



Town of Kill Devil Hills

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

PAID

MAR 30 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-063

PROJECT NAME: Boyd Stair Replacement
SITE ADDRESS: 1304 Elizabeth St. Kill Devil Hills

BUILDING

ISSUED: 03/21/2023

EXPIRES: 09/17/2023

APPLICANT: BOYD, TROY
1304 Elizabeth St
Kill Devil Hills, NC 27948

OWNER: BOYD, TROY
1304 Elizabeth St
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988312850149

Parcel Number: 027354001

Address: 1304 Elizabeth St. Kill Devil Hills

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

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

Legal Description:

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

PROJECT DESCRIPTION: replace existing stairs and handrails to same footprint

BP2023-063

PROJECT NAME: Boyd Stair Replacement
SITE ADDRESS: 1304 Elizabeth St. Kill Devil Hills

BUILDING

ISSUED: 03/21/2023

EXPIRES: 09/17/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1200.00
SURVEYOR NAME AND NUMBER	Jason Mizelle
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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



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PAID

MAR 30 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-059

PROJECT NAME: Royals Dune Deck and Dune Walkway
SITE ADDRESS: 1829 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 03/29/2023

EXPIRES: 09/25/2023

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

OWNER: MACPB, LLC
1205 Crozier Ct
Wake Forest, NC 27587

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

License: 80229
Expires: 12/31/2023

PARCEL:

PIN: 988406484704

Parcel Number: 002794000

Address: 1829 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: Croatan Shores Amended

Block: D **Lot(s):** 5 & PT 6

Legal Description:

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

PROJECT DESCRIPTION: replace existing stairs connected to rear deck, dune walkway and 10'x12' dune deck to same footprint

BP2023-059

PROJECT NAME: Royals Dune Deck and Dune Walkway
SITE ADDRESS: 1829 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 03/29/2023

EXPIRES: 09/25/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	29000.00
LOT COVERAGE	23.90
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Michael Sadler
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Final
Zoning Final	

CONDITIONS

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



Town of Kill Devil Hills

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PAID

Planning and Inspection Department

MAR 30 2023

BP2023-073

PROJECT NAME: JACKSON DECK REPAIR
SITE ADDRESS: 411 WALLACE ST KILL DEVIL HILLS

BUILDING
TOWN OF
KILL DEVIL HILLS
ISSUED: 03/30/2023
EXPIRES: 09/26/2023

APPLICANT: JACKSON, MICHAEL
7810 CRITTENDEN RD
SUFFOLK, VA 23432
757-339-0886

OWNER: JACKSON, MICHAEL
7810 CRITTENDEN RD
SUFFOLK, VA 23432
757-339-0886

UNLICENSED BUILDER: HAPPY HOUSE HOME IMPROVEMENTS
1005 RIVERSIDE AVE
ELIZABETH CITY, NC 27909
252-339-0886

License: XXXXXX
Expires:

PARCEL:

PIN: 987516835408

Parcel Number: 000265000

Address: 411 WALLACE ST KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 179

Legal Description:

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

PROJECT DESCRIPTION: REPLACE DECKING, RAILING, AND STRINGERS

BP2023-073

PROJECT NAME: JACKSON DECK REPAIR
SITE ADDRESS: 411 WALLACE ST KILL DEVIL HILLS

BUILDING

ISSUED: 03/30/2023

EXPIRES: 09/26/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

3-30-23



Town of Kill Devil Hills

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PAID

MAR 29 2023

Planning and Inspection Department

BP2023-067 PROJECT NAME: Schribner Deck and Stair Rebuild SITE ADDRESS: 105 PINEHURST AVE KILL DEVIL HILLS	TOWN OF KILL DEVIL HILLS
	BUILDING
	ISSUED: 03/29/2023
	EXPIRES: 09/25/2023

APPLICANT: Scribner, Jay
26 Paddock LN
HAMPTON, VA 23669

OWNER: Scribner, Jay
26 Paddock LN
HAMPTON, VA 23669

UNLICENSED - REMODELING: RKM Property Maintenance
180 Charleston Dr
GRANDY, NC 27939

License: 12345
Expires:

PARCEL:

PIN: 988419712143

Parcel Number: 003910000

Address: 105 PINEHURST AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 39 **Lot(s):** 15 & PT 14

Legal Description:

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

PROJECT DESCRIPTION: rebuild existing stairs and landing on sw corner, add new 16'x6' rear deck



Town of Kill Devil Hills

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Planning and Inspection Department

BP2023-070

PROJECT NAME: Kevin Cherry
SITE ADDRESS: 1708 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING

ISSUED: 03/27/2023
EXPIRES: 09/23/2023

APPLICANT: 7 X Down 8 Up, LLC
1714 Wrightsville Blvd.
Kill Devil Hills, NC 27948
252-202-1656

OWNER: 7 X Down 8 Up, LLC
1714 Wrightsville Blvd.
Kill Devil Hills, NC 27948
252-202-1656

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 989313046802

Parcel Number: 008245000

Address: 1708 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Addition: OCEAN ACRES INC

Zoning:
Block: 0 **Lot(s):** 42-43

Legal Description:

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

PROJECT DESCRIPTION: Add shed to rear yard

PAID

MAR 27 2023

TOWN OF
KILL DEVIL HILLS

BP2023-070

PROJECT NAME: Kevin Cherry

SITE ADDRESS: 1708 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING

ISSUED: 03/27/2023

EXPIRES: 09/23/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S22-16978
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4385.00
SURVEYOR NAME AND NUMBER	Styons
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.



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MAR 22 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-066

PROJECT NAME:

SITE ADDRESS: 110 AVALON DR E KILL DEVIL HILLS

BUILDING

ISSUED: 03/22/2023

EXPIRES: 09/18/2023

APPLICANT: MCPEAK, JASON
5700 HALEY LN
PRINCE GEORGE, VA 23875
804-919-1245

OWNER: MCPEAK, JASON
5700 HALEY LN
PRINCE GEORGE, VA 23875
804-919-1245

GENERAL - LIMITED: D and B Bulkheads
401 Aycock St Apt A
Kill Devil Hills, NC 27948
252-722-5774

License: 87413
Expires: 12/31/2023

PARCEL:

PIN: 988517202835

Parcel Number: 001700000

Address: 110 AVALON DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 46

Legal Description:

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

PROJECT DESCRIPTION: Replace one house piling

BP2023-066**PROJECT NAME:****SITE ADDRESS:** 110 AVALON DR E KILL DEVIL HILLS**BUILDING****ISSUED:** 03/22/2023**EXPIRES:** 09/18/2023**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Slab/Foundation/Piling

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Liam Miller **Date:** 03 / 22 / 2023



Town of Kill Devil Hills

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Planning and Inspection Department

BP2023-064	BUILDING
PROJECT NAME: Beveridge Dune Walkover Rebuild	ISSUED: 03/22/2023
SITE ADDRESS: 1011 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 09/18/2023

APPLICANT: Josh Beveridge 207 Soundview Drive Kill Devil Hills, NC 27948	OWNER: BEVERIDGE, KAREN P. O. BOX 86 KESWICK, VA 22947 703-987-8016
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UNLICENSED - REMODELING: Josh Beveridge 207 Soundview Drive Kill Devil Hills, NC 27948	License: 12345 Expires:
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PARCEL:

PIN: 988415732472	Parcel Number: 003705001
Address: 1011 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 11 Lot(s): 2
Legal Description:	

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

PROJECT DESCRIPTION: replace existing dune walkover to same footprint

PAID

MAR 22 2023

TOWN OF
KILL DEVIL HILLS

PAID
WITH
CASH

BP2023-064

PROJECT NAME: Beveridge Dune Walkover Rebuild
SITE ADDRESS: 1011 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 03/22/2023

EXPIRES: 09/18/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	12
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13000.00
LOT COVERAGE	37.70
SURVEYOR NAME AND NUMBER	Doug Styons
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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PAID

MAR 22 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-061

PROJECT NAME: MANGANELLO STAIR REPLACEMENT
SITE ADDRESS: 1401 4-A VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 03/17/2023

EXPIRES: 09/13/2023

APPLICANT: MANGANELLO, ALBERT JOHN
252A MILLERTOWN ROAD
BLOOMSBURG, PA 17815

OWNER: MANGANELLO, ALBERT JOHN
252A MILLERTOWN ROAD
BLOOMSBURG, PA 17815

BUILDING UNLIMITED: Gibbs, Clarence
Po Box 2387
Manteo, NC 27954

License: 76990
Expires: 12/31/2023

PARCEL:

PIN: 98841165410710

Parcel Number: 028124000

Address: 1401 4-A VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UNIT 4-A

Legal Description:

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

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR IN SAME LOCATION, REPLACE 2 PILINGS



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PAID

MAR 21 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-062

PROJECT NAME: NORFORD STRINGERS
SITE ADDRESS: 819 KITTY CT KILL DEVIL HILLS

BUILDING

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

APPLICANT: NORFORD, THOMAS
1229 HOLMES AVE
Charlottesville, VA 22901
434-960-1979

OWNER: NORFORD, THOMAS
1229 HOLMES AVE
Charlottesville, VA 22901
434-960-1979

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988405078988

Parcel Number: 027138000

Address: 819 KITTY CT KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:
Block: 0 **Lot(s):** 101

Legal Description:

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

PROJECT DESCRIPTION: REPLACE STAIR STINGERS, RAILINGS TO REMAIN

BP2023-062

PROJECT NAME: NORFORD STRINGERS
SITE ADDRESS: 819 KITTY CT KILL DEVIL HILLS

BUILDING

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

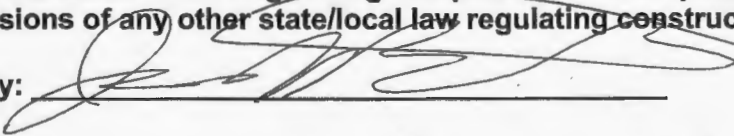
Final

CONDITIONS

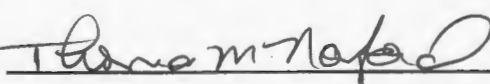
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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit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

Issued By:



Contractor or Authorized Agent:



Date:

3-21-23



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-058

PROJECT NAME: Bailey Front Deck and Stair Rebuild
SITE ADDRESS: 1716 SUNSET AVE KILL DEVIL HILLS

BUILDING

ISSUED: 03/16/2023

EXPIRES: 09/12/2023

APPLICANT: BAILEY, DIANA B
BOX 2041
KILL DEVIL HILLS, NC 27948

OWNER: BAILEY, DIANA B
BOX 2041
KILL DEVIL HILLS, NC 27948

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988409057756

Parcel Number: 002619013

Address: 1716 SUNSET AVE KILL DEVIL HILLS

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 20 **Lot(s):** 13

Legal Description:

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

PROJECT DESCRIPTION: replace existing front stairs and decking on front deck, no change to footprint

PAID

MAR 17 2023

TOWN OF
KILL DEVIL HILLS

BP2023-058

PROJECT NAME: Bailey Front Deck and Stair Rebuild
SITE ADDRESS: 1716 SUNSET AVE KILL DEVIL HILLS

BUILDING

ISSUED: 03/16/2023

EXPIRES: 09/12/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
LOT COVERAGE	24.49
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Gloria Rodgers
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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Planning and Inspection Department

BP2023-060	BUILDING
PROJECT NAME:	ISSUED: 03/15/2023
SITE ADDRESS: 2004 SMITHFIELD ST KILL DEVIL HILLS	EXPIRES: 09/11/2023

APPLICANT: BERNARD, L LEON JR 217 NORTH BLAKE ROAD NORFOLK, VA 23505	OWNER: BERNARD, L LEON JR 217 NORTH BLAKE ROAD NORFOLK, VA 23505
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RESIDENTIAL - LIMITED:	BARRETT & HABER, LLC Emanuelson & Dad PO BOX 448 nags head, nc 27959 252-261-2212	License: 87233 Expires: 12/31/2023
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PARCEL:

PIN: 988405186922	Parcel Number: 001417000
Address: 2004 SMITHFIELD ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 1277
Legal Description:	

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

PROJECT DESCRIPTION: Replace 12 8x8 pilings in same location

PAID
 M 3/15/23
 pd. online

BP2023-060

PROJECT NAME:

SITE ADDRESS: 2004 SMITHFIELD ST KILL DEVIL HILLS

BUILDING

ISSUED: 03/15/2023

EXPIRES: 09/11/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Lorelei Lumbrunnen Date: 03 / 15 / 2023



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PAID

MAR 13 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-054

PROJECT NAME: Seagate North Shopping Center re-roof project
SITE ADDRESS: 3105 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 03/08/2023

EXPIRES: 09/04/2023

APPLICANT: JOHN HIGH
203 Forest Hill Ave.
Rocky Mount, NC 27801

OWNER: JOHN HIGH
203 Forest Hill Ave.
Rocky Mount, NC 27801

GENERAL BUILDING INTERMEDIATE: GALLOP ROOFING AND REMODELING, INC.
673 Old Wharf Road
Wanchese, NC 27981
252-207-7269

License: 32504
Expires: 12/31/2023

PARCEL:

PIN: 988513035596

Parcel Number: 002991000

Address: 3105 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: Re roof 2 portions with single ply membrane roof material per supplied details and specs.

