

TOWN OF NAGS HEAD

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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203208	FLOOD PERMIT	\$0.00	SS	11/04/2022

Conditions of Approval:**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203207	ZONING PERMIT - COMM	\$0	KW	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.

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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 piling 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.

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: P.O. 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 30'

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	SS	11/17/2022

Conditions of Approval:
- Call for material check. Call for final inspections

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203314	FLOOD PERMIT	\$0.00	SS	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.

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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.

(ZONING) RIGHT OF APPEAL

TOWN OF NAGS HEAD
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Commercial Project Approval
Application # 202201368

Property Address: 2236 SOUTH CROATAN HWY **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:** **Suffix:** **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 Paid/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 #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203364	ZONING PERMIT - COMM	\$0.00	KW	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.

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.

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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.

(ZONING) RIGHT OF APPEAL



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 **Suffix:** 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: 101 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 #	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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203142	FLOOD PERMIT	\$0.00	SS	11/01/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203143	ZONING PERMIT - RES	\$0.00	MK	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.



Residential Project Approval
Application # 202201284

Property Address: 107 EAST SUN DANCER CT **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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203151	FLOOD PERMIT	\$0.00	SS	11/01/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203150	ZONING PERMIT - RES	\$0.00	MK	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.



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	SS	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)

Responsible Party _____ **Date** _____



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	11/01/2022

Conditions of Approval:

- All work shall meet current codes. Stairs shall meet today's code. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203155	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)

Responsible Party _____ Date _____



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	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.

DECISION: Approved with Conditions (See above)

Responsible Party Date



Residential Project Approval
Application # 202201407

Property Address: 4126 WEST DRIFTING SANDS CT **PIN #:** 989108887002 **Parcel:** 030238000

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

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

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

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

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

Owner Address: 4126 W DRIFTING SANDS CT

Contractor Name: 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: \$80000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203163	RES ADD-REM-REP-ACC	\$320.00	SS	11/02/2022

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 #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203161	FLOOD PERMIT	\$0.00	SS	11/02/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203162	ZONING PERMIT - RES	\$0.00	MK	11/02/2022

Conditions of Approval:

covered porch addition 120 sqft - lot coverage compliant only ay 27%
underneath addition within footprint
must maintain setbacks
call for final zoning 252-449-8045

Additional Conditions:

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

PLEASE NOTE:

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

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202200209

Property Address: 4202 SOUTH VA DARE TRL **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 CONSTRUCTI **Contractor Phone:**
252-489-1252
Contractor Address: 453 NECK RD SHILOH, NC 27974

Description: Complete deck remodel

Construction Value: \$29000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203173	RES ADD-REM-REP-ACC	\$220.00	SS	11/02/2022

Conditions of Approval:

- Additional engineering may be requested. Property contain and dispose of construction debris. Call for piling inspection. Review deck condition and stair handout we have provided. Review zoning permit conditions. Call for zoning final inspection. Call for building final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/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.

DECISION: Approved with Conditions (See above)

Responsible Party Date



Residential Project Approval
Application # 202201387

Property Address: 4039 WEST SOUNDSIDE RD **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	SS	11/02/2022

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	\$0.00	SS	11/02/2022

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202203170	PW APPROVAL RES NEW	\$2304.23	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	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203169	ZONING PERMIT - RES	\$0.00	MK	11/02/2022

Conditions of Approval:

- Must comply with LDP



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 plings 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. 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	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.

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



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
619-2599

Contractor Phone: 252-

Contractor Address: P O BOX 875 GRANDY, NC 27939

Description: Replace upper level decking railing frnt back mid lvl rails frt/back rails, step level one to level two back entry steps

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. 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	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.

DECISION: Approved with Conditions (See above)



Residential Project Approval
Application # 202201441

Property Address: 4213 SOUTH VA DARE TRL **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 **Suffix:** 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 #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203179	RES ADD-REM-REP-ACC	\$370.00	SS	11/03/2022

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.

DECISION: Approved with Conditions (See above)



Residential Project Approval
Application # 202201432

Property Address: 5613 SOUTH SANDBAR DR **PIN #:** 080118313076 **Parcel:** 000380140
Lot/Block/Sec: LOT: 38 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: NORMAN, RICHARD B TRUSTEE - NORMAN, PATR
Owner Address: 1324 SMITH COVE CIR

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 with new 1/2" Medium Fir e Treated Cedar
Construction Value: \$35209 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203181	RES ADD-REM-REP-ACC	\$250.00	SS	11/03/2022

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:
FL202203180	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.

DECISION: Approved with Conditions (See above)



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 DISTRICT **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: PIB ENTERPRISES LLC
Owner Address: 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 & handrails front & back of house staying w/in footprint 11/22 replace pool fence same footprint
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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203182	FLOOD PERMIT	\$0.00	SS	11/03/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	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.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202201435

Property Address: 220 WEST BARNES ST **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 spiral 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.

DECISION: Approved with Conditions (See above)

Responsible Party Date



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
252-767-3377

Contractor Phone:

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 #	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.

(ZONING) RIGHT OF APPEAL



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

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203195	RES ADD-REM-REP-ACC	\$140.00	SS	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	Approved By:	Approved Date:
FL202203194	FLOOD PERMIT	\$0.00	SS	11/04/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203193	ZONING PERMIT - RES	\$0.00	MK	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 and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202201422

Property Address: 219 WEST WOODHILL DR **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 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: SULEWSKI, STACEY L
Owner Address: 219 W WOODHILL DR

Contractor Name: Saunders General Contractor, Inc., R.M. **Contractor Phone:** 252-207-8710
Contractor Address: PO Box 1922 Kill Devil Hills, NC 27948

Description: 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 Paid/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 material
- 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



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: 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: 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 & handrails 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 #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203199	FLOOD PERMIT	\$0.00	SS	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.

DECISION: Approved with Conditions (See above)

Responsible Party **Date**



**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:** 06/19/2020 **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
12.2.22 AMENDMENT: \$7,300.00 for windows materials and installation. CG

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. 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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203212	FLOOD PERMIT	\$0.00	SS	11/07/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203211	ZONING PERMIT - RES	\$0.00	KB	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:

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

CG Clarence Gibbs

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.



Residential Project Approval
Application # 202201452

Property Address: 9840 SOUTH OLD OREGON INLET RD **PIN #:** 071811562134 **Parcel:** 008068000

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.



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 footprint

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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203218	FLOOD PERMIT	\$0.00	SS	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	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.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202201454

Property Address: 5305 WEST CAPTAINS WAY **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: GREY DOG ESTATES LLC
Owner Address: 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 Paid/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.

(ZONING) RIGHT OF APPEAL



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:**

Contractor Address:

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

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

BUILDING INFORMATION

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 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.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202201322

Property Address: 4800 EAST ENGAGEMENT HILL LOOP **PIN #:** 060113145922 **Parcel:** 027839017

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

Owner Address: P O BOX 2202

Contractor Name: W. M. DUNN CONSTRUCTION, LLC

Contractor Phone: 252-261-1542

Contractor Address: P O Box 201 125 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

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.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202201339

Property Address: 8229 SOUTH OLD OREGON INLET RD **PIN #:** 080020900398 **Parcel:** 008988000

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
252-489-9171

Contractor Phone:

Contractor Address: 300 WALLACE ST

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 Paid/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 repair 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	SS	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.

(ZONING) RIGHT OF APPEAL



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: 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: 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

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

BUILDING INFORMATION

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.

DECISION: Approved with Conditions (See above)

Responsible Party Date



Residential Project Approval
Application # 202201457

Property Address: 5810 SOUTH SEACHASE DR **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, flooring

Construction Value: \$22050 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/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.

DECISION: Approved with Conditions (See above)

Responsible Party Date



**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: P O BOX NH, NC 27959

Description: Replacing vinyl siding, pool fence, pergola, deck floor
Construction Value: \$20000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203265	RES ADD-REM-REP-ACC	\$190.00	SS	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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203264	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.

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



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: SAND BAR LLC
Owner Address: 103 HAROLD CT

Contractor Name: Gibbs Daughters NC, LLC **Contractor Phone:** 252-202-5991
Contractor Address: PO Box 2387 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 Paid/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. 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:
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.

(ZONING) RIGHT OF APPEAL



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 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.



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

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

Construction Value: \$80000

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	SS	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	\$0.00	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



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: 252-619-8717

Contractor Address: PO BOX 2875

Description: Replace a damaged girder from front NW house corner pile spanning 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

FLOOD 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

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.



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 #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203340	RES ADD-REM-REP-ACC	\$280.00	SS	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

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 _____



Residential Project Approval
Application # 202201487

Property Address: 10418 SOUTH COLONY SOUTH DR **PIN #:** 071820705936 **Parcel:** 007515005

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

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: RUSSELL, WILLIAM E SR - RUSSELL, MARY M

Owner Address: 9343 ELK RUN RD

Contractor Name: PROPERTY OWNER

Contractor Phone:

Contractor Address: See Above

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

Construction Value: \$6400

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203344	RES ADD-REM-REP-ACC	\$160.00	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 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	SS	11/18/2022

Conditions of Approval:

ZONING INFORMATION

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

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

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.



Residential Project Approval
Application # 202201501

Property Address: 219 EAST ALTOONA SOUTH ST **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 Used:** 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 Paid/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 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.



Residential Project Approval
Application # 202201429

Property Address: 3607 SOUTH VA DARE TRL **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

Owner Name: SANDPIPER LLC
Owner Address: 6151 MILES LN

Contractor Name: SIMPLESIDE CONSTRUCTION, INC. **Contractor Phone:** 252-564-8307
Contractor Address: 308 W Helga St

Description: Replace window, doors and siding. Replace all existing deck decking and railing on dune walkway and 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	SS	11/18/2022

Conditions of Approval:

ZONING INFORMATION

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

Conditions of Approval:

Zoning has been reviewed and approved for the replacement deck board and railings on existing dune walkway and dune deck, NO new pilings. Replace deck boards and railings on top 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



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

Owner Address: 10237 FINLANDIA LN

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 #	Permit Description	Total Fees Paid/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 starting 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 INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203351	ZONING PERMIT - RES	\$0.00	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



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 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:
FL202203355	FLOOD PERMIT	\$0.00	SS	11/21/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203354	ZONING PERMIT - RES	\$0.00	KW	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

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.



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
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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

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.



Residential Project Approval
Application # 202201544

Property Address: 7201 SOUTH VA DARE TRL **PIN #:** 080015734800 **Parcel:** 008869001
Lot/Block/Sec: LOT: 1 BLK: 9 SEC: **Subdivision:** WHALEBONE BEACHES - COMP. MAP
Zoning: COMMERCIAL/RESIDENTIAL DISTRICT **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: TEETS, JOSEPH C - SEIDEL, CATHERINE
Owner Address: 6502 EVENING COMPANY CIR

Contractor Name: NARRON, TIM **Contractor Phone:** 252-455-7140
Contractor Address: 3938 POOR RIDGE RD

Description: Remove old decking & handrails & install new Trex decking & Tamko pvc handrails
Construction Value: \$16800 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203381	RES ADD-REM-REP-ACC	\$190.00	SS	11/22/2022

Conditions of Approval:

- 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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203380	FLOOD PERMIT	\$0.00	SS	11/22/2022

Conditions of Approval:

ZONING INFORMATION

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

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

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.



Residential Project Approval
Application # 202201543

Property Address: 9235 SOUTH OLD OREGON INLET RD **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:** 08/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

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

Owner Address: 80 READINGTON RD

Contractor Name: MIGUEL MORALES DBA THE PROFESSIONAL HAND **Contractor Phone:**
252-573-9372

Contractor Address: 513 BURNS DR

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

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

BUILDING INFORMATION

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 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.



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

Owner Address: 444 GOOSSEN REGAN RD

Contractor Name: 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 refrigerator 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	SS	11/22/2022

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 to 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 Paid/Due	Approved By:	Approved Date:
FL202203385	FLOOD PERMIT	\$0.00	SS	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 Party Date



Residential Project Approval
Application # 202201350

Property Address: 5311 WEST CAPTAINS WAY **PIN #:** 080117115680 **Parcel:** 024981385
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 Paid/Due	Approved By:	Approved Date:
FL202203415	FLOOD PERMIT	\$0.00	SS	11/29/2022

Conditions of Approval:

ZONING INFORMATION

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



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

Description: 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 Paid/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:
FL202203418	FLOOD PERMIT	\$0.00	SS	11/29/2022

Conditions of Approval:

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 s 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 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.



