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

Commercial Project Approval Application # 202201426

Property Address:

2230 SOUTH CROATAN HWY

PIN #: 989317116794 Parcel: 005618000

Lot/Block/Sec: LOT: 1A-1R BLK: SEC: Subdivision: CHARLES L SINEATH DIVISION

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: OFFICE/RETAIL

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9893

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

COASTAL BLUEWATER CAPITAL, LLC

Owner Address:

PO BOX 969

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

000, 00 00000

Description: Installing perimeter fence around warehouse

Construction Value: \$10000

Classification of Work: COMMERCIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

CA202203209 COMM ADD-REM-REP-ACC

\$160.00

SS

11/04/2022

Conditions of Approval:

- Review zoning permit conditions. Call for zoning, fire and building final inspections

FLOOD INFORMATION

Permit #

Permit Description FL202203208 FLOOD PERMIT

Total Fees Paid/Due

\$0.00

Approved By:

Approved Date:

11/04/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203207 ZONING PERMIT - COMM

90

KW

SS

0.0011/04/2022

Conditions of Approval:

Zoning has been reviewed and approved for the construction of a 6-8 foot tall wooden privacy fence around from the rear of the retail building on the south side of the property, extending to the rear of the warehouse/accessory building. Pursuant to Section 7.78.4, no wall or fence shall exceed 10 feet in height within commercial districts.

All components of the fence shall be located entirely within the property boundary and the construction side of the fence shall face inward (pretty side out).

This permit does not authorize the fencing or gating of any drive aisles. Staff understands this is a future project and will be applied for separately at that time.

Call for final zoning inspection upon completion of the fence.

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Commercial Project Approval Application # 202201430

Property Address: 5611 SOUTH VA DARE TRL PIN #: 080118317211EE Parcel: 012198001

Lot/Block/Sec: LOT: BLDG 1A UNIT E-E BLK: SEC: Subdivision: WINDJAMMER CONDOS

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC Land Use: MULTI-FAMILY DWELLING

Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

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

Owner Name: WINDJAMMER INTERVAL OWNERSHIP - ASSOCIAT

Owner Address: P O BOX 1166

Contractor Name: COMMSTRUCT, LLC Contractor Phone: 843-860-1889

Contractor Address: 15720 BRIXHAM HILL AVE SUITE 300 CHARLOTTE, NC 28277

Description: Repair/replace elevated decks

Construction Value: \$150000 Classification of Work: COMMERCIAL REPAIR

BUILDING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: CA202203301 COMM ADD-REM-REP-ACC \$580.00 SS 11/16/2022

Conditions of Approval:

 Additional engineering may be required. No pilling installation is approved with this permit. Remove all unsafe conditions. Call for all required inspections. Call for final inspection

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: FL202203300 FLOOD PERMIT \$0.00 SS 11/16/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
ZN202203299 ZONING PERMIT - COMM \$0 KW 0.0011/16/2022

Conditions of Approval:

Zoning has been reviewed and approved for the repair/replacement of elevated decks only, no piling replacement indicated.

All work to be within the existing footprint. NO increase in footprint or lot coverage is permitted.

If deviate from approved scope of work please contact the Planning Department as it may require additional zoning and CAMA review.

Final zoning inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Commercial Project Approval Application # 202201444

Property Address:

Unknown

PIN #: 000000000003 Parcel: 00000000

Lot/Block/Sec: Dummy Parcel for non site specific permits

Subdivision: SUBDIVISION - NONE

Zoning:

Land Use: UNKNOWN

Flood Zone:

Base Flood Elevation: 0.0

Regulatory Flood Elevation: 12

Map Panel No:

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

PROPERTY OWNER

Owner Address:

See Above

Contractor Name:

NORTHEASTERN MARINE, INC.

Contractor Phone:

252-261-3682

Contractor Address:

PO Box 42

Kitty Hawk, NC 27949

Description:

Build retaining walls: 3923 - 3925 SVDT 48" X 38', 4047 - 4049 SVDT 2'6 X 34', 4049 - 4101 SVDT 2'6 X

Construction Value: \$23970

Classification of Work: COMMERCIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

CA202203315 COMM ADD-REM-REP-ACC

\$0.00

\$0.00

SS

11/17/2022

Conditions of Approval:

Call for material check. Call for final inspections

FLOOD INFORMATION

Permit #

Permit Description FL202203314 FLOOD PERMIT

Total Fees Paid/Due

Approved By: SS

Approved Date:

11/17/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203313 ZONING PERMIT - COMM

\$0

KW

0.0011/17/2022

Conditions of Approval:

Zoning has been reviewed and approved for the replacement of various bulkheads within the right-of-way of S. Virginia Dare Trail (Beach Road) as follows:

4047 - 4049 SVDT, 2 ft. tall, 34 ft. long

3923-3925 SVDT, 2 ft. tall, 37 ft. long

4049 - 4101 SVDT, 2 ft. tall, 30 ft. long

All work shall be within the NCDOT right-of-way. Should scope of work change please allow for zoning review. Final zoning inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Commercial Project Approval Application # 202201456

Property Address: 2403 SOUTH WRIGHTSVILLE AVE PIN #: 989318215495 Parcel: 026402000

Lot/Block/Sec: LOT: 3-4 BLK: H SEC: Subdivision: NAGS HEAD SHORES REVISED BLK H

Zoning: VILLAGE COMMERCIAL DISTRICT Land Use: MULTI-USE

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

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

Owner Name: FARMDOG SURF SCHOOL LLC

Owner Address: 2500 S VIRGINIA DARE TR

Contractor Name: Hunter Homes, Inc. Contractor Phone: 252-207-8861

Contractor Address: 121 Craigy Ct Kill Devil Hills, NC 27948

Description: Finish existing Unit A & open into Unit B, to be used as storage existing bathroom stubs will be capped off

Construction Value: \$26000 Classification of Work: COMMERCIAL REMODEL

BUILDING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:

CA202203338 COMM ADD-REM-REP-ACC \$220.00 CT 11/18/2022

Conditions of Approval:

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
FL202203337 FLOOD PERMIT \$0.00 CT 11/18/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: ZN202203336 ZONING PERMIT - COMM \$0 KW 0.0011/18/2022

Conditions of Approval:

Zoning has been reviewed and approved for finishing out Unit A and creating an opening into Unit B to be used as storage only. No exterior changes, no increase in footprint or lot coverage is permitted.

NOTE: Outdoor storage is prohibited.

Final zoning inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

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

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

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

Commercial Project Approval Application # 202201368

2236 SOUTH CROATAN HWY **Property Address:**

PIN #: 989317117538 Parcel: 017886000

Lot/Block/Sec: LOT: I BLK: SEC:

Subdivision: CAROLINIAN COLONY

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SHOPPING CENTER

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation:

Map Panel No:

Map Panel Date:

Suffly: Datum Used:

Owner Name:

QUAIL RUN BUSINESS CENTER LLC

Owner Address:

406 W LAKE DR

KILL DEVIL HILLS, NC 27948

Contractor Name:

Davco Electric, Inc.

Contractor Phone:

252-256-2305

Contractor Address:

406 W Lake Dr

Kill Devil Hills, NC 27948

Description: Upfit for tea shop, plumbing 3 floor sinks, 2 hard sinks 1 bath, electrical QUAIL RUN CENTER UNIT 1

Construction Value: \$52000

Classification of Work: COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

CA202203366 COMM ADD-REM-REP-ACC

\$310.00

SS

11/21/2022

Conditions of Approval:

See prepared comments on separate piece of paper

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203365 FLOOD PERMIT

\$0.00

SS

11/21/2022

Conditions of Approval:

ZONING INFORMATION

Permit Description

Total Fees Paid/Due \$0.00

Approved By:

KW

Approved Date:

11/21/2022

Conditions of Approval:

Zoning has been reviewed and approved for the interior upfit of unit 1 to a tea shop/retail shop. No food production permitted.

All work is to be within the existing footprint, no increase in footprint or lot coverage permitted.

Existing onsite parking is adequate for use.

ZN202203364 ZONING PERMIT - COMM

If signage is desired beyond the existing panels additional review and permitting is required.

Final zoning inspection is required prior to the issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Commercial Project Approval Application # 202201548

Property Address: 8031 SOUTH OLD OREGON INLET RD PIN #: 080020822069 Parcel: 006956000

Lot/Block/Sec: LOT: 17-21 BLK: 1 SEC: Subdivision: BODIE ISLAND BEACH

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC Land Use: HOTEL

Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0800 Map Panel Date: 06/18/2020 Suffix: k Datum Used: NAVD 1988

Owner Name: DARE HOSPITALITY, LLC

Owner Address: 20 CONSTITUTION DR STE 100

Contractor Name: OCEAN BUILDERS, LLC Contractor Phone: 252-480-5514

Contractor Address: 349 Water Plant Rd Unit E Manteo, NC 27954

Description: Replace approx 3,500 sf of deck boards, hand rails with same at existing exterior oceanside sun deck

Construction Value: \$50000 Classification of Work: COMMERCIAL REPAIR

BUILDING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: CA202203389 COMM ADD-REM-REP-ACC \$280.00 SS 11/22/2022

Conditions of Approval:

 Guardrails shall comply with todays codes. 42 inch high with bottom of rail not more than 2 inches above walking surface. If any electric is affected pull electrical permit. CALL for final inspection.

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: FL202203388 FLOOD PERMIT \$0.00 SS 11/22/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: ZN202203387 ZONING PERMIT - COMM \$0 KB 11/22/2022

Conditions of Approval:

Replace approximately 3,500sf of deck boards and hand rails, with same, at existing exterior oceanside sun deck. All work to remain in same footprint. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

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

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



Residential Project Approval Application # 202201365

Property Address:

3307 SOUTH MEMORIAL AVE

PIN #: 989211566259 Parcel: 026803025

Lot/Block/Sec: LOT: 25 BLK: 1 SEC: 3 Subdivision: NAGS HEAD SHORES AMENDED SEC 3

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

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

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffly: K

Datum Used: NAVD 1988

Owner Name:

HAID, CHRISTOPHER PATRICK - HAID, SUSAN

Owner Address:

7 TOPPING WAY

Contractor Name:

SANDMARK CUSTOM HOMES INC

Contractor Phone:

252-202-3808

Contractor Address:

191 Wax Myrtle Trail

Description:

Replace decks add new dining rm master bedrm, bdrm to office 5 fixtures in bathrm 2 new hvac,remodel

kitchen adding 533'

Construction Value: \$517497

Classification of Work: RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203144 RES ADD-REM-REP-ACC

\$1171.25

SS

11/01/2022

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Provide smoke and Co2 detectors to code throughout home. Additional engineering could be requested. Pull all trade permits prior to starting work. Call for all required inspections. Review zoning and storm water permit conditions. Call for zoning and storm water final inspections

FLOOD INFORMATION

Permit #

Permit Description FL202203142 FLOOD PERMIT

Total Fees Pald/Due

Approved By:

Approved Date:

11/01/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

\$0.00

Approved By:

Approved Date:

ZN202203143 ZONING PERMIT - RES

\$0.00

SS

11/01/2022

Conditions of Approval:

Addition proposed to meet setbacks and lot coverage Parking compliant Any land disturbance will need to be stabilized As-built survey required Call for final zoning 252-449-6045

Additional Conditions:

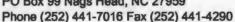
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

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

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

PO Box 99 Nags Head, NC 27959





Residential Project Approval Application # 202201284

107 EAST SUN DANCER CT **Property Address:**

PIN #: 080006488947 Parcel: 031001000

Lot/Block/Sec: LOT: 40 BLK: SEC:

Subdivision: SEASIDE SOUTH

Zoning: VILLAGE DET SF 3

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

JENNINGS, CHRISTOPER W - JENNINGS, LEIGH

Owner Address:

605 APACHE LN

PLYMOUTH MEETING, PA 19462

Contractor Name:

Andrus Construction Co., LLC

Contractor Phone:

252-261-7903

Contractor Address:

4140 Thick Ridge Dr

Kitty Hawk, NC 27949

Description: Construct dune deck as per plan

Construction Value: \$18000

Classification of Work: RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203152 RES ADD-REM-REP-ACC

\$190.00

SS

11/01/2022

Conditions of Approval:

Call for material check inspection. Address #s required at end of beach walkway. Call for framing inspection. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description FL202203151 FLOOD PERMIT

Total Fees Paid/Due \$0.00

Approved By:

Approved Date:

11/01/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

ZN202203150 ZONING PERMIT - RES

\$0.00

MK

SS

11/01/2022

Conditions of Approval:

Must comply with CAMA Minor Permit

Lot coverage compliant

Call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval Application # 202201402

Property Address:

4728 SOUTH POMPANO CT

PIN #: 080113049506

Parcel: 006423000

Lot/Block/Sec: LOT: 31 BLK: SEC: C

Subdivision: OLD NAGS HEAD COVE SEC C

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

OGDEN, KIRK B - OGDEN, SUSAN L

Owner Address:

4728 POMPANO CT

NAGS HEAD

Contractor Name:

TECCON, Tim Chambers dba

Contractor Phone:

252-599-6409

Contractor Address:

219 W Windjammer Rd Nags Head, NC 27959

Description:

Replace handrails @ decks & stairs

Construction Value: \$5500

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203154

RES ADD-REM-REP-ACC

\$160.00

11/01/2022

Conditions of Approval:

All work shall meet current codes. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202203153

FLOOD PERMIT

\$0.00

SS

11/01/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Date

Responsible	Party		
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PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval **Application # 202201403**

Property Address:

4720 SOUTH POMPANO CT

PIN#: 080113047731

Parcel: 006426000

Lot/Block/Sec: LOT: 35 BLK: SEC: C

Subdivision: OLD NAGS HEAD COVE SEC C

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

RYCE, STEVEN D - RYCE, KRISTIN J

Owner Address:

206 E BONNETT ST

NAGS HEAD, NC 27959

Contractor Name:

TECCON, Tim Chambers dba

Contractor Phone:

252-599-6409

Contractor Address:

219 W Windjammer Rd

Nags Head, NC 27959

Description: Replace front stairs & railing

Construction Value: \$4200

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203156

RES ADD-REM-REP-ACC

\$130.00

SS

SS

11/01/2022

Conditions of Approval:

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

FLOOD INFORMATION

Permit #

FL202203155

Permit Description FLOOD PERMIT

Total Fees Paid/Due

Approved By: Approved Date: 11/01/2022

Conditions of Approval:

Additional Conditions:

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

\$0.00

PLEASE NOTE:

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

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

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

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



Residential Project Approval Application # 202201410

Property Address:

5614 SOUTH SANDBAR DR

PIN #: 080118301988

Parcel: 000380126

Lot/Block/Sec: LOT: 24 BLK: SEC:

Subdivision: DOLPHIN RUN

Zoning: VILLAGE DET RES SF 2

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

LAMM, RONALD W - LAMM, MARY C

Owner Address:

C/O PURYEAR

2714 DUNOEE RD

Contractor Name:

MUELLER BUILDERS OBX. LLC

Contractor Phone:

804-533-7663

Contractor Address:

P O BOX 2096

PRINCE GEORGE, VA 23875

Description:

Removing existing roof & install new cedar shake roof

Construction Value: \$40600

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203160

RES ADD-REM-REP-ACC

\$280.00

SS

11/02/2022

Conditions of Approval:

Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Caroline Decker to discuss 252-480-4707 carolined@vrobx.com prior to commencing construction.

Call for material check. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203159

FLOOD PERMIT

\$0.00

11/02/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Responsible Party	ř
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PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval **Application # 202201407**

Property Address: 4126 WEST DRIFTING SANDS CT PIN #: 989108887002 Parcel: 030236000

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

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

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

Map Panel Date: 06/19/2020

Suffly: K

Datum Used: NAVD 1988

Owner Name: KISER, WILLIAM C - KISER, LINDA M

Owner Address: 4126 W DRIFTING SANDS CT

PATTON CONTRACTING, LLC

Contractor Phone: 252-489-9537

Contractor Address: 113 W WINDJAMMER RD

Description: Covered porch addition in back yard, unfinished space under house enclosure within footprint

Construction Value: \$60000 Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Map Panel No: 9891

Contractor Name:

Permit # **Permit Description** Total Fees Pald/Due Approved By: Approved Date: RE202203163 RES ADD-REM-REP-ACC 11/02/2022 \$320,00

Conditions of Approval:

Properly contain and dispose of construction debris. Smoke and co2 detectors to code throughout home. A new flood elevation cert is required. Engineering may be requested. Pull trade permits prior to starting work. Storage area is limited to 300 square feet in total including existing space if below the 9 foot RFPE. Review zoning permit conditions and call for zoning final inspection. Call for all required inspections. Call for building final inspection

FLOOD INFORMATION

Permit Description Permit #

FL202203161 FLOOD PERMIT

Total Fees Paid/Due Approved By: **Approved Date:**

\$0.00 SS 11/02/2022

Conditions of Approval:

ZONING INFORMATION

Parmit # **Permit Description** Total Fees Pald/Due

Approved By:

Approved Date:

ZN202203162 ZONING PERMIT - RES

\$0.00

11/02/2022

Conditions of Approval:

covered porch addition 120 aqft - lot coverage compilant only ay 27% underneath addition within footprint must maintain setbacks

call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval **Application # 202200209**

4202 SOUTH VA DARE TRL **Property Address:**

PIN #: 989108987278 Parcel: 008556075

Lot/Block/Sec: LOT: 75 BLK: SEC:

Subdivision: OLD HOTEL LOTS - DB 15-219

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

URBANIK, MICHAEL J - URBANIK, AMELIA L.

Owner Address:

28933 TUDOR DR

Contractor Name:

JAVON SYLVESTER DBA FIVE STAR CONSTRUCT!

Contractor Phone:

252-489-1252

453 NECK RD

SHILOH, NC 27974

Description: Complete deck remodel

Construction Value: \$29000

Contractor Address:

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

RE202203173

Permit Description

RES ADD-REM-REP-ACC

Total Fees Paid/Due

Approved By: Approved Date:

11/02/2022

Conditions of Approval: Additional engineering may be requested. Properly contain and dispose of construction debris. Call for pilling inspection. Review deck condition and stair handout we have provided. Review zoning permit conditions. Call for zoning final inspection. Call for building final inspection

\$220.00

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By: Approved Date:

FL202203172

FLOOD PERMIT

\$0.00

SS

11/02/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Responsible Party	Date
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PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 4414290



Residential Project Approval Application # 202201387

4039 WEST SOUNDSIDE RD **Property Address:**

PIN #: 989111772477

Parcel: 006752002

Lot/Block/Sec: LOT: 3 BLK: SEC:

Subdivision: SUBDIVISION - NONE

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: VACANT

Flood Zone: AE

Base Flood Elevation: 4.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

BICKETT, DANIEL - BICKETT, COURTNEY CUPP

Owner Address

14149 RIVERDOWNS SOUTH DR

Contractor Name:

2 GUYS SERVICES

Contractor Phone:

252-489-8753

Contractor Address:

605 W Archdale St

KILL DEVIL HILLS, NC 27948

Description: Construct new single-family dwelling on piling foundation, 4 bedrooms 3.1 baths

Construction Value: \$582000

Classification of Work: NEW RESIDENTIAL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

BR202203171 RESIDENTIAL NEW CONST SFD

\$3744.23

11/02/2022 SS

Conditions of Approval:

Provide address #s on home to TONH ordinance. All subs shall pull permits prior to starting work. Call for all required inspections. All material below the 9 RFPE shall be pressure treated. Flood vents to code in storage area if needed. A building under construction flood elevation certificate may be required. A finished flood elevation certificate will be required. Review zoning permit and storm water conditions. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203168 FLOOD PERMIT

PW202203170 PW APPROVAL RES NEW

\$0.00

11/02/2022 SS

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #

Permit Description

\$2304.23

Total Fees Paid/Due Approved By: Approved Date:

LCN

11/02/2022

Conditions of Approval:

See Public Works Approval handout for detailed project information

For Public Works related Items please call the Public Works Department at 252-441-1122.

36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'

36-4(f):max, driveway apron shall be a min. of 10' in length, 4" thick, 3,000 psi conc. and designed for access purposes only. The driveway apron shall be sloped a min. of 1/4" per foot from the eop to a point 6' offset from the eop, creating a valley section within the driveway, (2" min. drop)

All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call Public Works for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt. Call for FINAL inspection once pouring is complete. Give 24 advance notice for all inspections.

ZONING INFORMATION

Permit #

Permit Description

ZN202203169 ZONING PERMIT - RES

Total Fees Paid/Due Approved By: Approved Date:

\$0.00

MK

11/02/2022

Conditions of Approval:

Must comply with LDP

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



Residential Project Approval Application # 202201431

Property Address: 5116 SOUTH VA DARE TRL PIN #: 080114226609 Parcel: 027839066

Lot/Block/Sec: LOT: 6 BLK: SEC: Subdivision: ELLIOTT ESTATES

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

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

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

Owner Name: ATLANTIS OBX, LLC

Owner Address: PO BOX 365

Contractor Name: H & W SERVICES GROUP, LLC Contractor Phone: 252-423-0744

Contractor Address: 1053 MARTINS POINT RD KITTY HAWK, NC 27949

Description: Replacing decking, stairs & handrails w/same, no change in footprint, existing ground pllings to stay

Construction Value: \$52000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:

RE202203175 RES ADD-REM-REP-ACC \$310.00 SS 11/03/2022

Conditions of Approval:

 Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: FL202203174 FLOOD PERMIT \$0.00 SS 11/03/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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



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



Residential Project Approval Application # 202201446

Property Address:

5100 SOUTH VA DARE TRL

PIN #: 080113234015 Parcel: 027839072

Lot/Block/Sec: LOT: 12 BLK: SEC:

Subdivision: ELLIOTT ESTATES

Zoning: VILLAGE DET RES SF 2

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used:

Owner Name:

GAMB PROPERTIES LLC

Owner Address:

1260 CRESCENT DR

Contractor Name:

K.I.C.Z. MAINTENANCE & REMODELING INC

Contractor Phone:

252-

619-2599

Contractor Address: P O BOX 875

GRANDY, NC 27939

Description:

Replace upper level decking railing fmt back mid M rails frt/back rails, step level one to level two back

Construction Value: \$27521

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203177

RES ADD-REM-REP-ACC

\$220.00

SS

11/03/2022

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203176

FLOOD PERMIT

\$0.00

SS

11/03/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

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



Residential Project Approval Application # 202201441

4213 SOUTH VA DARE TRL **Property Address:**

PIN #: 080105082230 Parcel: 008635003

Lot/Block/Sec: LOT: 3 BLK: SEC:

Subdivision: W G GAITHER

Zoning: LOW DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffly: K

Datum Used: NAVD 1988

Owner Name:

SMALL, WILLIAM F - SMALL, JOANN

Owner Address:

39 FAIRWAY LN

Contractor Name:

Compass Edge Construction, Inc.

Contractor Phone:

252-202-4217

Contractor Address:

103 High Dune Ip

Southern Shores, NC 27949

Description:

Remodel 1st level bath w/vanity, toilet & shower replace 4 exterior windows 3 doors, new gas fireplace

tankless w/heate

Construction Value: \$75000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203179

RES ADD-REM-REP-ACC

\$370.00

11/03/2022 SS

Conditions of Approval:

Provide address #s on home if none are present. Provide smoke and co2 detectors to code throughout home. Properly contain and dispose of construction debris. Pull all trade permits before starting work. Call for all required inspections. Gas water heater shall be at or above the 12 foot RFPE. Call for final inspections. Call for a site visit before starting work. Steve at 252 449 2005

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203178

FLOOD PERMIT

\$0.00

SS

11/03/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

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



Residential Project Approval Application # 202201432

5613 SOUTH SANDBAR DR PIN #: 080118313076 Parcel: 000380140 **Property Address:**

Lot/Block/Sec: LOT: 38 BLK: SEC: Subdivision: DOLPHIN RUN

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

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

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

Owner Name: NORMAN, RICHARD B TRUSTEE - NORMAN, PATR

1324 SMITH COVE CIR Owner Address:

PO Box 157

Contractor Phone: 252-473-2888 Contractor Name: Gallop Roofing & Remodeling, Inc.

Contractor Address: WANCHESE, NC 27981

Description: Remove and Replace Cedar Shake roof with new 1/2" Medium Fir e Treated Cedar

Classification of Work: RESIDENTIAL REMODEL Construction Value: \$35209

BUILDING INFORMATION

Permit # **Permit Description Total Fees Paid/Due** Approved By: Approved Date:

RES ADD-REM-REP-ACC 11/03/2022 RE202203181 SS \$250.00

Conditions of Approval:

Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Caroline Decker to discuss 252-480-4707 carolined@vrobx.com prior to commencing construction.

Call for material check. Call for final inspection

FLOOD INFORMATION

Permit # **Permit Description Total Fees Paid/Due** Approved By: Approved Date:

FLOOD PERMIT 11/03/2022 FL202203180 \$0.00 SS

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

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



Residential Project Approval Application # 202201434

Property Address:

7037 SOUTH VA DARE TRL

PIN #: 080015649679 Parcel: 006609001

Lot/Block/Sec: LOT: 19 BLK: 5 SEC: Subdivision: WHALEBONE BEACHES - COMP. MAP

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 12

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name: Owner Address: PIB ENTERPRISES LLC

22958 WEYBRIDGE SQ

Contractor Name:

ASHTON LEE HARRELL T/A ALH CONSTRUCTION

Contractor Phone:

252-207-1247

Contractor Address:

4144 POOR RIDGE RD

Description:

Replace decking & handralls front & back of house staying w/in footprint11/22 replace pool fence same

Construction Value: \$53840

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203183 RES ADD-REM-REP-ACC

\$310.00

SS

11/03/2022

Conditions of Approval:

- Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final Inspection
- Review appendix v we have provided via email. Pool barrier shall be break away design

\$0.00

FLOOD INFORMATION

Parmit #

Permit Description FL202203182 FLOOD PERMIT

Total Fees Paid/Due

Approved By:

SS

Approved Date:

11/03/2022

Conditions of Approval:

ZONING INFORMATION

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203417 ZONING PERMIT - RES

\$0.00

KB

11/29/2022

Conditions of Approval:

Replace decking and handrails front and back of house staying within existing footprint. 11/22/2022 Replace pool fence in same footprint. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201435

220 WEST BARNES ST **Property Address:**

PIN #: 989205283161 Parcel: 005893000

Lot/Block/Sec: LOT: 16 BLK: E SEC: Subdivision: VISTA COLONY WEST

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

NEWMAN, TIMOTHY K - NEWMAN, VALERIE J

Owner Address:

220 W BARNES ST

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

000,00 00000

Description: Erect spriral staircase from mid deck to upper deck

Construction Value: \$10500

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203185

RES ADD-REM-REP-ACC

\$190.00

SS 11/03/2022

Conditions of Approval:

Stairs shall meet the 2018 NC Residential code. Stairs shall be provided proper support. Engineering may be requested, Call for final inspection.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203184

FLOOD PERMIT

\$0.00

SS

11/03/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Responsible Party	
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PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202201421

Property Address:

10105 SOUTH COLONY SOUTH DR

PIN #: 071815641184 Parcel: 009039000

Lot/Block/Sec: LOT: 108 BLK: SEC: Subdivision: OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 4.0

Regulatory Flood Elevation: 9

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

HICKEY, DEBORAH A TRUSTEE OF THE - DEBOR

Owner Address:

P.O. BOX 1178

Contractor Name:

JEREMY MORTON DBA PRECISION REMODELING

Contractor Phone:

252-767-3377

Contractor Address:

965 WASHINGTON ST

Description:

Remove old fence and install new pool fence bumping out 1 s side, 11/3/22 replace stairs & rails in same

footprint

Construction Value: \$8892

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203189 RES ADD-REM-REP-ACC

\$160.00

SS

11/03/2022

Conditions of Approval:

Properly contain and dispose of construction debris. Pool barrier shall comply with Appendix V which we have provided. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203188 FLOOD PERMIT

\$0.00

SS

11/03/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203187 ZONING PERMIT - RES

\$0.00

MK

11/03/2022

Conditions of Approval:

rear yard fence is max 6 ft in height, construction side of the fence shall face inward must remain within property boundaries call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201428

Property Address:

4629 SOUTH PAMLICO WAY

PIN #: 080109050044 Parcel: 006183000

Lot/Block/Sec: LOT: 56 BLK: SEC: A Subdivision: OLD NAGS HEAD COVE SEC A

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: SHX

Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

LANGE, HARRY M

Owner Address:

4629 PAMLICO WAY

Contractor Name:

Lowe Custom Builders, LLC

Contractor Phone:

252-202-6452

Contractor Address:

4705 S Pamlico Way

Nags Head, NC 27959

Description: Construct 6'x8' open deck on first floor level, East side of house; add door to deck

Construction Value: \$3500

Classification of Work: RESIDENTIAL REMODEL

SS

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203195 RES ADD-REM-REP-ACC \$140.00

11/04/2022

Conditions of Approval:

All work shall meet current codes. A GFCI WR Type receptacle is required on new deck. Pull electrical permit. Properly contain and dispose of construction debris, 2-2x10 girders required. Call for piling inspection. Review zoning permit conditions. Call for final inspections

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due \$0.00

Approved By:

Approved Date:

11/04/2022

Conditions of Approval:

FL202203194 FLOOD PERMIT

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By:

Approved Date:

ZN202203193 ZONING PERMIT - RES

\$0.00

MK

SS

11/04/2022

Conditions of Approval:

open deck under existing deck per plans no additional lot coverage

call for final CAMA and Zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final end unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval Application # 202201422

219 WEST WOODHILL DR **Property Address:**

PIN #: 989210259947 Parcel: 030781000

Lot/Block/Sec: LOT: 23 BLK: SEC:

Subdivision: HILLS OF NAGS HEAD

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9892

Datum Used: NAVD 1988 Suffix: K

Owner Name:

SULEWSKI, STACEY L

Owner Address:

219 W WOODHILL DR

Contractor Name:

Saunders General Contractor, Inc., R.M.