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
FINAL ELEVATION CERTIFICATE	N

PAID
3/13/23 OK
CK # 81094

cost 113,072⁰⁰
Floodzone X

BP2023-054

PROJECT NAME: Seagate North Shopping Center re-roof project
SITE ADDRESS: 3105 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 03/08/2023

EXPIRES: 09/04/2023

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

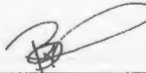
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

Issued By: _____

Marty Shaw

Contractor or Authorized Agent: _____



Date: 03 / 09 / 2023



Town of Kill Devil Hills

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

PAID

MAR 13 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-057

PROJECT NAME: Office Space Remodel
SITE ADDRESS: 2600 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 03/13/2023

EXPIRES: 09/09/2023

APPLICANT: Regan, Martin
2600 N. Croatan Highway
Kill Devil Hills, NC 27948
571-246-1213

OWNER: 2mugsies LLC
PO BOX 2391
kitty hawk, nc 27949

UNLICENSED BUILDER: SIGNATURE TOUCH PROPERTY MANAGEMENT
2600 N CROATAN HWY
Kill Devil Hills, NC 27948
252-441-8857
License: 12345
Expires:

PARCEL:

PIN: 988517111827 **Parcel Number:** 028426000
Address: 2600 CROATAN HWY N KILL DEVIL HILLS
Addition: VIRGINIA DARE SHORES **Zoning:**
Block: 20 **Lot(s):** 38-40 PT 37
Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Renovation/Remodel/Relocate	\$241.20	\$0.00	Remodel/Renovation 536 SQFT
Totals :	\$241.20	\$0.00	

PROJECT DESCRIPTION: removing interior dividing wall on ground floor office space

BP2023-057

PROJECT NAME: Office Space Remodel
SITE ADDRESS: 2600 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 03/13/2023

EXPIRES: 09/09/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	7500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

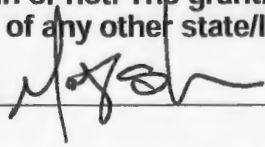
REQUIRED INSPECTIONS

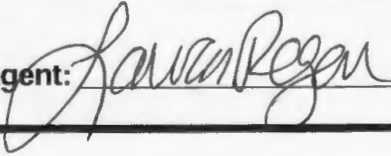
Rough In	Zoning Final
Framing	Final
Slab/Foundation/Piling	

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 03-13-2023



Town of Kill Devil Hills

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

PAID

MAR 14 2023

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2023-046

PROJECT NAME: FRANCIS EXTERIOR WALL
SITE ADDRESS: 403 TRUXTON ST KILL DEVIL HILLS

BUILDING

ISSUED: 02/27/2023

EXPIRES: 08/26/2023

APPLICANT: Vernie Francis Jr.
P. O. Box 362
COURTLAND, VA 23837
757-653-8183

OWNER: Vernie Francis Jr.
P. O. Box 362
COURTLAND, VA 23837
757-653-8183

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 987516839080

Parcel Number: 001046000

Address: 403 TRUXTON ST KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:

Block: 0 **Lot(s):** 102

Legal Description:

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

PROJECT DESCRIPTION: REMOVE EXTERIOR DOOR AND FILL IN



PAID

3/14/23

Payroll

BP2023-046PROJECT NAME: FRANCIS EXTERIOR WALL
SITE ADDRESS: 403 TRUXTON ST KILL DEVIL HILLS**BUILDING**

ISSUED: 02/27/2023

EXPIRES: 08/26/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	990.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final	Framing
Final	Insulation

CONDITIONS

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

Issued By: Jordan Blythe

Contractor or Authorized Agent:  Date: 02 / 27 / 2023



Town of Kill Devil Hills

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

PAID

MAR 14 2023

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2023-056	BUILDING
PROJECT NAME: Bock Pilings	ISSUED: 03/10/2023
SITE ADDRESS: 2022 PORTSMOUTH ST KILL DEVIL HILLS	EXPIRES: 09/06/2023

APPLICANT: Bock, David & Kelly 1116 Tobacco Row Ct ZEBULON, NC 27597 252-908-4289	OWNER: Bock, David & Kelly 1116 Tobacco Row Ct ZEBULON, NC 27597 252-908-4289
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RESIDENTIAL - LIMITED:	Barrett and Haber, LLC T/A; Emanuelson & Dad PO Box 448 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2212	License: 87233 Expires: 01/01/2024
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PARCEL:

PIN: 988405080673	Parcel Number: 001089000
Address: 2022 PORTSMOUTH ST KILL DEVIL HILLS	
Addition: AVALON BEACH ANNEX 2 & 3	Zoning:
Legal Description:	Block: 0 Lot(s): 871

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

PROJECT DESCRIPTION: Replace two 8x8 house and 4 6x6 deck pilings

 **PAID**
Paypal - CR
3/10/23

BP2023-056**PROJECT NAME:** Bock Pilings**SITE ADDRESS:** 2022 PORTSMOUTH ST KILL DEVIL HILLS**BUILDING****ISSUED:** 03/10/2023**EXPIRES:** 09/06/2023**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling Final
Zoning Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Lorelei Zumbrennen **Date:** 03 / 10 / 2023



Town of Kill Devil Hills

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

PAID

MAR 13 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-053	BUILDING
PROJECT NAME: Scott Deck	ISSUED: 03/09/2023
SITE ADDRESS: 1512 CAPTAIN'S LN KILL DEVIL HILLS	EXPIRES: 09/05/2023

APPLICANT: B & A BUILDERS 180 Watersedge Drive Kill Devil Hills, NC 27948 441-6366	OWNER: Davis, Scott 6763 Summerduck Rd REMINGTON, VA 22734
--	---

RESIDENTIAL-INTERMEDIATE:	B & A BUILDERS 180 Watersedge Drive Kill Devil Hills, NC 27948 202-9030	License: 45496 Expires: 01/01/2024
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PARCEL:

PIN: 988413131507	Parcel Number: 028504150
Address: 1512 CAPTAIN'S LN KILL DEVIL HILLS	
Addition:	Zoning:
Legal Description:	Block: 0 Lot(s): 150

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

PROJECT DESCRIPTION: add 8'x23' rear deck

BP2023-053

PROJECT NAME: Scott Deck

SITE ADDRESS: 1512 CAPTAIN'S LN KILL DEVIL HILLS

BUILDING

ISSUED: 03/09/2023

EXPIRES: 09/05/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
LOT COVERAGE	20.90
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Carlos Gomez
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.

* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

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



Town of Kill Devil Hills

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

PAID

MAR - 8 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-055

PROJECT NAME: Padilla pilings
SITE ADDRESS: 1002 AVALON DR W KILL DEVIL HILLS

BUILDING

ISSUED: 03/08/2023

EXPIRES: 09/04/2023

APPLICANT: PADILLA, LAWRENCE EDWARD
1000 AVALON DRIVE
KILL DEVIL HILLS, NC 27948

OWNER: PADILLA, LAWRENCE EDWARD
1000 AVALON DRIVE
KILL DEVIL HILLS, NC 27948

BUILDER: AFFORDABLE BILL'S
300 West Albermarle Drive
nags head, nc 27959
252-489-9555

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 987408998551

Parcel Number: 001607000

Address: 1002 AVALON DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0 **Lot(s):** 251

Legal Description:

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

PROJECT DESCRIPTION: Replace two pilings on west side of structure

BP2023-055

PROJECT NAME: Padilla pilings

SITE ADDRESS: 1002 AVALON DR W KILL DEVIL HILLS

BUILDING

ISSUED: 03/08/2023

EXPIRES: 09/04/2023

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Zoning Final

CONDITIONS

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

* Pilings notched over 50 percent require 4"x18" steel plates on each of load bearing girders.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

*Devesa Eger**3/8/23*



Town of Kill Devil Hills

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

PAID

MAR - 7 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-048

PROJECT NAME: Minnie Smith foundation repair
SITE ADDRESS: 2026 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 03/02/2023

EXPIRES: 08/29/2023

APPLICANT: LESTER & MINNIE SMITH
5150 carolina rd
suffolk, va 23434
757-986-4518

OWNER: LESTER & MINNIE SMITH
5150 carolina rd
suffolk, va 23434
757-986-4518

CONTRACTOR: JES Construction
2569 Quality Ct.
VIRGINIA BEACH, VA 23454
757-337-4221

License: 69678
Expires: 12/31/2023

PARCEL:

PIN: 988405292789

Parcel Number: 001308000

Address: 2026 CROATAN HWY N KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 542

Legal Description:

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

PROJECT DESCRIPTION: Stabilize foundation utilizing engineered intellijack push pier foundation system.



PAID
R 3/7/23
By Pel

BP2023-048**PROJECT NAME:** Minnie Smith foundation repair
SITE ADDRESS: 2026 CROATAN HWY N KILL DEVIL HILLS**BUILDING****ISSUED:** 03/02/2023**EXPIRES:** 08/29/2023**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	28000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Merchantile

REQUIRED INSPECTIONS

Final

Slab/Foundation/Piling

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Kayley Campbell Date: 03 / 03 / 2023



Town of Kill Devil Hills

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

PAID

MAR - 7 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-051

PROJECT NAME:

SITE ADDRESS: 815 S Va Dare Trl Kill Devil Hills

BUILDING

ISSUED: 03/07/2023

EXPIRES: 09/03/2023

APPLICANT: FIRST FLIGHT RETREAT
815 South Virginia Dare Trail
Kill Devil Hills, NC 27948

OWNER: FIRST FLIGHT RETREAT
815 South Virginia Dare Trail
Kill Devil Hills, NC 27948

UNLICENSED BUILDER: Silva Painting Co
PO BOX 2415
Kill Devil Hills, NC 27948

License: 12345
Expires:

PARCEL:

PIN: 98830899420300

**Parcel
Number:**

Address: 815 S Va Dare Trl Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: First Flight Retreat Condos

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

PROJECT DESCRIPTION: Repair/replace siding/sheathing around pool area as needed. Pool barrier code requirements must be maintained.



PAID

va 3/7/23
RS Pd

BP2023-051**PROJECT NAME:****SITE ADDRESS:** 815 S Va Dare Trl Kill Devil Hills**BUILDING****ISSUED:** 03/07/2023**EXPIRES:** 09/03/2023**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	14500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* Building code requirements for pool barriers must be maintained.

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

Issued By: Marty Shaw

Contractor or Authorized Agent: B. L. L. Date: 03 / 07 / 2023



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-049

PROJECT NAME: JACOCKS DUNE DECK
SITE ADDRESS: 1233 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 03/03/2023

EXPIRES: 08/30/2023

APPLICANT: JACOCKS, SYLVIA GREEN
206 W. Wood Hill Dr.
nags head, nc 27959
252-423-2230

OWNER: JACOCKS, SYLVIA GREEN
206 W. Wood Hill Dr.
nags head, nc 27959
252-423-2230

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 989309075094

Parcel Number: 004659000

Address: 1233 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: CONSTRUCT 12'X10' DUNE DECK

PAID

MAR - 3 2023

TOWN OF
KILL DEVIL HILLS

BP2023-049

PROJECT NAME: JACOCS DUNE DECK
SITE ADDRESS: 1233 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 03/03/2023

EXPIRES: 08/30/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	20000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

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

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

1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
3. In the VE Zone, there shall be no fill used for structural support.
4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-050	BUILDING
PROJECT NAME: MAYER WINDOWS	ISSUED: 03/03/2023
SITE ADDRESS: 313 OCEAN ACRES DR W KILL DEVIL HILLS	EXPIRES: 08/30/2023

APPLICANT: Mayer, Gregory 332 Canal Dr Kill Devil Hills, NC 27948	OWNER: Mayer, Gregory 332 Canal Dr Kill Devil Hills, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2023
-----------------	--	--

PARCEL:

PIN: 988316931648	Parcel Number: 008491000
Address: 313 OCEAN ACRES DR W KILL DEVIL HILLS	
Addition: OCEAN ACRES TRACT 3 SEC 1	Zoning:
Legal Description:	Block: G Lot(s): 13

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

PROJECT DESCRIPTION: REPLACE OLD WINDOWS ON FRONT OF HOUSE WITH NEW AND ASSOCIATED FRAMING

PAID

MAR - 3 2023

TOWN OF
KILL DEVIL HILLS

BP2023-050

PROJECT NAME: MAYER WINDOWS

SITE ADDRESS: 313 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING

ISSUED: 03/03/2023

EXPIRES: 08/30/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

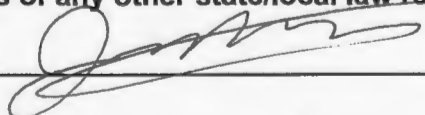
Final

CONDITIONS

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

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

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 3/3/23



Town of Kill Devil Hills

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

PAID

MAR - 2 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2023-047	BUILDING
PROJECT NAME:	ISSUED: 02/28/2023
SITE ADDRESS: 1107 VEELEE DR KILL DEVIL HILLS	EXPIRES: 08/27/2023

APPLICANT: Baumgardner, Marie 8431 Summer Walk PKWY Mechanicsville, VA 23116	OWNER: Baumgardner, Marie 8431 Summer Walk PKWY Mechanicsville, VA 23116
---	---

UNLICENSED BUILDER:	Ventures LLC Superior Fence and Rail of Tidewater 3310 Deepwater Terminal RD SUITE 104 RICHMOND, VA 23234 804-316-9230	License: 2705178406 Expires:
----------------------------	---	---

PARCEL:

PIN: 988415634699	Parcel Number: 003717000
Address: 1107 VEELEE DR KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 15 Lot(s): 5
Legal Description:	

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

PROJECT DESCRIPTION: Replace privacy fence and pool barrier.