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 Above

Description: Refurbish 2 decks keeping bases on top deck extend 2 ft east 24" from the NE corner to the cargo lift 48sq ft

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 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:
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

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4280



Residential Project Approval
Application # 202201549

Property Address: 4203 SOUTH THIRTEENTH ST PIN #: 989112765740 Parcel: 028838004
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 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 1988

Owner Name: COLLAR, JOHN H III - COLLAR, LYNN S
Owner Address: 8844 WOODYHILL RD

Contractor Name: 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 Paid/Due	Approved By:	Approved Date:
RE202203430	RES ADD-REM-REP-ACC	\$190.00	SS	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	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203428	FLOOD PERMIT	\$0.00	SS	11/29/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203429	ZONING PERMIT - RES	\$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 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.



**Residential Project Approval
Application # 202201578**

Property Address: 8913 SOUTH OLD OREGON INLET RD **PIN #:** 071013241243 **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

Description: 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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202203437	FLOOD PERMIT	\$0.00	SS	11/30/2022

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202203436	ZONING PERMIT - RES	\$0.00	KW	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

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.



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

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X **Base Flood Elevation:** 0.0 **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: 252-258-1883

Contractor Address: 4212 Ivy Ln Kitty Hawk, NC 27949

Description: Demo vinyl fence & replace with 4' wooden shadow box w/2 gates in existing footprint 11/30 increasing fenced in area

Construction Value: \$19175

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202203441	RES ADD-REM-REP-ACC	\$190.00	SS	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 Paid/Due	Approved By:	Approved Date:
FL202203440	FLOOD PERMIT	\$0.00	SS	11/30/2022

Conditions of Approval:

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



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: REPAIR-14344

11/07/2022

Parcel Number: 023538000
 Location: 25 E R DANIELS RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: KIMBERLY D GRIMES
 Owner Mail Address: 155 OLD CHURCH RD WANCHESE, NC 27981
 Owner Phone and email:

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

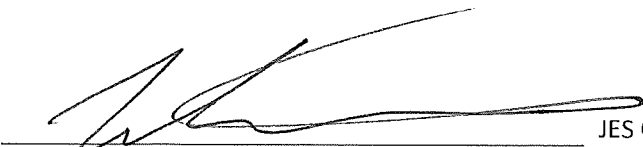
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - REPAIR,
 Description of Work 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
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TOTAL FEES:	\$150.00
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Applicant Signature:  JES CONSTRUCTION LLC

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14380

11/08/2022

Parcel Number: 025226031
 Location: D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 5RA BLK: SEC:

Owner Name: EXCHANGE INVESTMENT HOLDINGS LLC
 Owner Mail Address: P O BOX 567 ALABASTER, AL 35007
 Owner Phone and email:

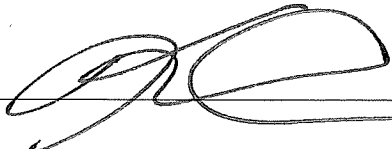
Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work CONSTRUCT A RETAINING WALL
 Septic Permit Date: Cost of Construction: \$29,431
 Septic Permit #: CAMA Permit#: 2022-30
 Flood Zone:
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14379

11/08/2022

Parcel Number: 025226029
 Location: 134 D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: DAVID NATHANIEL HATCHELL
 Owner Mail Address: P O BOX 1083 MANTEO, NC 27954
 Owner Phone and email: 252-305-3822 etwyne@yahoo.com

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

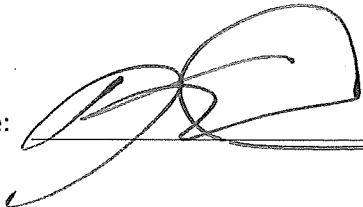
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work: CONSTUCT A RETAINING WALL

Septic Permit Date:	Cost of Construction:	\$17,620
Septic Permit #:	CAMA Permit#:	2022-29
	Flood Zone:	
	Base Flood Elevation:	0.0
	Lot/Ground Elevation:	NA

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14381

11/08/2022

Parcel Number: 025226028
 Location: 136 D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 2 BLK: SEC:

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

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

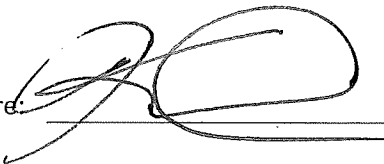
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work CONSTRUCT A RETAINING WALL

Septic Permit Date:	Cost of Construction:	\$19,343
Septic Permit #:	CAMA Permit#:	2022-27
	Flood Zone:	
	Base Flood Elevation:	0.0
	Lot/Ground Elevation:	

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14378

11/08/2022

Parcel Number: 025226027
 Location: 138 D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: O R JR BLIZZARD
 Owner Mail Address: 7701 GLENDOWER RD RALEIGH, NC 27613
 Owner Phone and email:

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work CONSTRUCT RETAINING WALL
 Septic Permit Date: Cost of Construction: \$20,684
 Septic Permit #: CAMA Permit#: 2022-28
 Flood Zone:
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14376

11/08/2022

Parcel Number: 022976000
Location: 1134 BURNSIDE RD – MANTEO
Subdivision: BURNSIDE FOREST SEC 2
Legal Description: LOT: E5 BLK: SEC: 2

Owner Name: BRIAN D HARTLIEB
Owner Mail Address: 847 BEAR CABIN DR FOREST HILL, MD 21050
Owner Phone and email: 443-506-2003

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

ACCESSORY INFORMATION

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

Applicant Signature: Julie Emory NORTHEASTERN MARINE INC
0BA3B8CB41E2434... 11/8/2022

Inspector Signature: Keil Twiford
8F937CD3D827499... 11/8/2022



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14383

11/08/2022

Parcel Number: 024042000
 Location: 224 BAYVIEW DR – STUMPY POINT
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: VALERIE D SUTTON
 Owner Mail Address: 628 OAK GROVE RD CHESAPEAKE, VA 23320
 Owner Phone and email:

Contractor Name: VALERIE D SUTTON
 Contractor Mail Address: 628 OAK GROVE RD, CHESAPEAKE, VA 23320
 Contractor Phone: 252-722-3464 Contractor NC License#: OWNER\BUILDER

ACCESSORY INFORMATION

Proposed Construction: - ACCESSORY STRUCT OVER 12 FT,
 Description of Work CONSTRUCT 12X16 STORAGE SHED
 Septic Permit Date: Cost of Construction: \$10,000
 Septic Permit #: CAMA Permit#: NA
 Footing Type: Flood Zone:
 Finished Square Footage: 0 Base Flood Elevation: 0.0
 Unfinished Square Footage: Lot/Ground Elevation: NA

Comments: SHED MUST BE AT LEAST FIVE FEET FROM PROPERTY LINE, THIS TO BE VERIFIED BY SURVEYOR AT TIME OF FINAL ELEVATION CERTIFICATE.	PERMIT FEE	\$150.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$225.00

Applicant Signature: Valerie D Sutton VALERIE D SUTTON

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-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

Northern Beach Office

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
 ELEVATOR SHAFT

Septic Permit Date:	Cost of Construction:	\$80,000
Septic Permit #:	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



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-7157

11/16/2021

Parcel Number: 024458000
 Location: 361 MOTHER VINEYARD RD – MANTEO
 Subdivision: MOTHER VINEYARD SECTION 1
 Legal Description: LOT: 30 BLK: SEC: 1

Owner Name: ROBERT V III OWENS
 Owner Mail Address: 301 W FRESH POND DR UNIT 1 KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: RENAISSANCE CONSTRUCTION COMPANY INC
 Contractor Mail Address: PO BOX 1411, MANTEO, NC 27954
 Contractor Phone: 252-473-3312 Contractor NC License#:

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - SWIMMING POOLS;HOT TUBS,
 Description of Work INSTALL FIBERGLASS POOL
 Septic Permit Date: 10/13/2021 Cost of Construction: \$65,000
 Septic Permit #: S8-6517 CAMA Permit#:
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$300.00
 ONLINE BP APPLICATION REVIEW

TOTAL FEES: \$300.00

Applicant Signature: X *Ju Midget* NAGS HEAD POOLS LLC

Inspector Signature: Keil Twiford ALD



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14586

11/21/2022

Parcel Number: 024838000
 Location: 4331 MILL LANDING RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: PARCEL TWO BLK: SEC:

Owner Name: FRESH CATCH SEAFOOD INC
 Owner Mail Address: 4331 MILL LANDING RD WANCHESE, NC 27981
 Owner Phone and email:

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

ACCESSORY INFORMATION

Proposed Construction: COMMERCIAL - REMODEL RES OR COM,
 Description of Work BULKHEAD AND CONCRETE PIER

Septic Permit Date:	Cost of Construction:	\$210,000
Water Tap Number:	CAMA Permit#:	90-22 MAJOR
	Flood Zone:	
	Base Flood Elevation:	0.0
	Lot/Ground Elevation:	

Comments:	PERMIT FEE	\$250.00
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TOTAL FEES:	\$250.00
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Applicant Signature: Sabrina Cree HACHELL CONCRETE, INC

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14665

11/28/2022

Parcel Number: 023563000
Location: 3777 MILL LANDING RD – WANCHESE
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: RUSSELL L STETSON
Owner Mail Address: PO BOX 309 WANCHESE, NC 27981
Owner Phone and email: 252-305-1814

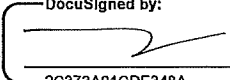
Contractor Name: COLSON CONSTRUCTION COMPANY INC
Contractor Mail Address: 1305 CAMPGROUND ROAD, ELIZABETH CITY, NC 27909-7533
Contractor Phone: 252-771-2764 Contractor NC License#: 40746

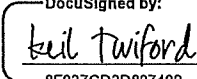
ACCESSORY INFORMATION

Proposed Construction: COMMERCIAL - MISC ACCESSORY, ACC
Description of Work: BUILD 12X24 STORAGE SHED ON EXISTING CONCRETE
Septic Permit Date: 480
Septic Permit #: 480
Cost of Construction: \$10,000
CAMA Permit#:
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$192.00

TOTAL FEES: \$192.00

Applicant Signature:  COLSON CONSTRUCTION COMPANY INC
DocuSigned by: 2C373A01CDE348A... 11/28/2022

Inspector Signature:  KT
DocuSigned by: 8F937CD3D827499... 11/28/2022



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14679

11/29/2022

Parcel Number: 024344000
 Location: 157 DOGWOOD CIR – MANTEO
 Subdivision: MOTHER VINEYARD EXT
 Legal Description: LOT: 15 BLK: SEC:

Owner Name: PAUL NORTHRUP
 Owner Mail Address: 157 DOGWOOD CIR MANTEO, NC 27954
 Owner Phone and email:

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

ACCESSORY INFORMATION

Proposed Construction:	RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT,		
Description of Work	CONSTRUCT A 16X24 SHED		
Septic Permit Date:	08/23/2022	Cost of Construction:	\$4,000
Septic Permit #:	NA	CAMA Permit#:	NA
Footing Type:		Flood Zone:	
Finished Square Footage:	0	Base Flood Elevation:	0.0
Unfinished Square Footage:		Lot/Ground Elevation:	9.6

Comments: AS BUILT SURVEY REQUIRED BEFORE PERMIT FEE \$150.00
 CO.

