor Mail Address: Contractor Phone: 252-986-2367 PO BOX 118 - HATTERAS, NC 27943

L.17651

Contractor NC License#:

DETAILS RESIDENTIAL

UNITS: Electrical Contractor ID: SP PH 32484

MECHANICAL PROJECT FEE: \$150.00

Cost of Job:

\$4,900

Comments: REPLACE OUTSIDE HEAT PUMP FOR LOWER FLOOR

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

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

Inspector Signature Applicant Signature CHEMINARY -DocuSigned by: 39688A67DBF44E8.. THE TANK THE 10/20/2022 10/20/2022 CHF CARTWRIGHTS HEATING AND AIR INC

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DocuSign Envelope ID: 97F0D0E8-3760-4E34-8ADF-256B61FC1E59



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

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

Frisco: (252) 475-5878

## MECHANICAL PROJECT

10/20/2022

MECHANICAL PROJECT#: MECH-14031

54045 MARLIN DR - FRISCO

015179000

Parcel Number:

Subdivision: MARLIN VILLAGE

Legal Description: LOT: 5 BLK: SEC:

Owner Name: JOY A PHILLIPPI

Owner Mail Address:

Owner Contact Information:

7970 BROWNS BRIDGE RD - HIGHLAND, MD 20777

Contractor Mail Address: Contractor Name: PO BOX 118 - HATTERAS, NC 27943 CARTWRIGHTS HEATING AND AIR INC

Contractor Phone: 252-986-2367

Contractor NC License#: L.17651

DETAILS RESIDENTIAL

Cost of Job: \$4,900

Electrical Contractor ID:

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE OUTSIDE HEAT PUMP FOR TOP FLOOR

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

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

Inspector Signature Applicant Signature CLEMINE BY DocuSigned by: 39688A67DBF44E8.. CHATANICH 10/20/2022 10/20/2022 유 CARTWRIGHTS HEATING AND AIR INC

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10/20/2022

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14032

Parcel Number:

39197 AMBERJACK CT - AVON

013713000

Subdivision: HATTERAS COLONY SEC 3

Legal Description: LOT: 93 BLK: SEC: 3

Owner Name: SUSAN W MCCAFFREY

Owner Mail Address: 307 BALTIMORE RD - ROCKVILLE, MD 20850

Owner Contact Information:

Contractor Name:

Contractor Mail Address:

Contractor Phone: Z  $\frac{Z}{P}$ 

Contractor NC License#:

DETAILS RESIDENTIAL

UNITS: 1.00

**Electrical Contractor ID:** 53334

\$150.00

Cost of Job:

\$4,900

Units MECHANICAL PROJECT FEE:

Comments: REPLACE OUTSIDE HEATPUMP FOR LOWER LEVEL FLOOR

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

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Inspector Signature Applicant Signature CLEVINGO) DocuSigned by: 39688A67DBF44E8.. THE PART AND 10/20/2022 10/20/2022 덌 SIRMANS, KAREN

2082807C36C4EE

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

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Frisco: (252) 475-5878

10/18/2022

## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13944

Parcel Number:

Location: 42322 GREENWOOD PL – AVON

028702000

Subdivision: KINNAKEET SHORES PHASE 1

Legal Description: LOT: 89 BLK: SEC:

Owner Name: LARRY K BICKNER

Owner Mail Address: 245 WHISTLEWOOD LN - HENDERSONVILLE, NC 28739

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

Cost of Job: \$8,459

Electrical Contractor ID: 22222-L

Units **MECHANICAL PROJECT FEE:** \$150.00

Comments: SINGLE CO TRANE 16 SEER 2- TON H/P SYSTEM THAT SERVICES THE MID AND DOWN

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

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

Inspector Signature: Applicant Signature XIVINGLXII 030B0B8408D84A6... DocuSigned by: 2082807C36C4EE. 10/19/2022 10/20/2022 욲 paxtonn@rahoy.com R A HOY HEATING AND AIR CONDITIONING INC