Map Panel Date: 06/19/2020

Contractor Phone:

252-207-8710

Contractor Address:

PO Box 1922

Kill Devil Hills, NC 27948

Installation of inground concrete pool w/concrete decking & concrete hot tub deck

Construction Value: \$50000

Classification of Work: RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203198 RES ADD-REM-REP-ACC

\$280.00

SS

11/04/2022

Conditions of Approval:

Provide health department final inspection prior to calling for pool final inspection (if applicable). Review zoning permit conditions and call for zoning final inspection. Pull electrical permit. Call for any electrical trench inspections. Call for all required bonding inspections. Pool barrier shall comply with 2018 Appendix V. Pool equipment shall be elevated at or above the 9 foot RFPE. Call for final inspection.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

FL202203197 FLOOD PERMIT

\$0.00

SS

11/04/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203196 ZONING PERMIT - RES

\$0.00

MK

11/04/2022

Conditions of Approval:

silt fencing prior to any land disturbing activity

pool and pool surrounds must meet a minimum of 5 ft side and rear setback

pool excavation material if will remain on site will need to be stabilized and sloped to our ordinance requirements for fill

pool fence max in rear yard is 6 ft

as-built survey may be required if deviated from plans

stabilization required

call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months

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



Residential Project Approval Application # 202201417

Property Address:

10421 SOUTH OLD OREGON INLET RD

PIN #: 071820719181 Parcel:

009064000

Lot/Block/Sec: LOT: BLK: SEC:

Subdivision: SUBDIVISION - NONE

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VF

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name

PIRE, SHARI

Owner Address:

2747 PARADISE RD UNIT 3402

Contractor Name:

SALTY SOULS INC

Contractor Phone:

252-564-5101

Contractor Address:

P. O. BOX 69

NAGS HEAD, NC 27959

Description:

Replace decking & handrials on E facing decks, replace stairs & re-build walkway to dune

Construction Value: \$50000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203200

RES ADD-REM-REP-ACC

\$280.00

SS

11/04/2022

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair and beach walkway handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit # FL202203199 **Permit Description** FLOOD PERMIT

Total Fees Paid/Due

Approved By: Approved Date:

\$0.00

11/04/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Res	none	ملطة	Party

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



Residential Project Approval **Application # 202201436**

Property Address:

10228 EAST SEA GULL DR

PIN #: 071815730295 Parcel: 007479000

Lot/Block/Sec: LOT: 47 BLK: SEC:

Subdivision: GOOSE WING

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 08/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

MANDOZZI, JARROD - MANDOZZI, MARIA

Owner Address:

168 VENETIAN DR

Contractor Name:

Gibbs Daughters NC, LLC

Contractor Phone:

252-202-5991

Contractor Address:

PO Box 2387

Manteo, NC 27954

Description: Siding, Deck boards, Rails, Stairs in same footprint

Construction Value: \$49928

Classification of Work: RESIDENTIAL REPAIR

AMENDMENT: \$7,300.00 for windows materials and installation. CG 12.2.22

BUILDING INFORMATION

Clarence Gibbs

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203213 RES ADD-REM-REP-ACC

\$280.00

SS

11/07/2022

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit # FL202203212 FLOOD PERMIT

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

11/07/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

ZN202203211 ZONING PERMIT - RES

\$0.00

11/07/2022

Conditions of Approval:

Demo existing deck boards, railings, and stairs on the South and East side decks. Installing new deck boards, railings, and stairs in the same footprint. Demo existing siding. Installing Pre-Finished LP siding, PVC trim on the entire house. No increase in lot coverage, Must complete final inspection to receive final certificate of occupancy,

12.2.22

AMENDMENT: Demo six windows; install six double hung windows DP-50.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval Application # 202201452

Property Address: 9840 SOUTH OLD OREGON INLET RD PIN #: 071811562134 Parcel: 006068000

Lot/Block/Sec: LOT: 34 BLK: SEC: Subdivision: HIGH DUNES

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

Flood Zone: SHX Base Flood Elevation: 0.0 Regulatory Flood Elevation: 9

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

Owner Name: PRUETT, JOHN M - EVANS, LAUREN M

Owner Address: P. O. BOX 77

Contractor Name: PATTON CONTRACTING, LLC Contractor Phone: 252-489-9537

Contractor Address: 113 W WINDJAMMER RD

Description: Demo & reconstruct existing existing deck/stairs in same footprint reframing joist structure as shown in

plans

Construction Value: \$25000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:

RE202203216 RES ADD-REM-REP-ACC \$220.00 SS 11/07/2022

Conditions of Approval:

 Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: FL202203215 FLOOD PERMIT \$0.00 SS 11/07/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: ZN202203214 ZONING PERMIT - RES \$0.00 KB 11/07/2022

Conditions of Approval:

Demo and reconstruct existing deck/stairs in same footprint. Reframing Joist structure as shown in plans. No increase in lot coverage. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval Application # 202201449

Property Address:

10200 EAST SEA GULL DR

PIN #: 071815638867 Parcel: 007488000

Lot/Block/Sec: LOT: 56 BLK: SEC: Subdivision: GOOSE WING

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

COLEMAN, PAUL J - COLEMAN, LESLIE W

Owner Address:

1071 HARWICH DR

Contractor Name:

Gibbs Daughters NC, LLC

Contractor Phone:

252-202-5991

Contractor Address:

PO Box 2387

Manteo, NC 27954

Description:

Demo two sets of stairs and landing on the NE corner of the decks. Install new two sets of stairs &

landing same ftprint

Construction Value: \$3600

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203219 RES ADD-REM-REP-ACC

\$130.00

SS

11/07/2022

Conditions of Approval:

No pilings are approved for install as part of this permit. Provide address #s on home if none are present. Property contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description FL202203218 FLOOD PERMIT

Total Fees Pald/Due \$0.00

Approved By:

Approved Date:

11/07/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203217 ZONING PERMIT - RES

\$0.00

KB

SS

11/07/2022

Conditions of Approval:

Demo two sets of stairs and landing on the North east corner of the decks and install two new sets of stairs and landing in the same foot print. Install new handrails and pickets. No increase in lot coverage. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201454

5305 WEST CAPTAINS WAY **Property Address:**

PIN #: 080117115811 Parcel: 024961382

Lot/Block/Sec: LOT: 3 BLK: SEC:

Subdivision: CAPTAIN'S WATCH

Zoning: VILLAGE ATTACHED SF 4

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name: Owner Address: GREY DOG ESTATES LLC

11 CANTERBURY LN

Contractor Name:

Gallop Roofing & Remodeling, Inc.

Contractor Phone:

252-473-2888

Contractor Address:

PO Box 157

WANCHESE, NC 27981

Description: Remove and replace cedar shake roof

Construction Value: \$61212

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203222 RES ADD-REM-REP-ACC

\$340.00

SS

11/07/2022

Conditions of Approval:

Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Caroline Decker to discuss 252-480-4707 carolined@vrobx.com

prior to construction.

Call for material check. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203221 FLOOD PERMIT

\$0.00

SS

11/07/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

ZN202203220 ZONING PERMIT - RES

\$0.00

KB

11/07/2022

Conditions of Approval:

Remove and replace cedar shake roof, no increase in height. Must complete final Inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201439

Property Address: 4213 WEST COBBS WAY PIN #: 989112872129 Parcel: 030407000

Lot/Block/Sec: LOT: 26 BLK: SEC: 2 Subdivision: SOUTHRIDGE SEC 2

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

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

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

Owner Name: LEAVENS, ROBERT J - LEAVENS, SHERYL A

Owner Address: 4213 COBBS WAY

Contractor Name: Contractor Phone:

Construction Value: \$2000 Classification of Work: RESIDENTIAL REMODEL

Expand storage under house 9x11, already has a concrete floor

BUILDING INFORMATION

Contractor Address:

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:

RE202203233 RES ADD-REM-REP-ACC

\$100.00 SS

11/07/2022

Conditions of Approval:

SA final flood elevation certificate may be required. A minimum of of a light switch, light and GFCI receptacle is required in new storage area. Pull electrical permit. Combined storage area shall not exceed 300 square feet of total area using the outside finish to finish to measure. If any part of shed / storage area is below the 9 foot RFPE then the material shall be pressure treated. If shed is below the 9 foot RFPE then flood vents are required. A minimum of 2 vents at one square inch per square foot. The flood vents can't be in just one wall. Review zoning permit conditions. Call for final inspections. Any questions please call Steve at 252 449 2005.

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
FL202203232 FLOOD PERMIT \$0.00 SS 11/07/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: ZN202203231 ZONING PERMIT - RES \$0.00 MK 11/07/2022

Conditions of Approval:

9x 11 storage under house has concrete floor already no additional lot coverage all within existing footprint call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201322

Property Address: 4800 EAST ENGAGEMENT HILL LOOP PIN #: 060113145922 Parcel: 027639017

Lot/Block/Sec: LOT: 1 BLK: SEC: Subdivision: SEVEN SISTERS

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

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

Map Panel No: 0801 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 198

Owner Name: ROWLAND, SHANNON O

P O Box 201

Owner Address: P O BOX 2202

Contractor Name: W. M. DUNN CONSTRUCTION, LLC Contractor Phone: 252-261-1542

125 Greyson Loop

Description: Construct 2 deck structures to the front of the house and 3 story elevator

Construction Value: \$85000 Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Contractor Address:

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
RE202203239 RES ADD-REM-REP-ACC \$410.00 SS 11/08/2022

Conditions of Approval:

 Provide address #s on home if none are present. New decks will require WR GFCI Type outlets installed per the NEC. Additional engineering could be requested. Smoke and co2 detectors shall be brought up to code. Properly contain and dispose of construction debris. Pull trade permits prior to starting any work. Call for all required inspections. Provide elevator cert letter prior to scheduling final inspection. Review zoning permit conditions. Call for final inspection

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
FL202203237 FLOOD PERMIT \$0.00 SS 11/08/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
ZN202203238 ZONING PERMIT - RES \$0.00 MK 11/08/2022

Conditions of Approval:

survey shows side setback 15 ft and 30 ft front must maintain setbacks call for final zoning 252-441-7016

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval **Application # 202201339**

8229 SOUTH OLD OREGON INLET RD **Property Address:**

PIN #: 080020900398 Parcel: 006968000

Lot/Block/Sec: LOT: 54 BLK: 3 SEC: Subdivision: BODIE ISLAND BEACH

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

WEINBERG, EDWARD J - WEINBERG, MELISSA A

Owner Address:

8622 APPLETON CT

Contractor Name:

MATT ANDERSON DBA ANDERSON CONSTRUCTION

Contractor Phone:

252-489-9171

300 WALLACE ST Contractor Address:

Description: Rebuild decks on back of the house, Adding 2' cantilever to both sections & a single set of stairs down

Construction Value: \$25000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203242 RES ADD-REM-REP-ACC

\$220.00

SS

11/09/2022

Conditions of Approval:

Provide address #s on home if none are present. Max clear span for 2 - 2 x 12 is 9.5 feet. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repeir and stair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203241 FLOOD PERMIT

\$0.00

11/09/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203240 ZONING PERMIT - RES

\$0.00

MK

11/09/2022

Conditions of Approval:

additional decking and stairs all over existing footprint

no additional lot coverage

call for final zoning and CAMA inspection 252-441-7016

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201447

Property Address:

9311 SOUTH OLD OREGON INLET RD

PIN #: 071918307938 Parcel: 007285000

Lot/Block/Sec: LOT: 11 BLK: 4 SEC: 1 Subdivision: HOLLYWOOD BEACH SEC 1

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VF

Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

SCHLICHTHERLE, RAINER MARTIN - SCHLICHTH

Owner Address:

2303 BREAM DR

Contractor Name:

K.I.C.Z. MAINTENANCE & REMODELING INC

Contractor Phone:

252-

619-2599

Contractor Address: P O BOX 875

GRANDY, NC 27939

Description: Demolition of existing beach access & rebuilding utilizing exact footprint

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Construction Value: \$35000

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203245

RES ADD-REM-REP-ACC

\$250.00

SS

11/09/2022

Conditions of Approval:

- Review beach walkway handout we have provided. Review notes / comments on your plans

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203244

FLOOD PERMIT

\$0.00

SS 11/09/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Deer	aldiana	Donbe
L COR	ponsible	Party

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



Residential Project Approval Application # 202201457

5810 SOUTH SEACHASE DR **Property Address:**

PIN #: 080118307053 Parcel: 031007009

Lot/Block/Sec: LOT: 4 BLK: SEC:

Subdivision: SEASIDE NORTH

Zoning: VILLAGE ATTACHED SF 4

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

MASSIE, PAMELA C TTEE - MASSIE, STEVE L

Owner Address:

2406 FORGE RD

Contractor Name:

Beach Realty and Construction Company

Contractor Phone:

252-435-7444

Contractor Address:

4826 N Croatan Hwy

Kitty Hawk, NC 27949

Description:

Remodel 1 bath (2 light fixtures, 3 plumbing fixtures) convert tub shower to walk in shower, new vanity,

Construction Value: \$22050

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By: Approved Date:

RE202203251

RES ADD-REM-REP-ACC

\$220.00

SS

11/10/2022

Conditions of Approval:

Call for all required inspections. Pull all trade permits before work is started. Provide smoke and co2 detectors to code throughout home. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202203250

FLOOD PERMIT

\$0.00

SS 11/10/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Responsible Part	У
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PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202201464

Property Address:

2706 SOUTH VA DARE TRL

PIN #: 989206491580 Parcel: 027446003

Lot/Block/Sec: LOT: 9 BLK: 6 SEC: 2 Subdivision: NAGS HEAD SHORES AMENDED SEC 2

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

FIRST EXTENDED SERVICE CORP OF VIRGINIA

Owner Address:

P O BOX 439

Contractor Name:

ROBERT T JONES DBA ROBERT T JONES CONTRA

Contractor Phone:

757-373-6756

Contractor Address: POBOX

NH, NC 27959

Description: Replacing vinyl siding, pool fence, pergola, deck floor

Construction Value: \$20000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

RE202203265

Permit Description

RES ADD-REM-REP-ACC

Total Fees Paid/Due

Approved By: Approved Date: 11/10/2022

Conditions of Approval:

Provide address #s on home if none are present. Pool barrier shall comply with Appendix V which we have provided. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

\$190.00

FLOOD INFORMATION

Permit #

FL202203264

Permit Description FLOOD PERMIT

Total Fees Pald/Due

Approved By: Approved Date:

\$0.00

SS

11/10/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

Responsi	ble Part	У		Date	

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



Residential Project Approval Application # 202201492

Property Address:

5611 SOUTH SANDBAR DR

PIN #: 080118313150 Parcel: 000380139

Lot/Block/Sec: LOT: 37 BLK: SEC:

Subdivision: DOLPHIN RUN

Zoning: VILLAGE DET RES SF 2

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name: Owner Address: SAND BAR LLC

103 HAROLD CT

Contractor Name:

Gibbs Daughters NC, LLC

Contractor Phone:

252-202-5991

Contractor Address:

PO Box 2367

Manteo, NC 27954

Description: Demo existing siding; Install new Pre-Finished LP siding.

Construction Value: \$42400

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203304 RES ADD-REM-REP-ACC

\$280.00

SS

11/16/2022

Conditions of Approval:

- Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Caroline Decker to discuss 252-480-4707 carolined@vrobx.com prior to commencing construction.
- Provide address #s on home if none are present. Properly contein and dispose of construction debris. Call for sheathing / framing repair inspection if any repairs occur. Pull electrical permit to contend with wiring issues as they arise. Install siding per product evaluation report. Call for final inspection.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203303 FLOOD PERMIT

\$0.00

SS

11/16/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203302 ZONING PERMIT - RES

\$0.00

KW

11/16/2022

Conditions of Approval:

Zoning has been reviewed and approved for siding replacement only, no increase in footprint or lot coverage permitted. Final zoning inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

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

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



Residential Project Approval Application # 202201498

Property Address:

9330 SOUTH OLD OREGON INLET RD

PIN #: 071918304301 Parcel: 007970033

Lot/Block/Sec: LOT: 33 BLK: SEC: Subdivision: HOLLYWD BCH RECOMB/SO CREEK AC

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 4.0

Regulatory Flood Elevation: 9

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

WEST, TOMMY - WEST, TERESA

Owner Address:

15243 CEDAR KNOLL CT

Contractor Name:

STAPLETON, TODD

Contractor Phone:

252-202-8805

Contractor Address:

324 Live Oak Ct

Description: Relocate plumbing in bathroom, relocate wiring, add GFC, add exhaust fan, construct wall

Construction Value: \$26690

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203307 RES ADD-REM-REP-ACC

\$220.00

SS

11/16/2022

Conditions of Approval:

Provide smoke smoke and co2 detectors to code throughout home. Pull all trade permits prior to starting work. Call for all required inspections, All required plumbing fixture clearances shall be met. Please supply bathroom detail to scale for review and approval. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203306 FLOOD PERMIT

\$0.00

SS

11/16/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203305 ZONING PERMIT - RES

\$0.00

KW

11/16/2022

Conditions of Approval:

Zoning has been reviewed and approved interior bathroom remodel, no increase in footprint or lot coverage permitted.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval Application # 202201508

Property Address:

4128 WEST BRANT CT

PIN #: 989112778437 Parcel: 030420000

Lot/Block/Sec: LOT: 39 BLK: SEC: 2 Subdivision: SOUTHRIDGE SEC 2

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

GARRETT, JOHN T II - GARRETT, GERLADINE

Owner Address:

4641 LEEWARD DR

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

Replace windows, doors, siding, resurface & rerail decks, roof

Construction Value: \$60000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203310 RES ADD-REM-REP-ACC

\$310.00

11/16/2022

Conditions of Approval:

Review window and deck condition handouts we have provided. Provide address #s on home if none are present. Property contain and dispose of construction debris. Call for sheathing / framing repair inspection if any repairs occur. Pull electrical permit to contend with wiring issues as they arise. Install siding per product evaluation report. Call for final inspection.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By:

Approved Date:

FL202203308 FLOOD PERMIT

\$0.00

SS

11/16/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203309 ZONING PERMIT - RES

KW

11/16/2022

Conditions of Approval:

Zoning has been reviewed and approved for the replacement of windows, doors, siding and resurfacing decks and roof. All work to be within the existing footprint.

No increase in footprint, lot coverage or overall height permitted.

Final zoning inspection required prior to issuance of CO.

Additional Conditions:

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

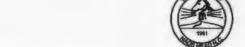
PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201514

Property Address: 7239 SOUTH OLD OREGON INLET RD PIN #: 060016738012 Parcel: 030210000

Lot/Block/Sec: LOT: 1 BLK: SEC: Subdivision: DEA PROPERTIES

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0800 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 1988

Owner Name: BEACH RENTALS VII LLC

Owner Address: PO BOX 8087

Contractor Name: SNEARER CONSTRUCTION, INC Contractor Phone: 252-619-6717

Contractor Address: PO BOX 2875

Description: Replace a damaged girder from front NW house corner pile spenning 2 piles E where rotted

Construction Value: \$16812 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:
RE202203331 RES ADD-REM-REP-ACC \$190.00 SS 11/17/2022

Conditions of Approval:

- Pile connection shall be to code. Call for final inspection

PLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: FL202203330 FLOOD PERMIT \$0.00 SS 11/17/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: ZN202203329 ZONING PERMIT - RES \$0.00 KW 11/17/2022

Conditions of Approval:

Zoning has been reviewed and approved for girder replacement only. No increase in footprint or lot coverage permitted.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201472

Property Address:

112 EAST GULL ST

PIN #: 080015645487 Parcel: 006630000

Lot/Block/Sec: LOT: PT 19-20 BLK: 6 SEC:

Subdivision: WHALEBONE BEACHES - COMP. MAP

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

SCALONE, TYLER A - BARBARA C SCALONE

Owner Address:

14206 CROSSHAVEN CT

Contractor Name:

ASHTON LEE HARRELL T/A ALH CONSTRUCTION

Contractor Phone:

252-207-1247

Contractor Address: 4144 POOR RIDGE RD

KITTY HAWK, NC 27949

Description: Remove decking, handrails, stairs and replace w/new keeping same footprint

Construction Value: \$44000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

RE202203340

Permit Description RES ADD-REM-REP-ACC Total Fees Paid/Due

Approved By: Approved Date:

11/18/2022

Conditions of Approval:

Engineering may be requested. Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair and stair handout we have provided. Call for final inspection

\$280.00

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202203339

FLOOD PERMIT

\$0.00

SS 11/18/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

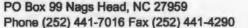
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized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

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

DECISION: Approved with Conditions (See above)

Responsible	Party	Date

PO Box 99 Nags Head, NC 27959





Residential Project Approval Application # 202201487

10418 SOUTH COLONY SOUTH DR **Property Address:**

PIN #: 071820705936 Parcel: 007515005

Lot/Block/Sec: LOT: 5 BLK: SEC: Subdivision: BODIE ISLAND

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

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

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

Owner Name: RUSSELL, WILLIAM E SR - RUSSELL, MARY M

9343 ELK RUN RD Owner Address:

Contractor Name: PROPERTY OWNER Contractor Phone:

Contractor Address: See Ahove

Description: Replace boards, railings & steps on deck, replace exterior stairs of main entrance SWO

Classification of Work: RESIDENTIAL REPAIR Construction Value: \$6400

BUILDING INFORMATION

Permit Description Total Fees Pald/Due Approved Date: Permit # Approved By: 11/18/2022

RE202203344 RES ADD-REM-REP-ACC \$160.00 SS

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair and stair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit # **Permit Description Total Fees Paid/Due** Approved By: **Approved Date:**

FL202203343 FLOOD PERMIT \$0.00 22 11/18/2022

Conditions of Approval:

ZONING INFORMATION

Approved Date: **Permit Description** Total Fees Paid/Due Approved By: ZN202203342 ZONING PERMIT - RES 11/18/2022 \$0.00 KW

Conditions of Approval:

Zoning has been reviewed and approved for the replacement of deck boards and steps from deck and exterior stairs at main entrance. All work shall be in the same footprint. No increase in footprint or lot coverage permitted. Final Zoning inspection required prior to issuance of CO.

Additional Conditions:

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

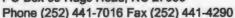
PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

PO Box 99 Nags Head, NC 27959





Residential Project Approval Application # 202201501

219 EAST ALTOONA SOUTH ST **Property Address:**

PIN #: 071815648178 Parcel: 008981000

Lot/Block/Sec: LOT: LOT 7R BLK: SEC:

Subdivision: OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Head: NAVD 1988

Owner Name:

SHRADER, CHRISTOPHER W

Owner Address:

38439 5TH AVE NO 185

Contractor Name:

691 ELECTRIC LLC

Contractor Phone:

252-548-2678

Contractor Address:

2621 S BRIDGE LN

Description: Installing 29 solar panels on the roof, install an inverter & rapid disconnect switch on the side of house

Construction Value: \$29757

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203347 RES ADD-REM-REP-ACC

\$220.00

SS

11/18/2022

Conditions of Approval:

Review solar inspection guide we have provided. All equipment shall be at or above the 12 foot RFPE. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203346 FLOOD PERMIT

\$0.00

SS

11/18/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

ZN202203345 ZONING PERMIT - RES

\$0.00

KW

11/18/2022

Conditions of Approval:

Zoning has been reviewed and approved for the installation of solar panels on the roof of the home, with an inverter on side of house.

No structures on grade, no increase in footprint or lot coverage permitted.

Final zoning inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201429

3607 SOUTH VA DARE TRL **Property Address:**

PIN #: 989215743023 Parcel: 007590000

Lot/Block/Sec: LOT: 153-A BLK: SEC: Subdivision: GEO T STRONACH

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: VE Base Flood Elevation: 11.0 **Regulatory Flood Elevation: 12**

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

SANDPIPER LLC Owner Name:

Owner Address: 6151 MILES LN

Contractor Name: SIMPLESIDE CONSTRUCTION, INC. **Contractor Phone:** 252-564-8307

Contractor Address: 308 W Helga St

Replace window, doors and siding. Replace all existing deck decking and railing on dune walkway and Description:

dune deck. Replace a

Construction Value: \$200000 Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit # **Permit Description** Total Fees Paid/Due Approved By: Approved Date: RE202203350 RES ADD-REM-REP-ACC

\$685.00 SS 11/18/2022

Conditions of Approval:

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

FLOOD INFORMATION

Permit # **Permit Description Total Fees Paid/Due** Approved By: **Approved Date:** FL202203349 FLOOD PERMIT \$0.00 11/18/2022 SS

Conditions of Approval:

ZOMING IMPORMATION

Permit # **Permit Description Total Fees Pald/Due** Approved By: Approved Date: ZN202203348 ZONING PERMIT - RES \$0.00 11/18/2022 KW

Conditions of Approval:

Zoning has been reviewed and approved for the replacement deck board and rallings on existing dune walkway and dune deck, NO new pilings. Replace deck boards and railings on tope level deck and pilings supporting the covered roof, replace deck boards and railings on 1st level deck. All work to be within the existing footprint. No increase in footprint or lot coverage permitted.

Final zoning inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

in accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months

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



Residential Project Approval Application # 202201497

Property Address:

10431 SOUTH OLD OREGON INLET RD

PIN #: 071820800965 Parcel:

027734000

Lot/Block/Sec: LOT: BLK: SEC:

Subdivision: SUBDIVISION - NONE

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

CLARKE, REBECCA W

10237 FINLANDIA LN

Owner Address:

Contractor Name:

DeBoy Construction & Remodeling, Inc.