TOTAL FEES: \$150.00

Applicant Signature:  PAUL NORTHRUP

Inspector Signature: Keil Twiford RSF



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14721

11/30/2022

Parcel Number: 025226031
 Location: D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 5RA BLK: SEC:

Owner Name: EXCHANGE INVESTMENT HOLDINGS LLC
 Owner Mail Address: P O BOX 567 ALABASTER, AL 35007
 Owner Phone and email:

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work CONSTRUCT A NEW PIER & BOATLIFT

Cost of Construction: \$47,741
 CAMA Permit#: 86812
 Flood Zone:
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford ALD



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14722

11/30/2022

Parcel Number: 025226029
 Location: 134 D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: DAVID NATHANIEL HATCHELL
 Owner Mail Address: P O BOX 1083 MANTEO, NC 27954
 Owner Phone and email: 252-305-3822 etwyne@yahoo.com

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work CONSTRUCT A NEW PIER AND BOATLIFT

Cost of Construction: \$43,869
 CAMA Permit#: GP 86813
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford ALD



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-14723

11/30/2022

Parcel Number: 025226027
 Location: 138 D VICTOR MEEKINS RD – MANTEO
 Subdivision: WEST SIDE
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: O R JR BLIZZARD
 Owner Mail Address: 7701 GLENDOWER RD RALEIGH, NC 27613
 Owner Phone and email:

Contractor Name: MILLSTONE MARINE CONSTRUCTION INC
 Contractor Mail Address: 7000 MARITIME WOODS DR, MANTEO, NC 27954
 Contractor Phone: 2523058842 Contractor NC License#: 78077

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work CONSTRUCT A NEW PIER AND BOATLIFT

Cost of Construction: \$32,157
 CAMA Permit#: 86814
 Flood Zone:
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  MILLSTONE MARINE CONSTRUCTION INC

Inspector Signature: Keil Twiford ALD



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-14407

11/09/2022

Parcel Number: 025327001
 Location: 102 CREEFS RIDGE RD – MANTEO
 Subdivision: CREEF RIDGE GARDENS
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: JOHN T III COURTNEY
 Owner Mail Address: 102 CREEFS RIDGE RD - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: LAND AND SEA MECHANICAL SERVICES LLC
 Contractor Mail Address: 128 OBERLIN RD - WANCHESE, NC 27981
 Contractor Phone: 252-473-3836
 Contractor NC License#: L33550

DETAILS RESIDENTIAL

UNITS:	1.00	Cost of Job:	\$150
Electrical Contractor ID:	L-28692		
Units	1	MECHANICAL PROJECT FEE:	\$150.00

Comments: CHANGE OUT

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:  LAND AND SEA MECHANICAL SERVICES LLC

Inspector Signature: Keil Twiford RSF



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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 packaged heat pump.

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DocuSigned by:
Applicant Signature: *Alan Sanchez* 11/22/2022 NORTH BEACH SERVICES
028364FE97CD47A... contact@northbeachhvac.com

DocuSigned by:
Inspector Signature: *Neil Twiford* 11/22/2022 KT
BF937CD3D827499...



County of Dare
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Manteo NC 27954

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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

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

DocuSigned by:
Applicant Signature: *All Season Heating and Cooling*
491650850C914AF... 11/29/2022

DocuSigned by:
Inspector Signature: *Keil Twiford*
8F937CD3D827499... 11/29/2022



County of Dare
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Manteo: (252) 475-5870
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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.
3. 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:



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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

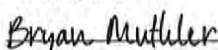
DETAILS RESIDENTIAL

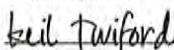
Amp Increase: 0
Service Amps: 200
Cost of Job: \$15,000
ELECTRICAL PERMIT FEE: \$150.00

Comments: install four poles with area flood light fixtures

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Applicant Signature:  11/1/2022
PRECISE ELECTRICAL SERVICES INC
preciseelectricalservices@gmail.com

Inspector Signature:  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: \$7,500

CAMA Permit

RESIDENTIAL ADDITION FEE: \$150.00

Septic Permit

Comments: CONSTRUCT 8X8 PANTRY ON SOUTH SIDE OF DWELLING

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Applicant Signature: _____

WAYNE COLE
 waynecole7575@gmail.com

Inspector Signature: _____

Keil Twiford / AD

ALD



**TOWN OF SOUTHERN SHORES
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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 # DPA22-000185

Parcel: 021936000
PIN: 986819614137
Location: 193 OCEAN BLVD
District: RS1 - Single Family Residential District
Subdiv: SO/SH AMENDED PLAT B SEC 3
Lot-Block-Sect: LOT: 23 24 BLK: 31 SEC: 3

Owner: MYERS, CHRISTOPHER A
Address: 4501 SAWGRASS CT
ALEXANDRIA, VA 22312
Phone #: 703-850-4121

BUSINESS NAME: Caribbean Pool and Spa of the Outer Banks, Inc
CONTRACTOR'S NAME: Pete Kelly
ADDRESS: 6024 Currituck Road
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: (252) 480-2900
CELL#:
FAX#:
EMAIL: pete@caribbeanobx.com

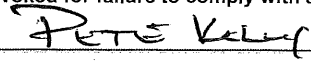
NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 73571
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: Peter Franklin Kelly
LIEN AGENT NAME: NORTH AMERICAN TITLE INSURANCE COMPANY
ENTRY#: 1779739
LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL INGROUND POOL WITH FENCE
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000097
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 09/30/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: S22-13466
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 09/28/2022

TOTAL CONSTRUCTION COST: \$72,961.00	
PERMIT FEES:	Total Cost
Description	250.00
Swimming Pools	TOTAL FEE: 250.00

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

09/30/2022

Date Approved
11-1-22



 Building/Code/Zoning Official
 By: 

Date Issued
11-1-22



**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 # DPA22-000197

Parcel: 021268000
PIN: 986806288897
Location: 9 TWELFTH AVE
District: RS1 - Single Family Residential District
Subdiv: SEA CREST VILLAGE
Lot-Block-Sect: LOT: 7 BLK: 57 SEC:

Owner: GOFF, LARRY H TTEE
Address: 5212 LOCKE LN
VIRGINIA BEACH, VA 23464
Phone #: 757-646-0228

BUSINESS NAME: Mike Moran
CONTRACTOR'S NAME: Mike Moran
ADDRESS: 2802 S. Wrightsville Avenue
CITY, STATE, ZIP: Nags Head, NC 27959
OFFICE#: (252) 202-0443
CELL#:
FAX#:
EMAIL: campmjm@charter.net

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 rail and stair lower level and decking on platform

SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

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

TOTAL CONSTRUCTION COST: \$27,300.00	
PERMIT FEES:	Total Cost
Description	273.00
Remodel / Renovation / Repair Fee	10.00
Homeowners Recovery Fund	TOTAL FEE: 283.00

***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.

Michael W. Gannon (Signature) 11/1/22
 Applicant - Owner/Contractor (Please print and sign name) 10/24/2022
Date Approved

Kevin Clark (Signature) 11-1-22
 Building/Code/Zoning Official *By MB* Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000202

Parcel:	022383504	Owner:	REESE, PATRICIA A
PIN:	986711566952	Address:	119 SUNRISE VW KITTY HAWK, NC 27949
Location:	153 CHICHAUK TRL	Phone #:	703-994-0872
District:	RS1 - Single Family Residential District		
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 504 BLK: SEC:		

BUSINESS NAME:	SECOTA CONTRACTING INC. T/A NEAL CONTRACTING	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	Matt Neal	NC G.C. LICENSE NUMBER:	88083
ADDRESS:	P.O. Box 497	LIMITATION:	UNLIMITED
CITY, STATE, ZIP:	Kitty Hawk, NC 27949	CLASSIFICATION:	Building
OFFICE#:	(252) 564-9780	QUALIFIER:	Matthew D Neal
CELL#		LIEN AGENT NAME:	Old Republic Title
FAX#:		ENTRY#:	1797957
EMAIL:	matt@nealcontracting.com	LIEN AGENT ADDRESS:	223 West Street, Suite 900, Raleigh, NC 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): NEW CONSTRUCTION - Construct New 4 Bedroom House and Pool
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 8	TYPE OF FOUNDATION: Monolithic slab	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 3047.0	HEAT: Heat Pump	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 1,517	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES: 1	INTERIOR WALLS: Drywall, Mixed	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 4	EXTERIOR WALLS: LP Smart Side	ZONING PERMIT #: ZP22-000108
SEPTIC CAP. # OF PERSONS: 8	FIREPLACE:	DATE APPROVED: 11/01/2022
BATHS: 4 ½ BATHS: 1	ROOF: Other	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 630	INSULATION: Other	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 480 SHED:	DECKS (SqFt): 887	
FLOOD ZONE: Unshaded X	WINDOWS MAKE: Andersen	SEPTIC PERMIT #: S3-13071
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Casement, Picture and Awning	DATE ISSUED: 09/09/2022

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$1,200,000.00
Description		Total Cost
Plan Review Fee - Single Family New Construction		150.00
Heated/Living Area Fee (Single Family)		1,828.20
Non-Heated Areas Fee (Single Family)		455.10
Swimming Pools		250.00
Homeowners Recovery Fund		10.00
		TOTAL FEE: 2,693.30

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 Matthew Neal	11/01/2022 Date Approved
Applicant - Owner/Contractor (Please print and sign name)	
 Kevin Clark	11-1-2022 Date Issued
Building/Code/Zoning Official By MB	



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000206

Parcel: 022379000
PIN: 986711764569
Location: 106 CHICHAUK TRL
District: RS1 - Single Family Residential District
Subdiv: CHICHAUK
Lot-Block-Sect: LOT: 151 BLK: SEC:

Owner: BORMAN, PETER
Address: 821 GEORGIA MOUNTAIN RD
FAIRFAX, VT 05454
Phone #: 802-734-7226

BUSINESS NAME: Gulfstream Pools
CONTRACTOR'S NAME: Dien Davis
ADDRESS: P.O. Box 2318
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: (252) 255-1192
CELL#: (252) 255-1192
FAX#: (252) 255-1193
EMAIL: deanna@gulfstreampoolsandspas.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: 60217
LIMITATION: UNLIMITED
CLASSIFICATION: NORMAN DAVIS
QUALIFIER:
LIEN AGENT NAME: Fidelity National Title Company, LLC
ENTRY#: 1798813
LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALLATION OF FIBERGLASS POOL, CONCRETE DECK AND FENCE
SPECIAL CONDITIONS - ALL WOOD BELOW RFP (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000107
SEPTIC CAP. # OF PERSONS: 10	FIREPLACE:	DATE APPROVED: 10/31/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: S5-13949
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 10/18/2022

TOTAL CONSTRUCTION COST: \$63,485.00	
PERMIT FEES:	Total Cost
Description	250.00
Swimming Pools	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 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.

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

10/31/2022

Date Approved

Kevin Clark

11-1-2022
Date Issued

Building/Code/Zoning Official *By MB*



**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 # DPA22-000207

Parcel:	029163000	Owner:	BERTINI, JOSEPH M III
PIN:	986805197221	Address:	392 SEA OATS TRL SOUTHERN SHORES, NC 27949
Location:	392 SEA OATS TRL	Phone #:	252-455-7039
District:	RS1 - Single Family Residential District		
Subdiv	SO/SH BLK 60		
Lot-Block-Sect:	LOT: 85 BLK: 60 SEC:		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	BERTINI, JOSEPH M III	NC G.C. LICENSE NUMBER:	
ADDRESS:	392 SEA OATS TRAIL	LIMITATION:	
CITY, STATE, ZIP:	SOUTHERN SHORES, NC 27949	CLASSIFICATION:	
OFFICE#:	252-255-1192	QUALIFIER:	
CELL#:	252-255-1192	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:		LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - NEW POOL INSTALLATION & STORAGE SHED
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input checked="" type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 288	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000109
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 11/01/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE: 288	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: S22-13431
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 09/27/2022

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$48,000.00
Description		Total Cost
Non-Heated Areas Fee (Single Family)		86.40
Swimming Pools		250.00
		TOTAL FEE: 336.40

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Kevin Clark *JOSEPH M BERTINI III*
Applicant - Owner/Contractor (Please print and sign name)

11/01/2022

Date Approved

Kevin Clark
Building/Code/Zoning Official

11-2-2022
Date Issued

By mb

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



Residential Trade Contractor Permit

Date November 02, 2022

**TP22-000191
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 Mechanical Gas

Contractor:

Company Name: Surfside Heating and Air Conditioning, Inc
Phone: (252) 261-4949
N. C. License Number: L.20077

Qualifier: Robert K Eike
Address: 124 Fox Knoll Dr
Harbinger , NC 27941

Description of Work: REPLACE 3.5 TON CARRIER 14 SEER HEAT PUMP & AIR HANDLER

Project Cost Estimate: \$7,500.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt Received From Amount