PAID
MAR 3/2/23
by [signature]

BP2023-047**PROJECT NAME:****SITE ADDRESS:** 1107 VEELEE DR KILL DEVIL HILLS**BUILDING****ISSUED:** 02/28/2023**EXPIRES:** 08/27/2023**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18755.07
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONSZoning Final
Final

Stringline

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Brittany Washington **Date:** 02 / 28 / 2023



Town of Kill Devil Hills

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

PAID

MAR - 2 2023

Planning and Inspection Department

**TOWN OF
KILL DEVIL HILLS**

BP2023-042

PROJECT NAME: Repair damage to recycle building
SITE ADDRESS: 701 Bermuda Bay Blvd. KILL DEVIL HILLS

BUILDING

ISSUED: 02/24/2023

EXPIRES: 08/23/2023

APPLICANT: TOWN OF KILL DEVIL HILLS
P O BOX 1719
102 Town Hall Drive
KILL DEVIL HILLS, NC 27948

OWNER: TOWN OF KILL DEVIL HILLS
P O BOX 1719
102 Town Hall Drive
KILL DEVIL HILLS, NC 27948

CONTRACTOR: PITTS, ADRIAN DEAN
1807 Bay Drive
Kill Devil Hills, NC 27948

GENERAL BUILDING-LIMITED: PITTS, ADRIAN DEAN
1807 Bay Drive
Kill Devil Hills, NC 27948

License: 48669
Expires: 12/31/2023

PARCEL:

PIN: 988307582495

Parcel Number: 008165001

Address: 701 Bermuda Bay Blvd. KILL DEVIL HILLS

Zoning:

Addition: SUBDIVISION - NONE

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

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>
Com. Building Permit Fees	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: repair block column damaged by tractor

BP2023-042

PROJECT NAME: Repair damage to recycle building
SITE ADDRESS: 701 Bermuda Bay Blvd. KILL DEVIL HILLS

BUILDING

ISSUED: 02/24/2023

EXPIRES: 08/23/2023

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	9500.00

REQUIRED INSPECTIONS

Zoning Final

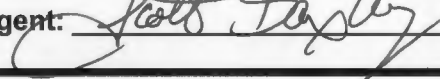
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 3/2/23



Town of Kill Devil Hills

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

Planning and Inspection Department

EG2023-005	EXCAVATION AND GRADING
PROJECT NAME: Lenz Properties, LLC	ISSUED: 03/20/2023
SITE ADDRESS: 107 CAROLYN DR KILL DEVIL HILLS	EXPIRES: 09/16/2023

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

OWNER: Lenz Properties Llc
20564 Captains Walk
SMITHFIELD, VA 23430

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2023

PARCEL:

PIN: 989313048533

Parcel Number: 004908007

Address: 107 CAROLYN DR KILL DEVIL HILLS

Zoning:

Addition:

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

Legal Description:

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

PROJECT DESCRIPTION: Clear lot to prepare for construction of single family dwelling

PAID

MAR 22 2023

TOWN OF
KILL DEVIL HILLS

EG2023-005

PROJECT NAME: Lenz Properties, LLC
SITE ADDRESS: 107 CAROLYN DR KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	7500.00
ZONING DISTRICT	C
CAMA PERMIT	N
FLOOD ZONE	X
SURVEYOR NAME AND NUMBER	Styons Surveying


REQUIRED INSPECTIONS

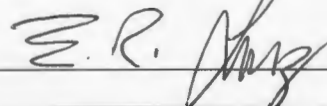
Final

CONDITIONS

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

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

Issued By: _____


Contractor or Authorized Agent: _____


Date: 3-22-23



Town of Kill Devil Hills

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

Planning and Inspection Department

EG2023-004

EXCAVATION AND GRADING

PROJECT NAME: Lenz Properties, LLC
SITE ADDRESS: 105 CAROLYN DR KILL DEVIL HILLS

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

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

OWNER: Lenz Properties Llc
20564 Captains Walk
SMITHFIELD, VA 23430

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2023

PARCEL:

PIN: 989313047489

Parcel Number: 004909000

Address: 105 CAROLYN DR KILL DEVIL HILLS

Addition:

Zoning:

Block: 0 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION: Clear lot to prepare for construction of single family dwelling

PAID

MAR 22 2023

TOWN OF
KILL DEVIL HILLS



Town of Kill Devil Hills

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

PAID

MAR 30 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2023-007

SIGN

PROJECT NAME: OUTERBANKS BEACH CLUB FREE STANDING
SIGN

ISSUED: 03/30/2023

SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

EXPIRES: 09/26/2023

APPLICANT: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

OWNER: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

CONTRACTOR: ADLIGHT SIGNS
600 West Boundry Street
Kill Devil Hills, NC 27948
252-449-2800

License: LEGACY UNKNOWN
Expires: 12/31/2030

PARCEL:

PIN: 98930508005501

Parcel Number: 027867000

Address: 1110 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 4

Lot(s): 1-8/CONDO-
BLDGS 1-2

Legal Description:

FEES:	Paid	Due
Sign Permit Fee	\$200.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: REPLACE (2) FREESTANDING SIGN WITH NEW LIT SIGNAGE

DETAILS

Permit

Name	Value
# OF SIGNS	2
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	12000.00
FLOOD ZONE	X

SG2023-007

PROJECT NAME: OUTERBANKS BEACH CLUB FREE STANDING

SIGN

SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

SIGN

ISSUED: 03/30/2023

EXPIRES: 09/26/2023

REQUIRED INSPECTIONS

Final

Slab/Foundation/Piling

CONDITIONS

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

* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.

No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.

* Free-standing sign cannot exceed 20 feet in elevation above street grade measured from ground elevation to the top of the sign structure. Sign cannot overhang into the right of way.

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

* Electrical sign off required prior to C.C.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

3/30/23



Town of Kill Devil Hills

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

PAID

MAR 10 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BANNER2023-002

PROJECT NAME: Target Banner
SITE ADDRESS: 1901 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 03/07/2023
EXPIRES: 06/05/2023

APPLICANT: L.F. Jennings, Inc.
7130 Glen Forest Drive, Suite 410
Richmond, Va 23226

OWNER: Target Corporation
1000 Nicollet Mall
MINNEAPOLIS, MN 55403

BUILDING-UNLIMITED: L.F. Jennings, Inc.
7130 Glen Forest Drive, Suite 410
Richmond, Va 23226

License: 46356
Expires:

PARCEL:

PIN: 988406383994L1

Parcel Number: 029832001

Address: 1901 CROATAN HWY N KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

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

Legal Description:

FEES:	Paid	Due
Banner Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: 2 6'x16' temp banners on building

DETAILS

Permit

Name	Value
# OF BANNERS	2
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	300.00
FLOOD ZONE	X

BANNNER2023-002

PROJECT NAME: Target Banner

SITE ADDRESS: 1901 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 03/07/2023

EXPIRES: 06/05/2023

REQUIRED INSPECTIONS

Final

CONDITIONS

* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.

No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.

* No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

3/10/23



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2023-004	SIGN
PROJECT NAME: Nags Head Pools, LLC	ISSUED: 01/19/2023
SITE ADDRESS: 208 FRESH POND DR W KILL DEVIL HILLS	EXPIRES: 07/18/2023

APPLICANT: Nags Head Pools, LLC
PO Box 4
nags head, nc 27959
252-573-9945

OWNER: Strum, Brendan
4708 S Cobia Way
Nags Head, NC 27959
252-489-4776

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2023

PARCEL:

PIN: 989313033568

Parcel Number: 004931000

Address: 208 FRESH POND DR W KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2

Zoning:
Block: 0 **Lot(s):** 92-93

Legal Description:

FEES:	Paid	Due
Sign Permit Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Sign on the building

PAID

MAR 15 2023

TOWN OF
KILL DEVIL HILLS

SG2023-004

PROJECT NAME: Nags Head Pools, LLC
SITE ADDRESS: 208 FRESH POND DR W KILL DEVIL HILLS

SIGN

ISSUED: 01/19/2023

EXPIRES: 07/18/2023

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	32.00
ZONING DISTRICT	LI-1
PURPOSE	Commercial Accessory
CONSTRUCTION COST	500.00
FLOOD ZONE	X

REQUIRED INSPECTIONS

Final

CONDITIONS

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

* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.

No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.

* Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 3-15-23



Town of Kill Devil Hills

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

PAID

MAR - 7 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2023-005

PROJECT NAME: Caliber
SITE ADDRESS: 2011 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 02/28/2023

EXPIRES: 08/27/2023

APPLICANT: Denyse Signs Inc.
4521 Industrial Access Road
DOUGLASVILLE, GA 30134
770-942-0688

OWNER: Caliber Kill Devil Hills Op Co, LLC
3625 Cumberland Blvd. Suite 1150
ATLANTA, GA 30339
404-394-6375

SIGN: Denyse Signs Inc.
4521 Industrial Access Road
DOUGLASVILLE, GA 30134
770-942-0688

License: SP ES 28435
Expires:

PARCEL:

PIN: 989313133228

Parcel Number: 008351000

Address: 2011 CROATAN HWY S KILL DEVIL HILLS

Addition: Fresh Pond Beaches

Zoning:

Block: 1 **Lot(s):** 2,3,4,6,PT 9

Legal Description:

FEES:	Paid	Due
Sign Permit Fee	\$200.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: Free-standing sign and sign on the building



PAID
MAR 3/7/23
Ry Pe 1

SG2023-005

PROJECT NAME: Caliber

SITE ADDRESS: 2011 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 02/28/2023

EXPIRES: 08/27/2023

DETAILS

Permit

Name	Value
# OF SIGNS	2
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	64.00
SIGN - WALL PERMITTED (SQFT)	72.00
SIGN- WALL PROPOSED (SQ FT)	71.40
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	86000.00
FLOOD ZONE	X

REQUIRED INSPECTIONS

Slab/Foundation/Piling Final
 Electrical

CONDITIONS

- * Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.
- No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).
- Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Window signs cannot exceed 25% of the gross glazing area of the building and cannot be separately illuminated or backlit by lighting installed for that purpose.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.



Town of Kill Devil Hills

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

Planning and Inspection Department

BANNNER2023-003	BANNER
PROJECT NAME: OCEAN REEF BANNERS	ISSUED: 03/22/2023
SITE ADDRESS: 107 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 06/20/2023

APPLICANT: OCEAN REEF HOTEL LLC 107 S VA DARE TRAIL Kill Devil Hills, NC 27948	OWNER: OCEAN REEF HOTEL LLC 107 S VA DARE TRAIL Kill Devil Hills, NC 27948
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2023
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PARCEL:

PIN: 988420805822	Parcel Number: 003669000
Address: 107 VA DARE TRL S KILL DEVIL HILLS	
Addition: KITTY HAWK SHORES - REVISED	Zoning: Block: 2 Lot(s): 1-4
Legal Description:	

FEES:	Paid	Due
Banner Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: 2- 80SQFT WYNDGATE BANNER ON BUILDING

DETAILS

Permit	Name	Value	PAID MAR 23 2023 TOWN OF KILL DEVIL HILLS
# OF BANNERS		2	
ZONING DISTRICT		OIR	
PURPOSE		Commercial Accessory	
CONSTRUCTION COST		200.00	
FLOOD ZONE		X	

BANNER2023-003

PROJECT NAME: OCEAN REEF BANNERS
SITE ADDRESS: 107 VA DARE TRL S KILL DEVIL HILLS

BANNER

ISSUED: 03/22/2023

EXPIRES: 06/20/2023

REQUIRED INSPECTIONS

Final

CONDITIONS

* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.

No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.

* No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

3-23-2023



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 BUILDING PERMIT

BUILDING PERMIT#: R-16703

03/10/2023

Parcel Number: 014298000
 Location: CECILS COTTAGE RD – WAVES
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: GLEN E JR STANLEY
 Owner Mail Address: 450 RIDGEVIEW DR MOCKSVILLE, NC 27028
 Owner Phone and email: 336-940-7198 iwatchkids@aol.com

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

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW 2 BEDROOM AND ONE BEDROOM ADU		
Proposed Construction Type:	SFD	Cost of Construction:	\$175,000
Finished Square Footage:	1545	CAMA Permit#:	N/A
Unfinished Square Footage:	576	Septic Permit#:	S8-15656
Stories:	0.0	Septic Permit Date:	01/20/2023
Building Height:	N/A	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:		Water Type:	Central Water
Exterior Finish:		Flood Zone:	SHX
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	3.5
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,389.15
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$1,574.15

DocuSigned by:
 Applicant Signature: Debra Stanley 3/10/2023 GLEN E JR STANLEY
3EC8C9FA3E8542A

DocuSigned by:
 Inspector Signature: CREW HAYES 3/10/2023 CHF
74DCB28282D14CC



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 BUILDING PERMIT

BUILDING PERMIT#: R-16555

03/03/2023

Parcel Number: 014224002
 Location: SEABREEZE DR EXT – RODANTHE
 Subdivision: RODANTHE SANDS
 Legal Description: LOT: 1-R BLK: SEC:

Owner Name: FAI CONSTRUCTION
 Owner Mail Address: 6049 POLE GREEN RD MECHANICSVILLE, VA 23116
 Owner Phone and email: 804-296-6703 saymarcr@aol.com

Contractor Name: HOWARD K INGALLS, JR
 Contractor Mail Address: 6049 POLE GREEN ROAD, MECHANICSVILLE, VA 23116
 Contractor Phone: Contractor NC License#: L. 99665

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SINGLE FAMILY DWELLING WITH POOL		
Proposed Construction Type:	SFD	Cost of Construction:	\$478,000
Finished Square Footage:	3024	CAMA Permit#:	HI-6-23
Unfinished Square Footage:	0	Septic Permit#:	S8-16173
Stories:	0.0	Septic Permit Date:	02/15/2023
Building Height:	42'4	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:		Water Type:	Central Water
Exterior Finish:		Flood Zone:	SHX
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. [2023-03-01 11:30:53 631kjack]:	PERMIT FEE	\$2,268.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

AS-BUILT NEEDED

TOTAL FEES: \$2,453.00

Applicant Signature:  HOWARD K INGALLS, JR

Inspector Signature: CREW HAYES  CHF



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 BUILDING PERMIT

BUILDING PERMIT#: ACC-16722

03/10/2023

Parcel Number: 011892000
 Location: 50231 SNUG HARBOR DR – FRISCO
 Subdivision: BRIGANDS BAY
 Legal Description: LOT: 365 BLK: SEC:

Owner Name: PAUL I III DETWILER
 Owner Mail Address: 5029 PENNKROLL DR EVERETT, PA 15537
 Owner Phone and email: 814-327-4818 pidiii58@gmail.com