Contractor Phone:

252-207-8912

Contractor Address:

303 Eagle Dr

Kill Devil Hills, NC 27948

Description: Replace two heat pumps & air handlers, replace air duct thru out house, new insulation, boxing &

underpinning 1st floor

Construction Value: \$40000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203353 RES ADD-REM-REP-ACC

\$250.00

SS

11/18/2022

Conditions of Approval:

Pull trade permits prior to staring work. Call for duct inspection. Call for insulation inspection. Air seal underpinning to code. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203352 FLOOD PERMIT

\$0.00

SS

11/18/2022

Conditions of Approval:

ZONING INPORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203351 ZONING PERMIT - RES

KW

11/18/2022

Conditions of Approval:

Zoning has been reviewed and approved for minor repairs to existing HVAC stands associated with replacement of units. No increase in footprint or lot coverage permitted.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201522

Property Address:

4729 SOUTH VA DARE TRL

PIN #: 080109157186 Parcel: 008701001

Lot/Block/Sec: LOT: SOUTHERLY 1/2 7&8 BLK: 3 SEC: A

Subdivision: NAGS HEAD BEACH PLAT A

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 12.0

Regulatory Flood Elevation: 12

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

CREEKBAUM, WILLIAM A

Owner Address:

455 PAISANO CT

Contractor Name:

ASHTON LEE HARRELL T/A ALH CONSTRUCTION

Contractor Phone:

252-207-1247

Contractor Address: 4144 POOR RIDGE RD

Description: Tear off old hardi plank siding & trim, replace w/new smart siding & trim

Construction Value: \$29450

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203356 RES ADD-REM-REP-ACC

\$220.00

SS

11/21/2022

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debns. Call for sheathing / framing repair inspection if any repairs occur. Pull electrical permit to contend with wiring issues as they arise. Install siding per product evaluation report. Call for final inspection.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

\$0.00 SS

11/21/2022

Conditions of Approval:

FL202203355 FLOOD PERMIT

ZONING INFORMATION

Permit # ZN202203354 ZONING PERMIT - RES

Permit Description

Total Fees Paid/Due

\$0.00

Approved By:

KW

Approved Date:

11/21/2022

Conditions of Approval:

Zoning has been reviewed and approved for siding replacement only. No increase in footprint or lot coverage permitted. Final zoning inspection required prior to Cert of Compliance.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201469

Property Address:

4811 SOUTH VA DARE TRL

PIN #: 080113149840

Parcel: 008737000

Lot/Block/Sec: LOT: PT 4 BLK: 1 SEC: B

Subdivision: NAGS HEAD BEACH PLAT B

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 12.0

Regulatory Flood Elevation: 12

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

JWJ OF NC LLC

Owner Address:

203 DOGWOOD TRL

ELIZABETH CITY, NC 27909

Contractor Name:

MICHAEL ELLISON DBA CLEAR CHOICE PROPERT

Contractor Phone:

252-619-4895

Contractor Address:

105 Trout Terrace

Grandy, NC 27939

Description:

Remove existing walkway from house to dune deck replace w/stairs & landing to go higher than existing

grnd levl walk

Construction Value: \$12000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203372 RES ADD-REM-REP-ACC

\$190.00

SS

11/22/2022

Conditions of Approval:

Review beach walkway handout we have provided. Call for a site visit before starting work. Call Steve at 252 449 2005

Review CAMA exemption letter we have provi

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203371 FLOOD PERMIT

\$0.00

SS

11/22/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203370 ZONING PERMIT - RES

\$0.00

KB

11/22/2022

Conditions of Approval:

Review CAMA exemption letter we have provided. Must complete final zoning and CAMA inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval **Application # 202201544**

7201 SOUTH VA DARE TRL Property Address:

PIN #: 080015734800 Parcel: 008869001

Lot/Block/Sec: LOT: 1 BLK: 9 SEC: Subdivision: WHALEBONE BEACHES - COMP. MAP

Land Use: SINGLE FAMILY DWELLING Zoning: COMMERCIAL/RESIDENTIAL DISTRIC

Flood Zone: VE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Datum Used: NAVD 1988 Suffix: K Map Panel No: 0800 Map Panel Date: 06/19/2020

Owner Name: TEETS, JOSEPH C - SEIDEL, CATHERINE

Owner Address: 6502 EVENING COMPANY CIR

252-455-7140 Contractor Phone: Contractor Name: NARRON, TIM

Contractor Address: 3938 POOR RIDGE RD

Remove old decking & handralis & install new Trex decking & Tamko pvc handralis

Construction Value: \$16800 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Total Fees Pald/Due Approved Date: Permit # **Permit Description** Approved By: 11/22/2022

RE202203381 RES ADD-REM-REP-ACC \$190.00 SS

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit # **Permit Description** Total Fees Paid/Due Approved By: Approved Date:

FL202203380 FLOOD PERMIT \$0.00 11/22/2022 SS

Conditions of Approval:

ZONING INFORMATION

Permit # **Permit Description Total Fees Paid/Due** Approved By: **Approved Date:** ZN202203379 ZONING PERMIT - RES 11/22/2022 \$0.00 KB

Conditions of Approval:

Remove old decking and handrails and install new Trex decking and Tamko PVC handrails. All work to remain in same foot print. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Contractor Phone:

Residential Project Approval Application # 202201543

Property Address: 9235 SOUTH OLD OREGON INLET RD PIN #: 0719

PIN #: 071918315424 Parcel: 007218002

Lot/Block/Sec: LOT: 2 BLK: SEC: Subdivision: BEACH CREST

Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: VE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Map Panel No: 0719 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 1988

Owner Name: ERKKILA, CRAIG A - HALPER-ERKKILA, RUBY

Owner Address: 60 READINGTON RD

513 BURNS DR

Contractor Name: MIGUEL MORALES DBA THE PROFESSIONAL HAND

252-573-9372

Description: Replace deck boards, hand rails, stair cases on back deck

Construction Value: \$28000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Contractor Address:

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date:

RE202203384 RES ADD-REM-REP-ACC \$220.00 SS 11/22/2022

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Remove
unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final
inspection

FLOOD INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: FL202203383 FLOOD PERMIT \$0.00 SS 11/22/2022

Conditions of Approval:

ZONING INFORMATION

Permit # Permit Description Total Fees Paid/Due Approved By: Approved Date: ZN202203382 ZONING PERMIT - RES \$0.00 KB 11/22/2022

Conditions of Approval:

Replace deck boards, hand rails and stair cases on back decks. No new lot coverage all work to remain in same foot print. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

In accordance with GS160Å-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201542

Property Address:

204 EAST ALTOONA SOUTH ST

PIN #: 071815644074 Parcel: 009025000

Lot/Block/Sec: LOT: 89 & PT 85 BLK: SEC:

Subdivision: OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

BEACHCOMBER'S PARADISE LLC

444 GOOSSEN REGAN RD

Contractor Name:

Owner Address:

DeBoy Construction & Remodeling, Inc.

Contractor Phone:

252-207-8912

Contractor Address:

303 Eagle Dr

Kill Devil Hills, NC 27948

Description:

Renovation of two full bathrooms & a powder room, relocate refridgerator to opposite end of kitchen

Construction Value: \$42403

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202203386

RES ADD-REM-REP-ACC

\$280.00

11/22/2022 SS

Conditions of Approval:

Provide address #s on home if none are present. Properly contain and dispose of construction debris. Pull plumbing and electrical permits prior o starting work. All plumbing fixture clearances shall be code compliant. Provide smoke and co2 detectors to code throughout home. Call for final inspection.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By: Approved Date:

SS

FL202203385

FLOOD PERMIT

\$0.00

11/22/2022

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Responsible	e Party
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PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202201350

Property Address:

5311 WEST CAPTAINS WAY

PIN #: 080117115680 Parcel: 024961385

Lot/Block/Sec: LOT: 6 BLK: SEC:

Subdivision: CAPTAIN'S WATCH

Zoning: VILLAGE ATTACHED SF 4

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

RETHEMEYER, DAVID G TTEE - RETHEMEYER,

Owner Address:

114 CLUBSIDE DR

Contractor Name:

Gallop Roofing & Remodeling, Inc.

Contractor Phone:

252-473-2888

Contractor Address:

PO Box 157

WANCHESE, NC 27981

Description: Removal of chimney and chase and closing in side of house where chimney once was

Construction Value: \$7800

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203416 RES ADD-REM-REP-ACC

\$160.00

SS

11/29/2022

Conditions of Approval:

- Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. Your are strongly encouraged to contact Caroline Decker to discuss 252-480-4707 carolined@vrobx.com prior to commencing construction.
- Call for framing / sheathing inspection. Pull trade permits if needed. Call for all required inspections. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

FL202203415 FLOOD PERMIT

\$0.00

SS

11/29/2022

Conditions of Approval:

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203414 ZONING PERMIT - RES

\$0.00

KB

11/29/2022

Conditions of Approval:

Removal of existing chimney chase on south side of home, closing on opening and installing new hardle shake siding to blend in with existing. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201566

Property Address: 9607 SOUTH OLD OREGON INLET RD PIN #: 071806487704 Parcel: 007252003

Lot/Block/Sec: LOT: 3 BLK: 1 SEC: 1 Subdivision: HOLLYWOOD BEACH SEC 1

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: VE

Base Flood Elevation: 10.0 Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

SCHLOSSER, MICHAEL D TTEE

Owner Address:

2902 SUGARBERRY LN

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address: See Above

Remove & replace wood pickets, rails & deck on existing s Soundside decks; repair kitchen door;

Remove & replace screen supports in porch, remove & replace flashing on both decks SWO

Construction Value: \$16706

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203420 RES ADD-REM-REP-ACC

\$190.00

SS

11/29/2022

Conditions of Approval:

SWO. Call for site visit to determine building permit conditions. Call Steve at 252 449 2005

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

\$0.00

SS

11/29/2022

Conditions of Approval:

FL202203418 FLOOD PERMIT

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203419 ZONING PERMIT - RES

\$0.00

KB

11/29/2022

Conditions of Approval:

Remove & replace wood pickets, rails & deck on existing a soundside decks; repair kitchen door. All work to stay in existing footprint. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201556

Property Address:

2100 SOUTH VA DARE TRL

PIN #: 989313230457 Parcel: 005574001

Lot/Block/Sec: LOT: 1 BLK: 5 SEC: 4 Subdivision: NAGS HEAD SHORES AMENDED SEC 4

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

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

Map Panel No: 9893

Map Panel Date: 06/19/2020

Suffix: K

Datum Used:

Owner Name:

DTE LLC - C/O WILLIAM H HOWELL III, MEMB

Owner Address:

28089 HANDSOM RD

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Ahove

Description:

Refurbish 2 decks keeping bases on top deck extend 2 ft east 24" from the NE corner to the cargo lift

Construction Value: \$29000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203427 RES ADD-REM-REP-ACC

\$220.00

SS

11/29/2022

Conditions of Approval:

Call for a site visit prior to starting construction. Call Steve at 252 449 2005. Tie down joist at front girder and provide back span connection of joist at deck ban. Provide address #s on home if none are present. Properly contain and dispose of construction debrts. Remove unsafe conditions. All work shall meet current codes. Review deck repair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202203426 FLOOD PERMIT

\$0.00

SS

11/29/2022

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203425 ZONING PERMIT - RES

\$0.00

KB

11/29/2022

Conditions of Approval:

Refurbish existing 2 decks while keeping bases, Top deck extended 2 feet east for a distance of 24 feet from NE corner to the cargo lift (approximately 48 sq ft). Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201549

Property Address:

4203 SOUTH THIRTEENTH ST

PIN #: 989112765740 Parcel: 626836004

Lot/Block/Sec: LOT: 4 BLK: SEC:

Subdivision: NAGS HEAD HOTEL PROPERTY

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: SHX

Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Suffix: K

Datum Used; NAVD 1986

COLLAR, JOHN H III - GOLLAR, LYNN S

Map Panel Date: 06/19/2020

Owner Name: Owner Address:

8844 WOODYHILL RD

Contractor Namo

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

Description: Rear, added 4x4 landing with two pilings, front replaced wood w/Trex decking, stairs & kick plates SWO

Construction Value: \$19500

Classification of Work; RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203430 RES ADD-REM-REP-ACC

\$190.00

11/29/2022

Conditions of Approval:

SWO. Work is complete. Call for a site visit to determine Building Permit conditions, Call Steve at 252 449 2005

FLOOD INFORMATION

Permit #

Permit Description

FL202203428 FLOOD PERMIT

Total Fees Paid/Due

Approved By:

SS

Approved Date:

11/29/2022

Conditions of Approval:

ZONING INFORMATION

Permit # ZN202203429 ZONING PERMIT - RES

Permit Description

Total Fees Pald/Dus

Approved By:

Approved Date:

00.02

\$0.00

KB

11/29/2022

Conditions of Approval:

Rear added 4X4 landing with two pilings, Front replaced wood with trex decking, replaced and brought up to code stairs and kick plates. Must complete final inspection to receive final certificate of occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

and shall be the responsibility of the undersigned applicant.
In accordance with GB180A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced, if, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201578

Property Address: 8913 SOUTH OLD OREGON INLET RD PIN #: 071913241243 Parcel: 007168000

Lot/Block/Sec: LOT: 10 BLK: 14 SEC: 4

Subdivision: HOLLYWOOD BEACH SEC 4

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 08/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

MCLAY, HEATHER - JSEPPI, SVEN

Owner Address:

201 CANNON TRL

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

Replace 6 windows, replace siding & sheathing as necessary

Construction Value: \$12000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202203438 RES ADD-REM-REP-ACC

\$190.00

SS

11/30/2022

Conditions of Approval:

Review window and door handout we have provided, Call for all required inspections. Call for final final inspection. Any questions call 252 449 2005

PLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due \$0.00

Approved By:

Approved Date:

11/30/2022

Conditions of Approval:

FL202203437 FLOOD PERMIT

ZONING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

ZN202203436 ZONING PERMIT - RES

22

11/30/2022

Conditions of Approval:

Zoning has been reviewed and approved to replace windows, siding and sheathing as necessary. No increase in footprint or lot coverage permitted.

Final zoning inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval Application # 202201577

Property Address:

3529 SOUTH MEMORIAL AVE

PIN #: 989215645361 Parcel: 016551077

Lot/Block/Sec: LOT: 377 BLK: SEC: Subdivision: GEO T STRONACH

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Zoning: GENERAL COMMERCIAL DISTRICT

Regulatory Flood Elevation: 12

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: K

Datum Used: NAVD 1988

Owner Name:

VITERISE, DAVID A - VITERISE, HEIDI M

Owner Address:

87 SHIRLEY TER

Contractor Name:

Albemarle Landscapes, Inc.

Contractor Phone:

252-256-1883

Contractor Address:

4212 by Ln

Kitty Hawk, NC 27949

Description:

Demo vinyl fence & replace with 4' wooden shadow box w/2 gates in existing footprint11/30 increasing

fenced in area

Construction Value: \$19175

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

RE202203441 RES ADD-REM-REP-ACC

\$190.00

11/30/2022

Conditions of Approval:

Review zoning permit conditions. Review Appendix V for pool barrier requirements. Pool barrier shall be constructed break away. Call for final inspections. Call if you have any Questions.. 252 449 2005

Additional fence shall not afford climbing into pool area

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By:

Approved Date:

11/30/2022

Conditions of Approval:

FL202203440 FLOOD PERMIT

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202203439 ZONING PERMIT - RES

\$0.00

KW

11/30/2022

Conditions of Approval:

Zoning has been reviewed and approved to replace the existing 4 ft. tall vinyl pool fence with a 4 ft. tall wooden shadow box fence with two gates in the same location.

Fence shall not exceed 6 ft. height. If style of fence changes, construction side must face inward.

Final zoning inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: REPAIL	R-14344	11/07/2022
Parcel Number: Location: Subdivision: Legal Description:	023538000 25 E R DANIELS RD – WANCHESE SUBDIVISION - NONE LOT: BLK: SEC:	
Owner Name: Owner Mail Address: Owner Phone and email:	KIMBERLY D GRIMES 155 OLD CHURCH RD WANCHESE, NC 27981	
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	JES CONSTRUCTION LLC 1741 CORPORATE LANDING PKWY STE 101, VIRGINIA BEACH, VA 23454 757-558-9909 Contractor NC License#: 69678	
Proposed Construction: Description of Work	RESIDENTIAL - REPAIR, ENCAPSULATION OF CRAWLSPACE	
:	Cost of Construction: \$12,000 CAMA Permit#: Flood Zone:	
	Base Flood Elevation: 0.0 Lot/Ground Elevation:	
Comments:	PERMIT FEE	\$150.00
	TOTAL FEES:	\$150.00
	1	
Applicant Signature:	JES CONSTRUCTION LLC	
Inspector Signature: Keil Twif	ord RSF	



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

		ACCESSORT	LIMITI		
ACCESSORY PERMIT#: ACC-1	4380				11/08/2022
Parcel Number: Location: Subdivision: Legal Description:	025226031 D VICTOR MEEK WEST SIDE LOT: 5RA BLK: S		TEO		
Owner Name: Owner Mail Address: Owner Phone and email:	EXCHANGE INV P O BOX 567 AL				
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	MILLSTONE MA 7000 MARITIMI 2523058842	WOODS DR,	JCTION INC MANTEO, NC 27954 or NC License#: 78077		
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - M CONSTRUCT A R			\$29,431 2022-30 8.0	
Comments:	,	PERMIT FEE			\$250.00
·		TOTAL FEES:		The state of the s	\$250.00
Applicant Signature:	AC		MILLSTONE MAR	RINE CONSTRUCT	ION INC
Inspector Signature: Keil Tw	iford		RSF		



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

ACCESSORY PERMIT

	ACCESSORY	PERMIT		·
ACCESSORY PERMIT#: ACC-1	4379			11/08/2022
Parcel Number: Location: Subdivision: Legal Description:	025226029 134 D VICTOR MEEKINS RD – WEST SIDE LOT: 3 BLK: SEC:	MANTEO		
Owner Name: Owner Mail Address: Owner Phone and email:	DAVID NATHANIEL HATCHELL P O BOX 1083 MANTEO, NC 2 252-305-3822 etwyne@yaho	7954		
Contractor Name: Contractor Mail Address: Contractor Phone:	MILLSTONE MARINE CONSTR 7000 MARITIME WOODS DR, 2523058842 Contract			
ACCESSORY INFORMATION				
Proposed Construction: Description of Work Septic Permit Date:	RESIDENTIAL - MISC ACCESSOR CONSTUCT A RETAINING WALL		\$17,620	
Septic Permit #:		CAMA Permit#: Flood Zone:	2022-29	
		Base Flood Elevation: Lot/Ground Elevation:	0.0 NA	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES	:		\$250.00
Applicant Signature:		MILLSTONE MAR	RINE CONSTRUCT	TION INC

RSF

Inspector Signature: Keil Twiford



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-1	4381			11/08/2022
Parcel Number: Location: Subdivision: Legal Description:	025226028 136 D VICTOR MEEKINS WEST SIDE LOT: 2 BLK: SEC:	S RD – MANTEO		
Owner Name: Owner Mail Address: Owner Phone and email:	STANFORD M WHITE P O DRAWER 1447 NAG 252-207-3799 stan@oi			
Contractor Name: Contractor Mail Address: Contractor Phone:		DNSTRUCTION INC DS DR, MANTEO, NC 27954 ontractor NC License#: 78077		
ACCESSORY INFORMATION			·	
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - MISC ACC CONSTRUCT A RETAININ		\$19,343 2022-27 0.0	
Comments:	PERM	NT FEE		\$250.00
	ТОТА	L FEES:		\$250.00
Applicant Signature:		MILLSTONE MA	RINE CONSTRUCT	ION INC
Inspector Signature: Keil Tw	riford	RSF		



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

ACCESSORY PERMIT

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
ACCESSORY PERMIT#: ACC-14	4378			11/08/2022
Parcel Number: Location: Subdivision: Legal Description:	025226027 138 D VICTOR MEEKINS RD – I WEST SIDE LOT: 1 BLK: SEC:	MANTEO		
Owner Name: Owner Mail Address: Owner Phone and email:	O R JR BLIZZARD 7701 GLENDOWER RD RALEIG	H, NC 27613		
Contractor Name: Contractor Mail Address: Contractor Phone:	MILLSTONE MARINE CONSTRU 7000 MARITIME WOODS DR, 2523058842 Contracto			
ACCESSORY INFORMATION				
Proposed Construction: Description of Work	RESIDENTIAL - MISC ACCESSOR' CONSTRUCT RETAINING WALL			
Septic Permit Date: Septic Permit #:		Cost of Construction: CAMA Permit#: Flood Zone:	\$20,684 2022-28	
		Base Flood Elevation: Lot/Ground Elevation:	8.0	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES:	•		\$250.00
Applicant Signature:	TOTAL FEES.	MILLSTONE MAR	RINE CONSTRUCT	

Inspector Signature: Keil Twiford



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

ACCESSORY PERMIT

	ACCESSORI I EMMI	
ACCESSORY PERMIT#: ACC-	14376	11/08/2022
Parcel Number: Location: Subdivision: Legal Description:	022976000 1134 BURNSIDE RD – MANTEO BURNSIDE FOREST SEC 2 LOT: E5 BLK: SEC: 2	
Owner Name: Owner Mail Address: Owner Phone and email:	BRIAN D HARTLIEB 847 BEAR CABIN DR FOREST HILL, MD 21050 443-506-2003	
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	NORTHEASTERN MARINE INC PO BOX 42, KITTY HAWK, NC 27949 2522613682 Contractor NC License#: 30026	
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS; PIERS; BULKHDS, BOATLFTS, BULK CONSTRUCT 86FT OF BULKHEAD AND 8X20FT DOCK Cost of Construction: \$26,000 CAMA Permit#: 86811 Flood Zone: Base Flood Elevation: 0.0 Lot/Ground Elevation:	
Comments:	PERMIT FEE	\$250.00
	TOTAL FEES:	\$250.00
OBASB80	Emory NORTHEASTERN MARINE INC 3841E2434 11/8/2022	

11/8/2022

8F937CD3D827499...



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

Frisco: (252) 475-5878

		ACCESSORY F	PERMIT		
ACCESSORY PERMIT#: ACC-14	1383		,		11/08/2022
Parcel Number: Location: Subdivision: Legal Description:	024042000 224 BAYVIEW DE SUBDIVISION - N LOT: BLK: SEC:		OINT		·
Owner Name: Owner Mail Address: Owner Phone and email:	VALERIE D SUTTON 628 OAK GROVE RD CHESAPEAKE, VA 23320				
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	VALERIE D SUTTO 628 OAK GROVE 252-722-3464	RD, CHESAPE	EAKE, VA 23320 tor NC License#: OWNER	\BUILDER	
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #: Footing Type: Finished Square Footage: Unfinished Square Footage:	- ACCESSORY STR CONSTRUCT 12X1			\$10,000 NA 0.0 NA	
Comments: SHED MUST BE AT L FROM PROPERTY LINE, THIS TO SURVEYOR AT TIME OF FINAL EL CERTIFICATE.	BE VERIFIED BY	PERMIT FEE FLOOD DEVE	LOPMENT BLDG PERMIT		\$150.00 75.00
Applicant Signature:	na Of	TOTAL FEES:	VALERIE D SUTTO	DN	\$225.00

RSF

Inspector Signature: Keil Twiford



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

Northern Beach Office

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14470

11/14/2022

Parcel Number:

019994000

Location:

1113 HARBOUR VIEW DR - COLINGTON

Subdivision:

COLINGTON HARBOR SEC N

Legal Description:

LOT: 114 BLK: SEC: N

Owner Name:

JAMES E CZERWINSKI

Owner Mail Address:

1113 HARBOUR VIEW DR KILL DEVIL HILLS, NC 27948

Owner Phone and email:

Contractor Name:

J.A. HART GENERAL CONTRACTOR, LLC

Contractor Mail Address:

PO BOX 1782, KILL DEVIL HILLS, NC 27948

Contractor Phone:

2022077900

Contractor NC License#: L.61800

ACCESSORY INFORMATION

Proposed Construction:

RESIDENTIAL - MISC ACCESSORY,

Description of Work

INSTALLATION OF ELEVATOR SHAFT & ELEVATOR EXTEND 2ND FLOOR DECK TO MEET

ELECATOR SHAFT

Septic Permit Date:

Septic Permit #:

Cost of Construction:

\$80,000

CAMA Permit#:

Flood Zone:

Base Flood Elevation:

0.0

Lot/Ground Elevation:

Comments: AS BUILT SURVEY REQUIRED BEFORE

PERMIT FEE

\$150.00

CO, LOT COVERAGE NOT TO EXCEED 30%

TOTAL FEES:

\$150.00

Applicant Signature:

J.A. HART GENERAL CONTRACTOR, LLC

Inspector Signature: Keil Twiford

RSF



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-7	7157			11/16/2021	
Parcel Number: Location: Subdivision: Legal Description:	024458000 361 MOTHER VINEYAR MOTHER VINEYARD SE LOT: 30 BLK: SEC: 1				
Owner Name: Owner Mail Address: Owner Phone and email:	ROBERT V III OWENS 301 W FRESH POND DR UNIT 1 KILL DEVIL HILLS, NC 27948				
Contractor Name:		RUCTION COMPANY INC			
Contractor Mail Address: Contractor Phone:	PO BOX 1411, MANTE 252-473-3312	Contractor NC License#:			
ACCESSORY INFORMATION	232 1/3 3312	Contractor tre Licensen.			
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - SWIMMI INSTALL FIBERGLASS PO 10/13/2021 S8-6517		\$65,000 0.0		
Comments:		MIT FEE INE BP APPLICATION REVIEW		\$300.00	
	тот	AL FEES:		\$300.00	
Applicant Signature:	gu Midge	H NAGS HEAD PO	OLS LLC		
Inspector Signature: Keil Tv	wiford	ALD			



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-1	4586	11/21/2022			
Parcel Number: Location: Subdivision: Legal Description:	024838000 4331 MILL LANDING RD – WANCHESE SUBDIVISION - NONE LOT: PARCEL TWO BLK: SEC:				
Owner Name: Owner Mail Address: Owner Phone and email:	FRESH CATCH SEAFOOD INC 4331 MILL LANDING RD WANCHESE, NC 27981				
Contractor Name: Contractor Mail Address: Contractor Phone:	HATCHELL CONCRETE, INC` PO BOX 2405, MANTEO, NC 27954 252-473-6074 Contractor NC License#: 34205				
ACCESSORY INFORMATION Proposed Construction: Description of Work Septic Permit Date: Water Tap Number:	COMMERCIAL - REMODEL RES OR COM, BULKHEAD AND CONCRETE PIER Cost of Construction: \$210,000 CAMA Permit#: 90-22 MAJOR Flood Zone: Base Flood Elevation: 0.0 Lot/Ground Elevation:				
Comments:	PERMIT FEE	\$250.00			
Applicant Signature:	TOTAL FEES: HATCHELL CONCRETE, INC	\$250.00			
Inspector Signature: Keil Twi	ford RSF				



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

ACCESSORY PERMIT

	•	ACCESSONT TE	171A111		
ACCESSORY PERMIT#: ACC-14	1665				11/28/2022
Parcel Number: Location: Subdivision: Legal Description:	023563000 3777 MILL LAND SUBDIVISION - N LOT: BLK: SEC:		NCHESE		
Owner Name: Owner Mail Address: Owner Phone and email:	RUSSELL L STETS PO BOX 309 WAI 252-305-1814		7981		
Contractor Name: Contractor Mail Address: Contractor Phone:	COLSON CONSTE 1305 CAMPGRO 252-771-2764	JND ROAD, E	IPANY INC LIZABETH CITY, NC 27909 tor NC License#: 40746	-7533	
ACCESSORY INFORMATION					
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	COMMERCIAL - N BUILD 12X24 STO		RY, ACC N EXISTING CONCRETE Cost of Construction: CAMA Permit#: Flood Zone:	\$10,000	
	480		Base Flood Elevation: Lot/Ground Elevation:	0.0	
Comments:		PERMIT FEE			\$192.00
		TOTAL FEES:			\$192.00
Applicant Signature:	DE348A	11/28/2		RUCTION COMPAI	NY INC

KT

11/28/2022

Inspector Signature: Full Twi



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

Frisco: (252) 475-5878

Jedude och Buddill

		ACCESSORY P	ERMIT		
ACCESSORY PERMIT#: ACC-1	4679				11/29/2022
Parcel Number: Location: Subdivision: Legal Description:	024344000 157 DOGWOOD MOTHER VINEYA LOT: 15 BLK: SEC	ARD EXT			
Owner Name: Owner Mail Address: Owner Phone and email:	PAUL NORTHRUP 157 DOGWOOD CIR MANTEO, NC 27954				
Contractor Name: Contractor Mail Address: Contractor Phone:	, Contract	tor NC License	#:		
ACCESSORY INFORMATION					
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #: Footing Type: Finished Square Footage: Unfinished Square Footage:	RESIDENTIAL - AC CONSTRUCT A 16 08/23/2022 NA 0		CT OVER 12 FT, Cost of Construction: CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	\$4,000 NA 0.0 9.6	
Comments: AS BUILT SURVEY CO.	REQUIRED BEFORE	PERMIT FEE			\$150.00
		TOTAL FEES:			\$150.00
Applicant Signature:	dely		PAUL NORTHRU	P	
Inspector Signature: Keil Tv			RSF		



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

	ACCESSORY P	ERMIT		
ACCESSORY PERMIT#: ACC-	14721			11/30/2022
Parcel Number: Location: Subdivision: Legal Description:	025226031 D VICTOR MEEKINS RD – MAN WEST SIDE LOT: 5RA BLK: SEC:	TEO		
Owner Name: Owner Mail Address: Owner Phone and email:	EXCHANGE INVESTMENT HOLE P O BOX 567 ALABASTER, AL 35			
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	MILLSTONE MARINE CONSTRU 7000 MARITIME WOODS DR, 1 2523058842 Contracto			
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS;PIERS;BUL CONSTRUCT A NEW PIER & BOA		\$47,741 86812 8.0	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES:			\$250.00
Applicant Signature:		MILLSTONE MAI	RINE CONSTRUCT	TION INC
Inspector Signature: Keil Tv	viford	ALD		



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

ACCESSORY PERMIT

	ACCESSORY	PERIVIT		
ACCESSORY PERMIT#: ACC-1	4722			11/30/2022
Parcel Number: Location: Subdivision: Legal Description:	025226029 134 D VICTOR MEEKINS RD – WEST SIDE LOT: 3 BLK: SEC:	MANTEO		
Owner Name: Owner Mail Address: Owner Phone and email:	DAVID NATHANIEL HATCHELL P O BOX 1083 MANTEO, NC 27954 252-305-3822 etwyne@yahoo.com			
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	MILLSTONE MARINE CONSTRUCTION INC 7000 MARITIME WOODS DR, MANTEO, NC 27954 2523058842 Contractor NC License#: 78077			
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS;PIERS;BU CONSTRUCT A NEW PIER AND I		\$43,869 GP 86813 0.0	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES	:		\$250.00
Applicant Signature:	20	MILLSTONE MAI	RINE CONSTRUCT	TION INC

ALD

Inspector Signature: Keil Twiford



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

	7,002,00			
ACCESSORY PERMIT#: ACC-	14723			11/30/2022
Parcel Number: Location: Subdivision: Legal Description:	025226027 138 D VICTOR MEEKINS RD – WEST SIDE LOT: 1 BLK: SEC:	MANTEO		
Owner Name: Owner Mail Address: Owner Phone and email:	O R JR BLIZZARD 7701 GLENDOWER RD RALEIO	GH, NC 27613		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	MILLSTONE MARINE CONSTR 7000 MARITIME WOODS DR, 2523058842 Contrac			
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS;PIERS;BI CONSTRUCT A NEW PIER AND		\$32,157 86814 8.0	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES	S:		\$250.00
Applicant Signature:		MILLSTONE MAR	RINE CONSTRUC	TION INC
Inspector Signature: Keil Tw	viford	ALD		



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

Frisco: (252) 475-5878

	MECHANICA	L PROJECT	
MECHANICAL PROJECT#: MEC	CH-14407		11/09/2022
Parcel Number: Location: Subdivision: Legal Description:	025327001 102 CREEFS RIDGE RD – MAI CREEF RIDGE GARDENS LOT: 1 BLK: SEC:	NTEO	
Owner Name: Owner Mail Address: Owner Contact Information:	JOHN T III COURTNEY 102 CREEFS RIDGE RD - MAI	NTEO, NC 27954	
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#:	LAND AND SEA MECHANICA 128 OBERLIN RD - WANCHE 252-473-3836 L33550		
DETAILS	RESIDENTIAL		
UNITS: Electrical Contractor ID: Units	1.00 L-28692 1	Cost of Job: MECHANICAL PROJECT FEE:	\$150 \$150.00
Comments: CHANGE OUT			
construction and be certain to information on this permit is co shown on the submitted plans revoked for failure to comply w	comply with all zoning regulation or contract. That he is owner or duly and specifications that he under with applicable regulations and large in advance) for inspections at	lations and laws, and should persona ns and building setbacks. The applica authorized agent of owner. That all o rstands this permit is valid for six mo aws. Dare County Offices Manteo Office	ant certifies that the construction shall be as nths and may be
Applicant Signature:	X	LAND AND SEA MECHAN	NICAL SERVICES LLC
Inspector Signature: Keil Tw	iford	RSF	



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

Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14606

11/21/2022

Parcel Number:

017595001

Location:

6043 HWY 64/264 - MANNS HARBOR

Subdivision:

SUBDIVISION - NONE

Legal Description:

LOT: 1 BLK: SEC:

Owner Name:

BRENT T JONES

Owner Mail Address:

6043 US HIGHWAY 64 - MANNS HARBOR, NC 27953

Owner Contact Information:

Contractor Name:

NORTH BEACH SERVICES

Contractor Mail Address:

PO BOX 181 - KITTY HAWK, NC 27949

Contractor Phone:

252-261-6293

Contractor NC License#:

L22053

DETAILS

RESIDENTIAL

UNITS:

1.00

Cost of Job:

\$8,191

Electrical Contractor ID:

24744

Units

1

MECHANICAL PROJECT FEE: \$150.00

Comments: Replacement of current HVAC system with new Trane 14 Seer pa ckaged heat pump.