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



Signature of Licensee or Duly Authorized Representative 11/2/22 Date



Signature of Permit Official 11-2-22 Date
By MB



**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 # DPA22-000214

Parcel: 021121000
PIN: 986810464211
Location: 4 FIFTH AVE
District: RS1 - Single Family Residential District
Subdiv: SEA CREST VILLAGE
Lot-Block-Sect: LOT: 2 BLK: 50 SEC:

Owner: 4 FIFTH AVENUE, LLC
Address: C/O MARSHALL CRSS
RICHMOND, VA 23226
Phone #: --

BUSINESS NAME: KICZ Maintenance
CONTRACTOR'S NAME: J. Wesley Liverman, Jr.
ADDRESS: P.O. Box 875
CITY, STATE, ZIP: Grandy, NC 27939
OFFICE#: (252) 619-2599
CELL#
FAX#:
EMAIL: kiczmaintenance@yahoo.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 84184
LIMITATION: LIMITED
CLASSIFICATION: RESIDENTIAL
QUALIFIER: BARRY RICHARD NEIER
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - REPLACE HANDRAILS, PICKETS, AND DECK BOARDS ON EAST FACING DECK AND STAIRS
SPECIAL CONDITIONS - ALL WOOD BELOW RFP (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Vacation Cottage < 30 days
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: VE - 11 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: Plus 3 ft of Freeboard	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$9,100.00	
PERMIT FEES:	Total Cost
Description	
Remodel / Renovation / Repair Fee	91.00
Homeowners Recovery Fund	10.00
Minimum Permit Fee	9.00
	TOTAL FEE: 110.00

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KICZ MAINTENANCE CB HOMEYOUT

Applicant - Owner/Contractor

(Please print and sign name)

11/03/2022

Date Approved

Ken Ull

CB Homeyout

11-3-22
Date Issued

Building/Code/Zoning Official

By: WJA



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

BUILDING PERMIT # DPA22-000210

Parcel:	021085000	Owner:	NYSTROM, JON B
PIN:	986810454445	Address:	23022 IVY HOLLOW CT GLEN ALLEN, VA 23059
Location:	7 FOURTH AVE	Phone #:	804-310-6640
District:	RS1 - Single Family Residential District		
Subdiv	SEA CREST VILLAGE		
Lot-Block-Sect:	LOT: 6 BLK: 48 SEC:		

BUSINESS NAME:	ROBERT J GOMEZ JR GENERAL CONTRACTOR INC	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	ROBERT J GOMEZ	NC G.C. LICENSE NUMBER:	43276
ADDRESS:	3110 BAY DRIVE	LIMITATION:	INTERMEDIATE
CITY, STATE, ZIP:	KILL DEVIL HILLS, NC 27948	CLASSIFICATION:	RESIDENTIAL
OFFICE#:		QUALIFIER:	ROBERT J GOMEZ JR. NORTH AMERICAN TITLE INSURANCE COMPANY
CELL#		LIEN AGENT NAME:	1800835
FAX#:		ENTRY#:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603
EMAIL:	RGOMEZJR3110@GMAIL.COM	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): NEW CONSTRUCTION - NEW 6 BEDROOM HOUSE WITH SWIMMING POOL & HOT TUB
SPECIAL CONDITIONS - FOUNDATION SURVEY & AS BUILT SHALL SHOW FINISHED GRADE ELEVATION
ALL WOOD BELOW RPFE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 12	TYPE OF FOUNDATION: Pile	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 3526.0	HEAT: Heat Pump	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 802	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES: 3	INTERIOR WALLS: SHEETROCK	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 6	EXTERIOR WALLS: SMART SIDING	ZONING PERMIT #: ZP22-000112
SEPTIC CAP. # OF PERSONS: 12	FIREPLACE: Gas	DATE APPROVED: 09/29/2022
BATHS: 5 ½ BATHS: 2	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt): 25	DATE ISSUED:
POOL: 1,426 SHED:	DECKS (SqFt): 384	
FLOOD ZONE: Unshaded X	WINDOWS MAKE: ANDERSON	SEPTIC PERMIT #: S22-14085
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Double Hung	DATE ISSUED: 10/24/2022

TOTAL CONSTRUCTION COST: \$800,000.00	
PERMIT FEES:	
Description	Total Cost
Plan Review Fee - Single Family New Construction	150.00
Heated/Living Area Fee (Single Family)	2,115.60
Non-Heated Areas Fee (Single Family)	240.60
Swimming Pools	250.00
Homeowners Recovery Fund	10.00
	TOTAL FEE: 2,766.20

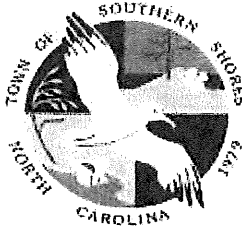
***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or 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.

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

 Kevin Clark
 Building/Code/Zoning Official *By MB*

Date Approved
 11-4-2022
 Date Issued

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



Residential Trade Contractor Permit

Date 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 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 11-1-22
Date


Signature of Permit Official 11-4-22
Date
By: WA



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

BUILDING PERMIT # DPA22-000213

Parcel:	022519036	Owner:	DARDEN, NATHEN JAMES
PIN:	986718410631	Address:	12 BLUE PETE CT
Location:	12 BLUE PETE CT		SOUTHERN SHORES, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	252-619-1589
Subdiv	SO/SH BLK 129 SEC A		
Lot-Block-Sect:	LOT: 12 BLK: 129 SEC: A		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	DARDEN, NATHEN JAMES	NC G.C. LICENSE NUMBER:	
ADDRESS:	12 BLUE PETE CT	LIMITATION:	
CITY, STATE, ZIP:	SOUTHERN SHORES, NC 27949	CLASSIFICATION:	
OFFICE#:	252-619-1589	QUALIFIER:	
CELL#:	252-619-1589	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:		LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL -REPLACE FRONT STEPS
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$2,000.00
Description		Total Cost
Remodel / Renovation / Repair Fee		20.00
Minimum Permit Fee		80.00
Misc. Fee VIOLATION FEE		100.00
		TOTAL FEE: 200.00

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Michele Darden *M. Darden*

Applicant - Owner/Contractor

(Please print and sign name)

11/03/2022

Date Approved

Kevin Clark

Building/Code/Zoning Official

By

Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000204

Parcel: 021538000
PIN: 986814248694
Location: 280 SEA OATS TRL
District: RS1 - Single Family Residential District
Subdiv: SO/SH BEACH BLKS 63 73 83 82A
Lot-Block-Sect: LOT: 28 BLK: 73 SEC:

Owner: LOBRED, ANDREW JAMES
Address: 280 SEA OATS TRL
KITTY HAWK, NC 27949
Phone #: 804-363-1981

BUSINESS NAME: Sandscapes Inc
CONTRACTOR'S NAME: Sarah Brown
ADDRESS: PO Box 1664
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#:
CELL#: (252) 261-2550
FAX#:
EMAIL: sandscapesinc@msn.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: CL0959
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME: Fidelity National Title Company, LLC
ENTRY#: 1793475
LIEN AGENT ADDRESS: 223 S. West Street, Suite 900 / Raleigh, NC 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - Expansion of pool fence on all three sides. Installation of wood shed roof tiki bar, 10x12 in size. Installation of additional pavers for tiki area.

SPECIAL CONDITIONS -
*****SHED TO BE TIED DOWN WITH HELICAL ANCHORS ON ALL 4 CORNERS*****
ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input checked="" type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 120	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000115
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 11/07/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$28,000.00	
PERMIT FEES:	Total Cost
Description	
Non-Heated Areas Fee (Single Family)	36.00
Minimum Permit Fee	64.00
	TOTAL FEE: 100.00

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Applicant - Owner/Contractor *(Signature)* (Please print and sign name)
 Building/Code/Zoning Official *Kevin Clark*
By MB

11/07/2022
Date Approved
 11-7-2022
Date Issued



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

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000209

Parcel: 021433002
PIN: 986813234359
Location: 44 A HICKORY TRL
District: RS1 - Single Family Residential District
Subdiv: SO/SH SOUNDSTIDE BLK 104
Lot-Block-Sect: LOT: 20-B BLK: 104 SEC:

Owner: GOSCINSKI, THEODORE JOHN
Address: 44 HICKORY TRL
KITTY HAWK, NC 27949
Phone #: --

BUSINESS NAME: Dan Osman
CONTRACTOR'S NAME: Dan Osman
ADDRESS: PO Box 7403
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 202-4599
CELL#: (252) 202-4599
FAX#:
EMAIL: osmandanny@gmail.com

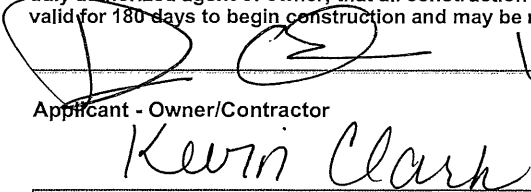
NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 76259
LIMITATION: Limited
CLASSIFICATION: Building
QUALIFIER: Daniel S. Osman
LIEN AGENT NAME:
ENTRY#: 1799109
LIEN AGENT ADDRESS:

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: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000110
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 11/02/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$30,500.00	
PERMIT FEES:	Total Cost
Description	250.00
Swimming Pools	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 duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.


 Applicant - Owner/Contractor (Please print and sign name)
Kevin Clark
 Building/Code/Zoning Official *By MB*

11/02/2022
 Date Approved
 11-8-2022
 Date Issued

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



Residential Trade Contractor Permit

Date 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 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: DOUBLE C/O TRANE 2-TON 16 SEER H/P SYSTEM.NEW STAND AND DUCT MODS.TRANE 5-TON 1 6 SEER H/P SYSTEM.

Project Cost Estimate: \$24,852.00

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.

Brian Lancaster

Signature of Licensee or Duly Authorized Representative

11/8/2022

Date

Kevin Clark 11-8-2022

Signature of Permit Official

Date

Bymb

**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 Trade 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 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 MINI SPLIT INSTALL MITSUBISHI 18 SEER 1.5 TON DUCTLESS MINI SPLIT H/P SYSTEM THAT WILL SERVICE THE UPSTAIRS. NEW STAND

Project Cost Estimate: \$4,573.00

Permit Amount: 150.00

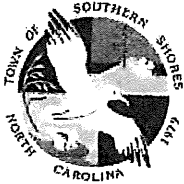
Payment:

Date Type Reference Receipt Received From Amount

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

Brian Lancaster
Signature of Licensee or Duly Authorized Representative 11/8/2022
Date

Kevin Clark
Signature of Permit Official 11-8-2022
Date
By MB



**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 # DPA22-000215

Parcel: 021676000
 PIN: 986705293606
 Location: 156 S DOGWOOD TRL
 District: RS1 - Single Family Residential District
 Subdiv: SO/SH SOUND BLKS 112 122 123
 Lot-Block-Sect: LOT: 3 BLK: 112 SEC:
 Owner: KONSTANZER, MAX D
 Address: 156 S DOGWOOD TRL
 SOUTHERN SHORES, NC 27949
 Phone #: --

BUSINESS NAME: Millstone Marine Construction
 CONTRACTOR'S NAME: Kevin Lineberger
 ADDRESS: 201-A Etheridge Rd.
 CITY, STATE, ZIP: Manteo, NC 27954
 OFFICE#: (252) 305-8842
 CELL#: --
 FAX#: (252) 305-8259
 EMAIL: millstonemarine@gmail.com
 NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
 NC G.C. LICENSE NUMBER: 78077
 LIMITATION: Limited
 CLASSIFICATION: Building
 QUALIFIER: Kevin Lineberger
 LIEN AGENT NAME: INVESTORS TITLE INSURANCE CO
 ENTRY#: 1803446
 LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
 RALEIGH N.C 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL A NEW BULKHEAD AND EXCAVATE A BOAT BASIN FOR A LIFT
 SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 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: 1/2 BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #: 86479
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED: 10/05/2022
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:	TOTAL CONSTRUCTION COST: \$36,735.00
Description	
Bulkhead, Dock, Pier, Retaining Wall Fee	Total Cost 150.00
	TOTAL FEE: 150.00

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Kevin Clark
 Applicant - Owner/Contractor
 Kevin Clark
 Building/Code/Zoning Official
 By MB

(Please print and sign name)