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

BUILDING INFORMATION

Proposed Construction Use:	ACCESSORY STRUCT OVER 12 FT , NEW CONSTRUCTION ACCESSORY DWELLING ABOVE GARAGE		
Proposed Construction Type:	ADU	Cost of Construction:	\$180,000
Finished Square Footage:	960	CAMA Permit#:	HI-23-2022
Unfinished Square Footage:	960	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	03/02/2023
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	S8-16539
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	9.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. [2023-03-07 15:43:06 631kjack]:	PERMIT FEE	\$1,104.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

AS-BUILT NEEDED

TOTAL FEES: \$1,179.00

Applicant Signature: PAUL I III DETWILER

Inspector Signature: CREW HAYES CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-16817

03/15/2023

Parcel Number: 029593013
 Location: 41933 OCEAN VIEW DR – AVON
 Subdivision: KINNAKEET SHORES PHASE 2
 Legal Description: LOT: 13 BLK: SEC:

Owner Name: LAWRENCE GASPAR
 Owner Mail Address: PO BOX 78052 CHARLOTTE, NC 28271
 Owner Phone and email: 805-769-4663 nila.beach33@gmail.com

Contractor Name: WILLIAM SMITH
 Contractor Mail Address: 3169 BUCKEYE RANCH RD, MT. PLEASANT, NC 28124
 Contractor Phone: Contractor NC License#: 40228

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REMODEL HOME WITH GROUND POOL		
Proposed Construction Type:	Cost of Construction:	\$59,000	
Finished Square Footage: 0	CAMA Permit#:	HI-4-2023	
Unfinished Square Footage: 0	Septic Permit#:	S9-915507	
Stories: 0	Septic Permit Date:	01/17/2023	
Building Height:	Survey/Site Plan:		
Total Rooms: 0	Water Tap#:		
Footing Type:	Water Type:		
Exterior Finish:	Flood Zone:	X	
Proposed Finished Floor Elevation:	Base Flood Elevation:	8.0	
Bedrooms: 0	Lot/Ground Elevation:		
	Baths/half baths:	0/0	

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$590.00
	SWIMMING POOLS;HOT TUBS	300.00

TOTAL FEES: \$890.00

Applicant Signature: _____ WILLIAM SMITH

Inspector Signature: CREW HAYES _____ CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-17099

03/28/2023

Parcel Number: 017246000
 Location: 46215 TOWER CIRCLE RD – BUXTON
 Subdivision: TOWER BEACH SUBD BLK 4
 Legal Description: LOT: 1 BLK: 4 SEC:

Owner Name: THOMAS SERRANO
 Owner Mail Address: 12620 PARKE CIR RANCHO CUCAMONGA, CA 91739
 Owner Phone and email:

Contractor Name: COASTAL SYNERGY CONSTRUCTION INC
 Contractor Mail Address: 4425 NORTH CROATAN HIGHWAY, KITTY HAWK, NC 27949
 Contractor Phone: 2522614151 Contractor NC License#: 84732

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , PILING REPAIR OF EXISTING PILINGS NO CHANGES TO FOOTPRINT		
Proposed Construction Type:		Cost of Construction:	\$100,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$160.00

DocuSigned by:
 Applicant Signature: MILENE DORRIS COASTAL SYNERGY CONSTRUCTION INC
 112FCC01300A473... 3/29/2023

DocuSigned by:
 Inspector Signature: CREW HAYES CHF
 74DC82B2B2D14CC... 3/29/2023



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17125

03/29/2023

Parcel Number: 014574000
Location: 40229 GULLS CRY RD – AVON
Subdivision: WINDSONG SANDS
Legal Description: LOT: 11 BLK: SEC:

Owner Name: HUGH JOHN RITCHIE
Owner Mail Address: 3924 KALONA RD - PORTSMOUTH, VA 23703
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,950

Electrical Contractor ID: ST.PH.32045

Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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

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

DocuSigned by:
Applicant Signature: LESLIE MARIE STEVENSON 3/29/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: CRON HAYES 3/29/2023 CHF
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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17123

03/29/2023

Parcel Number: 015532001
Location: 57164 PRICILLA CURVE RD – HATTERAS
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: B BLK: SEC:

Owner Name: ROBERT F BERAN
Owner Mail Address: 114 DEER RD - BOYERS, PA 16020
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,400
Electrical Contractor ID: ST.PH.32045
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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DocuSigned by:
Applicant Signature: LESLIE MARIE STEVENSON 3/29/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: CREW HAYES 3/29/2023 CHF
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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17132

03/29/2023

Parcel Number: 028625000
Location: 42171 GREENWOOD PL - AVON
Subdivision: KINNAKEET SHORES PHASE 1
Legal Description: LOT: 74 BLK: SEC:

Owner Name: PIRATES LAIR LLC
Owner Mail Address: 1200 MARITIME WOODS DR - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,500
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: install 1 outdoor and 1 indoor

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

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

DocuSigned by:
Applicant Signature: JAMES L. THOMAS, JR 3/29/2023 AUGUST AIR LLC
888CE3ABE1D541B... augustair@charter.net

DocuSigned by:
Inspector Signature: CREW HAYES 3/29/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17131

03/29/2023

Parcel Number: 014822160
Location: 41194 YARDARM CT – AVON
Subdivision: KINNAKEET SHORES - PH 17
Legal Description: LOT: 1728 BLK: SEC:

Owner Name: EDWARD D JR MOXIN
Owner Mail Address: 5813 SCARBOROWOOD DR - HOLLY SPRINGS, NC 27540
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$4,200
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install one outdoor heat pump

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

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DocuSigned by:
Applicant Signature: JAMES L. THOMAS, JR 3/29/2023 AUGUST AIR LLC
888CE3ABE1D541B... augustair@charter.net

DocuSigned by:
Inspector Signature: CROW HAYES 3/29/2023 CHF
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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17130

03/29/2023

Parcel Number: 023775073
Location: 47158 CROOKED RIDGE TRL – BUXTON
Subdivision: HATTERAS PINES
Legal Description: LOT: 73 BLK: SEC:

Owner Name: KENTE ELLEN GWYN
Owner Mail Address: PO BOX 685 - AVON, NC 27915
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,500
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: install one indoor and one outdoor

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

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DocuSigned by:
Applicant Signature: JAMES L. THOMAS, JR 3/29/2023 AUGUST AIR LLC
988CE3ABE10541B... augustair@charter.net

DocuSigned by:
Inspector Signature: CREW HAYES 3/29/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17129

03/29/2023

Parcel Number: 012797000
Location: 26263 WIMBLE SHORES DR – SALVO
Subdivision: WIMBLE SHORES INC
Legal Description: LOT: 20 BLK: SEC:

Owner Name: HATTERAS FAMILY VENTURES LLC
Owner Mail Address: 2617 S COMPASS LN - NAGS HEAD, NC 27959
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,000
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install mini split system

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

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

DocuSigned by:
Applicant Signature: JAMES L. THOMAS, JR 3/29/2023 AUGUST AIR LLC
BB8CE3ABE1D541B... augustair@charter.net

DocuSigned by:
Inspector Signature: CROW HAYES 3/29/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-17127

03/29/2023

Parcel Number: 015306000
Location: 54214 SHORESURF LN – FRISCO
Subdivision: SHORESURF
Legal Description: LOT: 22 BLK: SEC:

Owner Name: JOHN EDWARD MAGUIRE
Owner Mail Address: 6516 ORLAND ST - FALLS CHURCH, VA 22043
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,500
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: replace outdoor heat pump

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

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DocuSigned by:
Applicant Signature: JAMES L. THOMAS, JR 3/29/2023 AUGUST AIR LLC
BB8CE3ABE1D5418... augustair@charter.net

DocuSigned by:
Inspector Signature: CREW HAYES 3/29/2023 CHF
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 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-17175

03/30/2023

Parcel Number: 031136000
 Location: 27200 SPRITSAIL CT – SALVO
 Subdivision: SOUTH BEACH
 Legal Description: LOT: 20 BLK: SEC:

Owner Name: KASHF AIN
 Owner Mail Address: 17715 DRY MILL RD LEESBURG, VA 20175
 Owner Phone and email:

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

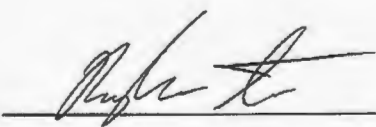
ACCESSORY INFORMATION

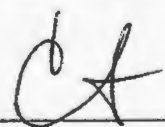
Proposed Construction: RESIDENTIAL - SWIMMING POOLS;HOT TUBS,
 Description of Work: Excavation, installing swimming pool, deck, and fence.
 Septic Permit Date: 04/08/2021 Cost of Construction: \$50,000
 Septic Permit #: 30706 CAMA Permit#:
 Flood Zone:
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: [2023-03-23 15:15:47 631kjack]: PERMIT FEE \$300.00

AS-BUILT NEEDED

TOTAL FEES: \$300.00

Applicant Signature:  Rayhan Ain

Inspector Signature: CREW HAYES  CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-17196

03/31/2023

Parcel Number: 014357008
 Location: 39187 WEAKFISH DR – AVON
 Subdivision: SPENCER'S COVE
 Legal Description: LOT: 255A BLK: SEC:

Owner Name: HENRY E III MYERS
 Owner Mail Address: 2804 MOUNT VERNON LN BLACKSBURG, VA 24060
 Owner Phone and email:

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

BUILDING INFORMATION

Proposed Construction Use:	DOCKS;PIERS;BULKHDS, BOATLFTS , 150 FT. VINYL BULKHEAD LANDWARD OF DELINIATED WETLAND		
Proposed Construction Type:		Cost of Construction:	\$25,500
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: Shane Clark SHANE CLARK CONSTRUCTION

Inspector Signature: CREW HAYES CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-17181

03/30/2023

Parcel Number: 012727000
 Location: 24216 ATLANTIC DR – RODANTHE
 Subdivision: CHICAMACOMICO BEACH SEC 1
 Legal Description: LOT: 37~38~39 BLK: A SEC: 1

Owner Name: AUGUSTA M FELDMANN
 Owner Mail Address: PO BOX 691 RODANTHE, NC 27968
 Owner Phone and email: 804-896-4760 AMSmallwood1156@gmail.com

Contractor Name: AUGUSTA M FELDMANN - OWNER/BUILDER
 Contractor Mail Address: P.O. BOX 691 RODANTHE, NC 27968
 Contractor Phone: Contractor NC License#: N/a

BUILDING INFORMATION

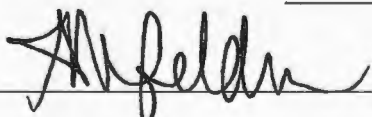
Proposed Construction Use:	RESIDENTIAL ADDITION , BUILD NEW GUEST HOUSE CONNECTED TO EXISTING HOME		
Proposed Construction Type:	SFD	Cost of Construction:	\$22,000
Finished Square Footage:	420	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	S22-16464
Stories:	0.0	Septic Permit Date:	02/28/2023
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	560		

Comments: Any deviation from the building plan or site plan requires prior approval. [2023-03-23 12:11:25 631kjack]:

PERMIT FEE	\$315.00
FLOOD DEVELOPMENT BLDG PERMIT	75.00

AS-BUILT NEEDED

TOTAL FEES: \$390.00

Applicant Signature:  AUGUSTA M FELDMANN

Inspector Signature: Crew Hayes  SF



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ELEVATION PERMIT PROJECT

ELEVATION PERMIT PROJECT#: R-16717

03/10/2023

Parcel Number: 014155000
 Location: 51030 BACCUS CT – FRISCO
 Subdivision: ELEVY MANOR 1ST ADD
 Legal Description: LOT: 18 BLK: SEC:

Owner Name: DAVID STEVEN JONES
 Owner Mail Address: P O BOX 703 - HATTERAS, NC 27943
 Owner Contact Information:

Contractor Name: DSW HOMES
 Contractor Mail Address: 1318-B COMMERCE DR, NEW BERN NC - 502 20TH ST. GALVESTON, TX 77550
 Contractor Phone: NA
 Contractor NC License#: 778881

DETAILS RESIDENTIAL

Cost of Job: \$258,470

ELEVATION PERMIT PROJECT FEE: \$200.00

Comments: ELEVATION OF A SINGLE FAMILY RESIDENTIAL HOME

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:  DSW HOMES
 LAUREN.PARKER@DSWHOMES.COM

Inspector Signature: Crew Hayes  SF



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 Manteo NC 27954

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 Frisco: (252) 475-5878

ELEVATION PERMIT PROJECT

ELEVATION PERMIT PROJECT#: R-16719

03/10/2023

Parcel Number: 011693000
 Location: 50183 BUCCANEER DR – FRISCO
 Subdivision: BRIGANDS BAY
 Legal Description: LOT: 5 BLK: SEC:

Owner Name: CHYREL B AUSTIN
 Owner Mail Address: P O BOX 731 - BUXTON, NC 27920
 Owner Contact Information: 252-671-8118

Contractor Name: DSW HOMES
 Contractor Mail Address: 1318-B COMMERCE DR, NEW BERN NC / 502 20TH ST. GALVESTON, TX 77550
 Contractor Phone: NA
 Contractor NC License#: 778881

DETAILS RESIDENTIAL

Cost of Job: \$199,840

ELEVATION PERMIT PROJECT FEE: \$200.00

Comments: ELEVATION OF A SINGLE FAMILY RESIDENTIAL HOME

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Applicant Signature: _____

DSW HOMES
 LAUREN.PARKER@DSWHOMES.COM

Inspector Signature: _____

Crew Hayes *7251*

SF



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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16537

03/02/2023

Parcel Number: 013426000
Location: 40235 ELLWOOD CT – AVON
Subdivision: HATTERAS COLONY SEC 1
Legal Description: LOT: 37 BLK: SEC: 1

Owner Name: WILSON HUNTER
Owner Mail Address: 256 BARBOURS LN - GREENVILLE, SC 29607
Owner Contact Information:

Contractor Name: MASTER HEATING AND COOLING
Contractor Mail Address: PO BOX 707 - KITTY HAWK, NC 27949
Contractor Phone: 252-255-0095
Contractor NC License#: L18066

DETAILS RESIDENTIAL

Electrical Contractor ID: L-07784
Units 1

Cost of Job: \$13,000

MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALLING DUCTLESS MINI SPLIT

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: _____

MASTER HEATING AND COOLING
masterhvac@masterhvac.net

Inspector Signature: _____

Crew Hayes - *RSF*

SF



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

MISC ACCESSORY

MISC ACCESSORY#: ACC-16956

03/21/2023

Parcel Number: 016092000
Location: 56178 QUEEN ST – HATTERAS
Subdivision: HATTERAS ESTATES SEC 1
Legal Description: LOT: 21 BLK: SEC: 1

Owner Name: DEBBIE B MILLER
Owner Mail Address: 204 BAILEY RD - ADVANCE, NC 27006
Owner Contact Information: 336-345-8528

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

DETAILS RESIDENTIAL

Cost of Job: \$86,000

CAMA Permit
Lot/Ground elevation (ft)

MISC ACCESSORY FEE: \$150.00

Comments: INSTALL ELEVATOR AND SHAFT TO EXTERIOR COVERED DECK

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: _____

J.A. HART GENERAL CONTRACTOR, LLC
accounts@hpsobx.com

Inspector Signature: CORY TATE

AYT



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Planning Office
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Manteo NC 27954

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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16931

03/21/2023

Parcel Number: 012458323
Location: 23006 CHICAMACOMICO CT – RODANTHE
Subdivision: MIRLO BEACH SEC. 3
Legal Description: LOT: 23 BLK: SEC: 3

Owner Name: PATRICK RENNIE
Owner Mail Address: 20 INDIAN HEAD RD - MORRISTOWN, NJ 07960
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,200
Electrical Contractor ID: 9801
Units 1 MECHANICAL PROJECT FEE: \$150.00

Comments: Install 4 Ton Coastal Heat Pump Unit.