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: NORTH BEACH SERVICES 11/22/2022 contact@northbeachhvac.com 928364FE97CD47A KT Inspector Signature 11/22/2022 BF937CD3D827499...



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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14673

11/28/2022

Parcel Number:

016268000

Location:

153 BRAKEWOOD RD - MANTEO

Subdivision:

BRAKEWOOD

Legal Description:

LOT: 12 BLK: SEC: 1

Owner Name:

WILLIAM W PEARCE

Owner Mail Address:

BOX 1162 - MANTEO, NC 27954

Owner Contact Information:

Contractor Name:

ALL SEASON HEATING AND COOLING

Contractor Mail Address:

PO BOX 244 - POINT HARBOR, NC 27964

Contractor Phone:

252-491-9232

Contractor NC License#:

L19091

DETAILS

RESIDENTIAL

Cost of Job:

\$7,690

Electrical Contractor ID:

34948

Units

2

MECHANICAL PROJECT FEE: \$150.00

Comments: Replace existing system with a 2 ton split system heat pump and air handler

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

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: All Season Heating and Cooling 12/29/2022

Inspector Signature: Lui Twiford

8F937CD3D827499...

11/29/2022



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

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

Frisco: (252) 475-5878

FLOOD DEVELOPMENT PERMIT

FLOOD DEVELOPMENT PERMIT#: F-14384

11/08/2022

Parcel Number:

024042000

Location:

224 BAYVIEW DR - STUMPY POINT

Subdivision:

SUBDIVISION - NONE - LOT: BLK: SEC:

Applicant Name:

VALERIE D SUTTON

Owner Name:

VALERIE D SUTTON

Owner Mail Address:

628 OAK GROVE RD - CHESAPEAKE, VA 23320

Owner Contact Information:

Establishment Type:

Flood Zone:

Ground Elevation:

Proposed Floor Elevation:

Applicant Signature:

Inspector Signature:

Keil Twiford RSF

- 1. Required elevation of lowest floor (Base Flood Elevation): 0.0.
- 2. No finished material, equipment, machinery, duct work, or insulation shall be located below the regulatory flood protection elevation.
- Areas located below the regulatory flood protection elevation shall only be used for parking, building access, and storage. These areas cannot be temperature-controlled and cannot be partitioned into separate rooms except to enclose storage areas.
- 4. Flood vents shall be installed with the total net area of the openings equal to one square inch for each one square foot of enclosed area. A minimum of two vents on different sides of the enclosed area shall be provided. The bottom of all required flood vents shall be no higher than 1 foot above the adjacent grade. Vents must remain permanently opened.
- 5. A finished construction elevation certificate prepared by a North Carolina licensed surveyor or professional engineer is required prior to the issuance of the certificate of occupancy.

Comments:



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

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

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-14238

11/01/2022

Parcel Number:

023537006

Location:

272 E R DANIELS RD – WANCHESE

Subdivision:

SUBDIVISION - NONE

Legal Description:

LOT: 4R BLK: SEC:

Owner Name:

RETRIEVER'S MARSH LLC

Owner Mail Address:

P O BOX 2059 - MANTEO, NC 27954

Owner Contact Information:

Contractor Name:

PRECISE ELECTRICAL SERVICES INC

Contractor Mail Address:

PO BOX 1227 - KILL DEVIL HILLS, NC 27948

Contractor Phone:

NA

Contractor NC License#:

U-26395

DETAILS

RESIDENTIAL

Cost of Job:

\$15,000

Amp Increase:

0

Service Amps:

200

ELECTRICAL PERMIT FEE:

\$150.00

Comments: install four poles with area flood light fixtures

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	Bryan Muthler		PRECISE ELECTRICAL SERVICES INC	
	—F988578FC19D4F3	11/1/2022	preciseelectricalservices@gmail.com	
	DocuSigned by:		. des	
Inspector Signature:	keil Twiford 8F937CD3D827499	11/1/2022	_ ALD	



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

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

Frisco: (252) 475-5878

RESIDENTIAL ADDITION

RESIDENTIAL ADDITION#: R-14272

11/02/2022

Parcel Number:

028521000

Location:

125 THE OAKS - MANTEO

Subdivision:

WILDWOODS

Legal Description:

LOT: 7 BLK: SEC: 1

Owner Name:

ALLEN G TARVER

Owner Mail Address:

125 THE OAKS - MANTEO, NC 27954

Owner Contact Information:

Contractor Name:

WAYNE COLE

Contractor Mail Address:

1003 INDIAN DR - KILL DEVIL HILLS, NC 27948

Contractor Phone:

252-256-3750

Contractor NC License#:

UNLICENSED

DETAILS

RESIDENTIAL

Cost of Job:

FEE:

\$7,500

CAMA Permit

Septic Permit

RESIDENTIAL ADDITION

\$150.00

Comments: CONSTRUCT 8X8 PANTRY ON SOUTH SIDE OF DWELLING

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:

WAYNE COLE

waynecole7575@gmail.com

Inspector Signature:

Keil Twiford / AD

ALD



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

CAROLINA							
Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	021936000 986819614137 193 OCEAN BLVD RS1 - Single Family Residential District SO/SH AMENDED PLAT B SEC 3 LOT: 23 24 BLK: 31 SEC: 3		B SEC 3	Owner: Address: Phone #:	MYERS, CHRIST 4501 SAWGRAS ALEXANDRIA, V. 703-850-4121	S CT	
BUSINESS NAME:		Caribbean Pool ar	nd Spa of the Outer Banks,	NC G.C. LICENS	SED CONTRACTOR:	Licensed General Contractor	
CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: DFFICE#:	ME:	Pete Kelly 6024 Currituck Ro Kitty Hawk, NC 27 (252) 480-2900		NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER:		73571 Limited Residential Peter Franklin Kelly	
ELL#				LIEN AGENT NA	ME:	NORTH AMERICAN TITLE	
AX#:				ENTRY#:		INSURANCE COMPANY 1779739	
MAIL:		pete@caribbeanol	ox.com	LIEN AGENT AD	DRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603	
🔲 Bulkhead - 🗌 Pi	ers/Do	cks - 🔲 Retaining \	ion - Addition / Expansi Nall - Beach Access W. uilding - Dune Deck -	alkway/Stairs -			
CCUPANCY:	- \ /		TYPE OF FOUNDATION		PERMIT TYPE	E. Posidontial	
EATED/LIVING ARE	AS (S	aFt): 0.0	HEAT:	Y •		TYPE: Vacation Cottage < 30 days	
ON-HEATED AREAS			A/C:			E: Single Family	
UMBER OF STORIE	and the second		INTERIOR WALLS:			RICT: RS1 - Single Family	
EDROOMS:			EXTERIOR WALLS:			MIT #: ZP22-000097	
EPTIC CAP. # OF PE	ERSON	IS:	FIREPLACE:			VED: 09/30/2022	
ATHS: ½ BATHS:			ROOF:		Dwelling	CONDITIONAL USE: Single Family	
ARAGE - DETACHE	-	TACHED:	INSULATION:		CAMA PERMI	Т#:	
ORAGE ENCLOSU	IRE:		ELEVATOR (SqFt):		DATE ISSUED):	
OOL: SHED:	-ll X/		DECKS (SqFt):				
LOOD ZONE: Unsha ASE FLOOD ELEVA	-	I EC Off	WINDOWS MAKE: WINDOWS TYPE:			MIT #: S22-13466	
ASE FLOOD ELEVA	IIION.	LES OIL	WINDOWS TIPE:		DATE ISSUED): U9/28/2U22	
PERMIT FEES: lescription swimming Pools			TOTAL CONSTRUCT			Total Cos 250.00 TOTAL FEE: 250.00	
ith all Ordinances of t uly authorized agent o	the Tow of owne	n of Southern Shor r; that all construct	es. The applicant certifies	that the information the submitted plans	on on this permit is corr s and specifications; th	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is s.	
pplicant - Owner/Co	ntract	or	(Please print	and sign name)	and the same of th	09/30/2022 Date Approved	
Kiin	(11	N.				11-1-2	
uilding/Code/Zoning	Offici	al		**************************************		Date Issued	
A.i.	, o i					11.1.1	
101. KA	١					11.1.7	



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel:	021268000		Owner:	GOFF, LARRY HITTEE
PIN: .ocation:	986806288897 9 TWELF T H AVE		Address:	5212 LOCKE LN VIRGINIA BEACH, VA 23464
District:	RS1 - Single Family	Residential District	Phone #:	757-646-0228
Subdiv	SEA CREST VILLA	GE		
ot-Block-Sect:	LOT: 7 BLK: 57 SEC	· · · · · · · · · · · · · · · · · · ·		
SUSINESS NAME: CONTRACTOR'S I DDRESS: CITY, STATE, ZIP: DFFICE#:	NAME: Mike Moran 2802 S. Wrig		NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER:	
ELL#	(===) === =		LIEN AGENT NA	AME:
AX#:			ENTRY#:	
EMAIL:	campmjm@d	charter.net	LIEN AGENT AD	DDRESS:
TYPE OF CONSTE	IONS - ALL WOOD BEI		Expansion - Remodel	/ Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, market o	age Building - Dune De		Swiffilling Pools - Workshop - J Gazebo
OCCUPANCY:	ge Co Modesony Ctor	TYPE OF FOUND		PERMIT TYPE: Residential
	AREAS (SqFt): 0.0	HEAT:		RESIDENCE TYPE: 2nd Home
ON-HEATED AR		A/C:		BUILDING USE: Single Family
		INTERIOR WALLS	S:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: EXT		EXTERIOR WALL	_S:	ZONING PERMIT #:
		FIREPLACE:		DATE APPROVED:
BATHS: ½ BATHS		ROOF:		PERMITTED/CONDITIONAL USE: Single Famil Dwelling
	CHED: ATTACHED:	INSULATION:		CAMA PERMIT #:
TORAGE ENCLO)SURE:	ELEVATOR (SqFt	:):	DATE ISSUED:
OOL: SHED:		DECKS (SqFt):		
LOOD ZONE: Un		WINDOWS MAKE		SEPTIC PERMIT #:
BASE FLOOD ELE	EVAIION: LES 8ft	WINDOWS TYPE:		DATE ISSUED:
		TOTAL CONS	TRUCTION COST: \$27,30	00.00
PERMIT FEES: Description Remodel / Renovati Homeowners Recov				Total Cos 273.0 10.0
				TOTAL FEE: 283.0
vith all Ordinances uly authorized age	of the Town of Souther ent of owner; that all cor	n Shores. The applicant ce nstruction shall be as show	ertifies that the information wn on the submitted plan	sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or as and specifications; the he/she understands this permit able regulations and laws.
Applicant - Owner	/Contractor	(Please	e print and sign name)	Date Approve
	AA = I			11 1-21
Kerni	Clain		S. (12) 27 7 . (1.17 22 22	
KUMO Building/Code/Zor	ing Official Del	MB		//-/ \(\mathred{A} \) Date Issue



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	022383504 986711566952 153 CHICAHAUK TRL RS1 - Single Family Res CHICAHAUK LOT: 504 BLK: SEC:	idential District	Owner: Address: Phone #:	REESE, PATRIC 119 SUNRISE V KITTY HAWK, NO 703-994-0872	N
BUSINESS NAME:		RACTING INC. T/A NEA	L NC G.C. LICENS	SED CONTRACTOR:	Licensed General Contractor
CONTRACTING Matt Neal P.O. Box 497 CITY, STATE, ZIP: CELL# FAX#: CONTRACTING Matt Neal P.O. Box 497 Kitty Hawk, NC 278 (252) 564-9780		7949	NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT NA ENTRY#:	on:	88083 UNLIMITED Building Matthew D Neal Old Republic Title 1797957
EMAIL:	matt@nealcontra	cting.com	LIEN AGENT A	DDRESS:	223 West Street, Suite 900, Raleigh, NC 27603
Bedroom House and F SPECIAL CONDITION TYPE OF CONSTRUCT Bulkhead - P	Pool NS - ALL WOOD BELOW	RFPE (8) FT. SHALL B	BE TREATED ansion - Remodel s Walkway/Stairs -	/ Renovation / Repair -	CONSTRUCTION - Construct New 4 Accessory - Other Workshop - Gazebo
OCCUPANCY: 8	- Accessory Storage E	TYPE OF FOUNDAT		PERMIT TYPE	- Posidontial
HEATED/LIVING ARE	AS (SaFt): 3047.0	HEAT: Heat Pump	ION. MONOPHING SIGD		TYPE: Residence
NON-HEATED AREA		A/C: Heat Pump			E: Single Family
NUMBER OF STORIE		INTERIOR WALLS: Drywall, Mixed			RICT: RS1 - Single Family
BEDROOMS: 4		EXTERIOR WALLS:	LP Smart Side	ZONING PERI	MIT #: ZP22-000108
SEPTIC CAP. # OF PI	ERSONS: 8	FIREPLACE:			VED: 11/01/2022
BATHS: 4 ½ BATHS:	1	ROOF: Other		PERMITTED/O	CONDITIONAL USE: Single Family
GARAGE - DETACHE		INSULATION: Other		CAMA PERMI	
STORAGE ENCLOSE	JRE:	ELEVATOR (SqFt):		DATE ISSUED	
POOL: 480 SHED: FLOOD ZONE: Unsha	adod V	DECKS (SqFt): 887 WINDOWS MAKE: A	ndoroon	CEDTIC DEDA	UT #. C2 42074
BASE FLOOD ELEVA				Awning DATE ISSUED	MIT #: S3-13071
DAGET LOOP LEET	MION, ELO OIL	printboard 111 L. Ca		AWING PAIL 1000LD	, 03/03/2022
PERMIT FEES: Description Plan Review Fee - Sing Heated/Living Area Fee Non-Heated Areas Fee Swimming Pools Homeowners Recovery	(Single Family)		CTION COST: \$1,200,0	00.00	Total Cost 150.00 1,828.20 455.10 250.00 10.00 TOTAL FEE: 2,693.30
with all Ordinances of t duly authorized agent o	the Town of Southern Sho	res. The applicant certif tion shall be as shown o be revoked for failure t	ies that the information on the submitted plan	on on this permit is corr s and specifications; th	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is s.
				-	11/01/2022
Applicant - Owner/Co	lack		int and sign name)		Date Approved
Building/Code/Zoning	Official By M	5			



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN:	02237 9867	79000 11764569		Owner: Address:	BORMAN, PETE 821 GEORGIA M	
ocation: District:	106 C	HICAHAUK TRL Single Family Res	sidential District	Phone #:	FAIRFAX, VT 054 802-734-7226	
ubdiv ot-Block-Sect:	CHIC	AHAUK 151 BLK: SEC:	AUK			
USINESS NAME: ONTRACTOR'S N DDRESS: ITY, STATE, ZIP: FFICE#:		Gulfstream Pools Dien Davis P.O. Box 2318 Kitty Hawk, NC 2 (252) 255-1192		NC G.C. LICENSE NC G.C. LICENSE LIMITATION: CLASSIFICATION QUALIFIER:		60217 UNLIMITED NORMAN DAVIS
ELL#		(252) 255-1192		LIEN AGENT NAM	IC.	Fidelity National Title Company,
AX#:		(252) 255-1192			IE;	LLC
MAIL:		•	eampoolsandspas.com	ENTRY#: LIEN AGENT ADD	RESS:	1798813 223 S. WEST ST SUITE 900
ESCRIPTION OF	WORK -	(Any deviation fr	om the Building Plan or	Site Plan requires pr	ior approval): ACCF	RALEIGH N.C 27603 SSORY - INSTALLATION OF
BERGLASS POO PECIAL CONDITI			/ RFPE (8) FT. SHALL BE	TREATED		
			ction - Addition / Expai			
Bulkhead -	Piers/Do	cks - 🔲 Retaining	y Wall - Beach Access	Walkway/Stairs - 🥯 S	wimming Pools -	Workshop - Gazebo
			Building - Dune Deck -		J	
CCUPANCY:	- ·	locosory olorage	TYPE OF FOUNDATION		PERMIT TYPI	F. Residential
EATED/LIVING A	REAS (S	α F t): 0 0	HEAT:	OIT.	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED	TYPE: Vacation Cottage < 30 days
ON-HEATED ARE			A/C:	BUILDING USE: Si		
NUMBER OF STORIES:		INTERIOR WALLS:	INTERIOR WALLS:		ZONING DISTRICT: RS1 - Single Family Residential District	
EDROOMS:			EXTERIOR WALLS:		The same of the sa	MIT #: ZP22-000107
EPTIC CAP. # OF	PERSO	NS : 10	FIREPLACE:		DATE APPRO	OVED: 10/31/2022
ATHS: ½ BATHS			ROOF:		Dwelling	CONDITIONAL USE: Single Family
ARAGE - DETAC		TACHED:	INSULATION:		CAMA PERM	The state of the s
TORAGE ENCLO	SURE:		ELEVATOR (SqFt):		DATE ISSUEI):
OOL: SHED:	·		DECKS (SqFt):			
LOOD ZONE: Uns		The second secon	WINDOWS MAKE:		And the second s	MIT #: S5-13949
ASE FLOOD ELE	VATION:	LES 8ft	WINDOWS TYPE:		DATE ISSUEI	D: 10/18/2022
PERMIT FEES:			TOTAL CONSTRU	CTION COST: \$63,485.	00	
Description Swimming Pools						Total Cost 250.00
*Tb	21-1	and the state of t				TOTAL FEE: 250.00
ith all Ordinances	nuer are	responsible to cor vn of Southern Sh	nply with all regulations a ores. The applicant certific	na laws; snoula perso es that the information	nally inspect all cons	truction and be certain to comply rect; that he/she is the owner or
ıly authorized ager	ગt of own	er; that all constru	ction shall be as shown o	n the submitted plans :	and specifications; th	ne he/she understands this permit is
lid for 180 days to	begin co	nstruction and ma	y be revoked for failure to	comply with applicab	le regulations and lav	vs.
ITYVUNI	VIII	1 IH A	inna mui	rag		
pplicant - Owner/	Contract	or	/Place pris	nt and sign name)		10/31/2022
			(Flease prii	n and sign name)		Date Approved
CUITÀ (&Ci)) H				11-1-2038
		1	<i>h</i> /			Date Issued
uilding/Code/Zon	ing Offic	ial \mathbb{K}_{1} ν N	V3			Date 153ueu
		Dy "	- 0			



TOWN OF SOUTHERN SHORES

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

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

NSTALLATION & STOPECIAL CONDITION TYPE OF CONSTRUCT Bulkhead - Pi Detached Garage DCCUPANCY: HEATED/LIVING AREA ION-HEATED AREA	392 SEA OATS TO SOUTHERN SHOUTHERN S	PH M III RAIL PRES, NC 27949 om the Building Plan RFPE (8) FT. SHALL ction - Addition / Ex	NC G.C. LICENS LIMITATION: CLASSIFICATIOI QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD or Site Plan requires p BE TREATED xpansion - Remodel / ess Walkway/Stairs -	N: ME:
Subdiv Sut-Block-Sect: BUSINESS NAME: CONTRACTOR'S NAME DESCRIPTION OF WORK STALLATION & STOCK PECIAL CONDITION TYPE OF CONSTRUCTOR Detached Garage DCCUPANCY: HEATED/LIVING AREA BUMBER OF STORIE BEDROOMS:	SO/SH BLK 60 LOT: 85 BLK: 60 SEC: ME: BERTINI, JOSEF 392 SEA OATS TI SOUTHERN SHO 252-255-1192 252-255-1192 ORK – (Any deviation from the Company of the C	PH M III RAIL PRES, NC 27949 om the Building Plan REPE (8) FT. SHALL ction - Addition / Es Wall - Beach Acce Building - Dune De	NC G.C. LICENS NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIOI QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD or Site Plan requires p BE TREATED xpansion - Remodel / ess Walkway/Stairs -	ED CONTRACTOR: E NUMBER: N: ME: DRESS: Orior approval): ACCESSORY - NEW POOL (Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
OT-Block-Sect: SUSINESS NAME: CONTRACTOR'S NAIDDRESS: SITY, STATE, ZIP: OFFICE#: ELL# AX#: MAIL: ESCRIPTION OF WORNSTALLATION & STOPECIAL CONDITION TYPE OF CONSTRUCT Bulkhead - Pi Detached Garage OCCUPANCY: SEATED/LIVING ARE SEDROOMS:	ME: BERTINI, JOSEF 392 SEA OATS TO SOUTHERN SHOUTHERN SH	RAIL PRES, NC 27949 om the Building Plan REPE (8) FT. SHALL ction - Addition / Ex Wall - Beach Acces Building - Dune De	NC G.C. LICENS LIMITATION: CLASSIFICATIOI QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD or Site Plan requires p BE TREATED xpansion - Remodel / ess Walkway/Stairs -	E NUMBER: N: ME: DRESS: Orior approval): ACCESSORY - NEW POOL (Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
USINESS NAME: ONTRACTOR'S NAIDDRESS: ITY, STATE, ZIP: OFFICE#: ELL# AX#: MAIL: ESCRIPTION OF WORN STALLATION & STOPECIAL CONDITION TYPE OF CONSTRUCT Bulkhead - Pi Detached Garage OCCUPANCY: IEATED/LIVING ARE ION-HEATED AREA	ME: BERTINI, JOSEF 392 SEA OATS TI SOUTHERN SHO 252-255-1192 252-255-1192 ORK – (Any deviation fr DRAGE SHED IS - ALL WOOD BELOW CTION: New Construction of the cons	RAIL PRES, NC 27949 om the Building Plan REPE (8) FT. SHALL ction - Addition / Ex Wall - Beach Acces Building - Dune De	NC G.C. LICENS LIMITATION: CLASSIFICATIOI QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD or Site Plan requires p BE TREATED xpansion - Remodel / ess Walkway/Stairs -	E NUMBER: N: ME: DRESS: Orior approval): ACCESSORY - NEW POOL (Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
ONTRACTOR'S NAIDDRESS: ITY, STATE, ZIP: FFICE#: ELL# AX#: MAIL: ESCRIPTION OF WORK OF THE CONDITION YPE OF CONSTRUCT Bulkhead - Pi Detached Garage ICCUPANCY: EATED/LIVING ARE ON-HEATED AREA UMBER OF STORIE EDROOMS:	392 SEA OATS TO SOUTHERN SHOUTHERN S	RAIL PRES, NC 27949 om the Building Plan REPE (8) FT. SHALL ction - Addition / Ex Wall - Beach Acces Building - Dune De	NC G.C. LICENS LIMITATION: CLASSIFICATIOI QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD or Site Plan requires p BE TREATED xpansion - Remodel / ess Walkway/Stairs -	E NUMBER: N: ME: DRESS: Orior approval): ACCESSORY - NEW POOL (Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
DDRESS: ITY, STATE, ZIP: FFICE#: ELL# AX#: MAIL: ESCRIPTION OF WORK ISTALLATION & STO PECIAL CONDITION YPE OF CONSTRUCT Bulkhead - Pi Detached Garage CCUPANCY: EATED/LIVING ARE ON-HEATED AREA: UMBER OF STORIE	392 SEA OATS TO SOUTHERN SHOUTHERN S	RAIL PRES, NC 27949 om the Building Plan REPE (8) FT. SHALL ction - Addition / Ex Wall - Beach Acces Building - Dune De	LIMITATION: CLASSIFICATION QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD or Site Plan requires p BE TREATED EXPANSION - Remodel / CLASSIFICATION REMODEL / CLASSIFICATIO	N: ME: DRESS: prior approval): ACCESSORY - NEW POOL Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
ITY, STATE, ZIP: FFICE#: ELL# AX#: MAIL: ESCRIPTION OF WAISTALLATION & STOPECIAL CONDITION YPE OF CONSTRUCT Bulkhead - Pi Detached Garage ICCUPANCY: EATED/LIVING ARE ON-HEATED AREA: UMBER OF STORIE EDROOMS:	SOUTHERN SHO 252-255-1192 252-255-1192 ORK – (Any deviation fr DRAGE SHED IS - ALL WOOD BELOW CTION: New Constructions of the construction of th	om the Building Plan / RFPE (8) FT. SHALL ction - Addition / Expression Beach Accessions Dune DefityPE OF FOUND	CLASSIFICATION QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD TO OF Site Plan requires p BE TREATED EXPANSION - Remodel / LESS Walkway/Stairs - Remodel /	ME: DRESS: prior approval): ACCESSORY - NEW POOL Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
ELL# AX#: MAIL: ESCRIPTION OF WO ISTALLATION & STO PECIAL CONDITION YPE OF CONSTRUCT Bulkhead - Pi Detached Garage OCCUPANCY: EATED/LIVING ARE ON-HEATED AREA: UMBER OF STORIE	252-255-1192 ORK – (Any deviation from the Company of the Company	tion - Addition / Exit Wall - Beach Accessibilities - Dune De	LIEN AGENT NA ENTRY#: LIEN AGENT AD TO OF SITE Plan requires p BE TREATED EXPANSION - Remodel / ESS Walkway/Stairs - Cock - Generator	DRESS: prior approval): ACCESSORY - NEW POOL Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
AX#: MAIL: ESCRIPTION OF WO ISTALLATION & STO PECIAL CONDITION YPE OF CONSTRUCT Bulkhead - Pi Detached Garage ICCUPANCY: EATED/LIVING ARE ON-HEATED AREA: UMBER OF STORIE	ORK – (Any deviation from the DRAGE SHED IS - ALL WOOD BELOW CTION: New Construction New Construction Accessory Storage ID ACCESSORY ST	tion - Addition / Exit Wall - Beach Accessibilities - Dune De	ENTRY#: LIEN AGENT AD TO OF SITE Plan requires p BE TREATED EXPANSION - Remodel / Ress Walkway/Stairs - Ack - Generator	DRESS: prior approval): ACCESSORY - NEW POOL Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
ESCRIPTION OF WO ISTALLATION & STOPECIAL CONDITION YPE OF CONSTRUCT Bulkhead - PORTION Detached Garage CCUPANCY: EATED/LIVING ARE ON-HEATED AREA UMBER OF STORIE EDROOMS:	CTION: New Construiters/Docks - Retaining - Accessory Storage I	tion - Addition / Exit Wall - Beach Accessibilities - Dune De	LIEN AGENT AD or Site Plan requires p BE TREATED xpansion - Remodel / ess Walkway/Stairs - ck - Generator	Prior approval): ACCESSORY - NEW POOL Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
STALLATION & STOPECIAL CONDITION YPE OF CONSTRUCT Bulkhead - Priction Detached Garage CCUPANCY: EATED/LIVING AREA UMBER OF STORIE EDROOMS:	CTION: New Construiters/Docks - Retaining - Accessory Storage I	tion - Addition / Exit Wall - Beach Accessibilities - Dune De	xpansion - Remodel / ess Walkway/Stairs -	Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
YPE OF CONSTRUCT Bulkhead - Pi Detached Garage CCUPANCY: EATED/LIVING ARE ON-HEATED AREA UMBER OF STORIE EDROOMS:	CTION: New Construiters/Docks - Retaining - Accessory Storage I	ction - Addition / E: Wall - Beach Acco Building - Dune De TYPE OF FOUND	xpansion - Remodel / ess Walkway/Stairs - Ack - Generator	Swimming Pools - Workshop - Gazebo
Bulkhead - Pi Detached Garage OCCUPANCY: IEATED/LIVING ARE ION-HEATED AREA: IUMBER OF STORIE IEDROOMS:	lers/Docks - Retaining - Accessory Storage I	Wall - Beach Acce Building - Dune De	ess Walkway/Stairs - 🛭	Swimming Pools - Workshop - Gazebo
Detached Garage CCUPANCY: EATED/LIVING ARE ON-HEATED AREA UMBER OF STORIE EDROOMS:	Accessory Storage I	Building - Dune De	ck - Generator	
CCUPANCY: IEATED/LIVING ARE ION-HEATED AREA: IUMBER OF STORIE IEDROOMS:	AS (SqFt): 0.0	TYPE OF FOUND		PERMIT TYPE: Residential
EATED/LIVING ARE ON-HEATED AREA: UMBER OF STORIE EDROOMS:			ATION:	PERMIT LIPE: Residential
ON-HEATED AREA UMBER OF STORIE EDROOMS:		INCAL.		RESIDENCE TYPE: Residence
UMBER OF STORIE	3 (34rt). 200	A/C:		BUILDING USE: Single Family
EDROOMS:				ZONING DISTRICT: RS1 - Single Family
The state of the second				Residential District
CPTIC CAP. # OF PI			S :	ZONING PERMIT #: ZP22-000109 DATE APPROVED: 11/01/2022
.~!!O // D. T.!O	EKSUNS.	FIREPLACE:		PERMITTED/CONDITIONAL USE: Single Family
ATHS: ½ BATHS:		ROOF:		Dwelling
ARAGE - DETACHE		INSULATION:		CAMA PERMIT #:
TORAGE ENCLOSU	JRE: 288	ELEVATOR (SqFt));	DATE ISSUED:
OOL: SHED:	1.1.1.	DECKS (SqFt):		GERTIO REPAIR # 000 40404
LOOD ZONE: Unsha		WINDOWS MAKE		SEPTIC PERMIT #: S22-13431
ASE FLOOD ELEVA	TION: LES 8π	WINDOWS TYPE:		DATE ISSUED: 09/27/2022
	ACCESSOR OF THE SECOND	TOTAL CONST	TRUCTION COST: \$48,000	0.00
PERMIT FEES: Description			•	Total Cost
Non-Heated Areas Fee	(Single Family)			86.40
Swimming Pools	= -,			250.00
				TOTAL FEE: 336.40
ith all Ordi na nces of t uly authorized agent o	the Town of Southern Shoof owner; that all constru	ores. The applicant cer ction shall be as show	rtifies that the informatio on the submitted plans	onally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or s and specifications; the he/she understands this permit i
illulior for gays to be	A The structure and ma	JAM Tor railur		ible regulations and laws.
			ra en emercia de la comenticada de la comencia de l	11/01/2022
policant - Owner/Co	ontractor	(Please	print and sign name)	Date Approved
KOIMA	(1/1 /2 b)			11-2-202
100111	CX CMAC		antisten akutsusususus teksusisisustantan tuntus asas a	Date Issued
uilding/Code/Zoning	g Official			
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5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 02, 2022