11/03/2022
 Date Approved
 11-8-2022
 Date Issued



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

BUILDING PERMIT # DPA22-000211

Parcel: 021880000
PIN: 986707792843
Location: 160 OCEAN BLVD
District: RS1 - Single Family Residential District
Subdiv: SO/SH AMENDED PLAT B SEC 3
Lot-Block-Sect: LOT: E & G, & 12' STRIP BLK: 26 SEC: 3

Owner: SMITH, MARK E
Address: 3804 BIRDSVILLE RD
DAVIDSONVILLE, MD 21035
Phone #: 443-486-2634

BUSINESS NAME: ADP CONSTRUCTION
CONTRACTOR'S NAME: ADRIAN PITTS
ADDRESS: 801 INDIAN TRAIL DRIVE
CITY, STATE, ZIP: KILL DEVIL HILLS, NC 27948
OFFICE#: (252) 305-8088
CELL#:
FAX#:
EMAIL: adp8088@gmail.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 53785
LIMITATION: UNLIMITED
CLASSIFICATION: BUILDING
QUALIFIER: ADRIAN PITTS
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, EXTERIOR STAIRS & HANDRAILS, MAINTAIN EXISTING FOOTPRINT
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

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

TOTAL CONSTRUCTION COST: \$50,000.00	
PERMIT FEES:	Total Cost
Description	500.00
Remodel / Renovation / Repair Fee	10.00
Homeowners Recovery Fund	TOTAL FEE: 510.00

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John Pitts _____ *Adrian Pitts*
Applicant - Owner/Contractor (Please print and sign name)

11/03/2022

Date Approved

Kevin Clark _____
Building/Code/Zoning Official

11-10-2022
Date Issued

By MB



**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 # DPA22-000212

Parcel:	022579000	Owner:	LLOYD, BRANDON REED
PIN:	986710255228	Address:	5262 MOUNTAIN VIEW DR BROAD RUN, VA 20137
Location:	83 WILD SWAN LN	Phone #:	540-219-8462
District:	RS1 - Single Family Residential District		
Subdiv	SO/SH 114-117 126,127 200-202		
Lot-Block-Sect:	LOT: 3 BLK: 127 SEC:		

BUSINESS NAME:	Barrett & Haber, LLC, T/A Emanuelson & Dad	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	Jackie Lewis	NC G.C. LICENSE NUMBER:	87233
ADDRESS:	PO Box 448	LIMITATION:	Limited
CITY, STATE, ZIP:	Nags Head, NC 27959	CLASSIFICATION:	Residential
OFFICE#:	(252) 261-2212	QUALIFIER:	Elizha Barrett
CELL#		LIEN AGENT NAME:	
FAX#:	(252) 261-1115	ENTRY#:	
EMAIL:	emanuelson6705@outlook.com	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - rebuild front stairs - 6' wide (stairs to right of driveway)
SPECIAL CONDITIONS -

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
	Detached Garage - Accessory Storage Building - Dune Deck - Generator
OCCUPANCY:	TYPE OF FOUNDATION:
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:
NON-HEATED AREAS (SqFt): 0	A/C:
NUMBER OF STORIES:	INTERIOR WALLS:
BEDROOMS:	EXTERIOR WALLS:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:
BATHS: ½ BATHS:	ROOF:
GARAGE - DETACHED: ATTACHED:	INSULATION:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):
POOL: SHED:	DECKS (SqFt):
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:
	PERMIT TYPE: Residential
	RESIDENCE TYPE: 2nd Home
	BUILDING USE: Single Family
	ZONING DISTRICT: RS1 - Single Family Residential District
	ZONING PERMIT #:
	DATE APPROVED:
	PERMITTED/CONDITIONAL USE: Single Family Dwelling
	CAMA PERMIT #:
	DATE ISSUED:
	SEPTIC PERMIT #: S22-14243
	DATE ISSUED: 11/01/2022

TOTAL CONSTRUCTION COST: \$4,156.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	42.00
Homeowners Recovery Fund	10.00
Minimum Permit Fee	58.00
	TOTAL FEE: 110.00

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Signature _____ *Lovelei Zumbrennen for Emanuelson & Dad*
 Applicant - Owner/Contractor (Please print and sign name) Date Approved

Signature _____
 Building/Code/Zoning Official Date Issued

By ms



**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 # DPA22-000218

Parcel:	022420000	Owner:	TILLERY-BERNARD, KRISTEN
PIN:	986716930744	Address:	100 HIGH DUNE LOOP
Location:	100 HIGH DUNE LOOP		SOUTHERN SHORES, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	252-202-4217
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 247 BLK: SEC:		

BUSINESS NAME:	Compass Edge Construction, Inc.	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	David Buchanan	NC G.C. LICENSE NUMBER:	56041
ADDRESS:	103 High Dune Loop	LIMITATION:	Intermediate
CITY, STATE, ZIP:	Southern Shores, NC 27949	CLASSIFICATION:	Building
OFFICE#:		QUALIFIER:	David Paul Buchanan
CELL#:		LIEN AGENT NAME:	Investor Title Insurance Company
FAX#:		ENTRY#:	1806021
EMAIL:	david@compassedge.com	LIEN AGENT ADDRESS:	223 S. West Street, Suite 900 Raleigh, NC 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Replace old fiberglass pool with new concrete pool.
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
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: 312 SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$45,000.00
Description		Total Cost
Swimming Pools		250.00
		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 duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

[Signature] _____ *DAVID P. BUCHANAN*
Applicant - Owner/Contractor (Please print and sign name)

11/09/2022

Date Approved

Kevin Clark _____
Building/Code/Zoning Official

11-9-2022
Date Issued

By MB

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



Residential Trade Contractor Permit

Date November 08, 2022

TP22-000194
Electrical Trade Permit

Project Address: 29 PERIWINKLE PL

PIN #: 021673000

Property Owner: NIX-KARNAKIS, NANCY LOVE TTEE

Mailing Address: 2504 W MEREDITH DR
VIENNA, VA 22181

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Outer Banks Electric, Inc.

Qualifier: Chris Knight

Phone: (252) 473-3033

Address: 714 N Hwy 64/264

N. C. License Number: 24451

Manteo, NC 27954

Description of Work: replace meter base and service entrance cable. Add exterior 200 amp service disconnect

Project Cost Estimate: \$3,200.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt Received From Amount

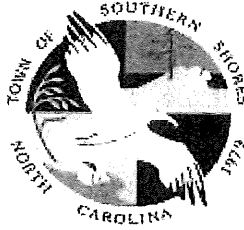
I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted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

 11-8-22
Signature of Licensee or Duly Authorized Representative Date

 11-14-2022
Signature of Permit Official Date

By 

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



Residential Trade Contractor Permit

Date November 08, 2022

TP22-000195
Plumbing Trade Permit

Project Address: 46 GINGUITE TRL

PIN #: 022519112

Property Owner: GERO, MARK ROBERT

Mailing Address: 46 GINGUITE TRL
SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas
Contractor:

Company Name: Absolute Plumbing

Qualifier: Ken Long, Sr.

Phone: (252) 996-0691

Address: 110 Quarter Landing Court

N. C. License Number: 30190

Harbinger, NC 27941

Description of Work: REPLACEMENT OF HOMES WATER DISTRIBUTION PIPING & REPLACEMENT OF WATER SERVICE LINE

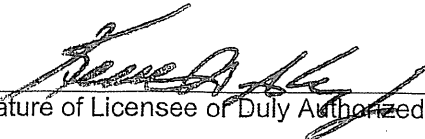
Project Cost Estimate: \$17,000.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt 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 11/8/22 Date


Signature of Permit Official 11-14-2022 Date
By MB



**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 # DPA22-000189

Parcel: 022596000
PIN: 986714343819
Location: 74 S DOGWOOD TRL
District: RS1 - Single Family Residential District
Subdiv: SO/SH 114-117 126,127 200-202
Lot-Block-Sect: LOT: 5 BLK: 202 SEC:

Owner: EWING, WAYNE L
Address: 205 BLAIR RD
YORKTOWN, VA 23692
Phone #: 757-771-0066

BUSINESS NAME: May's Landing Enterprises, Inc. T/A Southern Scapes Pool & Lands
CONTRACTOR'S NAME: Tom May
ADDRESS: 7441 Caratoke Highway
CITY, STATE, ZIP: Jarvisburg, NC 27947
OFFICE#: (252) 491-5303
CELL#:
FAX#: (252) 491-5052
EMAIL: admin@southernscapesllc.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 77270
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: Thomas Harry May, Jr
LIEN AGENT NAME: Premier Land Title Insurance Company
ENTRY#: 1786582
LIEN AGENT ADDRESS: 223 S West Street, Suite 900, Raleigh, NC 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Install Pool
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000116
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 11/09/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 686 SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: S22-12603
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 08/15/2022

TOTAL CONSTRUCTION COST: \$60,984.00	
PERMIT FEES:	Total Cost
Description	250.00
Swimming Pools	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 duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

[Signature]
Applicant - Owner/Contractor

Tom May
(Please print and sign name)

11/09/2022

Date Approved

Kevin Clark
Building/Code/Zoning Official

By MB

11-14-2022
Date Issued



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

**COMMERCIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000219

Parcel:	022510000	Owner:	SOUTHERN SHORES OWNER, LLC
PIN:	986720717057	Address:	610 E MOREHEAD ST STE 100
Location:	5500 N CROATAN HWY		CHARLOTTE, NC 28202
District:	C - General Commercial District	Phone #:	
Subdiv	SUBDIVISION - NONE		
Lot-Block-Sect:	LOT: BLK: SEC:		

BUSINESS NAME:	GALLAHER MANAGEMENT GROUP INC.	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	STORMY PHILLIPS	NC G.C. LICENSE NUMBER:	73017
ADDRESS:	270 LIVE OAK ROAD	LIMITATION:	UNLIMITED
CITY, STATE, ZIP:	NEWPORT, NC 28570	CLASSIFICATION:	BUILDING
OFFICE#:		QUALIFIER:	ZACK GALLAHER
CELL#:	(304) 923-9074	LIEN AGENT NAME:	WFG National Title Insurance Company
FAX#:		ENTRY#:	1809944
EMAIL:	SPHILLIPS@MGMCONTRACTING.COM	LIEN AGENT ADDRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): RE-MODEL - RE-SKIN OF EXISTING TPO ROOF WITH SAME IN LIKE KIND, UPON COMPLETION ISSUE A MANUFACTURERS WARRANTY
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

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

TOTAL CONSTRUCTION COST: \$145,000.00	
PERMIT FEES:	Total Cost
Description	1,450.00
Remodel / Renovation / Repair Fee	TOTAL FEE: 1,450.00

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Alex Gallaher _____ *Alex Gallaher* _____
 Applicant - Owner/Contractor (Please print and sign name)

Kevin Clark
 Building/Code/Zoning Official
 By *ms*

Date Issued
 11/16/2022
Date Approved
 11-16-2022



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

**COMMERCIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000217

Parcel: 022510000
PIN: 986720717057
Location: 5500 N CROATAN HWY
District: C - General Commercial District
Subdiv SUBDIVISION - NONE
Lot-Block-Sect: LOT: BLK: SEC:

Owner: SOUTHERN SHORES OWNER, LLC
Address: 610 E MOREHEAD ST STE 100
CHARLOTTE, NC 28202
Phone #: 7043194933

BUSINESS NAME: Ocean Builders LLC
CONTRACTOR'S NAME: Thomas Twiddy
ADDRESS: 349 Water Plant Rd Unit E
CITY, STATE, ZIP: Manteo, NC 27954
OFFICE#: 252-449-9300
CELL#
FAX#:
EMAIL: admin@oceanbldrs.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 56420
LIMITATION: Unlimited
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME: Chicago Title Company, LLC
ENTRY#: 1805762
LIEN AGENT ADDRESS: 223 S West St, Ste 900, Raleigh, NC 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - REMODEL THE UNIT ON THE RIGHT TO RUN TEMPORARY 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.
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMITTED/CONDITIONAL USE: Per ZA
HEATED/LIVING AREAS (SqFt):	HEAT:	COMMERCIAL USE: Per ZA
NON-HEATED AREAS (SqFt):	A/C:	PROPERTY USE: Commercial
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000117
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	BUILDING USE: Per BL
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$103,040.00
Description		Total Cost
Remodel / Renovation / Repair Fee		980.00
		TOTAL FEE: 980.00