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10/20/2022

MECHANICAL PROJECT

**MECHANICAL PROJECT#: MECH-14028** 

Parcel Number: 54121 SANDPIPER DR - FRISCO 015137009

Subdivision: Location: **SURF & SOUND SEC 1** 

Legal Description: LOT: 9 BLK: SEC: 1

Owner Name: BEDROCK FAMILY LLC

Owner Mail Address: PO BOX 183 - CHARLES TOWN, WV 25414

Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC

Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943

Contractor Phone: 252-986-2367

Contractor NC License#: L.17651

DETAILS RESIDENTIAL

UNITS: Cost of Job: \$5,800

**Electrical Contractor ID:** SP PH 32484

Units MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE OUTDOOR HEAT PUMP FOR LOWER FLOOR

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

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

Inspector Signature: Applicant Signature Clevinos) 39688A67DBF44E8.. DocuSigned by: THE TANK THE 10/20/2022 10/20/2022 유 CARTWRIGHTS HEATING AND AIR INC

2082807C36C4EE.,



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Frisco: (252) 475-5878

## RESIDENTIAL BUILDING PERMIT

**BUILDING PERMIT#: R-14059** 

10/21/2022

Parcel Number: 015954001

Location: 57172 C DEERING RIDGE RD - HATTERAS

Subdivision: SUBDIVISION - NONE

Legal Description: LOT: 2 BLK: SEC:

Owner Name: JOSE I GARCIA CASTILLO

Owner Mail Address: P O BOX 593 HATTERAS, NC 27943

Contractor Name:

Owner Phone and email:

Contractor Mail Address:

Contractor Phone: Contractor NC License#:

**BUILDING INFORMATION** 

**Proposed Construction Use:** SINGLE FAMILY DWELLING NEW , NEW SINGLE FAMILY DWELLING

Unfinished Square Footage: Finished Square Footage: Proposed Construction Type: 264 1680 SFD Septic Permit#: CAMA Permit#: Cost of Construction: <u>S</u> S8-13790 \$185,000

Footing Type: **Building Height:** Stories: Total Rooms: 30'-3" 0.0 PILING Water Tap#: Survey/Site Plan: Septic Permit Date: YES YES 10/11/2022

Elevation: **Proposed Finished Floor Exterior Finish:** 8 LAP SIDING Base Flood Elevation: Flood Zone: Water Type: Lot/Ground Elevation: 8.0 NEED ₽ Central Water

Bedrooms: ω Baths/half baths: 2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE FLOOD DEVELOPMENT BLDG PERMIT RESIDENTIAL ZONING APPROVAL HOME OWNERS RECOVERY FEE \$1,365.60 100.00 75.00 10.00

TOTAL FEES: \$1,550.60

Applicant Signature:

WAYLAND JENNETTE

Inspector Signature:

\_\_\_ JOSE I GARCIA CASTILLO

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Frisco: (252) 475-5878

10/21/2022

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14063

Location: Parcel Number: 39180 WEAKFISH DR - AVON 013856000

Subdivision: **HATTERAS COLONY SEC 4** 

Legal Description: LOT: 231 BLK: SEC: 4

Owner Name: MARILYN DENNIS PALSHA

Owner Mail Address: 204 JOHNS WOOD RD - CHAPEL HILL, NC 27516

Owner Contact Information:

Contractor Name: HATTERAS ISLAND AIR INC

Contractor Mail Address: 40462 NORTH END RD - AVON, NC 27915

Contractor Phone: 252-305-1671

Contractor NC License#: L.32971

DETAILS RESIDENTIAL

**Electrical Contractor ID:** 15935

MECHANICAL PROJECT FEE: \$150.00

Cost of Job:

\$6,200

Comments: REPLACE LOWER LEVEL SYSTEM AIR HANDLER & REFRIDGE LINES

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. information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all

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Applicant Signature:

HATTERAS ISLAND AIR INC

Inspector Signature:

**CREW HAYES** 

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Frisco: (252) 475-5878

#### ACCESSORY PERMIT

ACCESSORY PERMIT#: R-14065
14065
10/21/202

Parcel Number: 029553000

Location: 25228 WIMBLE SHORES NORTH - WAVES

Subdivision: WIMBLE SHORES NORTH

Legal Description: LOT: 25 BLK: SEC:

Owner Name: DONNA M OWENS

Owner Mail Address: 3558 2ND AVE EDGEWATER, MD 21037

Owner Phone and email:

Contractor Name: HART GENERAL CONTRACTOR LLC

Contractor Mail Address: PO BOX 1782, KILL DEVIL HILLS, NC 27948

Contractor Phone: 252-207-7900 Contractor NC License#: 61800

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY, ACC

Description of Work INSTALLATION OF ELEVATOR SHAFT & ELEVATOR 33.06 SQ CONCRETE BASE

02/16/2022 Cost of Construction: \$63,000

\$22-8982 CAMA Permit#:

Septic Permit Date: Septic Permit #:

COMBINATION Flood Zone: SHX

Base Flood Elevation: 0.0

Lot/Ground Elevation:

33

Comments: HOME OWNERS RECOVERY FEE PERMIT FEE \$150.00 10.00

TOTAL FEES: \$160.00

Applicant Signature:

HART GENERAL CONTRACTOR LLC

Inspector Signature: WAYLAND JENNETTE

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Frisco: (252) 475-5878

#### MECHANICAL PROJECT

10/18/2022

Parcel Number:

MECHANICAL PROJECT#: MECH-13947

42081 OCEAN VIEW DR - AVON

029562000

Subdivision: Location: KINNAKEET SHORES PHASE 2

Legal Description: LOT: 2 BLK: SEC:

Owner Name: THOMAS D FLEETMAN

Owner Mail Address: 1688 HANCE LN - GARNET VALLEY, PA 19060

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 - AVON, NC 27915

Contractor Phone: 252-564-4031

Contractor NC License#: L31244

DETAILS

RESIDENTIAL

**Electrical Contractor ID:** 2.00 ST.PH.32045 Cost of Job: \$9,000

N **MECHANICAL PROJECT FEE:** \$150.00

Comments: Replace HVAC Equipment

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. information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all

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Applicant Signature JEST MINE F2004D2AC07C413.. STEVENS/BN 10/20/2022 cbreeze247@gmail.com C-BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature:

Jam Gayes

DocuSigned by:

90726647C4CC47C..

10/20/2022

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Frisco: (252) 475-5878

10/18/2022

#### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-13946

Parcel Number: 026479000

Location: 39297 WAHOO CIR – AVON Subdivision: HATTERAS COLONY SEC 2

Legal Description: LOT: 12 BLK: SEC: 2

Owner Name: PETER SCHWARZ

Owner Mail Address: XXXXX - SAULT STE MARIE~ ONTARIO - XXXXX, XX XXXXX

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 - AVON, NC 27915

Contractor Phone: 252-564-4031

Contractor NC License#: L31244

**DETAILS** RESIDENTIAL

2.00 Cost of Job: \$11,200

Electrical Contractor ID: ST.PH. 32045

**MECHANICAL PROJECT FEE:** \$150.00

Comments: Replace HVAC Equipment

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

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

Applicant Signature 9 WIN 1839 DocuSigned by: =2004D2AC07C413... STEVENSON 10/20/2022 cbreeze247@gmail.com C-BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: Jan Hayes 90726647C4CC47C... DocuSigned by: 10/20/2022 유



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Frisco: (252) 475-5878

# **RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-14083** 10/24/2022

Parcel Number: 017335000

Location: 57221 HATTERAS ESCAPE RD - HATTERAS

Subdivision: HATTERAS ESCAPE

Legal Description: LOT: 7 BLK: SEC:

Owner Name: TIMOTHY T MIDGETT

Owner Mail Address: PO BOX 506 HATTERAS, NC 27943

Owner Phone and email: 252-996-0487

Contractor Name: **BATCHELOR HOMES** 

Contractor Mail Address: PO BOX 787, BUXTON, NC 27920

Contractor Phone: 252-305-4346 Contractor NC License#: 82295

**BUILDING INFORMATION** 

Proposed Construction Use: SINGLE FAMILY DWELLING NEW , NEW SINGLE FAMILY DWELLING

