



# Town of Kill Devil Hills

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

PAID

MAR 29 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-062**

**PROJECT NAME:** Akers HVAC  
**SITE ADDRESS:** 222 WILKINSON ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/29/2023

**EXPIRES:** 09/25/2023

**APPLICANT:** Akers, Katherine  
10 Allaine St.  
BRONXVILLE, NY 10708  
917-747-2898

**OWNER:** Akers, Katherine  
10 Allaine St.  
BRONXVILLE, NY 10708  
917-747-2898

**MECHANICAL H-3, CLASS 1:** DELTA T  
PO Box 575  
Kitty Hawk, NC 27949  
252-261-0404

**License:** 35327  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988513132448

**Parcel Number:** 030834000

**Address:** 222 WILKINSON ST E KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 10      **Lot(s):** 30-32

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC system

**MC2023-062**

**PROJECT NAME:** Akers HVAC

**SITE ADDRESS:** 222 WILKINSON ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/29/2023

**EXPIRES:** 09/25/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**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: \_\_\_\_\_

3/29/23



# 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

**MC2023-058**

**PROJECT NAME:**

**SITE ADDRESS:** 503 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED: 03/22/2023**

**EXPIRES: 09/18/2023**

**APPLICANT:** BALL, STEVEN & RACHEL  
822 ELAINE CT  
ALEXANDRIA, VA 22308

**OWNER:** BALL, STEVEN & RACHEL  
822 ELAINE CT  
ALEXANDRIA, VA 22308

**H-3, CLASS I:** AIR-O-SMITH  
330 North Dogwood Trail  
Southern Shores, NC 27949  
252-261-5238

**License:** 30070  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 98842071999906

**Parcel Number:** 003686006

**Address:** 503 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 6

**Lot(s):** 1,2 UNIT 6

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGEOUT



**PAID**

3/27/23

CK # 5503

**MC2023-058**

**PROJECT NAME:**

**SITE ADDRESS:** 503 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/22/2023

**EXPIRES:** 09/18/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7865.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** Kelly **Date:** 03/22/2023



# 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

**MC2023-059**

**PROJECT NAME:** BLAKE HVAC  
**SITE ADDRESS:** 308 LAKE DR E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/24/2023

**EXPIRES:** 09/20/2023

**APPLICANT:** BLAKE, TAMITHA  
10224 BALLS FORD RD  
MANASSAS, VA 20109  
757-547-4971

**OWNER:** BLAKE, TAMITHA  
10224 BALLS FORD RD  
MANASSAS, VA 20109  
757-547-4971

**MECHANICAL:** Comfort First Heating & Cooling  
148 IRIE LANE  
Powels Point, NC 27966

**License:** 33486  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 989313142721

**Parcel Number:** 008306000

**Address:** 308 LAKE DR E KILL DEVIL HILLS

**Zoning:**

**Addition:** LAKE DRIVE DEVELOPMENT

**Block:** 0 **Lot(s):** 5

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

**PAID**

**MAR 27 2023**

TOWN OF  
KILL DEVIL HILLS

**MC2023-059**

**PROJECT NAME:** BLAKE HVAC  
**SITE ADDRESS:** 308 LAKE DR E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/24/2023

**EXPIRES:** 09/20/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	11161.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** \_\_\_\_\_

**Contractor or Authorized Agent:** \_\_\_\_\_

**Date:** \_\_\_\_\_

3/27/23



# Town of Kill Devil Hills

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

PAID

MAR 21 2023

## Planning and Inspection Department

TOWN OF

**MC2023-056**

**PROJECT NAME:**

**SITE ADDRESS:** 1529 Sir Walter Rd. Kill Devil Hills

**MECHANICAL**

**ISSUED: 03/21/2023**

**EXPIRES: 09/17/2023**

**APPLICANT:** Cheryl Blake  
1529 Sir Walter Rd.  
102 Town Hall Drive  
Kill Devil Hills, NC 27948

**OWNER:** CHARANNE LLC  
PO BOX 567  
FOREST, VA24551

**MECHANICAL:** ALL SEASONS HEATING & COOLING  
P.O. Box 244  
Point Harbor, NC 27964  
491-9232

**License:** 19091  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988411553856

**Parcel Number:** 003182000

**Address:** 1529 Sir Walter Rd. Kill Devil Hills

**Zoning:**

**Addition:** Delray Beach

**Block:** D **Lot(s):** 26

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

### DETAILS

**Permit**

Name	Value
CONSTRUCTION COST	10170.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling



PAID  
3/21/23  
paypal

**MC2023-056**

**PROJECT NAME:**

**SITE ADDRESS:** 1529 Sir Walter Rd. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/21/2023

**EXPIRES:** 09/17/2023

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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Issued By: \_\_\_\_\_

*Marty Shaw*

Contractor or Authorized Agent: \_\_\_\_\_

*[Signature]*

Date: 03 / 21 / 2023





# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-057</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/21/2023</b>
<b>SITE ADDRESS: 300 EIGHTH ST E KILL DEVIL HILLS</b>	<b>EXPIRES: 09/17/2023</b>

<b>APPLICANT:</b> PARRISH, JOSEPH 903 DAWES ST Chapel Hill, NC 27516	<b>OWNER:</b> PARRISH, JOSEPH 903 DAWES ST Chapel Hill, NC 27516
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<b>MECHANICAL H2 AND H3:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 35329 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 989313138511	<b>Parcel Number:</b> 008514006
<b>Address:</b> 300 EIGHTH ST E KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> NAGS HEAD SHORES AMENDED SEC 4	<b>Block:</b> 4 <b>Lot(s):</b> 6
<b>Legal Description:</b>	

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**PAID**  
3/21/23  
on-line

**MC2023-057**

**PROJECT NAME:**

**SITE ADDRESS:** 300 EIGHTH ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/21/2023

**EXPIRES:** 09/17/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8408.45
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** BREAN LANCASTER **Date:** 03 / 21 / 2023



# Town of Kill Devil Hills

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

**PAID**

**Planning and Inspection Department**

**MAR 21 2023**

**MC2023-053**

**PROJECT NAME:**

**SITE ADDRESS:** 3111 RAYMOND AVE KILL DEVIL HILLS

TOWN OF  
**MECHANICAL**  
**ISSUED: 03/17/2023**  
**EXPIRES: 09/13/2023**

**APPLICANT:** LEWIS, GREGORY W  
465 CURRITUCK DR.  
CHESAPEAKE, VA 23322

**OWNER:** LEWIS, GREGORY W  
465 CURRITUCK DR.  
CHESAPEAKE, VA 23322

**MECHANICAL H-3 CLASS 1:** NORTH BEACH SERVICES  
P.O. Box 181  
Kitty Hawk, NC 27949  
252-491-2878

**License:** 22053  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988513039441

**Parcel Number:** 009119000

**Address:** 3111 RAYMOND AVE KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 25

**Legal Description:**

<b>FEES:</b>	<b><u>Paid</u></b>	<b><u>Due</u></b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HEAT PUMP CHANGEOUT

**MC2023-053**

**PROJECT NAME:**

**SITE ADDRESS:** 3111 RAYMOND AVE KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/17/2023

**EXPIRES:** 09/13/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4761.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

3/21/2023



# Town of Kill Devil Hills

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

PAID

MAR 21 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

<b>MC2023-054</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/20/2023</b>
<b>SITE ADDRESS: 208 SUFFOLK ST KILL DEVIL HILLS</b>	<b>EXPIRES: 09/16/2023</b>

<b>APPLICANT:</b> Gibson, James and Marjorie 1828 Sunsprite Loop CHESAPEAKE, VA 23323 540-514-0949	<b>OWNER:</b> Gibson, James and Marjorie 1828 Sunsprite Loop CHESAPEAKE, VA 23323 540-514-0949
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<b>MECHANICAL H2 AND H3:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 35329 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988517105179	<b>Parcel Number:</b> 001244000
<b>Address:</b> 208 SUFFOLK ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 791
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**PAID**  
3/21/23  
pan / pnf

**MC2023-054**

**PROJECT NAME:**

**SITE ADDRESS:** 208 SUFFOLK ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/20/2023

**EXPIRES:** 09/16/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7592.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** BREAN LANCASTER **Date:** 03 / 20 / 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

**MC2022-258**

**PROJECT NAME:**

**SITE ADDRESS:** 203 HELGA ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 08/08/2022

**EXPIRES:** 02/03/2024

**APPLICANT:** Madej, Jeanne  
PO BOX 15  
LAKEWOOD, PA 18439

**OWNER:** Madej, Jeanne  
PO BOX 15  
LAKEWOOD, PA 18439

**MECHANICAL, H-2, H-3:**

ATLANTIC HEATING AND COOLING  
P.O. Box 132  
Kill Devil Hills, NC 27948  
441-7642