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

Building/Code/Zoning Official
Kevin Clark
By MB

Date Issued
11/16/2022
Date Approved

11-17-22

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



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 Mechanical 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

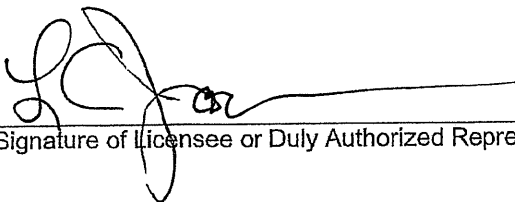
Description of Work: REPLACE EXISTING WITH A 2 TON 14 SEER AMERICAN STANDARD SILVER INDOOR & OUTDOOR HEAT PUMP SYSTEM

Project Cost Estimate: \$6,300.00

Permit Amount: 150.00

Payment:
Date Type Reference Receipt Received From Amount

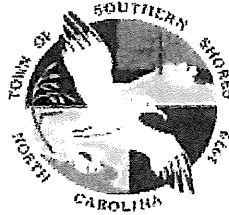
I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted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


Signature of Licensee or Duly Authorized Representative

11/16/2022
Date


Signature of Permit Official
By MB
11-21-2022
Date

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



Residential Trade Contractor Permit

Date 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 Electrical Mechanical 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 2.5 TON 14 SEER HEAT PUMP SYSTEM

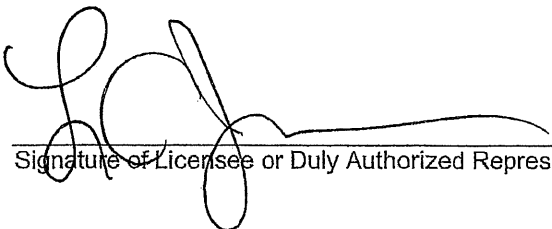
Project Cost Estimate: \$3,400.00

Permit Amount: 150.00

Payment:

Date **Reference Receipt Received** **From** **Amount**

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



Signature of Licensee or Duly Authorized Representative

11/18/22

Date



Signature of Permit Official
By 

11-21-2022

Date

TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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Residential Trade Contractor Permit

Date 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 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 16 SEER 2-TON H/P SYSTEM THAT SERVICES THE UPSTAIRS.

Project Cost Estimate: \$7,629.00

Permit Amount: 150.00

Payment:

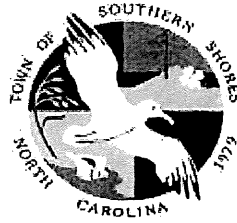
Date Type Reference Receipt Received From Amount

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

Brian Somater 11/22/2022
Signature of Licensee or Duty Authorized Representative Date

Kevin Clark 11-22-2022
Signature of Permit Official Date
By me

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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 SYSTEM THAT SERVICES THE UPSTAIRS.

Project Cost Estimate: \$9,883.00

Permit Amount: 150.00


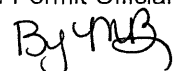
Payment:

Date Type Reference Receipt Received From Amount

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


Signature of Licensee or Duly Authorized Representative

11/21/2022
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 - 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 B TRUSTEE

Mailing Address: 11501 WOODSTOCK WAY
RESTON, VA 20194

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. HOY HEATING & AIR CONDITIONING

Qualifier: JAYDEN CHUTSKOFF

Phone: (252) 261-2008

Address: P.O. BOX 179

N. C. License Number: 35329

KITTY HAWK, NC 27949

Description of Work: SINGLE C/O TRANE 16 SEER 4-TON H/P SYSTEM THAT SERVICES THE UPSTAIRS.

Project Cost Estimate: \$11,645.00

Permit Amount: 150.00

Payment:

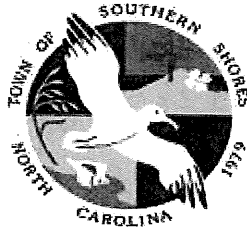
Date Type Reference Receipt Received From Amount

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

Brian Lancaster *11/22/2022*
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark *11-22-2022*
Signature of Permit Official Date
By MB

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



Residential Trade Contractor Permit

Date June 08, 2022

**TP22-000099
Mechanical Trade Permit**

Project Address: 210 OCEAN BLVD
Property Owner: BANAZEK, TIMOTHY J TTEE

PIN #: 022073000
Mailing Address: 8024 HAMPTON GLEN MEWS
CHESTERFIELD, VA 23832

Permit Types:

- Plumbing Electrical Mechanical Gas

Contractor:

Company Name: OBX Air Pros Heating and Cooling
Phone: (252) 435-8782
N. C. License Number: 29480

Qualifier: Lee Guthrie
Address: 197 W Mobile Road
Harbinger, NC 27941

Description of Work: REPLACEMENT OF MID LEVEL UNIT WITH 3.5 TRANE HEAT PUMP & AIR HANDLER

Project Cost Estimate: \$8,000.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt Received From Amount

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


Signature of Licensee or Duly Authorized Representative 11-22-22 Date


Signature of Permit Official Date

By MB 11-22-2022

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



Residential Trade Contractor Permit

Date November 22, 2022

**TP22-000202
Mechanical Trade Permit**

Project Address: 130 DUCK WOODS DR
Property Owner: MORRIS, D LYNN U

PIN #: 022357012
Mailing Address: 130 DUCK WOODS DR
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Air-O-Smith
Phone: (252) 261-5238
N. C. License Number: 30070

Qualifier: Steven Smith
Address: 330 N. Dogwood Trail
Southern Shores, NC 27949

Description of Work: REPLACE 2 TON 14 SEER HEAT PUMP AND AIR HANDLER FOR FROG

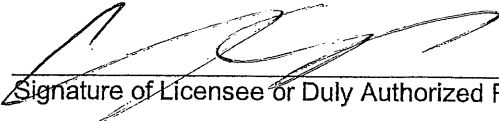
Project Cost Estimate: \$6,645.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt Received From Amount

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



Signature of Licensee or Duly Authorized Representative 11/22/2022
Date



Signature of Permit Official Date
MB

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



Commercial Trade Contractor Permit

Date November 23, 2022

TP22-000203
Mechanical Trade Permit

Project Address: 5500 N CROATAN HWY SUITE 30 KELLER WILLIAMS

PIN #: 022510000

Property Owner: SOUTHERN SHORES OWNER, LLC

Mailing Address: 610 E MOREHEAD ST STE 100 CHARLOTTE, NC 28202

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: CHANGE OUT & INSTALL 7 TON TRANE PACKAGE AC W/GAS FURNANCE, REUSE DUCT WORK & ELECTRICAL CONNECTIONS

Project Cost Estimate: \$26,000.00

Permit Amount: 150.00

Payment:

Date Type Reference Receipt Received From Amount

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


 Signature of Licensee or Duly Authorized Representative

11-23-22
 Date


 Signature of Permit Official Date

By MB

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



Residential Trade Contractor Permit

Date November 28, 2022

**TP22-000204
Mechanical Trade Permit**

Project Address: 73 OCEAN BLVD
Property Owner: STONE, GORDON P JR

PIN #: 022660000
Mailing Address: PO BOX 16155
CHESAPEAKE, VA 23328

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: OBHC, Inc. dba One Hour Heating & Air Conditioning
Phone: (252) 441-1740
N. C. License Number: 12643

Qualifier: Brian McDonald
Address: PO Box 2600
Kill Devil Hills, NC 27948

Description of Work: MECHANICAL - REPLACE HVAC WITH 14 SEER 1 1/2 TON CARRIER AIR HANDLER & HEAT PUMP

Project Cost Estimate: \$7,727.00

Permit Amount: 150.00

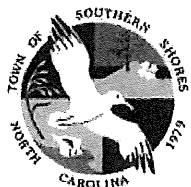
Payment:

Date Type Reference Receipt Received From Amount

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


Signature of Licensee or Duly Authorized Representative 11-28-22 Date


Signature of Permit Official 11-28-22 Date
By: WA



**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 # DPA22-000225

Parcel:	025910000	Owner:	WINDSOCK LLC
PIN:	986806383809	Address:	1731 BOLLING AVE NORFOLK, VA 23508
Location:	4 ELEVENTH AVE	Phone #:	252-333-8648
District:	RS1 - Single Family Residential District		
Subdiv:	SEA CREST VILLAGE		
Lot-Block-Sect:	LOT: 2 BLK: 57 SEC:		

BUSINESS NAME:	Godfrey Construction, LLC	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	Rick Godfrey	NC G.C. LICENSE NUMBER:	66982
ADDRESS:	PO Box 694	LIMITATION:	Unlimited
CITY, STATE, ZIP:	Kill Devil Hills, NC 27948	CLASSIFICATION:	Building
OFFICE#:	(252) 202-1469	QUALIFIER:	John Richard Godfrey, II
CELL#:		LIEN AGENT NAME:	Investors Title Insurance Co
FAX#:		ENTRY#:	1811789
EMAIL:	godfreyconstruction@gmail.com	LIEN AGENT ADDRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: VE - 11 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: Plus 3 ft of Freeboard	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$92,213.00	
PERMIT FEES:	Total Cost
Description	923.00
Remodel / Renovation / Repair Fee	10.00
Homeowners Recovery Fund	TOTAL FEE: 933.00

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

[Signature] Daniel Rodriguez

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

11/23/2022

Date Approved

[Signature] Kevin Clark

[Signature] 11-28-2022
Date Issued

Building/Code/Zoning Official
[Signature] By NUB



**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

Parcel: 021126000
PIN: 986810369291
Location: 9 SIXTH AVE
District: RS1 - Single Family Residential District
Subdiv: SEA CREST VILLAGE
Lot-Block-Sect: LOT: 7 BLK: 50 SEC:

Owner: MCKITTRICK-GRANT, MARIANNE
Address: 20275 WATERMARK PL
STERLING, VA 20165
Phone #: 703-969-5406

BUSINESS NAME: Real Escapes, Ltd.
CONTRACTOR'S NAME: Liliias Morrison
ADDRESS: PO Box 98
CITY, STATE, ZIP: Harbinger, NC 27941
OFFICE#:
CELL#:
FAX#:
EMAIL: accounts@realescapes.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 13735
LIMITATION: UNLIMITED
CLASSIFICATION: RESIDENTIAL
QUALIFIER: LILIAS J MORRISON
LIEN AGENT NAME: FIDELITY NATIONAL TITLE CO
LLC
ENTRY#: 1814542
LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Construct new bathroom by enclosing part of deck on East side of property per engineered plans.
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 72.0	HEAT: Heat Pump	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 0	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: SHEETROCK	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS: LAP SIDING	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: 4 1/2 BATHS:	ROOF: Other	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE: JELDON	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Double Hung	DATE ISSUED:

PERMIT FEES:	TOTAL CONSTRUCTION COST: \$33,750.00
Description	Total Cost
Heated/Living Area Fee (Single Family)	43.20
Homeowners Recovery Fund	10.00
Minimum Permit Fee	56.80
	TOTAL FEE: 110.00

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Liliias J. Morrison or **LILIAS J. MORRISON**, 11.28.22
Applicant - Owner/Contractor (Please print and sign name)

11/22/2022

Date Approved

Kevin Clark
Building/Code/Zoning Official

11/28/2022
Date Issued

By MB



**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 # DPA22-000220

Parcel: 022470372 Owner: VINCENTE HILL
PIN: 986715638669 Address: 41 EAGLES NEST LANE
Location: 41 EAGLES NEST LN SOUTHERN SHORES, NC 27949
District: RS1 - Single Family Residential District Phone #: 828-450-2902
Subdiv: CHICHAUK
Lot-Block-Sect: LOT: 372 BLK: SEC:

BUSINESS NAME: B & A BUILDERS INC NC G.C. LICENSED CONTRACTOR:
CONTRACTOR'S NAME: GLENN AVERY NC G.C. LICENSE NUMBER:
ADDRESS: 180 WATERS EDGE DRIVE LIMITATION:
CITY, STATE, ZIP: KILL DEVIL HILLS, NC 27948 CLASSIFICATION:
OFFICE#: (252) 202-8949 QUALIFIER:
CELL# LIEN AGENT NAME:
FAX#: ENTRY#:
EMAIL: BANDABUILDERS@GMAIL.COM LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL - REPAIR SAG IN FLOOR, REMODEL KITCHEN, CABINETS, TOPS, FLOORING & PLUMBING & ELECTRICAL
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