Finished Square Footage: **Proposed Construction Type:** SFD 1546 CAMA Permit#: Cost of Construction: \$250,000

Unfinished Square Footage: 562 Septic Permit#: S22-13369

2.0

Septic Permit Date:

09/23/2022

**Building Height:** Total Rooms:  $\infty$ Survey/Site Plan: Water Tap#: YES

Exterior Finish: Footing Type: WOOD SHINGLES PILING Water Type: Flood Zone: Æ

Proposed Finished Floor Bedrooms: Elevation: N Baths/half baths: Lot/Ground Elevation: Base Flood Elevation: 3.00/0 8.0

or site plan requires prior approval. Comments: Any deviation from the building plan [2022-10-14 10:33:40 631kjack]: RESIDENTIAL ZONING APPROVAL HOME OWNERS RECOVERY FEE PERMIT FEE FLOOD DEVELOPMENT BLDG PERMIT \$1,384.30 100.00 75.00 10.00

TOTAL FEES: \$1,569.30 AS-BUILT NEEDED

Applicant Signature: BATCHELOR HOMES

Inspector Signature:

WAYLAND JENNETTE

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# RESIDENTIAL BUILDING PERMIT

51039 BACCUS CT – FRISCO	
SUBDIVISION - NONE	
LOT: BLK: SEC:	
O J DRAGONFLY LLC	
P O BOX 220 FRISCO, NC 27936	
Contractor NC License#:	
Cost of Construction: \$10,000	
CAMA Permit#:	
Septic Permit#:	
Septic Permit Date:	
Survey/Site Plan:	
Water Tap#:	
Water Type:	
Flood Zone:	
Base Flood Elevation: 0.0	
Lot/Ground Elevation:	
Baths/half baths: 0/0	
Comments: Any deviation from the building plan PERMIT FEE	\$150.00
TOTAL FEES:	\$150.00
O J DRAGONFLY LLC	
2	
CHF	
100	



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Frisco: (252) 475-5878

#### **ELECTRICAL PERMIT**

ELECTRICAL PERMIT#: ELEC-14094
10/24/2022

Parcel Number: 026514000

Location: 47199 STONEY LN - BUXTON

Subdivision: SUBDIVISION - NONE

Legal Description: LOT: BLK: SEC:

Owner Name:

Owner Mail Address: ANGELA C TAWES
P O BOX 70 - BUXTON, NC 27920

Owner Contact Information:

Contractor Mail Address:

Contractor Name

Contractor Phone:  $\stackrel{\mathsf{Z}}{\succ}$ 

Contractor NC License#:  $\frac{N}{N}$ 

DETAILS RESIDENTIAL

Amp Increase: 0

Service Amps: 100 **ELECTRICAL PERMIT FEE:** \$150.00

Cost of Job:

\$2,500

Comments: INSTALL BOAT LIFT

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

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Inspector Signature: Applicant Signature: WAYLAND JENNETTE 닦 ANGELA C TAWES



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Frisco: (252) 475-5878

10/21/2022

#### ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14056

Parcel Number:	
014884202	

Subdivision: Location: SPENCERS WOOD SEC 2 50257 SPENCER LN – FRISCO

Legal Description: LOT: 2 BLK: SEC: 2

Owner Name:

Owner Mail Address: SCOTT ROMIG 3421 NORFOLK ST NO 4 POMPANO BEACH, FL 33062

Owner Phone and email:

Contractor Name: SOUTHERN ENERGY MANAGEMENT, INC

Contractor Mail Address: 5908 TRIANGLE DR, RALEIGH, NC 27617

Contractor Phone: 919-3029807 Contractor NC License#: 69072

**ACCESSORY INFORMATION** 

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,

Description of Work INSTALLATION OF ROOF MOUNTED SOLAR PV SYSTEM 24 MODULES

Cost of Construction: \$49,171

CAMA Permit#:

Septic Permit #:

Septic Permit Date:

Base Flood Elevation: Flood Zone:

0.0

Lot/Ground Elevation:

Comments: HOME OWNERS RECOVERY FEE PERMIT FEE \$150.00 10.00

TOTAL FEES: \$160.00

Applicant Signature:

DENTO CANOR

10/24/2022 SOUTHERN ENERGY MANAGEMENT, INC

Inspector Signature:

12082807C38C4EE

10/24/2022



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## MECHANICAL PROJECT

10/20/2022

MECHANICAL PROJECT#: MECH-14033

Parcel Number:

Location: 47129 NC 12 HWY - BUXTON

017009000

Subdivision: SUBDIVISION - NONE

Legal Description: LOT: BLK: SEC:

Owner Name: CONNER'S CAPE HATTERAS SUPERMARKET INC

Owner Mail Address: BOX 71 - BUXTON, NC 27920

Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC

Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943

Contractor Phone: 252-986-2367

Contractor NC License#: L.17651

DETAILS COMMERCIAL

Cost of Job: \$10,800

Electrical Contractor ID: ST PH 32484

Units

N **MECHANICAL PROJECT FEE:** \$150.00

Comments: REPLACE INSIDE AIR HANDLER AND OUTSIDE HEATPUMP

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

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

Inspector Signature Applicant Signature: CLEVINGED) 39688A67D8F44E8... DocuSigned by: THE METAL 10/20/2022 10/24/2022 유 CARTWRIGHTS HEATING AND AIR INC

12082807C36C4EE..



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Frisco: (252) 475-5878

## **RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-14101** 10/24/2022

Parcel Number: 016066023

Location: 57231 SUMMERPLACE DR - HATTERAS

Subdivision: SUMMERPLACE

Legal Description: LOT: 23 BLK: SEC:

Owner Name: ROBERT S HALL

Owner Mail Address: PO BOX 249 HATTERAS, NC 27943

Owner Phone and email:

Contractor Mail Address:

Contractor Name:

Contractor Phone: Contractor NC License#:

**BUILDING INFORMATION** 

**Proposed Construction Type: Proposed Construction Use:** REPAIR, REPLACE DECKING AND SCREEN PORCH REBUILD SHOWER & POOL HOUSE

Cost of Construction: \$25,000

CAMA Permit#:

Septic Permit Date: Septic Permit#:

Unfinished Square Footage:

Finished Square Footage:

**Building Height:** 

0

Stories:

0 0

Survey/Site Plan:

Water Tap#:

Water Type:

Flood Zone: Base Flood Elevation: 0.0

Lot/Ground Elevation:

Baths/half baths: %

\$150.00

Comments: Any deviation from the building plan PERMIT FEE

Bedrooms:

0

**Proposed Finished Floor** 

**Exterior Finish:** Footing Type: Total Rooms:

or site plan requires prior approval.

TOTAL FEES: \$150.00

Inspector Signature: Applicant Signature: WAYLAND JENNETTE 윢 ROBERT S HALL



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Frisco: (252) 475-5878

## RESIDENTIAL BUILDING PERMIT

Unfinished Square Footage: Contractor Mail Address: or site plan requires prior approval. Comments: Any deviation from the building plan **Proposed Finished Floor** Exterior Finish: Footing Type: **Building Height:** Stories: Finished Square Footage: Proposed Construction Type: **BUILDING INFORMATION** Contractor Phone: Contractor Name: Owner Phone and email: Owner Mail Address: Owner Name: Subdivision: Bedrooms: Total Rooms: Proposed Construction Use: Legal Description: Location: Parcel Number: **BUILDING PERMIT#: REPAIR-14091** 0 0 Q O 51039 BACCUS CT - FRISCO 014989000 REPAIR P O BOX 220 FRISCO, NC 27936 O J DRAGONFLY LLC LOT: BLK: SEC: SUBDIVISION - NONE Contractor NC License#: PERMIT FEE Water Type: Septic Permit#: Baths/half baths: Base Flood Elevation: Flood Zone: Water Tap#: Survey/Site Plan: Septic Permit Date: CAMA Permit#: Cost of Construction: Lot/Ground Elevation: 0.0 9 \$10,000 10/24/2022 \$150.00