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

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

Applicant Signature: *Bryan Phillips* 3/21/2023 VILLAGE AIR INC
34ACB70EC04145B... trivillagehvac@gmail.com

Inspector Signature: *CROW HAYES* 3/21/2023 CHF
74DCB2B2B2D14CC...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16930

03/21/2023

Parcel Number: 014297011
Location: 25222 SEA ISLE SHORES LN – WAVES
Subdivision: SEA ISLE SHORES
Legal Description: LOT: 11 BLK: PH: 2

Owner Name: MAGNOLIA SHORES LLC
Owner Mail Address: 173 WESTBROOK CT - CLARKSBORO, NJ 08020
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,000
Electrical Contractor ID: 9801
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install 14 Seer Variable Speed Unit.

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

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

DocuSigned by:
Applicant Signature: Bryan Phillips 3/21/2023 VILLAGE AIR INC
34AC870EC041458... trivillagehvac@gmail.com

DocuSigned by:
Inspector Signature: CREW HAYES 3/21/2023 CHF
74DCB2B2B2D14CC...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16924

03/20/2023

Parcel Number: 012458010
Location: 22141 SEA GULL ST – RODANTHE
Subdivision: MIRLO BEACH SECTION 2
Legal Description: LOT: 10 BLK: SEC:

Owner Name: THE AUGUST LAUREN LLC
Owner Mail Address: PO BOX 534 - WATERTOWN, OH 45787
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,281
Electrical Contractor ID: U34995
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Changing out the HVAC system and installing Armstrong 3-Ton Heat Pump & Air Handler

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

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Applicant Signature: DocuSigned by:
STUART MORRIS 3/21/2023 AIR HANDLERS OBX
3F8091EF33A4E3... INFO@AIRHANDLERSOBX.COM

Inspector Signature: DocuSigned by:
CROW HAYES 3/21/2023 CHF
74DCB282B2D14CC...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16932

03/21/2023

Parcel Number: 013901000
Location: 40254 E SUNFISH CT – AVON
Subdivision: HATTERAS COLONY SEC 5
Legal Description: LOT: 18 BLK: SEC: 5

Owner Name: KIMBERLEE LANGHORST
Owner Mail Address: 14719 GRAND FOREST CT - CHESTERFIELD, VA 23834
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,500
Electrical Contractor ID: 9801
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install 2.5 Ton 15 Seer System.

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

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DocuSigned by:
Applicant Signature: Bryan Phillips 3/21/2023 VILLAGE AIR INC
34ACB70EC04145B... trivillagehvac@gmail.com

DocuSigned by:
Inspector Signature: CREW HAYES 3/21/2023 CHF
74DCB28282D14CC...



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

MISC ACCESSORY

MISC ACCESSORY#: ACC-16956

03/21/2023

Parcel Number: 016092000
 Location: 56178 QUEEN ST - HATTERAS
 Subdivision: HATTERAS ESTATES SEC 1
 Legal Description: LOT: 21 BLK: SEC: 1

Owner Name: DEBBIE B MILLER
 Owner Mail Address: 204 BAILEY RD - ADVANCE, NC 27006
 Owner Contact Information: 336-345-8528

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#: L61800

DETAILS RESIDENTIAL

CAMA Permit	Cost of Job:	\$86,000
Lot/Ground elevation (ft)	MISC ACCESSORY FEE:	\$150.00

Comments: INSTALL ELEVATOR AND SHAFT TO EXTERIOR COVERED DECK

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: *Jeanne Hart* J.A. HART GENERAL CONTRACTOR, LLC
 accounts@hpsobx.com

Inspector Signature: CORY TATE AY

Application Reference # 10555 on 03/07/2023



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16903

03/20/2023

Parcel Number: 012504000
Location: 23208 EAST POINT DR -- RODANTHE
Subdivision: EAST POINT REEF
Legal Description: LOT: 14 BLK: SEC:

Owner Name: ELIZABETH D P HARVEY
Owner Mail Address: 120 MILLWOODS RD N LYNCHBURG, VA 24503
Owner Phone and email:

Contractor Name: BARRETT & HABER, LLC, T/A EMANUELSON & D
Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959
Contractor Phone: Contractor NC License#: 87233

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , replace 16-8"x8"x16' and 2-6"x6"x16' deck pilings	Cost of Construction:	\$16,000
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:		Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	SHX
Exterior Finish:		Base Flood Elevation:	8.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

DocuSigned by:
Applicant Signature: Lorelei Zumbrenner BARRETT & HABER, LLC, T/A EMANUELSON & D
8258597D22C845A... 3/20/2023

DocuSigned by:
Inspector Signature: CREW HAYES CHF
74DC828282D14CC... 3/20/2023



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16934

03/21/2023

Parcel Number: 013212000
Location: 27208 SPIN DRIFT RD – SALVO
Subdivision: SPIN-DRIFT BANKS SEC 2
Legal Description: LOT: 6 BLK: SEC: 2

Owner Name: VINCENT TTEE LOSCALZO
Owner Mail Address: 10 DANA CT - MILLER PLACE, NY 11764
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$9,400
Electrical Contractor ID: 9801
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install 3 Ton 15 Seer Variable Speed System.

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

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

DocuSigned by:
Applicant Signature: Erwan Philips 3/21/2023 VILLAGE AIR INC
34ACB70EC04145B... trivillagehvac@gmail.com

DocuSigned by:
Inspector Signature: EROW HAYES 3/21/2023 CHF
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County of Dare
Planning Office
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Manteo NC 27954

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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16933

03/21/2023

Parcel Number: 013163000
Location: 26864 COLONY DR – SALVO
Subdivision: HATTERAS COLONY SEC A
Legal Description: LOT: 61 BLK: SEC: A

Owner Name: JAMES W TRUSTEE MITCHUM
Owner Mail Address: C/O 928 SALISBURY GREEN - VIRGINIA BEACH, VA 23452
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,700
Electrical Contractor ID: 9801
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install 2 Ton Coastal Heat Pump Unit & Air Handler System.

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

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

DocuSigned by:
Applicant Signature: Bryan Phillips 3/21/2023 VILLAGE AIR INC
34ACB70EC04145B... trivillagehvac@gmail.com

DocuSigned by:
Inspector Signature: CREW HAYES 3/21/2023 CHF
74DCB282B2D14CC...





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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16958

03/21/2023

Parcel Number: 013694000
Location: 39189 BARRACUDA CT - AVON
Subdivision: HATTERAS COLONY SEC 3
Legal Description: LOT: 69 BLK: SEC: 3

Owner Name: VIRIGNIA H TTEE ROBERTS
Owner Mail Address: PO BOX 58 - SOUTH BOSTON, VA 24592
Owner Contact Information:

Contractor Name: HATTERAS ISLAND AIR INC
Contractor Mail Address: 40462 NORTH END RD - AVON, NC 27915
Contractor Phone: 252-305-1671
Contractor NC License#: L.32971

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$13,000
Electrical Contractor ID: 15935
Units 2 **MECHANICAL PROJECT FEE: \$150.00**

Comments: REPLACE BOTH UPSTAIRS AND DOWNSTAIRS SYSTEMS

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

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Applicant Signature: Warren Gastins HATTERAS ISLAND AIR INC
DocuSigned by:
0E23B5EAD8894D1... 3/22/2023

Inspector Signature: CREW HAYES CHF
DocuSigned by:
74DC8282B2D14CC... 3/21/2023



County of Dare
Planning Office
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Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MISC ACCESSORY

MISC ACCESSORY#: ACC-16956

03/21/2023

Parcel Number: 016092000
Location: 56178 QUEEN ST – HATTERAS
Subdivision: HATTERAS ESTATES SEC 1
Legal Description: LOT: 21 BLK: SEC: 1

Owner Name: DEBBIE B MILLER
Owner Mail Address: 204 BAILEY RD - ADVANCE, NC 27006
Owner Contact Information: 336-345-8528

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

DETAILS RESIDENTIAL

Cost of Job: \$86,000

CAMA Permit

Lot/Ground elevation (ft)

MISC ACCESSORY FEE: \$150.00

Comments: INSTALL ELEVATOR AND SHAFT TO EXTERIOR COVERED DECK

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

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Applicant Signature:

J.A. HART GENERAL CONTRACTOR, LLC
accounts@hpsobx.com

Inspector Signature: CORY TATE

AYT



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 Planning Office
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 Manteo NC 27954

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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-17053

03/27/2023

Parcel Number: 012766000
 Location: 24208 SEABREEZE CT – RODANTHE
 Subdivision: TRADE WINDS BEACHES
 Legal Description: LOT: 30 BLK: SEC:

Owner Name: SHIRE COASTAL HOMES OBX LLC
 Owner Mail Address: 767 S SHIRKSHIRE RD CONWAY, MA 01341
 Owner Phone and email:

Contractor Name: DEVCO BUILD & DESIGN LLC
 Contractor Mail Address: 1213 CULBRETH DR, STE 434 WILMINGTON, NC 28405
 Contractor Phone: Contractor NC License#: L.85287

BUILDING INFORMATION

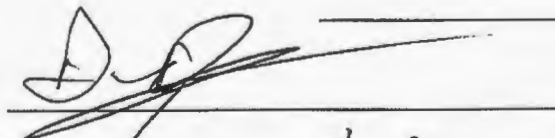
Proposed Construction Use:	REMODEL RES OR COM , REMODEL STRUCTURE INTO ADU DWELLING		
Proposed Construction Type:		Cost of Construction:	\$185,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	S9-9997
Stories:	0	Septic Permit Date:	04/05/2022
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	EXISTING
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AO
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0


Comments: Any deviation from the building plan or site plan requires prior approval. Replacement windows to meet the NC Residential Building Code requirements in Chapter 3 for windborne debris protection. All trade work to meet current NC codes. Call for all required inspections at least 24 hours in advance.

PERMIT FEE \$1,850.00

AS-BUILT NEED/OR NEW SURVEY SHOWING UPDATED LOT COVERAGE

TOTAL FEES: \$1,850.00

Applicant Signature:  DEVCO BUILD & DESIGN LLC

Inspector Signature: Cory Tate  CHF



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-17097

03/28/2023

Parcel Number: 012793000
Location: 26251 WIMBLE SHORES DR – SALVO
Subdivision: WIMBLE SHORES INC
Legal Description: LOT: 16 BLK: SEC:

Owner Name: CHRISTOPHER S GARBER
Owner Mail Address: PO BOX 217 RODANTHE, NC 27968
Owner Phone and email: 252-256-0832 CHRIS.GERBER27972@GMAIL.COM

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

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - SWIMMING POOLS;HOT TUBS,
Description of Work: INSTALL DETACHED POOL
Septic Permit Date: 02/13/2023 Cost of Construction: \$50,000
Septic Permit #: 27544 CAMA Permit#:
Flood Zone: SHX
Base Flood Elevation: 8.0
Lot/Ground Elevation:

Comments: [2023-03-23 15:46:34 631kjack]: PERMIT FEE \$300.00

AS-BUILT NEEDED

TOTAL FEES: \$300.00

Applicant Signature:  CHRISTOPHER S GARBER
3/29/2023

Inspector Signature:  CHF
3/29/2023



County of Dare
Planning Office
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Manteo NC 27954

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16843

03/16/2023

Parcel Number: 013475000
Location: 40244 DOLPHIN LN -- AVON
Subdivision: HATTERAS COLONY SEC 1
Legal Description: LOT: 88 BLK: SEC: 1

Owner Name: TIMOTHY JAMES SASSER
Owner Mail Address: 502 S HILLS CT - WESTMINSTER, MD 21158
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$10,500
Electrical Contractor ID: ST.PH.32045
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment and New Ductwork

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

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

DocuSigned by:
Applicant Signature: LESLIE MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
cbreeze247@gmail.com
F2004D2AC07C413...

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
E94AF422898B42A...