TP22-000191	l	
Mechanical '	Trade	Permit

Project Address: 37 SKYLINE RD

Property Owner: BERRYMAN, GRAY LEE

PIN #: 022880000

Mailing Address: 37 SKYLINE RD

SOUTHERN SHORES, NC 27949

Permit Types: Plumbing Electrical Mech Contractor:	nanical Gas	
Company Name: Surfside Heating and Phone: (252) 261-4949 N. C. License Number: L.20077	l Air Conditioning, Inc	Qualifier: Robert K Eike Address: 124 Fox Knoll Dr Harbinger, NC 27941
Description of Work: REPLACE 3.5	TON CARRIER 14 SEER HEA	AT PUMP & AIR HANDLER

approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative



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RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

BUILDING PERMIT # DPA22-000214

Parcel:	021121000		Owner:	4 FIFTH AVENUE	E, LLC	
PIN:	986810464211 4 FIFTH AVE RS1 - Single Family Residential District		Address:	C/O MARSHALL CRSS		
Location: District:			Phone #:	RICHMOND, VA	23226	
Subdiv	SEA CREST VILLAG		riione #.	M		
Lot-Block-Sect:	LOT: 2 BLK: 50 SEC:					
BUSINESS NAME: CONTRACTOR'S NA	KICZ Mainten AME: J. Wesley Live		NC G.C. LICENS	ED CONTRACTOR: E NUMBER:	Licensed General Contractor 84184	
ADDRESS:	P.O. Box 875		LIMITATION:		LIMITED	
CITY, STATE, ZIP: DFFICE#:	Grandy, NC 2		CLASSIFICATION	N:	RESIDENTIAL	
OFFICE#: CELL#	(252) 619-259	19	QUALIFIER: LIEN AGENT NA	ME.	BARRY RICHARD NEIER	
AX#:			ENTRY#:	IVIL.		
EMAIL:	kiczmaintenar	nce@yahoo.com	LIEN AGENT AD	DRESS:		
TYPE OF CONSTRU	DNS - ALL WOOD BEL JCTION: New Cons Piers/Docks - Retain		Expansion - Remodel / Ress Walkway/Stairs -		Accessory - Other Workshop - Gazebo	
OCCUPANCY:		TYPE OF FOUND		PERMIT TYPE	: Residential	
HEATED/LIVING AREAS (SqFt): 0.0 HEAT:				RESIDENCE TYPE: Vacation Cottage < 3		
NON-HEATED AREAS (SqFt): 0 A/C:				E: Single Family		
NUMBER OF STORIES:		INTERIOR WALLS	3:	ZONING DIST Residential Dis	RICT: RS1 - Single Family strict	
BEDROOMS: EXTERIOR WALL		S:	ZONING PER	MIT #:		
SEPTIC CAP. # OF F	PERSONS:	FIREPLACE:		DATE APPRO		
BATHS: ½ BATHS:		ROOF:		PERMITTED/O	CONDITIONAL USE: Single Family	
GARAGE - DETACH		INSULATION:		CAMA PERMI	Т#:	
TORAGE ENCLOS	URE:	ELEVATOR (SqFt)):	DATE ISSUED):	
POOL: SHED:	4.4.6.	DECKS (SqFt):				
LOOD ZONE: VE -		WINDOWS MAKE		SEPTIC PERM	AIT #:	
BASE FLOOD ELEV Freeboard	ATION: Plus 3 ft of	WINDOWS TYPE:		DATE ISSUED):	
PERMIT FEES: Description Remodel / Renovation Homeowners Recover	n / Repair Fee		TRUCTION COST: \$9,100		Total C c 91. 10.	
Minimum Permit Fee					9.0 TOTAL FEE: 110.0	
vith all Ordinances of luly authorized agent	f the Town of Southern t of owner; that all cons	Shores. The applicant ce truction shall be as show	rtifies that the information	n on this permit is corr and specifications; th	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit i /s.	
,					11/03/2022	
Applicant - Owner/C	ontractor	(Please	print and sign name)		Date Approve	

Building/Code/Zoning Official



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	7 FOURS1 - SEA	85000 0454445 JRTH AVE Single Family Resid CREST VILLAGE 6 BLK: 48 SEC:	ential District	Owner: Address: Phone #:	NYSTROM, JON 23022 IVY HOLLO GLEN ALLEN, VA 804-310-6640	OW CT
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#:	AME:	ROBERT J GOME CONTRACTOR IN ROBERT J GOME 3110 BAY DRIVE KILL DEVIL HILLS	C Z	NC G.C. LICENSI LIMITATION: CLASSIFICATION QUALIFIER:	N :	Licensed General Contractor 43276 INTERMEDIATE RESIDENTIAL ROBERT J GOMEZ JR. NORTH AMERICAN TITLE
CELL#				LIEN AGENT NAI	ME:	INSURANCE COMPANY
FAX#:				ENTRY#:		1800835
EMAIL:		RGOMEZJR3110@	GMAIL.COM	LIEN AGENT ADI	DRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603
Bulkhead - I Detached Garage	JCTION Piers/Do	: New Constructi	on - Addition / Expa	Walkway/Stairs - 🔲 :		Accessory - Other Workshop - Gazebo
OCCUPANCY: 12			TYPE OF FOUNDATI	ON: Pile	PERMIT TYPE	
HEATED/LIVING AR			HEAT: Heat Pump			「YPE: Vacation Cottage < 30 days
NON-HEATED ARE	AS (SqF	ft): 802	A/C: Heat Pump			E: Single Family
NUMBER OF STOR	I ES: 3		INTERIOR WALLS: S		ZONING DIST Residential Dis	RICT: RS1 - Single Family strict
BEDROOMS: 6			EXTERIOR WALLS: 5			MIT #: ZP22-000112
SEPTIC CAP. # OF I	PERSO	NS: 12	FIREPLACE: Gas		-	VED:09/29/2022
BATHS: 5 1/2 BATHS	: 2		ROOF: Asphalt		PERMITTED/O	CONDITIONAL USE: Single Family
GARAGE - DETACH	THE RESERVE OF THE PERSON NAMED IN	TACHED:	INSULATION: Batt		CAMA PERMI	
STORAGE ENCLOS			ELEVATOR (SqFt): 2	5	DATE ISSUED):
POOL: 1,426 SHED:	CONTRACTOR AND ADDRESS OF THE PARTY OF THE P		DECKS (SqFt): 384			
FLOOD ZONE: Unsh	Maria de la compania del la compania de la compania del la compania de la compania del la compania de la compania de la compan		WINDOWS MAKE: AT			MIT #: S22-14085
BASE FLOOD ELEV	ATION:	LES 8Π	WINDOWS TYPE: Do	ouble Hung	DATE ISSUED	1: 10/24/2022
MANAGEMENT OF THE PROPERTY OF	Mad Michael Common Comm		TOTAL CONSTRU	CTION COST: \$800,00	0.00	
PERMIT FEES: Description Plan Review Fee - Sir Heated/Living Area Fe Non-Heated Areas Fe Swimming Pools Homeowners Recover	ee (Single e (Single	e Family)				Total Cost 150.00 2,115.60 240.60 250.00 10.00 TOTAL FEE: 2,766.20
with all Ordinances o duly authorized agent	f the To t of own	wn of Southern Shor er; that all construct	es. The applicant certifi ion shall be as shown of be revoked for failure to	ies that the informatio on the submitted plans	n on this permit is corr and specifications; th	truction and be certain to comply ect; that he/she is the owner or the he/she understands this permit is
Applicant Owner/C	ontra-	· or	/Diagos :::::	int and alar name)		Data American
Applicant - Owner/C	ontrac	lack	(Please pri	nt and sign name)	ng mananagang	Date Approved
Building/Code/Zoni	ng Offic	ial By MC				Date Issued

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



Residential Trade Contractor Permit

Date October 28, 2022

TP22-000190

Mechanical Trade Permit

Project Address: 40 OCEAN BLVD

Property Owner: GUPTA, SUMIT

PIN #: 022614000

Mailing Address: 1314 S CROATAN HWY STE 301

KILL DEVIL HILLS, NC 27948

Permit Types:

Plumbing

Electrical

Mechanical

Gas

Contractor:

Company Name: Armstrong & Son Heating & Air, LLC

Phone: (252) 797-4100

N. C. License Number: L-22516

Qualifier: James Armstrong

Address: 3978 Albemarle Church Road

Columbia, NC 27925

Description of Work: CHANGEOUT 2.5 TON HEAT PUMP & AIR HANDLER

Project Cost Estimate: \$6,800.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

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

Signature of Licensee or Duly Authorized Representative

Data

Signature of Permit Official

Data



TOWN OF SOUTHERN SHORES

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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

BUILDING PERMIT # DPA22-000213

Parcel: PIN: Location:		9036 3410631 JE PETE CT			Owner: Address:		DARDEN, NATHEN JAMES 12 BLUE PETE CT
District: Subdiv Lot-Block-Sect:	RS1 - SO/SH	Single Family Resident Residen		it '			SOUTHERN SHORES, NC 27949 252-619-1589
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	AME:	DARDEN, NATHE 12 BLUE PETE CT SOUTHERN SHOR 252-619-1589 252-619-1589)	NC G.C. L LIMITATIO CLASSIFI QUALIFIE LIEN AGE ENTRY#:	LICENSE NU DN: ICATION:	
DESCRIPTION OF W	/ORK – (NS - ALI	Any deviation fro _ WOOD BELOW I	m the Buildir RFPE (8) FT.	ng Plan or SHALL BE	Site Plan req E TREATED	uires prior :	approval): REMODEL -REPLACE FRONT STEPS
TYPE OF CONSTRU	ICTION:	New Construct	ion - Add	lition / Expar	nsion - Re	emodel / Rend	ovation / Repair - Accessory - Other
Bulkhead - F	Piers/Dock	ks - Retaining V	Vall - Bea	ach Access	Walkway/Stairs		· · · · · · · · · · · · · · · · · · ·
Detached Garage	-] A	ccessory Storage Bu					Workeries Gazene
OCCUPANCY:			TYPE OF F) (PERMIT TYPE: Residential
HEATED/LIVING AR	EAS (Sq	Ft): 0.0	HEAT:	CONDAIN			RESIDENCE TYPE: Residence
NON-HEATED AREA			A/C:			6-m-18-004-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	BUILDING USE: Single Family
NUMBER OF STORI			INTERIOR	MALLS.			ZONING DISTRICT: RS1 - Single Family
						-	Residential District
BEDROOMS: SEPTIC CAP. # OF P	FDCOM	2	EXTERIOR	Name and Address of the Owner, where the Owner, which the			ZONING PERMIT #:
SEPTIC CAP, # OF P	ERSON);	FIREPLACI	E:			DATE APPROVED:
BATHS: 1/2 BATHS:			ROOF:				PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACH		ACHED:	INSULATIO	N:			CAMA PERMIT #:
STORAGE ENCLOS	URE:		ELEVATOR	(SqFt):		***	DATE ISSUED:
POOL: SHED:			DECKS (Sq	THE RESERVE OF THE PARTY OF THE			
FLOOD ZONE: AE - 4			WINDOWS				SEPTIC PERMIT #:
BASE FLOOD ELEV	ATION: I	_ES 8 ft	WINDOWS	TYPE:			DATE ISSUED:
							NOT COMMENCE AND MADE AND MADE AND A STATE OF THE AND A STATE OF THE AND ADDRESS OF THE AND ADDRESS OF THE ADDR
PERMIT FEES: Description Remodel / Renovation Minimum Permit Fee	/ Repair f	Fee	TOTAL	CONSTRU	CTION COST:	\$2,000.00	Total Cost 20.00 80.00
Misc. Fee VIOLATION	FEE						100.00
***The owner and built	dar ara ra	annaible to comm	in a salar a la company				TOTAL FEE: 200.00
with all Ordinances of	of owner	that all construct	es. The applic ion shall be a	cant certifie s shown or	s that the info	ormation on i	vinspect all construction and be certain to comply this permit is correct; that he/she is the owner or specifications; the he/she understands this permit is gulations and laws.
MICHER		JOY UCK	<u>ا</u>	_ ساما ۷	1 en		11/03/2022
Applicant - Owner/Co	ontracto	r 	(F	Please prin	nt and sign na	ame)	Date Approved
Kelun (LC	uh	The state of the s				

Building/Code/Zoning Official

Date Issued



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN:	9868	38000 14248694		Owner: Address:	LOBRED, ANDRE	RL	
Location: District: Subdiv Lot-Block-Sect:	RS1 - SO/S	0 SEA OATS TRL 61 - Single Family Residential District D/SH BEACH BLKS 63 73 83 82A DT: 28 BLK: 73 SEC:		Phone #:	KITTY HAWK, NC 804-363-1981		
BUSINESS NAME: Sandscapes Inc CONTRACTOR'S NAME: Sarah Brown ADDRESS: PO Box 1664 CITY, STATE, ZIP: Kitty Hawk, NC 27949 DFFICE#:		NC G.C. LICENSED CONTRACTOR NC G.C. LICENSE NUMBER: LIMITATION: CLASSIFICATION:		CL0959			
CELL#		(252) 261 2550		QUALIFIER:	ME.	Fidelity National Title Company,	
		(252) 261-2550		LIEN AGENT NA	AIVIE:	LLC	
FAX#:				ENTRY#:		1793475 223 S. West Street, Suite 900 /	
EMAIL:		sandscapesinc@r	nsn.com	LIEN AGENT A	DDRESS:	Raleigh, NC 27603	
TYPE OF CONSTR Bulkhead - Detached Garage	W RFPE UCTION Piers/Do	(8) FT. SHALL BE : New Constructions Retaining	tion - Addition / E	xpansion - Remodel ess Walkway/Stairs -	/ Renovation / Repair - 🗸 Swimming Pools - 🔲 v		
OCCUPANCY:			TYPE OF FOUND	ATION:	PERMIT TYPE	: Residential	
HEATED/LIVING A	REAS (S	i qFt): 0.0	HEAT:			YPE: Residence	
NON-HEATED ARE			A/C:		BUILDING USE	≣: Single Family	
NUMBER OF STOR	RIES:		INTERIOR WALLS:		ZONING DISTF Residential Dist	RICT: RS1 - Single Family trict	
BEDROOMS:			EXTERIOR WALLS	S:	THE RESIDENCE OF THE PARTY OF T	IIT #: ZP22-000115	
SEPTIC CAP. # OF	PERSO	NS:	FIREPLACE:			/ED: 11/07/2022	
BATHS: ½ BATHS			ROOF:		Dwelling	ONDITIONAL USE: Single Family	
GARAGE - DETAC		TACHED:	INSULATION:		CAMA PERMIT		
STORAGE ENCLO: POOL: SHED:	SURE:		ELEVATOR (SgFt)		DATE ISSUED:		
FLOOD ZONE: Uns	hadad V		DECKS (SqFt): WINDOWS MAKE	•	SEPTIC PERM	IT 4.	
BASE FLOOD ELE			WINDOWS TYPE:		DATE ISSUED:		
BASE FLOOD ELE	VATION	LES OIL	IMINDOWS ITPE:		DATE 133UED:		
DEDINT FEEC.	***************************************		TOTAL CONST	FRUCTION COST: \$28,00	0.00		
PERMIT FEES: Description Non-Heated Areas Foundation Minimum Permit Fee		e Family)				Total Cost 36.00 64.00 TOTAL FEE: 100.00	
with all Ørdinances o duly authorized ager	of the To at of own	wn of Southern Sho er; that all construc	res. The applicant ce tion shall be as show	rtifies that the information In on the submitted plan	on on this permit is corre	uction and be certain to comply ect; that he/she is the owner or he/she understands this permit is s.	
-X	-	_/_				11/07/2022	
Applicant Owner	Contrac			print and sign name)		Date Approved	
		Kevrin	Clark By Nib		nanananan marinan	11-7-2021	
Building/Code/Zon	ing Offic	ial	By MB			Date Issued	



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

District: 851-Single Family Residential District: RS1-Single Family RS2-Single Famil			······································	miindas (minima de mandiana de mandida de ma				
Location: 44 A HICKORY TRL RS1 - Single Family Residential District Subdiv SO/SH SOUNDSIDE BLK 104	Parcel:					•		
District: RS1 - Single Family Residential District So/SH SOUNDISCE BLK 104 SEC: Subdity SO/SH SOUNDISCE BLK 104 SEC: NC G.C. LICENSED CONTRACTOR: Licensed General Contractor 76259 SONTRACTOR'S NAME: Dan Osman NC G.C. LICENSED NUMBER: 76259 CONTRACTOR'S NAME: Dan Osman NC G.C. LICENSED NUMBER: 76259 CONTRACTOR'S NAME: Dan Osman NC G.C. LICENSED NUMBER: 76259 FOR 7403 LIMITATION: Limited District Number No. 100 Sec. LIMITATION: Limited District Number No. 100 Sec. LIMITATION: Limited District Number Numb					Address.			
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BUSINESS NAME: Dan Gemen NC G.C. LICENSED CONTRACTOR: Licensed General Contractor 76259 April 2004 (C.G. LICENSE NUMBER: Dan Gemen NC G.C. LICENSE NUMBER: T6259 April 2014 (C.G. LICENSE NUMBER: Dan Gemen NC G.C. LICENSE NUMBER: T6259 April 2014 (C.G. LICENSE NUMBER: Dan Gemen NUMBER: Dan General Contractor 76259 (LILL) (C.G. LICENSE NUMBER: Daniel S. Osman Contractor (C.G. LICE	Subdiv			104				
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ADDRESS: PO Box 7403 CITY, STATE, ZIP: Kill Devil Hills, NC 27948 CITY, STATE, ZIP: (252) 202-4599	BUSINESS NAME:	. A M.E.						
CITY, STATE, ZIP: KIII Down Hills, NC 27948 CLASSIFICATION: Building OperFICE#: (252) 202-4599 QUALIFIER: Daniel S. Osman OperFICE#: (252) QUALIFIER: Daniel S. Osman OperFICE#: (252) QUALIFIER: Daniel S. Osman OperFICE#: (252) QUALIFIER: Daniel S. Osman OperFICE#: Daniel S. O	ADDRESS: PO Box 7403 CITY, STATE, ZIP: Kill Devil Hills, NO DFFICE#: (252) 202-4599					NUMBER.		
OFFICE#: (252) 202-4599 CELL# (252) 202-4599 CELL# (252) 202-4599 LIEN AGENT NAME: ENTRY#: 1799109 DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): DATE SUBJECT — (Any deviation from the Building Plan or Site Plan requires prior approval): DATE SUBJECT — (Any deviation from the Building Plan or Site Plan requires prior approval): DATE SUBJECT — (Any deviation from the Building Plan or Site Plan requires prior approval): DATE SUBJECT — (Any deviation from the Building Plan or Site Plan r				27948		:		
ENTRY#: 1799109 ENTRY#: 1799109 1							C	
DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval):	CELL#		(252) 202-4599			NE:		
DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED TYPE OF CONSTRUCTION: New Construction - Addition / Expansion - Remodel / Renovation / Repair - Accessory - Other Bulkhead - Plens/Docks - Retaining Wall - Beach Access Walkway/Stairs - Swimming Pools - Workshop - Gazebo Detached Garage - Accessory Storage Building - Dune Deck - Generator OCCUPANCY: TYPE OF FOUNDATION: PERMIT TYPE: Residential HEATED/LIVING AREAS (SqFt): 0.0 HEAT: RESIDENCE TYPE: Vacation Cottage < 30 days NON-HEATED AREAS (Sqft): 0.1 A/C: BUILDING USE: Single Family NUMBER OF STORIES: INTERIOR WALLS: Residential District BEDROOMS: EXTERIOR WALLS: ZONING DERMIT #: ZP22-000110 SEPTIC CAP, # OF PERSONS: FIREPLACE: DATE APPROVED: 11/02/2022 BATHS: '% BATHS: DATA APPROVED: 11/02/2022 BATHS: '% BATHS: CAP APPROVED: 11/02/2022 BATHS: '% BATHS: DATE ATTACHED: INSULATION: CAMP PERMIT #: ZP22-000110 SOOR: PERMITTED/CONDITIONAL USE: Single Family Dwelling GARAGE - DETACHED: ATTACHED: INSULATION: CAMP PERMIT #: ZP22-000110 STORAGE ENCLOSURE: PLEUATOR (SgFt): DATE ISSUED: POOL: SHED: DECKS (SgFt): DATE ISSUED: POOL: SHED: DECKS (SgFt): DATE ISSUED: DATE ISSUED						DE00	1799109	
TYPE OF CONSTRUCTION: New Construction - Addition / Expansion - Remodel / Renovation / Repair - Accessory - Other Bulkhead - Piers/Docks - Retaining Wall - Beach Access Walkway/Stairs - Swimming Pools - Workshop - Gazebo Datached Garage - Accessory Storage Building - Dune Deck - Generator OCCUPANCY: TYPE OF FOUNDATION: PERMIT TYPE: Residential HEATED/LIVING AREAS (SqFt): 0.0 HEAF: RESIDENCE TYPE: Vacation Cottage < 30 days NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0.0 A/C: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): DATE APPROVED: 11/02/2022 BEDDROOMS: EXTERIOR WALLS: ZONING PERMIT #: ZP22-000110 SEPTIC CAP.# OF PERSONS: FIREPLACE: DATE APPROVED: 11/02/2022 BEATHS: ½ BATHS: ROOF: PERMIT #: DATE ISSUED: BATHS: ½ BATHS: ROOF: DATE ISSUED: DATE ISSUED: POOL: SHED: DECK (SqFt): DATE ISSUED: POOL: SHED: DECK (SqFt): DATE ISSUED: TOTAL CONSTRUCTION COST: \$30,500.00 TOTAL FEE: 250.00 **The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or lably sultporized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is correct; that he/she is the owner or lably sultporized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is correct; that	=MAIL:		osmandanny@gma	all.com	LIEN AGENT ADD	PRESS:		
OCCUPANCY: TYPE OF FOUNDATION: PERMIT TYPE: Residential HEATED/LIVING AREAS (SqFt): 0.0 HEAT: RESIDENCE TYPE: Vacation Cottage < 30 days NON-HEATED AREAS (SqFt): 0 A/C: BUILDING USE: Single Family NUMBER OF STORIES: BEDROOMS: EXTERIOR WALLS: BEDROOMS: EXTERIOR WALLS: SEPTIC CAP. # OF PERSONS: BATHS: ROOF: BATHS: BATHS: GARAGE - DETACHED: ATTACHED: BOLOSURE: ELEVATOR (SqFt): DOATE ISSUED: POOL: SHED: FLOOD ZONE: Unshaded X WINDOWS MAKE: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: PERMIT FEES: DATE ISSUED: TOTAL CONSTRUCTION COST: \$30,500.00 DEScription Swimming Pools "The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or withy authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is railid for 18D days to begin construction and may be revoked for failure to comply with applicable regulations and laws. Applicant - Owner/Contractor (Please print and sign name) Date Approved	TYPE OF CONSTR	UCTION Piers/Doc	. New Constructi	on - Addition / Ex	pansion - Remodel / I ss Walkway/Stairs - S	Renovation / Repair -		
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Kamo Mari	$+ \angle$			11-8-		THE TAX STORE	11/02/2022	
KUM Clark Pate Issued By MB Date Issued	Applicant - Owner/	Contract	or	(Please p	orint and sign name)		Date Approved	
Building/Code/Zoning Official By MB Date Issued	Kli	Mn	(Orx L	,			11-0-10	
By	Building/Code/Zoni	ing Offic	ial //	118		na na n	Date Issued	
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5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 04, 2022

TP22-000192	
Mechanical Trade	Permit

Project Address: 37 FAIRWAY DR Property Owner: COSTA, BARBARA

PIN #: 022356003

Mailing Address: 37 FAIRWAY DR

			SOUTHERN SHORES, NC 27949
Permit Types: Plumbing Electi Contractor:	rical 🏻 Mecha	nical 🗀 Gas	
Company Name: R.A. F Phone: (252) 261-2008 N. C. License Number:		AIR CONDITIONING	Qualifier: JAYDEN CHUTSKOFF Address: P.O. BOX 179 KITTY HAWK, NC 27949
Description of Work:	DOUBLE C/O TF 5-TON 1 6 SEER		SYSTEM.NEW STAND AND DUCT MODS.TRANE
Project Cost Estimate:	\$24,852.00	Permit Amount: 150.0	0

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

Signature of Licensee or Duly Authorized Representative

Permit Details | Citizenserve

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

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



Trade Contractor Permit

Date November 04, 2022

TP22-000193							
Mechanical Trac	le Permit						

Project Address: 243 DUCK RD Property Owner: KIMMEL, DAVID L

PIN #: 021618000

Mailing Address: 418 W ORANGE ST

LITITZ, PA 17543

Permit Types: Plumbing Elector:	trical 🧐 Mech	anical □Gas	
Company Name: R.A. Phone: (252) 261-2008 N. C. License Number		& AIR CONDITIONING	Qualifier: JAYDEN CHUTSKOFF Address: P.O. BOX 179 KITTY HAWK, NC 27949
Description of Work:	SINGLE MINI S SYSTEM THAT	PLIT INSTALL MITSUBISHI 18 WILL SERVICE THE UPSTAIF	8 SEER 1.5 TON DUCTLESS MINI SPLIT H/P RS. NEW STAND