Inspector Signature: Applicant Signature: WAYLAND JENNETTE TOTAL FEES: 유 O J DRAGONFLY LLC

\$150.00

DocuSign Envelope ID: 1E11DD4E-7107-4AB9-94D6-ED9EE0155283



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

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

10/24/2022

**ELECTRICAL PERMIT** 

**ELECTRICAL PERMIT#: ELEC-14099** 

Parcel Number:

Location: 57226 ATLANTIC VIEW DR - HATTERAS

027890012

Subdivision: ATLANTIC VIEW ESTATES

Legal Description: LOT: 6 BLK: SEC: 2

Owner Name:

Owner Mail Address: BRYAN C DAVIS
5486 BRADDOCK RIDGE DR - CENTREVILLE, VA 20120

Owner Contact Information:

Contractor Name: **OUTER BANKS ELECTRIC INC** 

Contractor Mail Address: 714 N HWY 64/264 - MANTEO, NC 27954

Contractor Phone: 2524733033

Contractor NC License#: U-24451

DETAILS RESIDENTIAL

Amp Increase:

Service Amps: **ELECTRICAL PERMIT FEE:** \$150.00

Cost of Job:

\$2,300

Comments: replace exterior 200 amp electrical service disconnects

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. information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all

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

Inspector Signature: Applicant Signature THOMA MOHACL STAND DocuSigned by: ed by: 10/25/2022 10/25/2022 욲 chris@obxelectric.com OUTER BANKS ELECTRIC INC

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

## SWIMMING POOLS;HOT TUBS

SWIMMING POOLS;HOT TUBS#: ACC-14112

10/25/2022

Location: Parcel Number: 012911000

26197 COLONY DR - SALVO

Subdivision: HATTERAS COLONY SEC D

Legal Description: LOT: 4 BLK: SEC: D

Owner Mail Address: Owner Name:

JOHN M RUKSTALIS 26 COLUMBINE RD - MILTON, MA 02186

Owner Contact Information:

Contractor Name:

Contractor Mail Address: SOUNDSIDE POOLS INC PO BOX 2996 - KILL DEVIL HILLS, NC 27948

Contractor Phone: 2522562684

Contractor NC License#: 62035

DETAILS RESIDENTIAL

Cost of Job:

\$50,000

CAMA Permit

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Lot/Ground elevation (ft) ξ SWIMMING POOLS;HOT TUBS FEE: \$300.00

Comments: INSTALLING DETACHED SWIMMING POOL

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:

SOUNDSIDE PODLS INC

jason@soundsidepools.com

Inspector Signature: WAYLAND JEANETTE 2

Application Reference #9121 on 10/11/2022



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

Frisco: (252) 475-5878

10/27/2022

### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14155

Parcel Number: 013911000

Location: 40136 NC 12 HWY – AVON Subdivision: HATTERAS COLONY SEC 6

Legal Description: LOT: 10 BLK: SEC: 6

Owner Name: JORVIK PROPERTIES LLC

Owner Mail Address: P O BOX 1426 - BUXTON, NC 27920

Owner Contact Information:

Contractor Name: HATTERAS ISLAND AIR INC

Contractor Mail Address: 40462 NORTH END RD - AVON, NC 27915

Contractor Phone: 252-305-1671

Contractor NC License#: L.32971

**DETAILS** RESIDENTIAL

Cost of Job:

\$6,200

Electrical Contractor ID: 15935

Units

**MECHANICAL PROJECT FEE:** \$150.00

Comments: REPLACE SYSTEM AIR HANDLER IN ATTIC

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

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:

HATTERAS ISLAND AIR INC

CREW HAYES

Inspector Signature:

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

Frisco: (252) 475-5878

10/31/2022

### MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14199

Parcel Number: 013771000

Subdivision: Location: HATTERAS COLONY SEC 4 39190 W SUNFISH CT - AVON

Legal Description: LOT: 138 BLK: SEC: 4

Owner Name: CRAIG J BARNETTE

Owner Mail Address: 6460 LICKTON PIKE - GOODLETTSVILLE, TN 37072

Owner Contact Information:

Contractor Name: AUGUST AIR LLC

Contractor Mail Address: PO BOX 726 - AVON, NC 27915

Contractor Phone: 252-423-9101

Contractor NC License#:

DETAILS RESIDENTIAL

15935

**Electrical Contractor ID:** 

MECHANICAL PROJECT FEE: \$150.00

Cost of Job:

\$7,000

Comments: INSTALL MINISPLIT SYSTEM

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

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

Applicant Signature:

Inspector Signature: CREW HAYES

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augustair@charter.net THEUST AIR LLC

DocuSign Envelope ID: 8496AB12-E585-466B-A85D-A49DC0B3D2DC



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

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Frisco: (252) 475-5878

10/28/2022

MECHANICAL PROJECT

**MECHANICAL PROJECT#: MECH-14168** 

Parcel Number: 014234043

Location: 24252 RESORT RODANTHE DR 1A - RODANTHE

Subdivision: RESORT RODANTHE~ A CONDOMINIUM

Legal Description: LOT: UNIT# 1A BLK: SEC:

Owner Name: DOUGLAS E ROBINSON

Owner Mail Address: 4207 W VANSCIVER DR - NAGS HEAD, NC 27959

Owner Contact Information:

Contractor Name: AIR HANDLERS OBX

Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941

Contractor Phone: 252-491-8637

Contractor NC License#: L26599

**DETAILS** RESIDENTIAL

Cost of Job:

\$3,990

Electrical Contractor ID: U34995

Units MECHANICAL PROJECT FEE: \$150.00

Comments: Changing out the heat pump & install Trane 14 seer 2 Ton Heat Pump only

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

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

Inspector Signature Applicant Signature Jam Bayes STUTE WORKIS 90726647C4CC47C.. DocuSigned by: DocuSigned by: 3F8D91EF33A84E3... 10/28/2022 10/28/2022 옦 INFO@AIRHANDLERSOBX.COM **AIR HANDLERS OBX** 

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

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Frisco: (252) 475-5878

10/28/2022

MECHANICAL PROJECT

**MECHANICAL PROJECT#: MECH-14169** 

Parcel Number: Location: 27247 OCEAN SPRAY RD - SALVO

013356000

Subdivision: SALVO BEACH NO 2

Legal Description: LOT: 30 BLK: SEC:

Owner Name: RUSSELL M TTEE SCARBERRY

Owner Mail Address: 412 MERINGER PL - SIMPSONVILLE, SC 29680

Owner Contact Information:

Contractor Name: VILLAGE AIR INC

Contractor Mail Address: PO BOX 421 -RODANTHE, NC 27968

Contractor Phone: 252-305-6149

Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job:

\$4,400

Electrical Contractor ID: 9801

MECHANICAL PROJECT FEE: \$150.00

Comments: Install 3.5 Ton Coastal Heat Pump Unit

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

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

Inspector Signature:    Docusioned by:	Applicant Signature
Docusioned by:  United Hauris	Docusigned by:  AAAC870EC041458
10/28/2022	10/31/2022
CHF	VILLAGE AIR INC

# DocuSign Envelope ID: EDB5C252-D6E5-4AA6-B9FB-8A3C62B7BF86



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

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Frisco: (252) 475-5878

10/27/2022

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14157

Parcel Number: 017244000

Subdivision: Location: TOWER BEACH SUBD BLK 3 46211 TOWER CIRCLE RD - BUXTON

Legal Description: LOT: 3 BLK: 3 SEC:

Owner Name: BROWN INVESTMENTS BEACH HOUSE LLC

Owner Mail Address: 12759 LEE HWY - WASHINGTON, VA 22747

Owner Contact Information: 540-675-1099 jsbmlb@comcast.net

Contractor Name: CARTWRIGHTS HEATING AND AIR INC

Contractor Phone: Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943 252-986-2367