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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16855

03/16/2023

Parcel Number: 013126000
 Location: 26707 COLONY DR – SALVO
 Subdivision: HATTERAS COLONY SEC A
 Legal Description: LOT: 23 BLK: SEC: A

Owner Name: GEORGE L III MARKHAM
 Owner Mail Address: 1016 WALNUT NECK AVE - CHESAPEAKE, VA 23320
 Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
 Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
 Contractor Phone: 252-491-8637
 Contractor NC License#: L26599

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,614
 Electrical Contractor ID: U34995
 Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Installing 3.5 Ton trane Air Handler only

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: DocuSigned by:
STUART MORRIS 3/20/2023 AIR HANDLERS OBX
 3F8D91EF33A84E3... INFO@AIRHANDLERSOBX.COM

Inspector Signature: DocuSigned by:
Cory Tate 3/16/2023 CHF
 E94AF422898842A...



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16908

03/20/2023

Parcel Number: 012458316
 Location: 23028 CROSS OF HONOR WAY – RODANTHE
 Subdivision: MIRLO BEACH SEC. 3
 Legal Description: LOT: 16 BLK: SEC: 3

Owner Name: MICHAEL E DUPRE
 Owner Mail Address: 9218 BAILY OAK DR MIDLOTHIAN, VA 23112
 Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
 Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , SIDING AND WINDOWS	REPLACEMENT	
Proposed Construction Type:		Cost of Construction:	\$95,772
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
 HOME OWNERS RECOVERY FEE 10.00

TOTAL FEES: \$160.00

Applicant Signature:  FRASCA CUSTOM HOMES LLC

Inspector Signature: CREW HAYES CHF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16855

03/16/2023

Parcel Number: 013126000
Location: 26707 COLONY DR – SALVO
Subdivision: HATTERAS COLONY SEC A
Legal Description: LOT: 23 BLK: SEC: A

Owner Name: GEORGE L III MARKHAM
Owner Mail Address: 1016 WALNUT NECK AVE - CHESAPEAKE, VA 23320
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,614

Electrical Contractor ID: U34995

Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Installing 3.5 Ton trane Air Handler only

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

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DocuSigned by:
Applicant Signature: STUART MORRIS 3/20/2023 AIR HANDLERS OBX
3F8D91EF33A84E3... INFO@AIRHANDLERSOBX.COM

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16842

03/16/2023

Parcel Number: 013174000
Location: 26224 BLUEBEARD RD – SALVO
Subdivision: HATTERAS COLONY SEC A
Legal Description: LOT: 74 BLK: SEC: A

Owner Name: JOHN D JR OWENS
Owner Mail Address: 3924 ST MARKS RD - DURHAM, NC 27707
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,900

Electrical Contractor ID: ST.PH.32045

Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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

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DocuSigned by:
Applicant Signature: LESA MARIE STEVENSON 3/20/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
cbreeze247@gmail.com
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DocuSigned by:
Inspector Signature: CREW HAYES 3/20/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16858

03/16/2023

Parcel Number: 013047000
Location: 26495 COLONY DR – SALVO
Subdivision: HATTERAS COLONY SEC B
Legal Description: LOT: 4 BLK: SEC: B

Owner Name: EARL H JR DICKERSON
Owner Mail Address: 298 FAIRWAY PL - APPOMATTOX, VA 24522
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$12,077
Electrical Contractor ID: 22222-L
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: SINGLE C/O—TRANE 16 SEER 2-TON H/P SYSTEM THAT SERVICES TH E UPSTAIRS.

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

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Applicant Signature: BRIAN LANCASTER 3/20/2023 R A HOY HEATING AND AIR CONDITIONING INC
02CC048B0F7B4B4... Brian@rahoy.com

Inspector Signature: BREW HAYES 3/20/2023 CHF
74DC82B2B2D14CC...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16920

03/20/2023

Parcel Number: 012626000
Location: 24040 DEAN AVENUE – RODANTHE
Subdivision: ROWAN BEACH ESTATES
Legal Description: LOT: A BLK: SEC:

Owner Name: JOHN P IV BAILEY
Owner Mail Address: 41 JUDY ST - WILLISTON, SC 29853
Owner Contact Information: 803-439-9043

Contractor Name: PAMLICO AIR INC
Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
Contractor Phone: 252-995-5435
Contractor NC License#: L15259

DETAILS RESIDENTIAL

Cost of Job: \$8,500

Electrical Contractor ID:

Units

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE AIR HANDLER AND HEAT PUMP

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

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Applicant Signature: JOSEPH FARROW PAMLICO AIR INC
DocuSigned by: 3/20/2023
B6D52F9C88E9435...

Inspector Signature: CREW HAYES CHF
DocuSigned by: 3/20/2023
74DC8282B2D14CC...



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16933

03/21/2023

Parcel Number: 013163000
Location: 26864 COLONY DR – SALVO
Subdivision: HATTERAS COLONY SEC A
Legal Description: LOT: 61 BLK: SEC: A

Owner Name: JAMES W TRUSTEE MITCHUM
Owner Mail Address: C/O 928 SALISBURY GREEN - VIRGINIA BEACH, VA 23452
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,700
Electrical Contractor ID: 9801
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install 2 Ton Coastal Heat Pump Unit & Air Handler System.

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

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Applicant Signature: DocuSigned by: Bryan Philips 3/21/2023 VILLAGE AIR INC
34ACB70EC04145B... trivillagehvac@gmail.com

Inspector Signature: DocuSigned by: GROW HAYES 3/21/2023 CHF
74DCB28282D14CC...



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16828

03/16/2023

Parcel Number: 017183000
Location: 46029 OCEAN DR – BUXTON
Subdivision: CAPE HATTERAS SEASHORE SEC B
Legal Description: LOT: 35 BLK: SEC: B

Owner Name: JAMES T JR KERSHAW
Owner Mail Address: 85 SQUAW BROOK RD - NORTH HALEDON, NJ 07508
Owner Contact Information:

Contractor Name: CALLAHAN HVAC REPAIRS AND SERVICE LLC
Contractor Mail Address: PO BOX 53 - HATTERAS, NC 27943
Contractor Phone: 252-986-2757
Contractor NC License#: L17825

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,000

Electrical Contractor ID: 24451

Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: REPLACE HEAT PUMP

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

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Applicant Signature: *[Signature]* CALLAHAN HVAC REPAIRS AND SERVICE LLC
3/16/2023

Inspector Signature: *[Signature]* CHF
3/16/2023



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-16872

03/17/2023

Parcel Number: 012082000
 Location: 50308 SPENCER LN – FRISCO
 Subdivision: SPENCERS WOOD
 Legal Description: LOT: 7 BLK: A SEC:

Owner Name: ANTHONY DAVID PENA
 Owner Mail Address: 12 SHELTON RD HAMPTON, VA 23663
 Owner Phone and email: 757-342-6982 hx1wasp@yahoo.com

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

BUILDING INFORMATION

Proposed Construction Use:	ACCESSORY STRUCT OVER 12 FT , NEW GARAGE KIT 40 X 30		
Proposed Construction Type:	STR	Cost of Construction:	\$3,600
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	1360	Septic Permit#:	4.5
Stories:	0.0	Septic Permit Date:	01/24/2023
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	S22-15691
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	9.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 [2023-03-09 10:37:39 631kjack]:

PERMIT FEE	\$544.00
FLOOD DEVELOPMENT BLDG PERMIT	75.00

AS-BUILT NEEDED

TOTAL FEES: \$619.00

Applicant Signature: *C. David Pena* ANTHONY DAVID PENA

Inspector Signature: CREW HAYES *CF* CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16876

03/17/2023

Parcel Number: 015228000
 Location: 53211 ROBIN LN – FRISCO
 Subdivision: HIGH TOR SANDS
 Legal Description: LOT: 21 BLK: SEC:

Owner Name: MICHAEL W LINGENFELTER
 Owner Mail Address: 36892 CHANDER DR SELBYVILLE, DE 19975
 Owner Phone and email: 302-362-2790 mikelingen134@hotmail.com

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

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , REPAIR DECK AND PILINGS	Cost of Construction:	\$20,000
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:		Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan PERMIT FEE \$150.00 or site plan requires prior approval.

TOTAL FEES: \$150.00

Applicant Signature: *Michael W Lingenfelter* MICHAEL W LINGENFELTER
 Inspector Signature: CREW HAYES CHF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16853

03/16/2023

Parcel Number: 016011002
Location: 56651 NC 12 HWY – HATTERAS
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: 2 BLK: SEC:

Owner Name: CHRISTOPHER M SMITH
Owner Mail Address: 740 SCHUYLKILL RD - BIRDSBORO, PA 19508
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$4,750
Electrical Contractor ID: ST.PH.32045
Units 1 MECHANICAL PROJECT FEE: \$150.00

Comments: Replace HVAC Equipment

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

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DocuSigned by:
Applicant Signature: LESA MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16854

03/16/2023

Parcel Number: 027890007
Location: 57233 ATLANTIC VIEW DR – HATTERAS
Subdivision: ATLANTIC VIEW ESTATES
Legal Description: LOT: 1 BLK: SEC: 1

Owner Name: HERE COMES THE SUN LLC
Owner Mail Address: 245 VIRGINIA KEY LN - UNION HALL, VA 24176
Owner Contact Information: 803-646-0294 papapitka@gmail.com

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,400

Electrical Contractor ID: ST.PH.32045

Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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DocuSigned by:
Applicant Signature: LESIA MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16852

03/16/2023

Parcel Number: 016113000
Location: 56173 ELIZABETH AVENUE – HATTERAS
Subdivision: HATTERAS ESTATES SEC 1
Legal Description: LOT: 42-R1 BLK: SEC: 1

Owner Name: WILLIAM MARTIN EVANS
Owner Mail Address: 1830 5TH ST NW - HICKORY, NC 28601
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,850
Electrical Contractor ID: ST.PH.32045
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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DocuSigned by:
Applicant Signature: LESLIE MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16850

03/16/2023

Parcel Number: 014297002
Location: 25209 SEA ISLE SHORES CT – WAVES
Subdivision: SEA ISLE SHORES
Legal Description: LOT: 2 BLK: SEC:

Owner Name: DOUGLAS W TTEE SCHAEFFER
Owner Mail Address: 687 N MAY ST - CHANDLER, AZ 85226
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,800
Electrical Contractor ID: ST.PH.32045
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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

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DocuSigned by:
Applicant Signature: LESLIE MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
E94AF42289842A...



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16849

03/16/2023

Parcel Number: 011477000
Location: 23174 W CORBINA DR – RODANTHE
Subdivision: CORBINA SHORES
Legal Description: LOT: 43 BLK: SEC:

Owner Name: BARRY B CONNORS
Owner Mail Address: 9563 CEDAR LN - SEAFORD, DE 19973
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$15,300
Electrical Contractor ID: ST.PH.32045
Units 2 MECHANICAL PROJECT FEE: \$150.00

Comments: Replace HVAC Equipment

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

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Applicant Signature: LESLIE MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
cbreeze247@gmail.com

Inspector Signature: Cory Tate 3/16/2023 CHF



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Manteo NC 27954

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16845

03/16/2023

Parcel Number: 013380000
Location: 39285 PAMLICO CT – AVON
Subdivision: ATLANTIC ESTATES SEC 1 & 2
Legal Description: LOT: 8 BLK: SEC: 2

Owner Name: TIMOTHY F GRECO
Owner Mail Address: 7 TWIN OAKS CT - SEWELL, NJ 08080
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$9,400

Electrical Contractor ID: ST.PH.32045

Units 2 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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

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

DocuSigned by:
Applicant Signature: LESA MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F200402AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: Cory Tate 3/16/2023 CHF
E94AF422898B42A...



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16844

03/16/2023

Parcel Number: 013374000
Location: 39353 NC 12 HWY – AVON
Subdivision: ATLANTIC ESTATES SEC 1 & 2
Legal Description: LOT: 2 BLK: SEC: 2

Owner Name: MICHAEL W TTEE BERNHARDT
Owner Mail Address: 222 WILDWOOD COVE DR - MOORESVILLE, NC 28117
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,850
Electrical Contractor ID: ST.PH.32045
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Replace HVAC Equipment

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Applicant Signature: LESA MARIE STEVENSON 3/16/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
cbreeze247@gmail.com

Inspector Signature: Cory Tate 3/16/2023 CHF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16674

03/09/2023

Parcel Number: 017240000
Location: 46201 TOWER CIRCLE RD – BUXTON
Subdivision: TOWER BEACH SUBD BLK 2
Legal Description: LOT: 1 BLK: 2 SEC:

Owner Name: MARY VAN SEVEREN
Owner Mail Address: 19272 252ND AVE - BETTENDORF, IA 52722
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$7,000
Electrical Contractor ID: 15935
Units 2 **MECHANICAL PROJECT FEE: \$150.00**

Comments: 2 outdoor heat pumps

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

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DocuSigned by:
Applicant Signature: JAMES L. THOMAS, JR 3/10/2023 AUGUST AIR LLC
8BBCE3ABE1D541B... augustair@charter.net

DocuSigned by:
Inspector Signature: CROW HAYES 3/9/2023 CHF
74DCB2B2B2D14CC...



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16673

03/09/2023

Parcel Number: 013898000
Location: 40294 E SUNFISH CT – AVON
Subdivision: HATTERAS COLONY SEC 5
Legal Description: LOT: 15 BLK: SEC: 5

Owner Name: GEORGE EDWARD SOUTHWELL
Owner Mail Address: 120 VILLA WAY - YORKTOWN, VA 23693
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$12,000
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install heat pump & airhandler

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

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DocuSigned by:
Applicant Signature: JAMES L THOMAS, JR 3/10/2023 AUGUST AIR LLC
888CE3ABE1D541B... augustair@charter.net

DocuSigned by:
Inspector Signature: BREW HAYES 3/9/2023 CHF
74DCB2B2B2D14CC...