Signature of Licensee or Duly Authorized Representative



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

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

-4 KOLINA			_	OILDING I LIKIV	III # DPA22-000215
PIN: Q Location: T District: F Subdiv S	021676000 986705293606 156 S DOGWOOD TF RS1 - Single Family F SO/SH SOUND BLKS OT: 3 BLK: 112 SEC	Residential District	Owner: Address: Phone #:	KONSTANZER, 156 S DOGWOO SOUTHERN SH	MAX D DD TRL ORES, NC 27949
ADDRESS: CITY, STATE, ZIP: OFFICE#:	ONTRACTOR'S NAME: Kevin Lineberg DDRESS: 201-A Etheridg ITY, STATE, ZIP: Manteo, NC 27		NC G.C. LICENSEI NC G.C. LICENSE LIMITATION: CLASSIFICATION: QUALIFIER:	NUMBER:	Licensed General Contractor 78077 Limited Building
CELL#			LIEN AGENT NAM	F•	Kevin Lineberger INVESTORS TITLE INSURANCE
AX#:	(252) 305-8259	9	ENTRY#:	_,	CO
MAIL:	millstonemarine	e@gmail.com	LIEN AGENT ADDI	RESS:	1803446 223 S. WEST ST SUITE 900 RALEIGH N.C 27603
1010	ADDOMS - Keralili	Building - Dune Deck	pansion - Remodel / Ress Walkway/Stairs - Sw	enovation / Repair -	Accessory - Other Workshop - Gazebo
EATED/LIVING AREAS		TYPE OF FOUNDAT	rion:	PERMIT TYPE	Residential
ON-HEATED AREAS (5 (5gFt): 0.0 SaEt): 0	HEAT:		RESIDENCE T	YPE: Residence
		A/C:		BUILDING US	E: Single Family
UMBER OF STORIES:		INTERIOR WALLS:		ZONING DIST	RICT: RS1 - Single Family
EDROOMS: EPTIC CAP. # OF PERS		EXTERIOR WALLS:		Residential Dis	
	SONS:	FIREPLACE:		DATE APPROV	/ED:
ATHS: 1/4 BATHS:		ROOF:		PERMITTED/C	ONDITIONAL USE: Single Family
ARAGE - DETACHED: TORAGE ENCLOSURE	ATTACHED:	INSULATION:		Dwelling CAMA PERMIT	1
OOL: SHED:	• •	ELEVATOR (SqFt):		DATE ISSUED:	10/05/2022
OOD ZONE: AE - 4 ft		DECKS (SqFt):			TOTOUTLULL
ASE FLOOD ELEVATIO	N- IES 8#	WINDOWS MAKE:		SEPTIC PERMI	IT#:
7711	711. CCO 0 II	WINDOWS TYPE:		DATE ISSUED:	
ERMIT FEES: escription ulkhead, Dock, Pier, Retai. The owner and builder a h all Ordinances of the T y authorized agent of ov- id for 180 days to begin	re responsible to con Town of Southern Sho	nply with all regulations a pres. The applicant certifi	ICTION COST: \$36,735.00 and laws; should personal es that the information on the submitted plans and comply with applicable r	ly inspect all constru this permit is correc I specifications; the	Total Cost 150.00 TOTAL FEE: 150.00 Jection and be certain to comply ct; that he/she is the owner or he/she understands this permit is
RUTEN LAWRE	mercan	y De Tevoked for failure h	comply with applicable r	egulations and laws.	
plicant - Owner/Contra	actor	(Please pri	nt and sign-name)		11/03/2022
Llyn C	lark.		organ Herries		Date Approved
ilding/Code/Zoning Off	ficial				11-0-26
a Morning Off	RILIA	`			Date Issued
	MY IVAL				



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: _ocation:	N: 986707792843		Owner: Address:	SMITH, MARK E 3804 BIRDSVILLE DAVIDSONVILLE,	
District: Subdiv Lot-Block-Sect:	RS1 - Single Family SO/SH AMENDED I LOT: E & G,& 12' ST		Phone #:	443-486-2634	
SUSINESS NAME: CONTRACTOR'S NA DDRESS: SITY, STATE, ZIP: OFFICE#: ELL#	801 INDIAN	TS TRAIL DRIVE HILLS, NC 27948	NC G.C. LICENSE LIMITATION: CLASSIFICATION QUALIFIER: LIEN AGENT NAI	ı:	Licensed General Contractor 53785 UNLIMITED BUILDING ADRIAN PITTS
AX#: MAIL:	adp8088@g	mail.com	ENTRY#: LIEN AGENT ADI	DRESS:	
EXTERIOR STAIRS & SPECIAL CONDITION TYPE OF CONSTRU Bulkhead - F Detached Garage	k HANDRAILS, MAIN' NS - ALL WOOD BEI CTION: New Cor Piers/Docks - Reta	na from the Building Plan TAIN EXISITING FOOTPRI LOW RFPE (8) FT. SHALL nstruction - Addition / Ex ining Wall - Beach Acce age Building - Dune Dec	NT BE TREATED pansion - Remodel / ss Walkway/Stairs - S	Renovation / Repair -	
CCUPANCY:		TYPE OF FOUNDA		PERMIT TYPE	: Residential
EATED/LIVING AR		HEAT:			YPE: 2nd Home
ON-HEATED AREA	S (SqFt): 0	A/C:		BUILDING USI	E: Single Family
UMBER OF STORI	ES:	INTERIOR WALLS	:	ZONING DISTI Residential Dis	RICT: RS1 - Single Family trict
EDROOMS:		EXTERIOR WALLS):	ZONING PERM	/IT #:
EPTIC CAP. # OF P	ERSONS:	FIREPLACE:		DATE APPROV	
ATHS: ½ BATHS:		ROOF:		PERMITTED/C Dwelling	ONDITIONAL USE: Single Family
ARAGE - DETACH		INSULATION:		CAMA PERMIT	
TORAGE ENCLOS	URE:	ELEVATOR (SqFt):		DATE ISSUED	
OOL: SHED:		DECKS (SqFt):			
LOOD ZONE: Unsh		WINDOWS MAKE:		SEPTIC PERM	
ASE FLOOD ELEV	AIIUN: X	WINDOWS TYPE:		DATE ISSUED	
PERMIT FEES:		TOTAL CONST	RUCTION COST: \$50,000	.00	
Description Remodel / Renovation Homeowners Recover	_ ' .				Total Cost 500.00 10.00 TOTAL FEE: 510.00
rith all Ordinances of uly authorized agent	the Town of Southers of owner; that all con	n Shores. The applicant cer struction shall be as show I may be revoked for failure	tifies that the information on the submitted plans to comply with applicat	n on this permit is corre and specifications; the	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is s.
SO W	1700	Itdria.	7 1011	andrew (Spinglage)	11/03/2022
Applicant - Owner/C	ontractor Od 1. 4	(Please)	orint and sign name)		Date Approved
Building/Code/Zonin	g Official	. 1	and the second s		Date Issued



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

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000212

Parcel: PIN: Location: 022579000

District: Subdiv

BUSINESS NAME:

CITY, STATE, ZIP:

CONTRACTOR'S NAME:

(stairs to right of driveway) SPECIAL CONDITIONS -

LOT: 3 BLK: 127 SEC: Lot-Block-Sect:

986710255228 83 WILD SWAN LN

RS1 - Single Family Residential District SO/SH 114-117 126,127 200-202

Barrett & Haber, LLC, T/A Emanuelson & DadNC G.C. LICENSED CONTRACTOR:

Jackie Lewis PO Box 448

Nags Head, NC 27959 (252) 261-2212

OFFICE#: CELL# FAX#: EMAIL:

ADDRESS:

(252) 261-1115

emanuelson6705@outlook.com

oveles

Address:

LIMITATION:

QUALIFIER:

ENTRY#:

CLASSIFICATION:

LIEN AGENT NAME:

LIEN AGENT ADDRESS:

Owner:

LLOYD, BRANDON REED 5262 MOUNTAIN VIEW DR BROAD RUN, VA 20137

540-219-8462 Phone #:

NC G.C. LICENSE NUMBER:

Licensed General Contractor

87233 Limited Residential Elizha Barrett

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - rebuild front stairs - 6' wide

Other TYPE OF CONSTRUCTION: New Construction -Addition / Expansion -Remodel / Renovation / Repair -Accessory -Gazebo Workshop -Swimming Pools -Bulkhead -Piers/Docks -Retaining Wall -Beach Access Walkway/Stairs -Detached Garage -Accessory Storage Building -Dune Deck -Generator TYPE OF FOUNDATION: PERMIT TYPE: Residential OCCUPANCY: RESIDENCE TYPE: 2nd Home HEATED/LIVING AREAS (SqFt): 0.0 HEAT: BUILDING USE: Single Family NON-HEATED AREAS (SqFt): 0 A/C: ZONING DISTRICT: RS1 - Single Family NUMBER OF STORIES: INTERIOR WALLS: Residential District ZONING PERMIT #: EXTERIOR WALLS: BEDROOMS: DATE APPROVED: SEPTIC CAP. # OF PERSONS: FIREPLACE: PERMITTED/CONDITIONAL USE: Single Family BATHS: 1/2 BATHS: ROOF: . Dwelling GARAGE - DETACHED: ATTACHED: CAMA PERMIT #: INSULATION: STORAGE ENCLOSURE: ELEVATOR (SqFt): DATE ISSUED: POOL: SHED: DECKS (SqFt): WINDOWS MAKE SEPTIC PERMIT #: S22-14243 FLOOD ZONE: AE - 4 ft BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: 11/01/2022

TOTAL CONSTRUCTION COST: \$4,156.00

PERMIT FEES:

Description Remodel / Renovation / Repair Fee

Homeowners Recovery Fund Minimum Permit Fee

Total Cost

42.00 10.00 58.00

TOTAL FEE: 110.00

**The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is 188 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. valid for

Zumbrunnen fer Emanuelsen

Applicant - Owner/Contractor (Please print and sign name)

Date Approved

Building/Code/Zoning Official

Date Issued



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
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www.southernshores-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

DITTI DINIC DEDMIT # DDA22 000240

CAROLINA	WWW.saathernanticastic.gov		BUILDING PERMIT # DPAZZ-000218			
PIN: S Location: District: F Subdiv S	022420000 086716930744 100 HIGH DUNE LOOP RS1 - Single Family Resid CHICAHAUK LOT: 247 BLK: SEC:	930744 BH DUNE LOOP ingle Family Residential District 1AUK		Owner: TILLERY-BERNARD, KRIS Address: 100 HIGH DUNE LOOP SOUTHERN SHORES, NO Phone #: 252-202-4217		
BUSINESS NAME: CONTRACTOR'S NAM ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	USINESS NAME: Compass Edge Construction, Inc. DNTRACTOR'S NAME: David Buchanan 103 High Dune Loop TY, STATE, ZIP: Southern Shores, NC 27949 FFICE#: ELL# AX#:		NC G.C. LICENSED CONTRACTOR: NC G.C. LICENSE NUMBER: LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#: LIEN AGENT ADDRESS:		Licensed General Contractor 56041 Intermediate Building David Paul Buchanan Investor Title Insurance Compan 1806021 223 S. West Street, Suite 900 Raleigh, NC 27603	
concrete pool. SPECIAL CONDITIONS	ş.	-			ce old fiberglass pool with new Accessory - Other	
	rs/Docks - Retaining V					
Detached Garage -	Accessory Storage Bu	ilding - Dune Dec	k - Generator			
OCCUPANCY:		TYPE OF FOUNDA		PERMIT TYP	F- Residential	
EATED/LIVING AREA	\S /SaEt\- 0 0	HEAT:			PERMIT TYPE: Residential RESIDENCE TYPE: Residence	
ION-HEATED AREAS		IA/C:			BUILDING USE: Single Family	
NUMBER OF STORIES		INTERIOR WALLS:			TRICT: RS1 - Single Family	
BEDROOMS:		EXTERIOR WALLS:		ZONING PER	MIT #:	
SEPTIC CAP. # OF PE	RSONS:	FIREPLACE:		DATE APPRO	OVED:	
BATHS: ½ BATHS:		Noor. D		PERMITTED/ Dwelling	CONDITIONAL USE: Single Family	
GARAGE - DETACHEL	THE PARTY OF THE P	INSULATION: CAI		CAMA PERM	IT #:	
STORAGE ENCLOSU	E:	ELEVATOR (SqFt):		DATE ISSUEI	D:	
POOL: 312 SHED:		DECKS (SqFt):				
FLOOD ZONE: Unshad	ed X	WINDOWS MAKE:		SEPTIC PERI		
BASE FLOOD ELEVAT	ION; LES 8ft	WINDOWS TYPE:		DATE ISSUE);	
PERMIT FEES:	ng makaban kan kan kan panakan kan kan kan kan kan kan kan kan k	TOTAL CONSTR	RUCTION COST: \$45,000.0	00		
Description Swimming Pools					Total Cost 250.00 TOTAL FEE: 259.00	
vith all Ordinances of th luly authorized agent of	e Town of Southern Shore	es. The applicant cert ion shall be as shown be revoked for failure	ifies that the information on the submitted plans :	on this permit is con and specifications: th		
1		6-1		-	11/09/2022	
Applicant - Owner/Con	Please p		rint and sign name)		Date Approved	
Building/Code/Zoning	Official N. V.	1 /	aktivan vitranken meneri ilikuli kun digur di vitrakk kilik kelik kentikku dibinka	-4.2-	Date Issued	

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



Residential Trade Contractor Permit

Date November 08, 2022

TP22-000194	
Flectrical Trade	Dormit

Project Address: 29 PERIWINKLE PL Property Owner: NIX-KARNAKIS, NANCY LOVE TTEE	PIN #: 021673000 Mailing Address: 2504 W MEREDITH DR VIENNA, VA 22181
Permit Types: Plumbing Electrical Mechanical Gas Contractor:	
Company Name: Outer Banks Electric, Inc. Phone: (252) 473-3033 N. C. License Number: 24451	Qualifier: Chris Knight Address: 714 N Hwy 64/264 Manteo, NC 27954
Description of Work: replace meter base and service	e entrance cable. Add exterior 200 amp service disconnect
Payment:	ount: 150.00 Reference Receipt ReceivedFrom Amount
hereby certify that all information in this application is corrother local laws and ordinances and regulations. The Inspendent plans and specification for the project permitted by	rect and all work will comply with the State Building Code and all ection Department will be notified of any changes in the nerein.
Musting 2 Km 1/2 Signature of Licensee or Duly Authorized Representative	8-21 Kenn Clark 11-14-0

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



Residential Trade Contractor Permit

Date November 08, 2022

TP22-000195

Plumbing Trade Permit

Project Address: 46 GINGUITE TRL

Property Owner: GERO, MARK ROBERT

PIN #: 022519112

Mailing Address: 46 GINGUITE TRL

SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Contractor:

Electrical

Mechanical

Gas

Company Name: Absolute Plumbing

Phone: (252) 996-0691

N. C. License Number: 30190

Qualifier: Ken Long, Sr.

Address: 110 Quarter Landing Court

Harbinger, NC 27941

Description of Work:

REPLACEMENT OF HOMES WATER DISTRIBUTION PIPING & REPLACEMENT OF WATER

SERVICE LINE

Project Cost Estimate: \$17,000,00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

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

Signature of Licensee of Duly Authorized Representative

Date

Signature of Permit Official



TOWN OF SOUTHERN SHORES

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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	022596000 986714343819 74 S DOGWOOD TRL RS1 - Single Family Residential District SO/SH 114-117 126,127 200-202 LOT: 5 BLK: 202 SEC:		Owner: Address: Phone #:	EWING, WAYNE 205 BLAIR RD YORKTOWN, VA 757-771-0066	RD VN, VA 23692		
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL#	AME:	May's Landing Er Scapes Pool & La Tom May 7441 Caratoke Hi Jarvisburg, NC 27 (252) 491-5303	ghway	thern NC G.C. LICENSE NC G.C. LICENSE LIMITATION: CLASSIFICATION QUALIFIER:	E NUMBER:	Licensed General Contractor 77270 Limited Residential Thomas Harry May, Jr Premier Land Title Insurance	
FAX#:		(050) (04 5050		LIEN AGENT NAM	/IE:	Company	
EMAIL:		(252) 491-5052 admin@southerns	capesllc.com	ENTRY#: LIEN AGENT ADD	DRESS:	1786582 223 S West Street, Suite 900, Raleigh, NC 27603	
DESCRIPTION OF W	ORK - NS - AL	(Any deviation fro L WOOD BELOW	m the Building Plan o RFPE (8) FT. SHALL I	or Site Plan requires pr BE TREATED	ior approval): Install I	Pool	
Bulkhead - F	Piers/Do	cks - 🔲 Retaining	iion - 🗍 Addition / Exp Wall - 🗍 Beach Acces uilding - 🗍 Dune Deck	s Walkway/Stairs - 🚨 S	Renovation / Repair -	Accessory - Other Workshop - Gazebo	
OCCUPANCY:			TYPE OF FOUNDAT		PERMIT TYPE	: Residential	
EATED/LIVING AR		The same of the sa	HEAT:		RESIDENCE T	YPE: Residence	
ON-HEATED AREA	S (SqF	t): 0	A/C:			E: Single Family	
IUMBER OF STORI	ES:		INTERIOR WALLS:		ZONING DIST Residential Dis	RICT: RS1 - Single Family	
EDROOMS:			EXTERIOR WALLS:			MIT #: ZP22-000116	
SEPTIC CAP. # OF P	ERSON	lS:	FIREPLACE:		DATE APPRO	VED: 11/09/2022	
ATHS: ½ BATHS:	2000 1000 1000 1000 1000 1000 1000 1000		ROOF:		PERMITTED/O	CONDITIONAL USE: Single Family	
ARAGE - DETACHI		TACHED:	INSULATION:		CAMA PERMI	Т#:	
TORAGE ENCLOSE	JRE:		ELEVATOR (SqFt):		DATE ISSUED		
OOL: 686 SHED: LOOD ZONE: Unsh	0404 1/	The Control of the Co	DECKS (SqFt):				
BASE FLOOD ELEVA		I FS 8ft	WINDOWS TYPE:			IIT #: S22-12603	
, ICL I LOOD LLEV	TION,	LLO OIL	WINDOWS TYPE: DATE ISS		DATE ISSUED	JED: 08/15/2022	
PERMIT FEES: Description Swimming Pools				UCTION COST: \$60,984.		Total Cost 250,00 TOTAL FEE: 250,00	
uly authorized agent	of owne	er: that all construc	es. The applicant certi ion shall be as shown	on the submitted plans to comply with applicable	on this permit is corre	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is s.	
		0			reformation.	11/09/2022	
pplicant - Owner/Co	ontract		(Please pr	int and sign name) (Date Approved	
KUMM		rank				11-14-20	
Building/Code/Zoning	g Offici By	al Y <i>WS</i>				Daté Issued	



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COMMERCIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

CAROLINA							
Parcel: 022510000 PIN: 986720717057 Location: 5500 N CROATAL		20717057	vy	Owner: Address:	SOUTHERN SHO 610 E MOREHE CHARLOTTE, N		
District: Subdiv Lot-Block-Sect:	C - G SUBI	- General Commercial District UBDIVISION - NONE DT: BLK: SEC:		Phone #:			
CONTRACTOR'S NAME: STORMY PH ADDRESS: STORMY PH 270 LIVE OA		STORMY PHIL 270 LIVE OAK	GALLAHER MANAGEMENT GROUP INC. STORMY PHILLIPS 270 LIVE OAK ROAD NEWPORT, NC 28570		D CONTRACTOR: NUMBER:	Licensed General Contractor 73017 UNLIMITED BUILDING ZACK GALLAHER	
CELL#		(304) 923-907-	4	LIEN AGENT NAM	Æ:	WFG National Title Insurance Company	
AX#:				ENTRY#:		1809944	
EMAIL:		SPHILLIPS@M	MGMCONTRACTING .COM	LIEN AGENT ADD	RESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603	
TYPE OF CONSTR	UCTION Piers/Do	1.7.17.17.17	ing Wall - Beach Access W	sion - Remodel / I		Accessory - Other Workshop - Gazebo	
OCCUPANCY:	JC - trimit	Accessory Storag	TYPE OF FOUNDATIO		[PERMITTED/	CONDITIONAL USE: Per ZA	
HEATED/LIVING A	REAS (S	SqFt):	HEAT:		the state of the s	COMMERCIAL USE: Per ZA	
NON-HEATED ARE	THE RESERVE OF THE PERSON NAMED IN	Contract of the last of the la	A/C:		PROPERTY USE: Commercial		
NUMBER OF STOR	RIES:		INTERIOR WALLS:		ZONING DISTRICT: C - General Commercial District		
BEDROOMS:	70.70		EXTERIOR WALLS:		THE RESERVE AND ADDRESS OF THE PARTY OF THE	ZONING PERMIT #:	
SEPTIC CAP. # OF	PERSO	NS:	FIREPLACE:		DATE APPRO		
BATHS: 1/2 BATHS	THE RESERVE AND PARTY.		ROOF:		BUILDING USE: Per BL		
GARAGE - DETAC		TTACHED:	INSULATION:		CAMA PERM	IT #:	
STORAGE ENCLO	SURE:		ELEVATOR (SqFt):		DATE ISSUE	D:	
POOL: SHED:			DECKS (SqFt):				
FLOOD ZONE: Una			WINDOWS MAKE:		SEPTIC PERI		
BASE FLOOD ELE	VATION	: LES Bit	WINDOWS TYPE:	WINDOWS TYPE: DATE ISSUE		D:	
PERMIT FEES: Description Remodel / Renovation	on / Repa	ir Fee	TOTAL CONSTRUC	TION COST: \$145,000	.00	Total Cost 1,450.00 TOTAL FEE: 1,450.00	
with all Ordinance	s of the	Town of Southern er; that all const	n Shores. The applicant certif	les that the informati the submitted plans	on on this permit is c and specifications: th	struction and be certain to comply orrect; that he/she is the owner or ne he/she understands this permit is gulations and laws,	
Applicant - Owner/Contractor Kuyo Clauk		ack	N conversa	t and sign name)		Date Issued 11/16/2022	
Building/Code/Zon	ing Office	D				Date Approved	
		Bum	18			11 11-00	
		109				11-16-208	



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

COMMERCIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000217

PINI: 986720717057 Address: 610 E MORENEAD ST STE 100 Location: 5500 N CROATAN HWY District: C - General Commercial District Subdiv SUBDIVISION - NONE SUBDIVISION - NONE BUSINESS NAME: Ocean Builders LLC North From the State of Contractor Set 20 Location: 5420 North Set 20 Location: 5420 North Set 20 Location: 5420 North Set 20 North Set	CAROLINA					
DONTRACTOR'S NAME: ADDRESS: ADDRE	Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	986720717057 5500 N CROATAN HW C - General Commercia SUBDIVISION - NONE		Address:	610 E MOREHEA CHARLOTTE, NO	D ST STE 100
ENTRY#: 1805762 EMAIL: admin@oceanbldrs.com LIEN AGENT ADDRESS: 223 S West St, Ste 900, Raleight Stem AGENT ADDRESS: NC 27603 ESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL. REMODEL THE UNIT ON ITEMPORARY PAINT STORE OPERATIONS. REMOVE SOME INTERIOR WALLS; REMOVE SHELVING, REPLACE FLOORING WITH LLVR REPLACE LIGHT FIXTURES, POWER POLE AND DATA FOR POS COUNTER, REWORK PLUMBING AND HVAC AS NEEDED. TYPE OF CONSTRUCTION: New Construction — Addition / Expansion - Remodel / Renovation / Repair — Accessory — Other Detached Garage — Accessory - Stetaining Well — Beach Access Welkway/Staler — Swimming Pools — Workshop — Gazebo Detached Garage — Accessory Storege Building — Dune Deck — Generator DECUPANCY: TYPE OF FOUNDATION: PERMITTED/CONDITIONAL USE; Per ZA LEATED/LIVING AREAS (SqFt): HEAT: COMMERCIAL USE: Per ZA LEATED/LIVING AREAS (SqFt): ACC: PROPERTY USE: Commercial Volume Property Service Commercial District Property Service Commercial Dis	BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL#	AME: Thomas Twiddy 349 Water Plant Manteo, NC 279	: Rd Unit E	NC G.C. LICENS LIMITATION: CLASSIFICATIOI QUALIFIER:	E NUMBER: N:	56420 Unlimited
THE RIGHT TO RUIT EMPORARY PAINT STORE OPERATIONS, REMOVE SOME INTERIOR WALLS, REMOVE SHELVING, REPLACE FLOORING WITH LVP, REPLACE LIGHT FIXTURES, POWER POLE AND DATA FOR POS COUNTER, REWORK PLUMBING AND HVAC AS NEEDED. TYPE OF CONSTRUCTION: New Construction Addition / Expansion Remodel / Renovation / Repair Accessory Other Bulkhead Piera/Docks Retaining Wall Beach Access Walkway/Stairs Swimming Pools Workshop Gazebo Detached Garage Accessory Storage Building Dune Deck Generator Detached Garage Accessory Storage Building Dune Deck Generator DCCUPANCY: TYPE OF FOUNDATION: PERMITTED/CONDITIONAL USE: Per ZA NON-HEATED LAWING AREAS (SgFt): HEAT: COMMERCIAL USE: Per ZA NON-HEATED AREAS (SgFt): A/C: PROPERTY USE: Commercial DUMBER OF STORIES: INTERIOR WALLS: ZONING DISTRICT: C - General Commercial District District State District SEPTIC CAP. # OF PERSONS: EXTERIOR WALLS: ZONING PERMIT #: ZP22-000117 SEPTIC CAP. # OF PERSONS: FIREPLACE: DATE APPROVED: BATHS: ½ BATHS: ROOF: BUILDING USE: Per BL SARAGE - DETACHED: ATTACHED: INSULATION: CAMA PERMIT #: STORAGE ENCLOSURE: ELEVATOR (SqF0): DATE ISSUED: DOCKS (SqF0): DATE ISSUED: STORAGE ENCLOSURE: ELEVATOR (SqF0): DATE ISSUED: DATE ISSUED: DECKS (SqF0): DATE ISSUED: TOTAL CONSTRUCTION COST: \$103,040.00 PERMIT FEES: DATE APPROVED: DATE ISSUED: TOTAL FEE: 980.00	FAX#: EMAIL:	admin@oceanb	ldrs.com		DRESS:	223 S West St, Ste 900, Raleigh
Bulkhead -	THE RIGHT TO RUN WITH LVP, REPLACE SPECIAL CONDITIO	TEMPORARY PAINT ST ELIGHT FIXTURES, POV NS -	ORE OPERATIONS. RI	EMOVE SOME INTERIC FOR POS COUNTER, R	DR WALLS, RÉMOVE S EWORK PLUMBING A	SHELVING, REPLACE FLOORING ND HVAC AS NEEDED.
Detached Garage - Accessory Storage Building - Dune Deck - Generator DCCUPANCY: TYPE OF FOUNDATION: PERMITTED/CONDITIONAL USE: Per ZA HEATED/LIVING AREAS (SqFt): HEAT: COMMERCIAL USE: Per ZA NON-HEATED AREAS (SqFt): A/C: PROPERTY USE: Commercial NUMBER OF STORIES: INTERIOR WALLS: District District DECK OF STORIES: INTERIOR WALLS: ZONING DISTRICT: C - General Commercial District DISTRICT: C - General Commercial District ZONING PERMIT #: ZP22-000117 SEPTIC CAP. # OF PERSONS: FIREPLACE: DATE APPROVED: BATHS: YBATHS: ROOF: BUILDING USE: Per BL SARAGE - DETACHED: ATTACHED: INSULATION: CAMA PERMIT #: STORAGE ENCLOSURE: ELEVATOR (SqFt): DATE ISSUED: POOL: SHED: DECKS (SqFt): PLOOD ZONE: Unshaded X WINDOWS MAKE: SEPTIC PERMIT #: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: PERMIT FEES: DESCRIPTION COST: \$103,040.00 PERMIT FEES: DECK (SqFt): DATE ISSUED: TOTAL CONSTRUCTION COST: \$103,040.00 TOTAL FEE: 980.01 ***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or unly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is correct; that he/she is the owner or unly authorized agent of owner; that all construction and may be revoked for fallure to comply with applicable regulations and laws. **DATE TOWNERS OF THE						
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HEATED/LIVING AREAS (SqFt): HEAT: COMMERCIAL USE: Per ZA NON-HEATED AREAS (SqFt): AC: PROPERTY USE: Commercial District ZONING DISTRICT: C - General Commercial District ZONING PERMIT #: ZP22-000117 BEDROOMS: EXTERIOR WALLS: ZONING PERMIT #: ZP22-000117 BEPTIC CAP. # OF PERSONS: FIREPLACE: DATE APPROVED: BATHS: ½ BATHS: ROOF: BUILDING USE: Per BL BARAGE - DETACHED: ATTACHED: INSULATION: CAMA PERMIT #: STORAGE ENCLOSURE: DECKS (SqFt): DOTE: Unshaded X WINDOWS MAKE: SEPTIC PERMIT #: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: TOTAL CONSTRUCTION COST: \$103,040.00 PERMIT FEES: Description Remodel / Renovation / Repair Fee TOTAL CONSTRUCTION COST: \$103,040.00 PERMIT FEES: Description Total Cos 980.0 **The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores, The applicant certifies that the information on this permit is correct; that he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she is the owner or uly autho	OCCUPANCY:				PERMITTED/O	CONDITIONAL USE: Per ZA
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BEDROOMS: EXTERIOR WALLS: ZONING PERMIT #: ZP22-000117 BEPTIC CAP. # OF PERSONS: FIREPLACE: DATE APPROVED: BATHS:	NUMBER OF STORI	ES:	INTERIOR WALLS:			RICT: C - General Commercial
SEPTIC CAP, # OF PERSONS: FIREPLACE: DATE APPROVED: 3ATHS: ½ BATHS: ROOF: BUILDING USE: Per BL 3ARAGE - DETACHED: ATTACHED: INSULATION: CAMA PERMIT #: 5TORAGE ENCLOSURE: ELEVATOR (Sq.Ft): DATE ISSUED: POOL: SHED: DECKS (SqFt): LOOD ZONE: Unshaded X WINDOWS MAKE: SEPTIC PERMIT #: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: TOTAL CONSTRUCTION COST: \$103,040.00 PERMIT FEES: DEscription Assembdel / Renovation / Repair Fee Stouthern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or ulty authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. Thomas Twickly Applicant - Owner/Contractor (Please print and sign name) Date Issue 11/16/202	BEDROOMS:		EXTERIOR WALLS);		MIT #: ZP22-000117
SARAGE - DETACHED: ATTACHED: INSULATION: CAMA PERMIT #: DETORAGE ENCLOSURE: ELEVATOR (SqFt): DATE ISSUED: POOL: SHED: DECKS (SqFt): ELODD ZONE: Unshaded X WINDOWS MAKE: SEPTIC PERMIT #: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: TOTAL CONSTRUCTION COST: \$103,040.00 PERMIT FEES: Description Remodel / Renovation / Repair Fee Secretary with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. Thomas Twickly Applicant - Owner/Contractor (Please print and sign name) Date Issue: 11/16/202	SEPTIC CAP. # OF P	ERSONS:	FIREPLACE:			
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PEOOL: SHED: PEOOD ZONE: Unshaded X WINDOWS MAKE: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: TOTAL CONSTRUCTION COST: \$103,040.00 PERMIT FEES: Description Remodel / Renovation / Repair Fee TOTAL FEE: 980.0 ***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or uly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. Thomas Twickly Applicant - Owner/Contractor (Please print and sign name) Date Issue- 11/16/2022			THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU		CAMA PERMI	T #:
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Applicant - Owner/Contractor (Please print and sign name) Date Issued 11/16/202: Applicant - Owner/Contractor (Please print and sign name) Date Issued	with all Ordinances duly authorized agent valid	of the Town of Southern of owner; that all constru for 180 days to begin cor	Shores, The applicant c iction shall be as showr	ertifies that the informat 1 on the submitted plans	ion on this permit is co and specifications: th	struction and be certain to comply orrect; that he/she is the owner or e he/she understands this permit i
11/16/202 Suilding/Code/Zoning Official Date Approve	Spormer	- Churtly	Thomas -	Twiddy	and the second	
huilding/Code/Zoning Official	Applicant - Owner/C	ontractor 💆	(Please p	orint and sign name)		Date Issue
Date Approve Kevri Clauk By MW						11/16/202
By MB 11-17	Building/Code/Zonin	g Official				Date Approve
	10011)	By M	3			11-17

11-17-22

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



Residential Trade Contractor Permit

Date November 16, 2022

TP22-000196 Mechanical Trade Permit

Project Address: 37 E DOGWOOD TRL

Property Owner: NELSON, PEGGY A

PIN #: 022121000

Mailing Address: 37 E DOGWOOD TRL

SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical

ectrical Mechanical

nical 🗎

Gas

Contractor:

Company Name: Delta T Heating & Air Conditioning, Inc

Phone: (252) 261-0404

N. C. License Number: 35327

Qualifier: Lloyd Journigan

Address: PO Box 575

Kitty Hawk, NC 27949

Description of Work:

REPLACE EXISTING WITH A 2 TON 14 SEER AMERICAN STANDARD SILVER INDOOR &

OUTDOOR HEAT PUMP SYSTEM

Project Cost Estimate: \$6,300.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

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

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

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



Residential Trade Contractor Permit

Date November 17, 2022

TP22-000197 Mechanical Trade Permit

Project Address: 145 DUCK WOODS DR

Property Owner: ANDERSON, STEVEN J

PIN #: 022357029

Mailing Address: 145 DUCK WOODS RD

SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Contractor:

Electrical

Mechanical

Gas

Company Name: Delta T Heating & Air Conditioning, Inc

Phone: (252) 261-0404

N. C. License Number: 35327

Qualifler: Lloyd Journigan

Address: PO Box 575

Kitty Hawk, NC 27949

Description of Work: REPLACE EXISTING WITH 2.5 TON 14 SEER HEAT PUMP SYSTEM

Project Cost Estimate: \$3,400.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

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

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

)ate

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



Residential Trade Contractor Permit

Date November 21, 2022

TP22-000198	
Mechanical Trade	Permit

Project Address: 7 PALMETTO LN

Property Owner: CLOWER, VICKI B TTEE

PIN #: 022771000

Mailing Address: 78 MOCCASIN ROCK RD

BRUCETON MILLS, WV 26525

Permit Types: Plumbing Electrical Mech. Contractor:	anical Gas	
Company Name: R.A. HOY HEATING & Phone: (252) 261-2008 N. C. License Number: 35329	Qualifier: JAYDEN CHUTSKOFF Address: P.O. BOX 179 KITTY HAWK, NC 279	
Description of Work: SINGLE C/O TF	RANE 16 SEER 2-TON H/P SY	STEM THAT SERVICES THE UPSTAIRS.