Contractor NC License#: L.17651

DETAILS RESIDENTIAL

Cost of Job:

\$5,200

Electrical Contractor ID:

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE 2.5 TON HEAT PUMP

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. information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all

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

Inspector Signature: Applicant Signature CLEVINGED) 39688A67D8F44E8.. THE TANK THE 10/31/2022 CARTWRIGHTS HEATING AND AIR INC

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10/31/2022

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

Frisco: (252) 475-5878

# DOCKS; PIERS; BULKHDS, BOATLFTS

DOCKS; PIERS; BULKHDS, BOATLFTS#: ACC-14209

10/31/2022

Parcel Number: 015617004

DOCKS 27 – HATTERAS

Subdivision: TEACH'S LAIR MARINA CONDO

Legal Description: LOT: 27 BLK: SEC:

Owner Name: T DALE PETTY

Owner Mail Address: 224 MOTHER VINEYARD RD - MANTEO, NC 27954

Owner Contact Information:

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC

Contractor Mail Address: 201-A ETHERIDGE ROAD - MARITIME WOODS BUSINESS PARK - MANTEO, NC 27954

Contractor Phone: 2523058842

Contractor NC License#: 78077

DETAILS

`AMA Permit 86724 Cost of Job:

\$33,000

Lot/Ground elevation (ft) DOCKS; PIERS; BULKHDS, **BOATLFTS FEE:** \$250.00

Comments: INSTALL BOATLIFT AND FINGER PIER LOT 27

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

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:

millstonemarine@gmail.com

MILLSTONE MARINE CONSTRUCTION INC

inspector Signature:

Wayland Jennette / AD

, VID



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

Frisco: (252) 475-5878

# DOCKS;PIERS;BULKHDS, BOATLFTS

DOCKS; PIERS; BULKHDS, BOATLFTS#: ACC-14208

10/31/2022

Parcel Number: 015617003

DOCKS 26 ~ HATTERAS

Subdivision: TEACH'S LAIR MARINA CONDO

Legal Description: LOT: 26 BLK: SEC:

Owner Name: TROY DALE PETTY

Owner Mail Address: P O BOX 1667 - MANTEO, NC 27954

Owner Contact Information:

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC

Contractor Mail Address: 201-A ETHERIDGE ROAD - MARITIME WOODS BUSINESS PARK - MANTEO, NC 27954

Contractor Phone: 2523058842

Contractor NC License#:

RESIDENTIAL

'AMA Permit Cost of Job: \$33,000

Lot/Ground elevation (ft) BOATLFTS FEE: DOCKS;PIERS;BULKHDS, \$250.00

Comments: INSTALL BOATLIFTS AND FINGER PIER BETWEEN SLIPS LOT 26

revoked for failure to comply with applicable regulations and laws. shown on the submitted plans and specifications that he understands this permit is valid for six months and may be information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as 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

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Wayland Jennette / AD

B

MILLSTONE MARINE CONSTRUCTION INC

millstonemarine@gmail.com

Tinspector Signature:

Applicant Signature:

Application Reference # 9049 on 10/05/2022



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

Frisco: (252) 475-5878

10/28/2022

## MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14165

Location: 47598 LOST TREE TRL — BUXTON

023775033

Parcel Number:

Subdivision: HATTERAS PINES

Legal Description: LOT: 33 BLK: SEC:

Owner Name: DEIRDRE R MULDER

Owner Mail Address: P O BOX 546 - FRISCO, NC 27936

Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL

Contractor Mail Address: PO BOX 801 - AVON, NC 27915

Contractor Phone: 252-564-4031

Contractor NC License#: L31244

**DETAILS** RESIDENTIAL

Cost of Job: \$14,600

**Electrical Contractor ID:** ST.PH.32045 MECHANICAL PROJECT FEE:

\$150.00

Comments: Replace HVAC Equipment

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

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Applicant Signature LESA MARKE

ESI MINE STEVENSON 10/31/2022

C-BREEZE HEATING AND AIR CONDITIONING LL cbreeze247@gmail.com

Inspector Signature:



CHF 10/31/2022