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16706

03/10/2023

Parcel Number: 015137002
Location: 54025 SANDPIPER DR – FRISCO
Subdivision: SURF & SOUND SEC 1
Legal Description: LOT: 2 BLK: SEC: 1

Owner Name: JOSEPH HENRY MORICI
Owner Mail Address: 4719 JENNWAY LOOP - MOSELEY, VA 23120
Owner Contact Information:

Contractor Name: PAMLICO AIR INC
Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
Contractor Phone: 252-995-5435
Contractor NC License#: L15259

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,200
Electrical Contractor ID: 15259
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: REPLACE AIR HANDLER AND HEAT PUMP

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

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DocuSigned by:
Applicant Signature: JOSEPH FARROW PAMLICO AIR INC
86D62F9C88E9435... 3/10/2023

DocuSigned by:
Inspector Signature: BREW HAYES CHF
74DC82B282D14CC... 3/10/2023



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16704

03/10/2023

Parcel Number: 013390000
Location: 39309 SAILFISH LN – AVON
Subdivision: HATTERAS COLONY SEC 1
Legal Description: LOT: 1 BLK: SEC: 1

Owner Name: BRADFORD J MARX
Owner Mail Address: PO BOX 1055 - AVON, NC 27915
Owner Contact Information:

Contractor Name: PAMLICO AIR INC
Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
Contractor Phone: 252-995-5435
Contractor NC License#: L15259

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,500
Electrical Contractor ID: L15259
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: REPLACE AIR HANDLER AND HEAT PUMP

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

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Applicant Signature: JOSEPH FARROW PAMLICO AIR INC
3/10/2023
80D52F8C68E9435...

Inspector Signature: CREW HAYES CHF
3/10/2023
74DC82B2B2D14CC...



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16729

03/10/2023

Parcel Number: 004791019
Location: 57511 LIGHTHOUSE RD – HATTERAS
Subdivision: HATTERAS BY THE SEA
Legal Description: LOT: 19 BLK: SEC:

Owner Name: RUSSELL JOSEPH BASIURA
Owner Mail Address: 2570 MUIRFIELD WAY - LANSDALE, PA 19446
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

Cost of Job: \$6,496

Electrical Contractor ID: 22222-L

Units: 0

MECHANICAL PROJECT FEE: \$150.00

Comments: SINGLE DUCT SYSTEM REPLACEMENT– DUCT WORK TO THE UPSTAIRS S YSTEM AND AEROSEAL WHEN COMPLETE

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Applicant Signature: BRIAN LANCASTER 3/13/2023
DocuSigned by: 02CC048B0F7B4B4...

R A HOY HEATING AND AIR CONDITIONING INC
Brian@rahoy.com

Inspector Signature: CREW HAYES 3/13/2023
DocuSigned by: 74DC82B2B2D14CC...

CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16815

03/15/2023

Parcel Number: 012465003
 Location: 23048 JOE BELL LN – RODANTHE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: UNICORN PROPERTIES 1 LLC
 Owner Mail Address: 300 MANOR RIDGE DR CARRBORO, NC 27510
 Owner Phone and email:

Contractor Name: STAN WHITE REALTY AND CONSTRUCTION INC
 Contractor Mail Address: PO BOX 1447, NAGS HEAD, NC 27959
 Contractor Phone: 252-441-1515 Contractor NC License#: 18946

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , REPLACE AND REPAIR SIDING AND WINDOWS	Cost of Construction:	\$187,325
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:		Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$160.00

Applicant Signature: STAN WHITE REALTY AND CONSTRUCTION INC

Inspector Signature: CREW HAYES CHF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16572

03/06/2023

Parcel Number: 027778025
Location: 58187 HATTERAS HARBOR CT – HATTERAS
Subdivision: HATTERAS HARBOR
Legal Description: LOT: 25 BLK: SEC:

Owner Name: KENNETH G FECHTER
Owner Mail Address: 19 JASMINE DR - BURLINGTON, NJ 08016
Owner Contact Information:

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

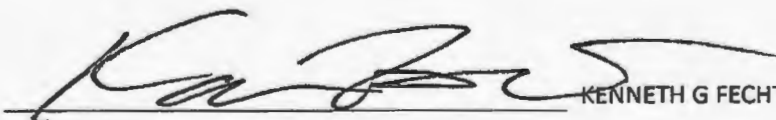
DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$10,000
Electrical Contractor ID:
Units MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE TWO HEAT PUMP UNITS

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

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Applicant Signature:  KENNETH G FECHTER

Inspector Signature: CREW HAYES CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-16585

03/06/2023

Parcel Number: 013977000
Location: 39190 WEAKFISH DR – AVON
Subdivision: HATTERAS COLONY SEC 10
Legal Description: LOT: 26 BLK: SEC: 10

Owner Name: TODD EARL AYDELOTTE
Owner Mail Address: 37359 TREE TOP LN SELBYVILLE, DE 19975
Owner Phone and email:

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

BUILDING INFORMATION

Proposed Construction Use: DOCKS;PIERS;BULKHDS, BOATLFTS , NEW BULKHEAD AND 10 X 20 BOAT RAMP
Proposed Construction Type: Cost of Construction: \$32,000
Finished Square Footage: 0 CAMA Permit#: 86847
Unfinished Square Footage: 0 Septic Permit#:
Stories: 0 Septic Permit Date:
Building Height: Survey/Site Plan:
Total Rooms: 0 Water Tap#:
Footing Type: Water Type:
Exterior Finish: Flood Zone: AE
Proposed Finished Floor Elevation: Base Flood Elevation: 8.0
Elevation: Lot/Ground Elevation:
Bedrooms: 0 Baths/half baths: 0/0

Comments: Any deviation from the building plan PERMIT FEE \$250.00
or site plan requires prior approval.

TOTAL FEES: \$250.00

DocuSigned by:
Applicant Signature: Julie Emory NORTHEASTERN MARINE INC
08A388CB41E2434... 3/7/2023

DocuSigned by:
Inspector Signature: CROW HAYES CHF
74DC8282B2D14CC... 3/6/2023



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ELEVATION PERMIT PROJECT

ELEVATION PERMIT PROJECT#: R-16717

03/10/2023

Parcel Number: 014155000
 Location: 51030 BACCUS CT – FRISCO
 Subdivision: ELEVVY MANOR 1ST ADD
 Legal Description: LOT: 18 BLK: SEC:

Owner Name: DAVID STEVEN JONES
 Owner Mail Address: P O BOX 703 - HATTERAS, NC 27943
 Owner Contact Information:

Contractor Name: DSW HOMES
 Contractor Mail Address: 1318-B COMMERCE DR, NEW BERN NC - 502 20TH ST. GALVESTON, TX 77550
 Contractor Phone: NA
 Contractor NC License#: 778881

DETAILS RESIDENTIAL

Cost of Job: \$258,470

ELEVATION PERMIT PROJECT FEE: \$200.00

Comments: ELEVATION OF A SINGLE FAMILY RESIDENTIAL HOME

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Applicant Signature:  DSW HOMES
 LAUREN.PARKER@DSWHOMES.COM

Inspector Signature: Crew Hayes *-ASF* SF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16668

03/09/2023

Parcel Number: 013598000
Location: 39308 SANDFIDDLER LN – AVON
Subdivision: HATTERAS COLONY SEC 2
Legal Description: LOT: 55 BLK: SEC: 2

Owner Name: STEVEN HOWARD MILLS
Owner Mail Address: 548 SPENCER MULL RD - PENROSE, NC 28766
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,600
Electrical Contractor ID: ST.PH.32045
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Install a new mini-split system to condition the sun room on the south side of the home.

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Applicant Signature: LESLIE MARIE STEVENSON
F2094D2AC07C413... 3/9/2023

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

Inspector Signature: CROW HAYES
74DC82B2B2D14CC... 3/9/2023

CHF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16669

03/09/2023

Parcel Number: 016066025
Location: 57235 SUMMERPLACE DR – HATTERAS
Subdivision: SUMMERPLACE
Legal Description: LOT: 25 BLK: SEC:

Owner Name: WJG HOLDINGS LLC
Owner Mail Address: 530 WOODLAND DR - GREENSBORO, NC 27408
Owner Contact Information:

Contractor Name: C-BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 4.00 Cost of Job: \$26,300
Electrical Contractor ID: ST.PH.32045
Units 4 **MECHANICAL PROJECT FEE: \$200.00**

Comments: Replace HVAC Equipment

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DocuSigned by:
Applicant Signature: LESA MARIE STEVENSON 3/9/2023 C-BREEZE HEATING AND AIR CONDITIONING LL
F2004D2AC07C413... cbreeze247@gmail.com

DocuSigned by:
Inspector Signature: BREW HAYES 3/9/2023 CHF
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16671

03/09/2023

Parcel Number: 011568000
Location: 25036 MAC OCA CT -- WAVES
Subdivision: MAC-OCA REEF
Legal Description: LOT: 7 BLK: SEC:

Owner Name: BAHAMA BREEZE WAVES LLC
Owner Mail Address: PO BOX 1163 - PASADENA, MD 21123
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,726
Electrical Contractor ID: U34995
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: Armstrong, 14 Seer Single-Stage Heat Pump, 2.50 Ton, Heat Pu mp & Armstrong, Single-Speed Fan Motor Air Handler, 2.50 Ton

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DocuSigned by:
Applicant Signature: STUART MORRIS AIR HANDLERS OBX
3F8D91EF33A84E3... 3/9/2023 INFO@AIRHANDLERSOBX.COM

DocuSigned by:
Inspector Signature: CREW HAYES CHF
740C828282D14CC... 3/9/2023



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16678

03/09/2023

Parcel Number: 017050000
Location: 47310 BUXTON BACK RD – BUXTON
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: EDGAR P HOOPER
Owner Mail Address: P O BOX 800 - BUXTON, NC 27920
Owner Contact Information:

Contractor Name: AUGUST AIR LLC
Contractor Mail Address: PO BOX 726 - AVON, NC 27915
Contractor Phone: 252-423-9101
Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,800
Electrical Contractor ID: 15935
Units 1 **MECHANICAL PROJECT FEE: \$150.00**

Comments: one indoor air handler and one outdoor heat pump

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

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DocuSigned by:
Applicant Signature: JAMES L THOMAS, JR 3/10/2023 AUGUST AIR LLC
888CE3A8E1D541B... augustair@charter.net

DocuSigned by:
Inspector Signature: CREW HAYES 3/9/2023 CHF
74DCB2B2B2D14CC...



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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-16585

03/06/2023

Parcel Number: 013977000
 Location: 39190 WEAKFISH DR – AVON
 Subdivision: HATTERAS COLONY SEC 10
 Legal Description: LOT: 26 BLK: SEC: 10

Owner Name: TODD EARL AYDELOTTE
 Owner Mail Address: 37359 TREE TOP LN SELBYVILLE, DE 19975
 Owner Phone and email:

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

BUILDING INFORMATION

Proposed Construction Use:	DOCKS;PIERS;BULKHDS, BOATLFTS , NEW BULKHEAD AND 10 X 20 BOAT RAMP		
Proposed Construction Type:		Cost of Construction:	\$32,000
Finished Square Footage:	0	CAMA Permit#:	86847
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan - PERMIT FEE \$250.00
 or site plan requires prior approval.

TOTAL FEES: \$250.00

Applicant Signature: _____ NORTHEASTERN MARINE INC

Inspector Signature: _____ CHF



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 BUILDING PERMIT

BUILDING PERMIT#: R-16628

03/08/2023

Parcel Number: 012660055
Location: 24252 DEAN AVENUE – RODANTHE
Subdivision: ROWAN BEACH ESTATES
Legal Description: LOT: 55 BLK: SEC:

Owner Name: MARTHA ALICE BUNDY
Owner Mail Address: PO BOX 338 RODANTHE, NC 27968
Owner Phone and email: 252-987-2934

Contractor Name: DSW HOMES
Contractor Mail Address: 1318-B COMMERCE DR, NEW BERN, NC 285, 502 20TH ST. GALVESTON, TX 77550
Contractor Phone: Contractor NC License#: 778881

BUILDING INFORMATION

Proposed Construction Use:	ELEVATION PERMIT PROJECT , ELEVATION OF SINGLE FAMILY RESIDENTIAL HOME		
Proposed Construction Type:		Cost of Construction:	\$172,138
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	SHX
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$200.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$275.00

DocuSigned by:
Applicant Signature: Laura Parker 3/8/2023 DSW HOMES
63EC5AF83EE48F...

DocuSigned by:
Inspector Signature: CREW HAYES 3/8/2023 CHF
74DC82B282D14CC...