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

TOTAL CONSTRUCTION COST: \$60,000.00	
PERMIT FEES:	
Description	Total Cost
Remodel / Renovation / Repair Fee	600.00
Homeowners Recovery Fund	10.00
	TOTAL FEE: 610.00

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

11/22/2022

Date Approved

Kevin Clark
Building/Code/Zoning Official

11-28-22
Date Issued

By MB



**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:	022383039	Owner:	OWENS, DAVID W
PIN:	986707681195	Address:	530 CASWELL RD
Location:	164 CLAM SHELL TRL		CHAPEL HILL, NC 27514
District:	RS1 - Single Family Residential District	Phone #:	919-260-1949
Subdiv	CHICAHAIK		
Lot-Block-Sect:	LOT: 39 BLK: SEC:		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	David Owens	NC G.C. LICENSE NUMBER:	
ADDRESS:	164 Clam Shell Tr	LIMITATION:	
CITY, STATE, ZIP:	Southern Shores, NC 27514	CLASSIFICATION:	
OFFICE#:		QUALIFIER:	
CELL#	919--260-1949	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	davidowens5@gmail.com	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 -	Addition / Expansion -	Remodel / Renovation / Repair -	Accessory -	Other
	Bulkhead -	Piers/Docks -	Retaining Wall -	Beach Access Walkway/Stairs -	Swimming Pools -
	Detached Garage -	Accessory Storage Building -	Dune Deck -	Generator	Workshop -
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 FEES:	TOTAL CONSTRUCTION COST: \$40,000.00
Description	Total Cost
Remodel / Renovation / Repair Fee	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.

David W. Owens 11/21/22
Applicant - Owner/Contractor (Please print and sign name)

11/21/2022

Kevin Clark

Date Approved

Building/Code/Zoning Official
By MB

11/28/2022
Date Issued



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

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA22-000223

Parcel: 021313000
PIN: 986806296069
Location: 12 TWELFTH AVE
District: RS1 - Single Family Residential District
Subdiv: SEA CREST VILLAGE
Lot-Block-Sect: LOT: 24 BLK: 58 SEC:

Owner: DOYLE, MARIANNE B
Address: 12 12TH AVE
KITTY HAWK, NC 27949
Phone #: 252-261-2990

BUSINESS NAME: Mike Moran
CONTRACTOR'S NAME: Mike Moran
ADDRESS: 2802 S. Wrightsville Avenue
CITY, STATE, ZIP: Nags Head, NC 27959
OFFICE#: (252) 202-0443
CELL#:
FAX#:
EMAIL: campmjm@charter.net

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 - DECK AND RAIL REPLACEMENT
SPECIAL CONDITIONS -

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

TOTAL CONSTRUCTION COST: \$22,500.00	
PERMIT FEES:	Total Cost
Description	225.00
Remodel / Renovation / Repair Fee	TOTAL FEE: 225.00

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

[Signature]

Michael W. Moran

Applicant - Owner/Contractor

(Please print and sign name)

11/22/2022

Date Approved

Ken Ceb

11-29-22
Date Issued

Building/Code/Zoning Official

By: WA



**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:	022352010	Owner:	NEWELL, RICK
PIN:	986715537693	Address:	72 DUCK WOODS DRIVE
Location:	72 DUCK WOODS DR		SOUTHERN SHORES, NC 27949
District:	RS1 - Single Family Residential District	Phone #:	--
Subdiv	SO/SH BLK 227		
Lot-Block-Sect:	LOT: 10 BLK: 227 SEC:		

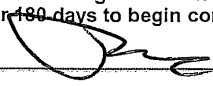
BUSINESS NAME:	Caribbean Pool and Spa of the Outer Banks, Inc	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	Pete Kelly	NC G.C. LICENSE NUMBER:	73571
ADDRESS:	6024 Currituck Road	LIMITATION:	Limited
CITY, STATE, ZIP:	Kitty Hawk, NC 27949	CLASSIFICATION:	Residential
OFFICE#:	(252) 480-2900	QUALIFIER:	Peter Franklin Kelly
CELL#		LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	pete@caribbeanobx.com	LIEN AGENT ADDRESS:	

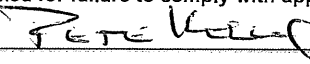
DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP22-000120
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 11/23/2022
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 480 SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #: S22-12767
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED: 08/24/2022

TOTAL CONSTRUCTION COST: \$75,426.00	
PERMIT FEES:	Total Cost
Description	250.00
Swimming Pools	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 duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.


 Applicant - Owner/Contractor
 Kevin Clark
 Building/Code/Zoning Official


 (Please print and sign name)
 Pete Kelly

11/23/2022
 Date Approved

 Date Issued



MECHANICAL PERMIT

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

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

PERMIT NUMBER: 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 HAWK STATE: NC ZIP: 27949
PHONE: 252-261-2008

LOCATION: 212 S HWY 64/264 PARCEL NUMBER: 025549000
BUILDER: _____

NUMBER OF HEATING UNITS: 1 NUMBER OF AIR HANDLERS: _____
NUMBER OF REGISTERS: _____ TONNAGE: 5 TON
LICENSE NUMBER: 35329 WORK ORDER NUMBER: _____
COST: \$14,180.00 PERMIT COST: \$100.00

IF REPAIRING OR ALTERING, PLEASE DESCRIBE WORK:

SINGLE ROOF TOP C/O 14 SEER 5 TON TRANE

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

DATE OF ISSUANCE: 11/1/22 SEALS: Payton Nix for RA Hoy
(APPLICANT)

(INSPECTOR)



PERMIT NUMBER: 5278

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: Cornerstone Marine & Remodeling
PHONE NUMBER: 455 0960 LICENSE NUMBER: 84441
ADDRESS: PO Box 2371
EMAIL: Cornerstoneabx@yahoo.com

PROPERTY OWNER INFORMATION

NAME: Joe Kratger PHONE: _____
EMAIL: Joe.kratger@verizon.net

DEVELOPMENT INFORMATION

CHECK ALL THAT APPLY: NEW CONSTRUCTION ADDITION ACCESSORY STRUCTURE
 REMODEL SWIMMING POOL OTHER: _____ ATTACHED DETACHED

PROPERTY ADDRESS: 1421 Ballast point Dr
PARCEL NUMBER: 025694150 ZONING DISTRICT: _____
ESTIMATED COST: 21000 HEATED SPACE (SQ. FT.): 150 UNHEATED SPACE (SQ. FT.): _____
DESCRIPTION OF WORK: Remove shower & tub in master
replace with the shower & free standing tub

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

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
HOMEOWNERS RECOVER FEE:	—
PERMIT COST:	\$210.00
TOTAL COST:	\$260.00
CONDITIONS OF PERMIT: _____	

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

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

DATE OF ISSUANCE: 11/5/22

Seals: [Signature]
Applicant

[Signature]
Inspector

[Signature]
Zoning Administrator



BUILDING PERMIT

PERMIT NUMBER: 5279

DATE: 11-2-2022

OWNER: Dare County
ADDRESS: DC Box 1000
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: Weatherly Construction & Restoration LLC
CONTRACTOR LICENSE #: 87244
ADDRESS: 349 E Water Plant Rd.
CITY: Manteo STATE: NC ZIP: 27954

no address 300 OE

LOCATION OF BUILDING SITE: Dare County Arts Courtyard ZONING DISTRICT: Manteo B-1
PARCEL NUMBER: 624775 000 FLOOD ZONE: _____ BFE: _____ FFE: _____

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

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

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

ADDITIONAL NOTES: *building a trellis courtyard*

EACH APPLICATION MUST BE ACCOMPANIED BY:

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

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

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

REVIEW \$50.00

Estimated or Contract Cost: \$20,715

Permit Cost: 207.15

Date of Issuance: 11/3/22

\$ 207.15

Seals: [Signature]
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



MECHANICAL PERMIT

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

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

PERMIT NUMBER: 5280

DATE: 11/03/2022

OWNER: GARY GOGERTY

CONTRACTOR: RA HOY HEATING AND AIR CONDITIONING LLC

ADDRESS: 1120 SOUTH BAY CLUB

ADDRESS: PO BOX #179

CITY: MANTEO STATE: NC ZIP: 27954

CITY: KITTY HAWK STATE: NC ZIP: 27949

PHONE: _____

PHONE: 252-261-2008

LOCATION: 1120 SOUTH BAY CLUB

PARCEL NUMBER: 030835085

BUILDER: _____

NUMBER OF HEATING UNITS: 1

NUMBER OF AIR HANDLERS: 1

NUMBER OF REGISTERS: _____ TONNAGE: 1.5 TON

LICENSE NUMBER: 35329

WORK ORDER NUMBER: _____

COST: \$8,500.00

PERMIT COST: \$150.00

IF REPAIRING OR ALTERING, PLEASE DESCRIBE WORK:

SINGLE C/O TRANE 16 SEER 1.5 TON H/P SYSTEM THAT SERVICES THE UPSTAIRS.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 11/3/22

SEALS: Payton Nix for RA Hoy

(APPLICANT)

(INSPECTOR)



Plumbing

BUILDING PERMIT

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

PERMIT NUMBER: 5281

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

CONTRACTOR INFORMATION

NAME: Cornestane Mark & Remedily
PHONE NUMBER: 252 455 0960 LICENSE NUMBER: 84441
ADDRESS: PO Box 2371 Manteo
EMAIL: Cornestaneobx@yahoo.ca

PROPERTY OWNER INFORMATION

NAME: John Bennett PHONE: 703 531 9670
EMAIL: amelia@whitegite.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 plumbing supply lines to pex (Has old pex) (August plumbing)

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

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
HOMEOWNERS RECOVER FEE:	—
PERMIT COST:	\$50.00
TOTAL COST:	\$100.00
CONDITIONS OF PERMIT:	

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

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DATE OF ISSUANCE: 11/10/22

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



BUILDING PERMIT

PERMIT NUMBER: 5282

DATE: 10/18/22

OWNER: 103 Gilbert Street LLC
ADDRESS: 619 Breezy Hill Road
CITY: Spout Spring STATE: VA ZIP: 24593

BUILDER: Macko OBX Construction, Inc
CONTRACTOR LICENSE #: 81540
ADDRESS: PO Box 3689
CITY: Kill Devil Hills STATE: NC ZIP: 27948
PHONE: 480-6411

LOCATION OF BUILDING SITE: 103 Gilbert Street ZONING DISTRICT: B-2
PARCEL NUMBER: 025691002 FLOOD ZONE: _____ BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: X REPAIR: _____

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

ADDITIONAL NOTES: 11'x20' 2 level deck addition on north elevation with ground level concrete pad. Cargo lift on NE elevation.