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

gnature of Licensee or Duly Authorized Representative

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



Residential Trade Contractor Permit

Date November 21, 2022

TP22-000199			
Mechanical Trade	Permit		

Project Address: 18 OCEAN BLVD

Property Owner: PRICE, KAREN OLIVOLA TTEE

PIN #: 028714000

Mailing Address: 20 SILVER SPUR DR

	DENISON, TX 75201
Permit Types: Plumbing Electrical Mechanical Gas Contractor:	
Company Name: R.A. HOY HEATING & AIR CONDITIONING Phone: (252) 261-2008 N. C. License Number: 35329	Qualifier: JAYDEN CHUTSKOFF Address: P.O. BOX 179 KITTY HAWK, NC 27949
Description of Work: SINGLE C/O TRANE 18 SEER 2 TON H/P S	SYSTEM THAT SERVICES THE UPSTAIRS.

Project Cost Estimate: \$9,883.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

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

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

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



Residential Trade Contractor Permit

Date November 21, 2022

TP22-000200	
Mechanical Trade	Permit

Project Address: 6 SEVENTH AVE		PIN #: 021183000	
Property Owner: FITZGERALD, MARION	NBTRUSTEE MI:	ailing Address: 11501 WOODSTOCK WAY RESTON, VA 20194	,
Permit Types: Plumbing 을 Electrical 을 Mechar Contractor:	nical Gas		
Company Name: R.A. HOY HEATING & Phone: (252) 261-2008 N. C. License Number: 35329	AIR CONDITIONING	Qualifier: JAYDEN CHUTS Address: P.O. BOX 179 KITTY HAWK, NO	
Description of Work: SINGLE C/O TRA	ANE 16 SEER 4-TON	H/P SYSTEM THAT SERVICES THE UPST.	AIRS.
Project Cost Estimate: \$11,645.00	Permit Amount: Payment: Date Type Refer	150.00 rence Receipt ReceivedFrom Amount	
hereby certify that all information in this apother local laws and ordinances and regula approved plans and specification for the pro-	tions. The Inspection [d all work will comply with the State Building Department will be notified of any changes in	Code and all the
Bai 9			

Date

Signature of Permit Official

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



Residential Trade Contractor Permit

Date June 08, 2022

TP22-000099	l	
Mechanical 1	rade	Permit

Project Address: 210 OCEAN BLVD	PIN #: 022073000
Property Owner: BANAZEK, TIMOTHY J TTEE	Mailing Address: 8024 HAMPTON GLEN MEWS CHESTERFIELD, VA 23832
Permit Types: Plumbing Electrical Mechanical Gas Contractor:	
Company Name: OBX Air Pros Heating and Cooling	Qualifier: Lee Guthrie
Phone: (252) 435-8782	Address: 197 W Mobile Road
N. C. License Number: 29480	Harbinger, NC 27941
Description of Work: REPLACEMENT OF MID LEVE	L UNIT WITH 3.5 TRANE HEAT PUMP & AIR HANDLER
Project Cost Estimate: \$8,000.00 Permit Amore Payment: Date Tyne	unt: 150.00 Reference Receipt ReceivedFrom Amount
лас туре	Received From Amount

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

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

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



Residential Trade Contractor Permit

Date November 22, 2022

PIN #: 022357012 Mailing Address: 130 DUCK WOODS DR KITTY HAWK, NC 27949
Gas
Qualifier: Steven Smith
Address: 330 N. Dogwood Trail
Southern Shores, NC 27949
ER HEAT PUMP AND AIR HANDLER FOR FROG
mit Amount: 150.00
yment:
yment: te Type Reference Receipt ReceivedFrom Amount on is correct and all work will comply with the State Building Code and all
yment:

Signature of Permit Official

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



Commercial Trade Contractor Permit

Date November 23, 2022

TP22-000203			
Mechanical	Trade	Parmit	

Project Address: 5500 N CROATAN HWY SUITE 30 KELLER

WILLIAMS

Property Owner: SOUTHERN SHORES OWNER, LLC

PIN #: 022510000

Mailing 610 E MOREHEAD ST STE 100

			Address: CHARLOTTE, NC 28202
Permit Types: Plumbing EleContractor:	ectrical 🗹 Mech	anical Gas	
Company Name: OE Phone: (252) 435-87 N. C. License Numb	82	and Cooling	Qualifier: Lee Guthrie Address: 197 W Mobile Road Harbinger, NC 27941
Description of Work	. CHANGE OUT WORK & ELEC	& INSTALL 7 TON TRANE P CTRICAL CONNECTIONS	ACKAGE AC W/GAS FURNANCE, REUSE DUCT
Project Cost Estimat	te: \$26,000.00	Permit Amount: 150.00 Payment: Date Type Reference	Receipt ReceivedFrom Amount
l horoby cortify that all	information in this	oppliesting is compated all u	roule will company with the Otata Dellaling On the second

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

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official
By MB

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



Residential Trade Contractor Permit

Date November 28, 2022

TP22-000204	
Mechanical Trade	Permit

Project Address: 73 OCEAN BLVD	PIN #: 022660000
Property Owner: STONE, GORDON P JI	R Mailing Address: PO BOX 16155 CHESAPEAKE, VA 23328
Permit Types: Plumbing Electrical Mechar Contractor:	nical Gas
Company Name: OBHC, Inc. dba One Ho Phone: (252) 441-1740 N. C. License Number: 12643	Our Heating & Air Conditioning Qualifier: Brian McDonald Address: PO Box 2600 Kill Devil Hills, NC 27948
Description of Work: MECHANICAL - HEAT PUMP	REPLACE HVAC WITH 14 SEER 1 1/2 TON CARRIER AIR HANDLER &
Project Cost Estimate: \$7,727.00	Permit Amount: 150.00 Payment: Date Type Reference Receipt ReceivedFrom Amount
hereby certify that all information in this apother local laws and ordinances and regula approved plans and specification for the pro-	oplication is correct and all work will comply with the State Building Code and all tions. The Inspection Department will be notified of any changes in the oject permitted herein.

https://www4.citizenserve.com/Admin/PermitController?Action=DisplayPermitDetail&SelectedTab=Permits&Permit_ID=11139411&WorkOrder_ID=863...

Signature of Licensee or Duly Authorized Representative Date

1/1



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

<u>RESIDENTIAL</u> BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

BIJII DING PERMIT # DPA22-000225

CAROLINA			DOILDING FLIXINI # DFA22-000223		
PIN: 9	25910000 86806383809 ELEVENTH AVE	4	Owner: Address:	WINDSOCK LLC 1731 BOLLING A	NE
District: F Subdiv S	ELEVENTH AVE RS1 - Single Family Re EA CREST VILLAGE OT: 2 BLK: 57 SEC:	sidential District	Phone #:	NORFOLK, VA 2 252-333-8648	3508
DUCINECO NAME.	0 15 0		No o o Liosivos		
BUSINESS NAME: CONTRACTOR'S NAM ADDRESS: CITY, STATE, ZIP: DFFICE#: CELL# FAX#:	Godfrey Construction, LLC AME: Rick Godfrey PO Box 694 Kill Devil Hills, NC 27948 (252) 202-1469		NC G.C. LICENSED CONTRACTOR: NC G.C. LICENSE NUMBER: LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#:		Licensed General Contractor 66982 Unlimited Building John Richard Godfrey, II Investors Title Insurance Co 1811789
EMAIL:	godfreyconstruction@gmail.com LIEN AG		LIEN AGENT ADD	RESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603
Bulkhead - Pier	TION: New Constr	uction - Addition / E	xpansion - Remodel / F		
CCUPANCY:	Accessory Storage	TYPE OF FOUND		PERMIT TYPE	E- Residential
EATED/LIVING AREA	S (SaFt): 0.0	HEAT:	·	A CONTRACTOR OF THE PARTY OF TH	TYPE: Residence
ON-HEATED AREAS	(SaFt): 0	A/C:		THE RESIDENCE OF THE PARTY OF T	E: Single Family
UMBER OF STORIES		INTERIOR WALLS):	ZONING DISTRICT: RS1 - Single Family Residential District	
EDROOMS:		EXTERIOR WALL	S:	ZONING PER	
EPTIC CAP. # OF PER	RSONS:	FIREPLACE:		DATE APPRO	
ATHS: ½ BATHS:		ROOF:		PERMITTED/0 Dwelling	CONDITIONAL USE: Single Family
ARAGE - DETACHED		INSULATION:		CAMA PERMI	
TORAGE ENCLOSUR	E:	ELEVATOR (SqFt)	•	DATE ISSUE):
OOL: SHED:		DECKS (SqFt):			
LOOD ZONE: VE - 11		WINDOWS MAKE		SEPTIC PERM	AIT #:
ASE FLOOD ELEVAT reeboard	ION: Plus 3 ft of	WINDOWS TYPE:		DATE ISSUED):
		TOTAL CONOT	TRUCTION COOT, ASS SAS	0.0	
PERMIT FEES: Description		IOTAL CONST	RUCTION COST: \$92,213.		T-4-1 04
Remodel / Renovation / R Homeowners Recovery F					Total Cost 923.00 10.00 TOTAL FEE: 933.00
vith all Ordinances of the luly authorized agent of	e Town of Southern Showner; that all constri	ores. The applicant ce action shall be as show	rtifies that the information on on the submitted plans te to comply with applicab	on this permit is cornand specifications; the regulations and law	truction and be certain to comply rect; that he/she is the owner or le he/she understands this permit is vs.
	(K		Marie 1 Nac	1 aguez	11/23/2022
Applicant - Owner/Conf	tractor	(Please	print and sign name)		Date Approved
Keurn (lank			Philippinas.	//-28-20
Building/Code/Zoning (By MB				Date Issued
	RUJ 1040				



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

RESIDENTIAL BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000227

MOTING					" D! ALL-000221
PIN: Location: District: Subdiv	021126000 986810369291 9 SIXTH AVE RS1 - Single Family Res SEA CREST VILLAGE LOT: 7 BLK: 50 SEC:	idential District	Owner: Address: Phone #:	MCKITTRICK-GF 20275 WATERMA STERLING, VA 20 703-969-5406	
USINESS NAME: ONTRACTOR'S NAM DDRESS: ITY, STATE, ZIP: FFICE#:	Real Escapes, Lt IE: Lilias Morrison PO Box 98 Harbinger, NC 27		NC G.C. LICENSE NC G.C. LICENSE LIMITATION: CLASSIFICATION: QUALIFIER:		Licensed General Contractor 13735 UNLIMITED RESIDENTIAL
ELL#			LIEN AGENT NAME:		LILIAS J MORRISON FIDELITY NATIONAL TITLE CO
λX#:				IC:	LLC
AAIL:	accounts@reales	capes.com	ENTRY#: LIEN AGENT ADDRESS:		1814542 223 S. WEST ST SUITE 900 RALEIGH N.C 27603
- Danaicad - Viii LIGI	FION: New Constructors/Docks - Retaining of Accessory Storage B	wall - Deach Acce	pansion - Remodel / R ss Walkway/Stairs - St sk - Generator	tenovation / Repair - C	Accessory - Other Workshop - Gazebo
	0/0 8/1 80	TYPE OF FOUNDA	TION:	PERMIT TYPE	: Residential
ATED/LIVING AREA DN-HEATED AREAS	(Saft): /2.0	HEAT: Heat Pump		RESIDENCE T	YPE: Vacation Cottage < 30 days
		A/C: Heat Pump		BUILDING USE	E: Single Family
IMBER OF STORIES	:	INTERIOR WALLS	: SHEETROCK	ZONING DISTR	RICT: RS1 - Single Family
DROOMS:		EXTERIOR WALLS		Residential Dist	trict
PTIC CAP. # OF PER	SONS:	FIREPLACE:	EFRICIO DE	ZONING PERM DATE APPROV	旧#: /FD:
THS: 4 1/2 BATHS:		ROOF: Other			ONDITIONAL USE: Single Family
RAGE - DETACHED	ATTACUED.			Dwelling	Single Family
ORAGE ENCLOSUR	E:	INSULATION: Batt		CAMA PERMIT	
OL: SHED:		ELEVATOR (SqFt): DECKS (SqFt):		DATE ISSUED:	
OOD ZONE: Unshade	ed X	WINDOWS MAKE:	IFI DON	CEDTIA BEET	
SE FLOOD ELEVATI	ON: LES 8ft	WINDOWS TYPE:	Double Hung	SEPTIC PERMI	
		1 # 1 Jm4 L		DATE ISSUED:	
RMIT FEES:		TOTAL CONSTR	RUCTION COST: \$33,750.00	0	
eated/Living Area Fee (Someowners Recovery Funimum Permit Fee	ind				Total Cost 43.20 10.00 56.80
ly agthorized agent of a	wn&r that all constructi	on shall be see all and	and laws; should persona fies that the information of on the submitted plans are to comply with applicable SJ. LORRISO	nd specifications; the regulations and laws	
plicant - Owner/Conti	ractor	/DI		_ 1	11/22/2022
MAN AM		(Please p	rint and sign name)		Date Approved
1111 (V)	ML				11/20/01
Iding/Code/Zoning O	fficial		· · · · · · · · · · · · · · · · · · ·		Data lacore
By	W				ψate is ş ued
U					



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

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

RIIII DING PERMIT # DPA22-000220

CAROLINA			'	BUILDING PERMIT # DPA22-000220
PIN: Location: District: Subdiv	022470372 986715638669 41 EAGLES NEST LN RS1 - Single Family Residential District CHICAHAUK LOT: 372 BLK: SEC:		Owner: Address: Phone #:	VINCENTE HILL 41 EAGLES NEST LANE SOUTHERN SHORES, NC 27949 828-450-2902
BUSINESS NAME: CONTRACTOR'S NAM ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#: EMAIL:	RACTOR'S NAME: GLENN AVERY ESS: 180 WATERS EDGE DRIVE BTATE, ZIP: KILL DEVIL HILLS, NC 27948 E#: (252) 202-8949		NC G.C. LICENSI NC G.C. LICENSI LIMITATION: CLASSIFICATION QUALIFIER: LIEN AGENT NA ENTRY#: LIEN AGENT AD	N: ME:
REMODEL KITCHEN, OBJECTAL CONDITION	CABINETS, TOPS, FLOC S - ALL WOOD BELOW CTION: New Construc	PRING & PLUMBING & RFPE (8) FT. SHALL I	BELECTRICAL BE TREATED Dansion - Remodel /	rior approval): REMODEL - REPAIR SAG IN FLOOR, Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
	Accessory Storage B			The state of the s
OCCUPANCY:		TYPE OF FOUNDAT	Salarinathe Marker Internation where the authorization are in the con-	PERMIT TYPE: Residential
HEATED/LIVING ARE	AS (SaFt): 0.0	HEAT:		RESIDENCE TYPE: Residence
NON-HEATED AREAS		A/C:	The state of the s	
TORTILATED ANLAC	(odi i). O	M/C.		BUILDING USE: Single Family
NUMBER OF STORIES	S:	INTERIOR WALLS:		ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	TARLES COMMENTE HARVANDE HARVANDE SERVICE CONTRACTOR OF THE SERVICE CO	EXTERIOR WALLS:		Control of the Contro
SEPTIC CAP. # OF PE	Deone.			ZONING PERMIT #:
SEPTIC CAP, # OF PE	:K20N2:	FIREPLACE:		DATE APPROVED:
BATHS: 1/2 BATHS:		ROOF:		PERMITTED/CONDITIONAL USE: Single Fami
CADACE DETACHE	D. ATTACIED	MIGHT ATTION		Dwelling
GARAGE - DETACHE	Market Colored Print, 57 page 15 ft. at Section 5 ft. Land Colored Section 5 ft. Annual Colored Section 6 ft. Annual Colored 6 ft. Annual Colored Section 6 ft. Annual Colored 6 ft. Annual Co	INSULATION:		CAMA PERMIT #:
STORAGE ENCLOSU	RE:	ELEVATOR (SqFt):		DATE ISSUED:
POOL: SHED:		DECKS (SqFt):	United prints of collection and its organization in the collection of the collection	
LOOD ZONE: Unshace		WINDOWS MAKE:		SEPTIC PERMIT #:
BASE FLOOD ELEVA	TION: LES 8ft	WINDOWS TYPE:		DATE ISSUED:
		TOTAL CONCER	UCTION COST: \$60,000	
PERMIT FEES:		TOTAL CONSTR	.OC HON COS1: \$60,000	1.00
Description Remodel / Renovation / Homeowners Recovery !	Fund			Total Co 600.0 10.0 TOTAL FEE: 610.0
vith all Ordinances of the luly authorized agent of the luly authorized agent of the luly all	he Town of Southern Sho	res. The applicant certi tion shall be as shown	fies that the information on the submitted plans	onally inspect all construction and be certain to comply n on this permit is correct; that he/she is the owner or and specifications; the he/she understands this permit ble regulations and laws.
				11/22/202
Applicant - Owner/Cor	ntractor	(Please p	rint and sign name)	Date Approve
Kevin	Clark			
Building/Code/Zoning	Official By MB	_		' 'Date Issue



TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

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

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000222

Parcel:	
PIN:	

022383039

986707681195

164 CLAM SHELL TRL

Location: District:

RS1 - Single Family Residential District

Subdiv Lot-Block-Sect:

CHICAHAUK LOT: 39 BLK: SEC: Owner: Address:

OWENS, DAVID W 530 CASWELL RD CHAPEL HILL, NC 27514

Phone #:

919-260-1949

BUSINESS NAME:

CONTRACTOR'S NAME:

ADDRESS:

CITY, STATE, ZIP: OFFICE#:

CELL#

FAX#: EMAIL: David Owens 164 Clam Shell Tr

Southern Shores, NC 27514

919--260-1949

davidwowens5@gmail.com

NC G.C. LICENSED CONTRACTOR:

NC G.C. LICENSE NUMBER:

LIMITATION: CLASSIFICATION:

QUALIFIER: LIEN AGENT NAME:

ENTRY#:

LIEN AGENT ADDRESS:

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - Replace decking, bannisters, steps, and rails for existing front, side, and rear porches. No change in existing footprint or square footage. SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New Construction	on - Addition / Expansion - Remodel / Renovation / Repair - Accessory - Other
	on - Addition / Expansion - Remodel / Renovation / Repair - Accessory - Other
Bulkhead - Piers/Docks - Retaining V	/all - Beach Access Walkway/Stairs - Swimming Pools - Workshop - Gazebo
Detached Garage - Accessory Storage Bu	ilding - Dune Deck - Generator
OCCUPANCY:	TYPE OF FOUNDATION: PERMIT TYPE; Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT: RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C: BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS: ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE: DATE APPROVED:
BATHS: ½ BATHS:	ROOF: PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt): DATE ISSUED:
POOL: SHED:	DECKS (SqFt):
FLOOD ZONE: Unshaded X	WINDOWS MAKE: SEPTIC PERMIT #: 30355
BASE FLOOD ELEVATION: LES 8FT	WINDOWS TYPE: DATE ISSUED: 12/30/2020

PERMIT I	FEES:
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Remodel / Renovation / Repair Fee

TOTAL CONSTRUCTION COST: \$40,000.00

Total Cost 400.00 **TOTAL FEE: 400.00**

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

- Owner/Contractor

(Please print and sign name)

11/21/2022

Date Approved

Building/Code/Zoning Official



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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

BUILDING PERMIT # DPA22-000223

CAROLINA						
Parcel: PIN:	021313000 986806296069		Owner: Address:	DOYLE, MARIANNE B 12 12TH AVE		
.ocation:	12 TWELFTH AVE		Address.	KITTY HAWK, NC 27949		
istrict:	RS1 - Single Family	Residential District	Phone #:	252-261-2990		
ubdiv	SEA CREST VILLAC					
ot-Block-Sect:	LOT: 24 BLK: 58 SE	O:				
USINESS NAME: Mike Moran ONTRACTOR'S NAME: Mike Moran DDRESS: 2802 S. Wrightsvi ITY, STATE, ZIP: Nags Head, NC 2 FFICE#: (252) 202-0443		NC 27959	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER:			
ELL#	(===) === = .		LIEN AGENT NA	AME:		
AX#:			ENTRY#:			
MAIL:	campmjm@c	harter.net	LIEN AGENT AD	DDRESS:		
PECIAL CONDITION YPE OF CONSTRUCT Bulkhead - Pi	STION: New Con	struction - Addition / Ex	xpansion - Remodel	/ Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo		
CCUPANCY:	- Accessory Store	TYPE OF FOUND				
EATED/LIVING ARE	AS (SaEt): 0.0	HEAT:	ATION:	PERMIT TYPE: Residential		
ON-HEATED AREAS		A/C:		RESIDENCE TYPE: Residence		
		A/C.		BUILDING USE: Single Family		
JMBER OF STORIE	S:	INTERIOR WALLS	i:	ZONING DISTRICT: RS1 - Single Family Residential District		
DROOMS:		EXTERIOR WALLS	S:	ZONING PERMIT #:		
PTIC CAP. # OF PE	ERSONS:	FIREPLACE:		DATE APPROVED:		
ATHS: ½ BATHS:		ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling		
ARAGE - DETACHE	The state of the s	INSULATION:		CAMA PERMIT#:		
ORAGE ENCLOSU	IRE:	ELEVATOR (SgFt)		DATE ISSUED:		
OOL: SHED:		DECKS (SqFt):				
.OOD ZONE: Unsha		WINDOWS MAKE:		SEPTIC PERMIT #:		
ASE FLOOD ELEVA	TION: LES 8ft	WINDOWS TYPE:		DATE ISSUED:		
		TOTAL CONST	RUCTION COST: \$22,50	0.00		
ERMIT FEES: escription emodel / Renovation /	Repair Fee			Total Cost 225.00 TOTAL FEE: 225.00		
th all Ordinances of t ily authorized agent o	the Town of Southern of owner; that all cons	Shores. The applicant cer struction shall be as show may be revoked for failure	tifies that the information	sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or s and specifications; the he/she understands this permit is able regulations and laws.		
oplicant - Owner/Co	ntractor		print and sign name)	11/22/2022 Date Approved		
1	^ 1	(:200	process or an arrange	Date Approved		
Kun C						
, باناding/Code/Zoning	official			Date Issue		
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BY!W	₹					



TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

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

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

BUILDING PERMIT # DPA22-000226

Parcel: PIN:	RS1 - Single Family Residential District SO/SH BLK 227		Owner: Address:	NEWELL, RICK	NEWELL, RICK 72 DUCK WOODS DRIVE	
₋ocation:			Addiess.		ORES, NC 27949	
District:			Phone #:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Subdiv						
ot-Block-Sect:	LOT: 10 BLK: 227 SE	U:				
USINESS NAME:	Caribbean Pool and Spa of the Outer Ba		^{nks,} NC G.C. LICENS	ED CONTRACTOR:	Licensed General Contractor	
ONTRACTOR'S NAME: Pete Kelly			NC G.C. LICENS	E NUMBER:	73571	
DDRESS:	6024 Currituck Road		LIMITATION:		Limited	
ITY, STATE, ZIP:	Kitty Hawk, NC 27949		CLASSIFICATION	N:	Residential	
FFICE#: ELL#	(252) 480-290	0	QUALIFIER: LIEN AGENT NA	MC.	Peter Franklin Kelly	
AX#:			ENTRY#:	IVIC.		
MAIL:	pete@caribbe	anobx.com				
PECIAL CONDITIO	NS -	from the Building Plan o	/			
YPE OF CONSTRU	CTION: New Cons	truction - 🔲 Addition / Exp	ansion - 🔲 Remodel /	Renovation / Repair -	Accessory - Other	
		ing Wall - D Beach Acces				
manufacture and the second sec	PET STATE OF THE S	je Building - Dune Deck			Salar	
OCCUPANCY:	/ Nocessury Otorag	TYPE OF FOUNDAT	The state of the s	DEDMIT TVD	E. Docidontial	
EATED/LIVING AR	EAS (SqFt): 0.0	HEAT:	IOI1.		PERMIT TYPE: Residential RESIDENCE TYPE: Residence	
ON-HEATED AREA		A/C:			BUILDING USE: Single Family	
UMBER OF STORI		INTERIOR WALLS:	INTERIOR WALLS.		ZONING DISTRICT: RS1 - Single Family	
					Residential District	
BEDROOMS: SEPTIC CAP. # OF PERSONS:			EXTERIOR WALLS: FIREPLACE:		ZONING PERMIT #: ZP22-000120 DATE APPROVED: 11/23/2022	
	LINOUNG.				CONDITIONAL USE: Single Family	
ATHS: ½ BATHS:		ROOF:		Dwelling	SOMBITIONAL USE: Single Family	
ARAGE - DETACHI	ED: ATTACHED:	INSULATION:		CAMA PERM	IT #:	
TORAGE ENCLOS	JRE:	ELEVATOR (SqFt):		DATE ISSUEI):	
OOL: 480 SHED:	MANAGEMENT AND ADDRESS OF THE PARTY OF THE P	DECKS (SqFt):				
LOOD ZONE: AE - 4	Manager Control of the Control of th	WINDOWS MAKE:			MIT #: S22-12767	
ASE FLOOD ELEV	ATION: LES8ft	WINDOWS TYPE:		DATE ISSUED	DATE ISSUED: 08/24/2022	
		TOTAL CONSTR	UCTION COST: \$75,426	5.00		
PERMIT FEES:					Total Cost	
Description					250.00	
Description		oppolity width all an analysis			TOTAL FEE: 250.00	
Description Swimming Pools	Jon ove veen !!- !- '		and laws; should perso	onally inspect all cons	truction and be certain to comply	
Description Swimming Pools *The owner and build	der are responsible to c	Shores. The annlicant certi	fies that the information			
escription wimming Pools The owner and built th all Ordinances of	of owner; that all const	Shores. The applicant certi ruction shall be as shown	fies that the information on the submitted plans	and specifications: th	e he/she understands this permit is	
escription wimming Pools The owner and built th all Ordinances of	of owner; that all const	Shores. The applicant certi	fies that the information on the submitted plans	and specifications: th	e he/she understands this permit is	
escription wimming Pools The owner and built th all Ordinances of ly authorized agent	of owner; that all const	Shores. The applicant certi ruction shall be as shown	fies that the information on the submitted plans	and specifications: th	e he/she understands this permit i vs.	
Pescription Eximming Pools The owner and build th all Ordinances of ally authorized agent allid for 180 days to b	the Town of Southern S of owner; that all const egin construction and r	Shores. The applicant certi ruction shall be as shown	fies that the information on the submitted plans	and specifications: th	e he/she understands this permit is	
Description Swimming Pools *The owner and build ith all Ordinances of ally authorized agent all of for 180 days to b	the Town of Southern S of owner; that all const egin construction and r	Shores. The applicant certifuction shall be as shown may be revoked for failure	fies that the information on the submitted plans	and specifications: th	e he/she understands this permit is vs.	
Pescription Eximming Pools The owner and build th all Ordinances of ally authorized agent allid for 180 days to b	the Town of Southern S of owner; that all const egin construction and r	Shores. The applicant certifuction shall be as shown may be revoked for failure	fies that the information on the submitted plans to comply with applical	and specifications: th	e he/she understands this permit is vs.	
Description Swimming Pools *The owner and build ith all Ordinances of ally authorized agent all of for 180 days to b	the Town of Southern S of owner; that all const egin construction and r	Shores. The applicant certifuction shall be as shown may be revoked for failure	fies that the information on the submitted plans to comply with applical	and specifications: th	e he/she understands this permit is vs.	
Description Swimming Pools *The owner and built ith all Ordinances of uly authorized agent	of owner; that all const egin construction and r	Shores. The applicant certifuction shall be as shown may be revoked for failure	fies that the information on the submitted plans to comply with applical	and specifications: th	e he/she understands this permit is vs.	