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 BUILDING PERMIT

BUILDING PERMIT#: R-16626

03/08/2023

Parcel Number: 014368000
 Location: 40050 NORTH END RD – AVON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: WANDA FIELDS KING
 Owner Mail Address: P O BOX 36 AVON, NC 27915
 Owner Phone and email:

Contractor Name: DSW HOMES
 Contractor Mail Address: 1318-B COMMERCE DR, NEW BERN, NC 285, 502 20TH ST. GALVESTON, TX 77550
 Contractor Phone: Contractor NC License#: 778881

BUILDING INFORMATION

Proposed Construction Use:	ELEVATION PERMIT PROJECT , ELEVATION OF A SINGLE FAMILY RESIDENTIAL HOME		
Proposed Construction Type:	Cost of Construction:	\$235,151	
Finished Square Footage: 0	CAMA Permit#:		
Unfinished Square Footage: 0	Septic Permit#:		
Stories: 0	Septic Permit Date:		
Building Height:	Survey/Site Plan:		
Total Rooms: 0	Water Tap#:		
Footing Type:	Water Type:		
Exterior Finish:	Flood Zone:	X	
Proposed Finished Floor Elevation:	Base Flood Elevation:	8.0	
Bedrooms: 0	Lot/Ground Elevation:		
	Baths/half baths:	0/0	

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$200.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$275.00

DocuSigned by:
 Applicant Signature: Lauren Parker DSW HOMES
33EC5CAF63EE48F 3/8/2023

DocuSigned by:
 Inspector Signature: CREW HAYES CHF
740CB2B2B2D14CC 3/8/2023



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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16681

03/09/2023

Parcel Number: 015207000
 Location: 54393 NC 12 HWY – FRISCO
 Subdivision: MARLIN VILLAGE
 Legal Description: LOT: 38 BLK: SEC:

Owner Name: RAMON RIVERA
 Owner Mail Address: P O BOX 604 FRISCO, NC 27936
 Owner Phone and email: 984-344-7650 rivera7712@yahoo.com

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

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , REPLACE DECK ON BACK OF HOME AS ON SITEPLAN		
Proposed Construction Type:		Cost of Construction:	\$15,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: Ramon Rivera RAMON RIVERA

Inspector Signature: CREW HAYES CHF



County of Dare
 Planning Office
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Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-16542

03/02/2023

Parcel Number: 014890902
 Location: LOVEY LN – FRISCO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: REGENA R TTEE KAVANAGH
 Owner Mail Address: P O BOX 598 FRISCO, NC 27936
 Owner Phone and email:

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

BUILDING INFORMATION

Proposed Construction Use:	ACCESSORY STRUCT OVER 12 FT , 40 X 68 GARAGE		
Proposed Construction Type:	SFD	Cost of Construction:	\$248,141
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	2720	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	02/23/2023
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	S8-16404
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	9.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

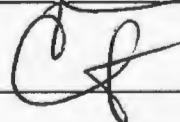
Comments: Any deviation from the building plan or site plan requires prior approval. [2023-02-23 15:32:57 631kjack]:

PERMIT FEE	\$1,088.00
FLOOD DEVELOPMENT BLDG PERMIT	75.00

AS-BUILT NEEDED

TOTAL FEES: \$1,163.00

Applicant Signature:  REGENA R TTEE KAVANAGH

Inspector Signature:  CREW HAYES CHF



County of Dare
Planning Office
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Manteo NC 27954

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-16537

03/02/2023

Parcel Number: 013426000
Location: 40235 ELLWOOD CT – AVON
Subdivision: HATTERAS COLONY SEC 1
Legal Description: LOT: 37 BLK: SEC: 1

Owner Name: WILSON HUNTER
Owner Mail Address: 256 BARBOURS LN - GREENVILLE, SC 29607
Owner Contact Information:

Contractor Name: MASTER HEATING AND COOLING
Contractor Mail Address: PO BOX 707 - KITTY HAWK, NC 27949
Contractor Phone: 252-255-0095
Contractor NC License#: L18066

DETAILS RESIDENTIAL

Electrical Contractor ID: L-07784
Units 1
Cost of Job: \$13,000
MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALLING DUCTLESS MINI SPLIT

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: _____

MASTER HEATING AND COOLING
masterhvac@masterhvac.net

Inspector Signature: _____

Crew Hayes - RSH

SF



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 BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16524

03/01/2023

Parcel Number: 013487000
Location: 40227 DOLPHIN LN – AVON
Subdivision: HATTERAS COLONY SEC 1
Legal Description: LOT: 100 BLK: SEC: 1

Owner Name: GARY LAWRENCE AMBROSE
Owner Mail Address: 140 TRAFTON RD CAMDEN, NC 27921
Owner Phone and email:

Contractor Name: KERSTIN KLUG
Contractor Mail Address: 40180 BONITO RD, AVON, NC 27915
Contractor Phone: 804-815-6543 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , REPLACE EXISTING DECK AND STAIRS	Cost of Construction:	\$12,970
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:		Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  GARY LAWRENCE AMBROSE
9EC50107B1F0433 3/1/2023

Inspector Signature:  CHF
740CB282B2D14CC.. 3/1/2023



County of Dare
 Planning Office
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Manteo: (252) 475-5870
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 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-16881

03/17/2023

Parcel Number: 029593026
 Location: 41741 OCEAN VIEW DR – AVON
 Subdivision: KINNAKEET SHORES PHASE 2
 Legal Description: LOT: 26 BLK: SEC:

Owner Name: WILLIAM L LUTZ
 Owner Mail Address: 3741 LEEWOOD RD STOW, OH 44224
 Owner Phone and email:

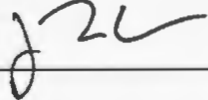
Contractor Name: HI CALIBER KITCHEN & BATH
 Contractor Mail Address: PO BOX 771, FRISCO, NC 27936
 Contractor Phone: Contractor NC License#: 81589

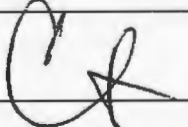
BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , UPSTAIRS GUT AND KITCHEN REMODEL NEW FLOORING		
Proposed Construction Type:	Cost of Construction:	\$50,000	
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$500.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$510.00

Applicant Signature:  HI CALIBER KITCHEN & BATH

Inspector Signature: CREW HAYES  CHF



County of Dare
 Planning Office
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 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-16813

03/15/2023

Parcel Number: 029593012
 Location: 41943 OCEAN VIEW DR – AVON
 Subdivision: KINNAKEET SHORES PHASE 2
 Legal Description: LOT: 12 BLK: SEC:

Owner Name: OUTERBANK INVESTMENTS LLC
 Owner Mail Address: 1220 YARROW ST STALLINGS, NC 28104
 Owner Phone and email:

Contractor Name: DECKARC LLC
 Contractor Mail Address: 3230 PROSPERITY CHURCH RD, STE 202 CHARLOTTE, NC 28269
 Contractor Phone: Contractor NC License#: N/A

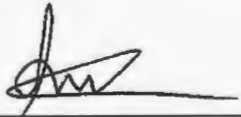
BUILDING INFORMATION

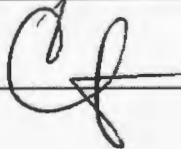
Proposed Construction Use:	SWIMMING POOLS;HOT TUBS , INSTALL ABOVE GROUND SWIMMING POOL WITH DECK		
Proposed Construction Type:	Cost of Construction:	\$14,000	
Finished Square Footage: 0	CAMA Permit#:	HI-7-2023	
Unfinished Square Footage: 0	Septic Permit#:		
Stories: 0	Septic Permit Date:	10/18/2022	
Building Height:	Survey/Site Plan:		
Total Rooms: 0	Water Tap#:	S22-13931	
Footing Type:	Water Type:		
Exterior Finish:	Flood Zone:	X	
Proposed Finished Floor Elevation:	Base Flood Elevation:	8.0	
Bedrooms: 0	Lot/Ground Elevation:		
	Baths/half baths:	0/0	

Comments: Any deviation from the building plan PERMIT FEE \$300.00
 or site plan requires prior approval.
 [2023-03-03 09:57:32 631kjack]:

AS-BUILT NEEDED

TOTAL FEES: \$300.00

Applicant Signature:  OUTERBANK INVESTMENTS LLC

Inspector Signature: CREW HAYES  CHF



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

COMMERCIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-16979

03/22/2023

Parcel Number: 015754000
Location: 5732 NC 12 HWY – HATTERAS
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: MP LEASING LLLP
Owner Mail Address: 169 WOODSTREAM CIR MOORESVILLE, NC 28117
Owner Phone and email:

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

BUILDING INFORMATION

Proposed Construction Use: , REMODEL BAR AREA OF RESTAURANT

Occupancy:

Proposed Construction Type:		Cost of Construction:	\$5,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Sprinkler System:		Base Flood Elevation:	0.0
Proposed Finished Floor Elev:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

DocuSigned by:
Applicant Signature: Melina Graham MP LEASING LLLP
4E92C112727488... 3/23/2023

DocuSigned by:
Inspector Signature: CREW HAYES CHF
74DCB28282D14CC... 3/23/2023



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

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

COMMERCIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-17091

03/28/2023

Parcel Number: 013064000
 Location: 26689 NC 12 HWY – SALVO
 Subdivision: HATTERAS COLONY SEC B
 Legal Description: LOT: 23 BLK: SEC: B

Owner Name: ROBERT E HOVEY
 Owner Mail Address: 300 WEST EDEN ST KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: SANDALWOOD CONSTRUCTION COMPANY INC
 Contractor Mail Address: PO BOX 349, KITTY HAWK, NC 27949
 Contractor Phone: Contractor NC License#: 12872

BUILDING INFORMATION

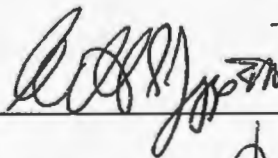
Proposed Construction Use: , REMODEL AND REPAIR FROM FIRE DAMAGE

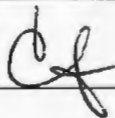
Occupancy:

Proposed Construction Type:		Cost of Construction:	\$200,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Sprinkler System:		Base Flood Elevation:	0.0
Proposed Finished Floor Elev:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan PERMIT FEE \$2,000.00
 or site plan requires prior approval.

TOTAL FEES: \$2,000.00

Applicant Signature:  SANDALWOOD CONSTRUCTION COMPANY INC

Inspector Signature: Cory Tate  CHF



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 BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16710

03/10/2023

Parcel Number: 016831003
 Location: 46007A CURRITUCK CIR – BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LOST LLC
 Owner Mail Address: PO BOX 8312 RICHMOND, VA 23226
 Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
 Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , ROOF REPLACEMENT, PARTIAL SIDING TURTLE & TUNA		
Proposed Construction Type:	Cost of Construction:	\$33,334	
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$160.00

Applicant Signature: Ariana Hughes FRASCA CUSTOM HOMES LLC
C07C1994E34348E... 3/10/2023

Inspector Signature: CREW HAYES CHF
74DCB2B2B2D14CC... 3/10/2023



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 BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16711

03/10/2023

Parcel Number: 016831003
 Location: 46010A CURRITUCK CIR -- BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LOST LLC
 Owner Mail Address: PO BOX 8312 RICHMOND, VA 23226
 Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
 Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , PARTIAL SIDING, INSTALLING NEW LP SMART LAP CONCH & CRANE		
Proposed Construction Type:	Cost of Construction:	\$27,016	
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$160.00

Applicant Signature:	DocuSigned by:	<u>Ariana Hughes</u>	FRASCA CUSTOM HOMES LLC
	C07C1994E34346E...		
Inspector Signature:	DocuSigned by:	<u>CREW HAYES</u>	CHF
	74DC82B2B2D14CC...		



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 BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16712

03/10/2023

Parcel Number: 016831003
Location: 46135A CAPE HATTERAS LN LOT13 – BUXTON
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: LOST LLC
Owner Mail Address: PO BOX 8312 RICHMOND, VA 23226
Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use: REPAIR , PARTIAL SIDING NEW SMART LAP
Proposed Construction Type: Cost of Construction: \$21,600
Finished Square Footage: 0 CAMA Permit#:
Unfinished Square Footage: 0 Septic Permit#:
Stories: 0 Septic Permit Date:
Building Height: Survey/Site Plan:
Total Rooms: 0 Water Tap#:
Footing Type: Water Type:
Exterior Finish: Flood Zone:
Proposed Finished Floor Base Flood Elevation: 8.0
Elevation: Lot/Ground Elevation:
Bedrooms: 0 Baths/half baths: 0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
HOME OWNERS RECOVERY FEE 10.00

TOTAL FEES: \$160.00

DocuSigned by:
Applicant Signature: Ariana Hughes FRASCA CUSTOM HOMES LLC
C07C1994E34348E... 3/10/2023

DocuSigned by:
Inspector Signature: CROW HAYES CHF
74DC82B2B2D14CC... 3/10/2023



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 BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16713

03/10/2023

Parcel Number: 016831003
 Location: 46021A CURRITUCK CIR – BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LOST LLC
 Owner Mail Address: PO BOX 8312 RICHMOND, VA 23226
 Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
 Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , PARTIAL ROOF REPLACEMNT AND REPLACE SMART LAP STRIPER & SWORDFISH		
Proposed Construction Type:		Cost of Construction:	\$55,573
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$160.00

Applicant Signature:	<i>Ariana Hughes</i> C07C1994E34346E... 3/10/2023	FRASCA CUSTOM HOMES LLC
Inspector Signature:	<i>CREW HAYES</i> 74DCB282B2D14CC... 3/10/2023	CHF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16707

03/10/2023

Parcel Number: 016831003
 Location: 46127A CAPE HATTERAS LN LOT12 – BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LOST LLC
 Owner Mail Address: PO BOX 8312 RICHMOND, VA 23226
 Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
 Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use:	REPAIR , ROOF REPLACEMENT PARTIAL SIDING SEAHORSE & SNAPPER		
Proposed Construction Type:		Cost of Construction:	\$66,853
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:		Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

TOTAL FEES: \$160.00

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 Applicant Signature: Ariana Hughes FRASCA CUSTOM HOMES LLC
C07C1994E34346E... 3/10/2023

DocuSigned by:
 Inspector Signature: CREW HAYES CHF
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Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-16708

03/10/2023

Parcel Number: 016831003
Location: 46014A LITTLE KINNAKEET CIR – BUXTON
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: LOST LLC
Owner Mail Address: PO BOX 8312 RICHMOND, VA 23226
Owner Phone and email:

Contractor Name: FRASCA CUSTOM HOMES LLC
Contractor Mail Address: 2401 COLINGTON RD, KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-256-1814 Contractor NC License#: 72094

BUILDING INFORMATION

Proposed Construction Use: REPAIR , REPLACE ROOF PARTIAL SIDING CROAKER & DOLPHIN
Proposed Construction Type: Cost of Construction: \$27,774
Finished Square Footage: 0 CAMA Permit#:
Unfinished Square Footage: 0 Septic Permit#:
Stories: 0 Septic Permit Date:
Building Height: Survey/Site Plan:
Total Rooms: 0 Water Tap#:
Footing Type: Water Type:
Exterior Finish: Flood Zone:
Proposed Finished Floor Base Flood Elevation: 8.0
Elevation: Lot/Ground Elevation:
Bedrooms: 0 Baths/half baths: 0/0

Comments: Any deviation from the building plan PERMIT FEE \$150.00
or site plan requires prior approval. HOME OWNERS RECOVERY FEE 10.00

TOTAL FEES: \$160.00

DocuSigned by:
Applicant Signature: Ariana Hughes FRASCA CUSTOM HOMES LLC
C07C1984E34346E... 3/10/2023

DocuSigned by:
Inspector Signature: CREW HAYES CHF
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