EACH APPLICATION MUST BE ACCOMPANIED BY:

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

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

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Estimated or Contract Cost: 180,000

Review \$50.00
Permit Cost: \$300.00
\$350.00

Date of Issuance: 11/8/22

Seals: [Signature]
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



PERMIT NUMBER: 5283

BUILDING PERMIT

DATE: 11/8/2022

OWNER: Paul Mascia
ADDRESS: 35 Ballast Pt.
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: N&M marine
CONTRACTOR LICENSE #: NC 30026
ADDRESS: PO Box 42
CITY: Kitty Hawk STATE: NC ZIP: 27949
PHONE: 261-3682

LOCATION OF BUILDING SITE: 35 Ballast Point ZONING DISTRICT: _____
PARCEL NUMBER: 025694392 FLOOD ZONE: _____ BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE)
ERECT: _____ ALTER: _____ REPAIR: _____

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

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

ADDITIONAL NOTES: Installing about 90ft of breakwater

EACH APPLICATION MUST BE ACCOMPANIED BY:

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

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

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

Estimated or Contract Cost: \$24,000.00 Review \$50.00
Date of Issuance: 11/9/22 Permit Cost: \$90.00
\$140.00

Seals: N&M marine
Julie E Emory
Applicant

[Signature]
Inspector

Zoning Official

Conditions of Permit: _____



SPECIAL USE PERMIT APPLICATION

DATE: 11.3.22

APPLICATION No. 5284

PROPERTY ADDRESS: 829 Wingina

ZONING DISTRICT: R-1 PARCEL # 024467000

PROPERTY OWNER: Dare County

MAILING ADDRESS: P.O. Box 1000, Manteo, NC 27954

TELEPHONE # 252-475-5000 EMAIL: _____

REPRESENTATIVE (IF DIFFERENT FROM OWNER): _____

MAILING ADDRESS: _____

TELEPHONE #: _____ EMAIL: _____

CURRENT USE(S) OF THE PROPERTY: Manteo High School
829 Wingina

PROPOSED USE(S) OF THE PROPERTY: Add Softball Field House

PROJECT DESCRIPTION: Add Softball Field House

PROPOSED DEVELOPMENT INFORMATION:

TOTAL ACREAGE 38.89 ac

TOTAL BUILDING AREA (S.F.) 880 sqft

TOTAL # UNITS N/A

LOT COVERAGE (S.F. & %) Total 26.04%

BUILDING HEIGHT _____

PARKING SPACES N/A

LIGHTING N/A

SIGNS N/A

IS THIS AN AMENDMENT TO AN EXISTING SPECIAL USE PERMIT? YES

IF YES, WHICH SPECIAL USE PERMIT _____

*PLEASE ATTACH A NARRATIVE DESCRIPTION OF THE CHANGES REQUESTED IN A SEPARATE DOCUMENT. *

SPECIAL USE PERMIT FEE \$200.00



BUILDING PERMIT

PERMIT NUMBER: ⁵²⁸⁵~~5286~~

DATE: 11/18/2022

OWNER: ADAMS, JONATHAN R.
ADDRESS: 5868 MAPLEDALE PLZ NO. 205
CITY: WOODBRIDGE STATE: VA ZIP: 22193

BUILDER: GRANPLAN, INC.
CONTRACTOR LICENSE #: 85630
ADDRESS: 349-C WATER PLANT ROAD
CITY: MANTEO STATE: NC ZIP: 27954
PHONE: 252-473-3334 (OFFICE) 814-722-7823 (KARL'S CELL)

LOCATION OF BUILDING SITE: 122 PIRATE'S WAY ZONING DISTRICT: MANTEO
PARCEL NUMBER: 025694264 FLOOD ZONE: BFE: FFE:
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE)
ERECT: ALTER: REPAIR:

SQUARE FOOTAGE OF HEATED SPACE: 1448 UNHEATED SPACE:
NUMBER OF STORIES: 2 ROOMS: 3 BATHS: 2.5 FIREPLACES: 1

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

ADDITIONAL NOTES: REMODELING PROJECT INCLUDING NEW WINDOWS AND SLIDING DOOR (SIMONTON), NEW KITCHEN CABINETS AND COUNTERTOPS, NEW KITCHEN APPLIANCES, NEW FLOORING (LVP & CARPET), NEW PLUMBING FIXTURES, LIGHT FIXTURES AND MIRRORS, AND INTERIOR PAINTING.

EACH APPLICATION MUST BE ACCOMPANIED BY:

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

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

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

Estimated or Contract Cost: \$100,000

Review: 50.00
Permit Cost: \$1000.00

Date of Issuance: 11/21/22

Home owner Review \$10.00

Seals: [Signature]
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: [Signature]

TOTAL - \$ 1060.00



MECHANICAL PERMIT

PERMIT NUMBER: 5286

DATE 11-21-22

OWNER: Cathy Cole
ADDRESS: 613 Pirates Way
CITY: Manteo STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: Seaside Heating & Air Conditioning
ADDRESS: PO Box 41
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252-473-7769

LOCATION: 613 Pirates Way
BUILDER: _____

PARCEL NUMBER: 02989000

NUMBER OF HEATING UNITS: 1
NUMBER OF REGISTERS: _____
LICENSE NUMBER: _____
COST: \$7,600

NUMBER OF AIR HANDLERS: 1
TONNAGE: _____
WORK ORDER NUMBER: _____
Permit Cost: \$150.00

If repairing or altering, please describe work. Replacing existing equipment with Goodman 14 SEER 2 ton heat pump split system.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 1/22/22 SEALS: Joseph Arbery (Applicant)

[Signature] (Inspector)

(UPDATED 7/2017)



PERMIT NUMBER: 5287

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+S Construction Company Inc
PHONE NUMBER: 252-207-3739 LICENSE NUMBER: 85642
ADDRESS: PO Box 2234 Elizabeth City, NC 27909
EMAIL: Kirk.nixon3@gmail.com

PROPERTY OWNER INFORMATION

NAME: RIFL, LLC PHONE: 252-473-9797
EMAIL: cparker@baylissboatworks.com

DEVELOPMENT INFORMATION

CHECK ALL THAT APPLY: NEW CONSTRUCTION ADDITION ACCESSORY STRUCTURE
 REMODEL SWIMMING POOL OTHER: _____ ATTACHED DETACHED
PROPERTY ADDRESS: 823 US-64, Manteo NC 27954
PARCEL NUMBER: 024472000 / 024470000 ZONING DISTRICT: _____
ESTIMATED COST: \$56,000⁰⁰ HEATED SPACE (SQ. FT.): _____ UNHEATED SPACE (SQ. FT.): 1,000
DESCRIPTION OF WORK: Metal Building Addition for storage

FLOODPLAIN INFORMATION

FLOOD ZONE: AE ZONE VE ZONE X ZONE NOT APPLICABLE
BASE FLOOD ELEVATION (BFE): 8.3' FIRST FLOOR ELEVATION (FFE): 8.89'
DESCRIPTION OF WORK BELOW BFE: N/A
PROPOSED NUMBER OF FLOOD VENTS: N/A ENCLOSED AREA BELOW BFE: YES NO
NET OPENING OF FLOOD VENTS (SQ. IN.): N/A 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:	<u>\$500.00</u>
HOMEOWNERS RECOVER FEE:	<u>N/A</u>
PERMIT COST:	<u>\$450.00</u>
TOTAL COST:	<u>\$950.00</u>
CONDITIONS OF PERMIT: _____	

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

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DATE OF ISSUANCE: 11-29-22

Seals: _____ Applicant _____ Inspector [Signature] Zoning Administrator [Signature]



BUILDING PERMIT

PERMIT NUMBER: 5288

DATE: 10/11/2022

OWNER: Bill Rea
ADDRESS: 413 Devon Street
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: Virginia Foundation Solutions
CONTRACTOR LICENSE #: _____
ADDRESS: 529 Viking Drive
CITY: Virginia Beach STATE: VA ZIP: 23452
PHONE: 757-301-8789

LOCATION OF BUILDING SITE: 413 Devon Street Manteo NC 27954 ZONING DISTRICT: _____
PARCEL NUMBER: 023213000 FLOOD ZONE: N/A BFE: N/A FFE: N/A
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) N/A
ERECT: N/A ALTER: N/A REPAIR: N/A

SQUARE FOOTAGE OF HEATED SPACE: N/A UNHEATED SPACE: N/A
NUMBER OF STORIES: N/A ROOMS: N/A BATHS: N/A FIREPLACES: N/A

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

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

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

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

Estimated or Contract Cost: \$22,544.75

Date of Issuance: 11/29/22 Review FEB \$50.00
Homeowners Fund \$10.00
Permit Cost: \$225.45
TOTAL - 285.45

Seals: Devon Lewis Applicant [Signature] Inspector _____ Zoning Official

Conditions of Permit: _____



PERMIT NUMBER: 5289

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: Cornestone Mame & Remodeling LLC
 PHONE NUMBER: 252 455 0960 LICENSE NUMBER: 84441
 ADDRESS: PO Box 2371
 EMAIL: Cornestoneobx@yahoo.com

PROPERTY OWNER INFORMATION

NAME: Dare Co Library PHONE: 473-2372
 EMAIL: earlibrary.org (Johanna)

DEVELOPMENT INFORMATION

CHECK ALL THAT APPLY: NEW CONSTRUCTION ADDITION ACCESSORY STRUCTURE
 REMODEL SWIMMING POOL OTHER: counter top replacement ATTACHED DETACHED
 PROPERTY ADDRESS: 700 US 264
 PARCEL NUMBER: 023 116 000 ZONING DISTRICT: B-2
 ESTIMATED COST: 3500⁰⁰ HEATED SPACE (SQ. FT.): _____ UNHEATED SPACE (SQ. FT.): _____
 DESCRIPTION OF WORK: demo counter top & replace w/ granite & granite
ones with lower 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

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
HOMEOWNERS RECOVER FEE:	—
PERMIT COST:	\$35.00
TOTAL COST:	\$85.00
CONDITIONS OF PERMIT:	

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

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

DATE OF ISSUANCE: _____
 Seals: [Signature] Applicant [Signature] Inspector [Signature] Zoning Administrator



ELECTRICAL PERMIT

PERMIT NUMBER: 5290 A

DATE: 11/25/2022

OWNER: MI MASTER LLC CONTRACTOR: ELECTRICAL & LIGHTING SOLUTIONS, INC
ADDRESS: 1314 S. CROATAN HWY ADDRESS: 2556 GAYTON CENTRE DR
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 - PARCEL NUMBER: 025557000 - SURROUNDING

BUILDER: N/A

RESIDENTIAL: NEW ALTERATION

COMMERCIAL: NEW ALTERATION

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

SERVICE AMPS: N/A INCREASED TO: N/A

LICENSE NUMBER: L32035 WORK ORDER NUMBER: _____

COST: \$ 15,900.00 Permit Cost: \$ 100.00

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 ADDITIONAL WORK WILL BE DONE.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 11/30/22 SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)

\$50.00 x 2 = \$100



5290B

ZONING PERMIT

DATE: 11/25/2022

APPLICANT

NAME: ELECTRICAL & LIGHTING SOLUTIONS, INC
ADDRESS: 2556 GAYTON CENTRE DR
RICHMOND VA 23238
TELEPHONE: 804 641-6339

PROPERTY OWNER

NAME: M I MASTER LLC
ADDRESS: 1314 S. CROATAN HWY
KILL DEVIL HILLS NC 27948
TELEPHONE: 1 252 619-0999

LEGAL RELATIONSHIP OF APPLICANT TO PROPERTY OWNER: ELECTRICAL CONTRACTOR WORKING FOR MARSHES LIGHT LLC
INSTALL NEW LED LIGHTING IN THE COMMON AREAS.

- 1. BUSINESS NAME: MARSHES LIGHT LLC
2. ADDRESS OF PROPERTY: 201 FERNANDO ST AND
3. PROPOSED USE: LIGHTING UPGRADE
4. ZONING DISTRICT: Manteo FLOOD ZONE: 0.2% ANNUAL CHANCE FLOOD HAZZARD
5. LOT SIZE: N/A SQUARE FOOTAGE: N/A
6. IF EXISTING, PROPOSED CHANGE OF USE: REMOVE OLD 175 WATT HID POLE HEADS AND REPLACE WITH NEW LED POST TOP LIGHTING PER MANTEO APPROVAL TOWN OF MANTEO - PHOTOMETRIC SUBMITTED
7. GROSS FLOOR AREA: N/A PROPOSED ADDITIONAL FLOOR AREA: N/A
8. BUFFER (NUMBER OF TREES REQUIRED & TYPE): N/A

SCREEN (LOCATION AND TYPE): N/A

- 9. SIGNAGE: SQUARE FOOTAGE FREE STANDING SIGN: N/A
SQUARE FOOTAGE WALL MOUNTED SIGN: N/A
10. PARKING: REQUIRED SPACES: N/A
EXISTING SPACES: N/A
PROPOSED SPACES: N/A

11. ATTACH SITE PLAN OR SURVEY SHOWING EXISTING AND PROPOSED CONDITIONS

APPLICANT'S SIGNATURE: [Signature]

Cost 5000

STAFF USE ONLY

IS PROPOSED USE IN COMPLIANCE WITH THE ZONING DISTRICT IN WHICH IT IS LOCATED? YES [checked] No

ZONING ADMINISTRATOR'S SIGNATURE: [Signature]

COMMENTS: Lighting must be done by December 19, 2022.