MECHANICAL PERMIT

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

* FORM MUST BE FILLED OUT ENTIRELY. I	NCOMPLETE FORMS WILL NOT BE PROCESSED*
PERMIT NUMBER: 5277	DATE: 11/1/2022
OWNER: FRANCHISE INVESTMENT CORP ADDRESS: 212 S HWY 64/264 CITY: MANTEO STATE: NC ZIP: 27954 PHONE:	CONTRACTOR: RA HOY HEATING AND AIR CONDITIONING LLC ADDRESS: PO BOX #179 CITY: KITTY HAWKSTATE: NC ZIP: 27949 PHONE: 252-261-2008
LOCATION: 212 S HWY 64/264 BUILDER:	PARCEL NUMBER: 025549000
NUMBER OF HEATING UNITS: 1 NUMBER OF REGISTERS: TO LICENSE NUMBER: 35329 COST: \$14,180.00 IF REPAIRING OR ALTERING, PLEASE DESCRIBE WOR SINGLE ROOF TOP C/O 14 SEER 5 TON TRANE	NUMBER OF AIR HANDLERS: NNAGE: 5 TON WORK ORDER NUMBER: PERMIT COST: \$ (00.00)
Call Building Inspector 24 hours in advan-	CE FOR ALL INSPECTIONS
DATE OF ISSUANCE: 11/1/22 SEALS:	

Page 1 of 1 Revised: 12/20/2021 Form #: PZ620





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* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED*
CONTRACTOR INFORMATION
NAME: Carreston Many & Remarks
PHONE NUMBER: 455 0960 LICENSE NUMBER: 04441
ADDRESS: PO Box 237/
EMAIL: Corner tare oby Caychoo Can
PROPERTY OWNER INFORMATION
NAME: Jac Krolger PHONE:
EMAIL: Due krage e verica, net
DEVELOPMENT INFORMATION
CHECK ALL THAT APPLY: NEW CONSTRUCTION ADDITION ACCESSORY STRUCTURE CEREMODEL SWIMMING POOL OTHER: ATTACHED DETACHED
PROPERTY ADDRESS: 1421 Ballast pant Dr
PARCEL NUMBER: CDS 694150 ZONING DISTRICT:
ESTIMATED COST: 21000 HEATED SPACE (SQ. FT.): 150 UNHEATED SPACE (SQ. FT.):
DESCRIPTION OF WORK: Dena share of tub in master
replace with the shower of free strandly trub
CLOOPELAIN INCORNATION
FLOODPLAIN INFORMATION FLOOD ZONE: AE ZONE
BASE FLOOD ELEVATION (BFE): FIRST FLOOR ELEVATION (FFE):
DESCRIPTION OF WORK BELOW BFE:
PROPOSED NUMBER OF FLOOD VENTS: ENCLOSED AREA BELOW BFE: ☐ YES ☐ NO
NET OPENING OF FLOOD VENTS (SQ. IN.): ☐ ENGINEERED ☐ NON-ENGINEERED
REQUIRED DOCUMENTATION CHECKLIST
SITE PLAN (*shows actual dimensions of the Lot, all structures, driveways & parking)
ONE SET OF WORKING DRAWINGS HEALTH DEPARTMENT APPROVALS (FOR RESTAURANTS)
□ NC LIEN AGENT FORM □ CAMA PERMIT (IF REQUIRED) □ ELEVATION CERTIFICATE REQUIRED
REVIEW FEE: 450.00 CALL BUILDING INSPECTOR
FIOMEOWNERS RECOVER FEE:
1 ENWIT COST. 4 210.00
TOTAL COST: \$260.00 This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and
all amendments as adopted by the Town of Manteo. This permit
is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in
construction or site plans will be subject to prior notification of the
DATE OF ISSUANCE: Planning and Zoning Department and the Building Inspector.
Seals: Applicant Inspector Zoning Administrator
Zoning Administrator



PERMIT NUMBER: 5279 BUILDING PERMIT
DATE: 11-2-2 022
OWNER: DG 16 COUNTY ADDRESS: DC BOX 1000 CITY: Myster STATE: NC ZIP: 77954 ADDRESS: 349 (1000 STATE: NC ZIP: 27954 LOCATION OF BUILDING SITE: DU (1000 M M S County M S Co
SQUARE FOOTAGE OF HEATED SPACE: NUMBER OF STORIES: ROOMS: BATHS: FINISHES: EXTERIOR WALLS: INTERIOR WALLS: INSULATION & R VALUE: FOOTING: FOOTING: FOUNDATION:
ADDITIONAL NOTES: building a frello courtier
EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPROVALS CAMA PERMIT IF REQUIRED
*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning
Seals: Permit Cost: 120,715 Seals: Permit Cost: 207.15 Seals: Permit Cost: 207.15
Applicant Inspector Zoning Official
Conditions of Permit:



MECHANICAL PERMIT

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

PERMIT NU		7 =2(*** INCOMPLETE FORMS WILL NOT BE PROCESSED*
	IMBER: 5	280		DATE: 11/03/2022
OWNER:	GARY GOGE	RTY		CONTRACTOR
ADDRESS:	1120 SOUTH	BAY CLUB		CONTRACTOR: RA HOY HEATING AND AIR CONDITIONING LLC ADDRESS: PO BOX #179
CITY:	MANTEO	STATE: NC	ZIP: 27954	
PHONE:				City: <u>KITTY HAWKSTATE</u> : <u>NC</u> zip: <u>27949</u> Phone: <u>252-261-2008</u>
LOCATION: BUILDER:	1120 SOUTH	I BAY CLUB		PARCEL NUMBER: 030835085
– Number of	HEATING	JNITS: 1		
NUMBER OF	REGISTER	S		NUMBER OF AIR HANDLERS: 1
LICENSE NU	JMBER: 35	329	10	NNAGE: 1.5 TON
Cost: \$8,50	0.00	020	-	WORK ORDER NUMBER:
				PERMIT COST: \$150.00
		ER 1.5 TON H/P SY		ERVICES THE UPSTAIRS.
				THE OF STAIRS.
**Call D				
CALL Bui	LDING INSP	ECTOR 24 HOUR	S IN ADVANC	E FOR ALL INSPECTIONS*
		1 1		E FOR ALL INSPECTIONS***
		1 1		-
CALL BUI		1 1		E FOR ALL INSPECTIONS* PARTON NIX for RA Hoy (INSPECTOR)
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Plumbing

BUILDING PERMIT

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

PERMIT NUMBER: 528

* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED*
CONTRACTOR INFORMATION
NAME: Cerry-Stave Mark & Reneally
PHONE NUMBER: 455 0960 LICENSE NUMBER: 84441
ADDRESS: PCBCX 2371 Mantre
EMAIL: Come-steme obx Q yahac. Ca
PROPERTY OWNER INFORMATION
NAME: John Bennett PHONE: 703 531 9670
EMAIL: andra wholes ila. com
DEVELOPMENT INFORMATION
CHECK ALL THAT APPLY: NEW CONSTRUCTION ADDITION ACCESSORY STRUCTURE REMODEL SWIMMING POOL OTHER: ATTACHED DETACHED
PROPERTY ADDRESS: 313 Fernando
PARCEL NUMBER: 024829000 ZONING DISTRICT:
ESTIMATED COST: 4000.00 HEATED SPACE (SQ. FT.): UNHEATED SPACE (SQ. FT.):
DESCRIPTION OF WORK: Replace plunding supply lies to pex (Has ald
pely)
(Hugh teck plunting)
FLOODPLAIN INFORMATION
FLOOD ZONE:
BASE FLOOD ELEVATION (BFE): FIRST FLOOR ELEVATION (FFE):
DESCRIPTION OF WORK BELOW BFE:
PROPOSED NUMBER OF FLOOD VENTS: ENCLOSED AREA BELOW BFE: ☐ YES ☐ NO
NET OPENING OF FLOOD VENTS (SQ. IN.): ☐ ENGINEERED ☐ NON-ENGINEERED
REQUIRED DOCUMENTATION CHECKLIST
☐ SITE PLAN (*SHOWS ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS & PARKING) ☐ ONE SET OF WORKING DRAWINGS ☐ HEALTH DEPARTMENT APPROVALS (FOR RESTAURANTS)
☐ NC LIEN AGENT FORM ☐ CAMA PERMIT (IF REQUIRED) ☐ ELEVATION CERTIFICATE REQUIRED
REVIEW FEE: \$50.00 CALL BUILDING INSPECTOR
HOMEOWNERS RECOVER FEE: 24 HOURS IN ADVANCE FOR ALL INSPECTIONS PERMIT COST: \$50.00
TOTAL COST: \$100.000 This building is to be erected or altered in accordance with the
latest edition of the General Building Laws of North Carolina and
all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations
is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the
Planning and Zoning Department and the Building Inspector.
DATE OF ISSUANCE: ////////////////////////////////////
Seals:
Applicant Inspector Zoning Administrator



PERMIT NUMBER: 5287	DATE: 10/18/22
OWNER: 103 Gilbert Street LLC ADDRESS: 619 Breezy Hill Road CITY: Spout Spring STATE: VA ZIP: 24593	BUILDER: Macto OBX Construction Inc
ADDRESS: 619 Breezy Hill Road	CONTRACTOR LICENSE #: 81540
CITY: Spout Spring STATE: VA ZIP: 24593	ADDRESS: PO Box 3689
	CITY: Kill Devil Hills STATE: NC ZIP: 27948
	PHONE: MUSICALIA
LOCATION OF BUILDING SITE: 103 Gilbert Street	ZONING DISTRICT: B-2 OOD ZONE: BFE: FFE:
PARCEL NUMBER: 025691002 FL	OOD ZONE: BFE: FFF
IND LOAVER MORE REGOEST NOWRED ON BOWER W	ETER NUMBER (IE APPLICABLE)
ERECT:	ALTER: X REPAIR:
SQUARE FOOTAGE OF HEATED SPA	ACE:UNHEATED SPACE:
NUMBER OF STORIES:RO	OMS: BATHS: FIREPLACES:
	FINISHES:
EXTERIOR WALLS: INTERIOR \	VALLS: ROOF TYPE AND MATERIAL: N & R VALUE: FLOORING:
TEAT TYPE:INSULATIO	R VALUE: FLOORING:
FOOTING:	FOUNDATION:
EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSION TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT AND CAMA PERMIT IF REQUIRED	S OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING PPROVALS HOURS IN ADVANCE FOR ALL INSPECTIONS***
	the latest edition of the General Building Laws of North Carolina and all nit is valid for six (6) months. Compliance with Building Regulations is the construction or site plans will be subject to prior notification of the Planning Permit Cost: \$300.00 Lance:
Conditions of Permit:	



PERMIT NUMBER: 5283 BUILDING PERMIT
DATE: 11 8 2022
OWNER: Paul Mascia, Builden: N.C. Man
ADDRESS: POLYON 42
CITY: Kilky HAWX STATE: NC ZIP: 299 (40)
LOCATION OF BUILDING SITE 35 BOLLOCK OPHONE: 261-3682
PARCEL NUMBER: 035694390 FLOOD ZONE: BFE: FFE: NC POWER WORK REQUEST NUMBER OR POWER METER NI MARCH (15 APPLICABLE)
ERECT: ALTER: REPAIR:
SQUARE FOOTAGE OF HEATED SPACE: UNHEATED SPACE: NUMBER OF STORIES: BATHS: FIREPLACES:
ROOMS: BATHS: FIREPLACES: FINISHES:
EXTERIOR WALLS: INTERIOR WALLS.
FOOTING: FOUNDATION:
ADDITIONAL NOTES: Installing about 90ft of breakwater
J STREET MECK
EACH APPLICATION MUST BE ACCOMPANIED BY:
SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS
TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE
RESTAURANTS: HEALTH DEPARTMENT APPROVALS
CAMA PERMIT IF REQUIRED
*** *** *** *** ***
*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all
responsibility of the understand and transfer and another than the state of the understand and transfer to the
Value 350.60
Estimated or Contract Coots 18 1. 186 CO
Date of Issuance: 11 (5) 2 Permit Cost: \$ 90.00
Seals: Delle & Emon
Applicant Inspector Zoning Official
Conditions of Permit:



SPECIAL USE PERMIT APPLICATION

DATE: 11.3.22	APPLICATION NO. 5284		
PROPERTY ADDRESS: 829 WINGLIN	4		
ZONING DISTRICT: 2-1	PARCEL# 024467000		
PROPERTY OWNER: Dave County	1		
MAILING ADDRESS: P.O. Por 100	= , Mantes, NC 27954		
TELEPHONE # 152-475-5000	EMAIL:		
REPRESENTATIVE (IF DIFFERENT FROM OW	/NER):		
MAILING ADDRESS:			
	EMAIL:		
CURRENT USE(S) OF THE PROPERTY: 1			
PROPOSED USE(S) OF THE PROPERTY:	ad Softal Relature		
PROJECT DESCRIPTION: Add SALL	all Field House		
PROPOSED DEVELOPMENT INFORMATION:			
TOTAL ACREAGE 38.89 40	TOTAL BUILDING AREA (S.F.) 880 34		
TOTAL # UNITS LOT COVERAGE (S.F. & %) Total 26.04%			
BUILDING HEIGHT # PARKING SPACES N/A			
LIGHTING NA			
SIGNS N/A			
IS THIS AN AMENDMENT TO AN EXISTING SP	ECIAL USE PERMIT? YES		
IF YES, WHICH SPECIAL USE PERMIT			
SPECIAL USE PERMIT FEE \$200.00	THE DOCUMENT.		

PO Box 246, Manteo North Carolina 27954 Telephone 252-473-2133 Fax 252-473-2135



5285

BUILDING PERMIT



MECHANICAL PERMIT

THE CHANGAL PERMIT
PERMIT NUMBER: 5286
OWNER. CANUS (DLE ADDRESS: 613 PINATCS LVAY CITY: INMINECE STATE: NC ZIP 2 7654 CITY PHONE: PHONE: 252-473 1769
LOCATION: US PIECHES WAY PARCEL NUMBER: 02989100
NUMBER OF HEATING UNITS NUMBER OF REGISTERS: LICENSE NUMBER: COST: WORK ORDER NUMBER: Permit Cost WORK ORDER NUMBER: Permit Cost LICENSE MUMBER: Permit Cost LICENSE NUMBER: LICENSE NUMBER: PERMIT COST LICENSE NUMBER: PERMIT COST LICENSE NUMBER: PERMIT COST LICENSE NUMBER: LICENSE NUMBER: PERMIT COST LICENSE NUMBER: PERMIT COST LICENSE NUMBER: LICENSE NUMBER: LICENSE NUMBER: PERMIT COST LICENSE NUMBER: LICENSE NUMBER: LICENSE NUMBER: LICENSE NUMBER: PERMIT COST LICENSE NUMBER: LICENSE NUMBER:
DATE OF ISSUANCE: 1/22/22 SEALS. SEALS. SEALS. SEALS. (UPDATED 7/2017)

PERMIT NUMBER: 528



BUILDING PERMIT

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

* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED*		
CONTRACTOR INFORMATION		
NAME: B+5 Construction Company Inc PHONE NUMBER: 252-207-3739 LICENSE NUMBER: 85642 ADDRESS: PO Box 2234 Elizabeth City, NC 27909 EMAIL: Vick airca 3 & areal com		
PROPERTY OWNER INFORMATION		
NAME: RIFL, LLC PHONE: 252-473-9797		
EMAIL: cparker@ bayliss bootworks.com		
DEVELOPMENT INFORMATION		
CHECK ALL THAT APPLY: ☐ NEW CONSTRUCTION ☑ ADDITION ☐ ACCESSORY STRUCTURE ☐ REMODEL ☐ SWIMMING POOL ☐ OTHER: ☐ ATTACHED ☐ DETACHED		
PROPERTY ADDRESS: 823 US-L4, Mantea NC 27954 PARCEL NUMBER: 024472000 024470000 ZONING DISTRICT: ESTIMATED COST: \$56,000 HEATED SPACE (SQ. FT.): UNHEATED SPACE (SQ. FT.): 4000 DESCRIPTION OF WORK: Metal Building Addition for Storage		
FLOODPLAIN INFORMATION		
FLOOD ZONE: AE ZONE VE ZONE X ZONE NOT APPLICABLE BASE FLOOD ELEVATION (BFE): BASE FLOOD ELEVATION (BFE): BASE FLOOD ELEVATION (FFE): BASE FLOOD ELEVATIO		
REQUIRED DOCUMENTATION CHECKLIST SITE PLAN (*SHOWS ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS & PARKING)		
☐ ONE SET OF WORKING DRAWINGS ☐ HEALTH DEPARTMENT APPROVALS (FOR RESTAURANTS)		
□ NC LIEN AGENT FORM □ CAMA PERMIT (IF REQUIRED) □ ELEVATION CERTIFICATE REQUIRED		
REVIEW FEE: \$500.00 HOMEOWNERS RECOVER FEE: PERMIT COST: \$450.00 TOTAL COST: \$90.00 CONDITIONS OF PERMIT: Barbon Structure of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector. DATE OF ISSUANCE: 1-29-22 Seals:		
Applicant Inspector Zoning Administrator		



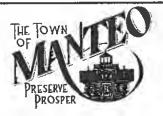
5000	Building Permit
PERMIT NUMBER: 5288	DATE: 10/11/2022
OWNER: Bill Rea	BUILDER: Virginia Foundation Solutions
ADDRESS: 413 Devon Street	CONTRACTOR LICENSE #:
ADDRESS: 413 Devon Street CITY: Manteo STATE: NC ZIP: 27954	ADDRESS: 529 Viking Drive
	CITY: Virginia Beach STATE: VA ZIP: 23452
	PHONE: 757-301-8789
LOCATION OF BUILDING SITE: 413 Devon Street Mani	teo NC 27954 ZONING DISTRICT: FLOOD ZONE: NA BFE: NA FFE: NA
PARCEL NUMBER: <u>023213600</u>	FLOOD ZONE: NA BFE: NA FFE: NA
	R METER NUMBER (IF APPLICABLE) N/A
ERECT: N/A	ALTER: N/A REPAIR: N/A
0	CRACE, N/A
SQUARE FOOTAGE OF HEATED	SPACE: N/A UNHEATED SPACE: N/A ROOMS: N/A BATHS: N/A FIREPLACES: N/A
NUMBER OF STURIES.	FINISHES:
EXTERIOR WALLS: INTERIO	OR WALLS: ROOF TYPE AND MATERIAL!
HEAT TYPE INSULA	OR WALLS: ROOF TYPE AND MATERIAL:
FOOTING:	FOUNDATION:
ADDITIONAL NOTES: Replace main beam "like for like",	Instal' Smart Jacks on poured footings and floor joist sister to stabilize foundation.
EACH APPLICATION MUST BE ACCOMPANIED	BY:
	SIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
☐ TWO SETS OF WORKING DRAWINGS	,
☐ ELEVATION OF THE SITE	
RESTAURANTS: HEALTH DEPARTMEN	IT APPROVALS
CAMA PERMIT IF REQUIRED	
O WANTERWANT REGORDED	
*** CALL BUILDING INSPECTO	OR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
OALL BOILDING INGI LOTE	THE PROOF OF THE PROPERTY OF T
This building is to be erected or altered in accordance	with the latest edition of the General Building Laws of North Carolina and all
amendments as adopted by the Town of Manteo. This	permit is valid for six (6) months. Compliance with Building Regulations is the
	e in construction or site plans will be subject to prior notification of the Planning
and Zoning Department and the Building Inspector.	KENIEW LEE & 20.00
Estimated or Contract Cost: \$22,544.75	Permit Cost: \$225.45
Date o	Permit Cost: \$225.45 of Issuance: 1/29/22 TOTAL - 285.45
	(01.0 28)
Seals: Devon Lewis	
Seals: Devon Lewis Applicant	Inspector Zoning Official
Conditions of Permit:	





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* FORM MUST BE FILLED OUT ENTIRELY. INCOMPLETE FORMS WILL NOT BE PROCESSED*		
CONTRACTOR INFORMATION		
NAME: Consistence Mane E Remodeling LLC		
PHONE NUMBER: 2-52 455 096 LICENSE NUMBER: 84441		
ADDRESS: POBOX 2371		
EMAIL: Comester dox & show i an		
PROPERTY OWNER INFORMATION		
NAME: 1) 9-E Co Lhang, PHONE: 473-2372		
EMAIL: earitray, any (Johnsten)		
DEVELOPMENT INFORMATION		
CHECK ALL THAT APPLY: NEW CONSTRUCTION ADDITION ACCESSORY STRUCTURE REMODEL SWIMMING POOL OTHER: confer fag raphin ATTACHED DETACHED		
PROPERTY ADDRESS: 700 45 264		
PARCEL NUMBER: 023 116 0000 ZONING DISTRICT: 3-2		
ESTIMATED COST: 3500 HEATED SPACE (SQ. FT.): UNHEATED SPACE (SQ. FT.):		
DESCRIPTION OF WORK: deme counter top & replace up good grant		
ones with lamer spot for ADA		
FLOODPLAIN INFORMATION		
FLOOD ZONE: AE ZONE VE ZONE X ZONE NOT APPLICABLE		
BASE FLOOD ELEVATION (BFE): FIRST FLOOR ELEVATION (FFE):		
DESCRIPTION OF WORK BELOW BFE:		
PROPOSED NUMBER OF FLOOD VENTS: ENCLOSED AREA BELOW BFE: ☐ YES ☐ NO		
NET OPENING OF FLOOD VENTS (SQ. IN.): ☐ ENGINEERED ☐ NON-ENGINEERED		
THE OF LITTLE CONTROL OF THE CONTROL		
REQUIRED DOCUMENTATION CHECKLIST		
☐ SITE PLAN (*shows actual dimensions of the Lot, all structures, driveways & parking) ☐ ONE SET OF WORKING DRAWINGS ☐ HEALTH DEPARTMENT APPROVALS (for restaurants)		
□ NC LIEN AGENT FORM □ CAMA PERMIT (IF REQUIRED) □ ELEVATION CERTIFICATE REQUIRED		
REVIEW FEE: \$50.00 CALL BUILDING INSPECTOR		
HOMEOWNERS RECOVER FEE: 24 HOURS IN ADVANCE FOR ALL INSPECTIONS		
TOTAL COST: \$85.00 This building is to be erected or altered in accordance with the		
latest edition of the General Building Laws of North Carolina and		
all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations		
is the responsibility of the undersigned applicant. Any change in		
construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.		
DATE OF ISSUANCE:		
Seals: Cw-mF		
Applicant Inspector Zoning Administrator		
· · · · · · · · · · · · · · · · · · ·		



ELECTRICAL PERMIT

PERMIT NUMBER: 5290 #			DATE: 11/25/20	22
OWNER: MI MASTER LLC ADDRESS: 1314 S. CROATAN HWY	CONTRACTO	R:ELECTRICAL 8 2556 GAYTON	LIGHTING SOL	UTIOPNS, INC
CITY: KILL DEVIL HILLS STATE: NC ZIP:27948	CITY:	RICHMOND	STATE: VA	ZIP:23238
PHONE: 252 619-0999	PHONE:	804 641-339 6		
LOCATION: MARSHES LIGHT LLC - N/A	PARCEL N	UMBER: <u>025557</u>	000 - SURROUN	DING
RESIDENTIAL: NEW ALTERATION	1			
COMMERCIAL: NEW \(\sum \) ALTERATION	I			
NC POWER WORK REQUEST NUMBER OR POWER METER	R NUMBER (IF AF	PPLICABLE) N/A		
	NCREASED TO:			
	Nork Orde <u>r</u> N			
Cost: \$ 15,900.00	Permit Cost	00.00		
If repairing or altering, please describe work: REMOVING EXISTING 175-W HID POLE LIGHTS AND DISPOSE OF PROPERLY AND INSTALL NEW LED POLE LIGHTS IN SAME LOCATION AS OTHERS. NO ADDITINAL WORK WILL BE DONE.				
CALL BUILDING INSPECTOR 24 HO DATE OF ISSUANCE: 1 SEALS: 1	URS IN ADVANC (Applicant)	CE FOR ALL IN	SPECTIONS	



5290B

ZONING PERMIT

APPLICAN		PROPERTY OWNER			
NAME:	ELECTRICAL & LIGHTING SOLUTIONS, INC	NAME: MI MASTER LLC ADDRESS: 1314 S. CROATAN HWY			
ADDRESS:	2556 GAYTON CENTRE DR RICHMOND VA 23238	KILL DEVIL HILLS NC 27948			
TELEPHON		Telephone: 1 252 619-0999			
TELEPHON	JE. 337 377 3333	TELEFRONE.			
•	ATIONSHIP OF APPLICANT TO PROPERTY OWN W LED LIGHTING IN THE COMMON AREAS.	NER: ELECTRICAL CONTRACTOR WORKING FOR MARSHES LIGHT LLC			
1. !	BUSINESS NAME: MARSHES LIGHT LLC				
2.7	2. ADDRESS OF PROPERTY: 201 FERNANDO ST AND				
	PROPOSED USE: LIGHTING UPGRADE				
4. 2	ZONING DISTRICT: Manteo FLOOD ZON	0.2% ANNAUL CHANCE FLOOD HAZZARD			
5. I	OT SIZE: N/A SQUARE FOOTAGE:	N/A			
6. I	F EXISTING, PROPOSED CHANGE OF USE: REM WITH NEW LED POST TOP LIGHTING PER MANTEO APPE	MOVE OLD 175 WATT HID POLE HEADS AND REPLACE ROVAL TOWN OF MANTEO - PHOTOMETRIC SUBMITTED			
7. 0	GROSS FLOOR AREA: N/A PROPOS	ED ADDITIONAL FLOOR AREA: N/A			
	BUFFER (NUMBER OF TREES REQUIRED & TYP				
S	SCREEN (LOCATION AND TYPE); N/A	1-107			
	SIGNAGE: SQUARE FOOTAGE FREE STANDING SQUARE FOOTAGE WALL MOUNTED				
10	PARKING: REQUIRED SPACES: N/A	_			
	EXISTING SPACES: NA/	_			
	PROPOSED SPACES: N/A	<u> </u>			
11	ATTACH SITE PLAN OR SURVEY SHO	WING EXISTING AND PROPOSED CONDITIONS			
Applican1	r's Signature:	4 Coot			
	STAFF U	SE ONLY			
Is propos	ED USE IN COMPLIANCE WITH THE ZONING DIS	STRICT IN WHICH IT IS LOCATED? YES NO			
7 A.	Marian Marian	HTE.			
	DMINISTRATOR'S SIGNATURE:	4 /			
COMMENT	s: Lighting must be	dienned by			
1)200	in ben 19, 6022.				
	46-4-1				
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