**License:** 34340  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988513044174

**Parcel Number:** 000032000

**Address:** 203 HELGA ST E KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 9 **Lot(s):** 9

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

PAID

MAR 17 2023

TOWN OF  
KILL DEVIL HILLS

2  
MC2022-258

PROJECT NAME:

SITE ADDRESS: 203 HELGA ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/08/2022

EXPIRES: 02/03/2024

### DETAILS

#### Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6875.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 3-17-23





# 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

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-052**

**PROJECT NAME:**

**SITE ADDRESS:** 432 SOTHEL ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/14/2023

**EXPIRES:** 09/10/2023

**APPLICANT:** RED DOG MANAGEMENT GROUP LLC  
p o box 702  
nellysford, va 22958

**OWNER:** RED DOG MANAGEMENT, LLC  
PO BOX 1007  
kitty hawk, nc 27949

**MECHANICAL H-3, CLASS 1:**

DELTA T  
PO Box 575  
Kitty Hawk, NC 27949  
252-261-0404

**License:** 35327  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 987520913820

**Parcel Number:** 000669000

**Address:** 432 SOTHEL ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 57 **Lot(s):** 36-37

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC changeout

**MC2023-052**

**PROJECT NAME:**

**SITE ADDRESS:** 432 SOTHEL ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/14/2023

**EXPIRES:** 09/10/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: RCJ

Date: 3/14/23



# 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

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

**MC2023-047**

**PROJECT NAME:** Zawodny HAVC  
**SITE ADDRESS:** 3317 BRIGGS ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/09/2023

**EXPIRES:** 09/05/2023

**APPLICANT:** ZAWODNY, JOHN A  
1508 BAYBERRT LANE  
SUFFOLK, VA 23433

**OWNER:** ZAWODNY, JOHN A  
1508 BAYBERRT LANE  
SUFFOLK, VA 23433

**H-3, CLASS I:** AIR-O-SMITH  
330 North Dogwood Trail  
Southern Shores, NC 27949  
252-261-5238

**License:** 30070  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 987512959107

**Parcel Number:** 000014000

**Address:** 3317 BRIGGS ST KILL DEVIL HILLS

**Addition:** ORVILLE BEACH AMENDED BLK 3

**Zoning:**  
**Block:** 3 **Lot(s):** 17

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 3 Ton HVAC system

PAID  
3/10/23  
[Signature]

**MC2023-047**

**PROJECT NAME:** Zawodny HAVC  
**SITE ADDRESS:** 3317 BRIGGS ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/09/2023

**EXPIRES:** 09/05/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7317.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

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**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:** Steve Sub **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

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

<b>MC2023-048</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Lowe HVAC	<b>ISSUED:</b> 03/09/2023
<b>SITE ADDRESS:</b> 1705 SEA SWEPT RD KILL DEVIL HILLS	<b>EXPIRES:</b> 09/05/2023

<b>APPLICANT:</b> Lowe, Theresa 102 Pocahontas Street FRANKLIN, VA 23851	<b>OWNER:</b> Lowe, Theresa 102 Pocahontas Street FRANKLIN, VA 23851
--	--

<b>H-3, CLASS I:</b>	AIR-O-SMITH 330 North Dogwood Trail Southern Shores, NC 27949 252-261-5238	<b>License:</b> 30070 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988409155789	<b>Parcel Number:</b> 002572000
<b>Address:</b> 1705 SEA SWEPT RD KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> CROATAN SHORES SUBDIV	<b>Block:</b> 14 <b>Lot(s):</b> 26
<b>Legal Description:</b>	

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC system

PAID  
MAR 31 2023  
Refal

**MC2023-048**

**PROJECT NAME:** Lowe HVAC

**SITE ADDRESS:** 1705 SEA SWEPT RD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/09/2023

**EXPIRES:** 09/05/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6809.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** Steve Smith **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

**MC2023-051**

**PROJECT NAME:** Dickerson HVAC  
**SITE ADDRESS:** 701 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/13/2023

**EXPIRES:** 09/09/2023

**APPLICANT:** Dickerson, Daniel  
2301 CR 703  
BLUE MOUNTAIN, MS 38610  
410-336-7676

**OWNER:** Dickerson, Daniel  
2301 CR 703  
BLUE MOUNTAIN, MS 38610  
410-336-7676

**H3, CLASS 1:** One Hour Heating and Air Conditioning  
701 Fresh Pond West  
Kill Devil Hills, NC 27948  
441-1740

**License:** 12643  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988420727465

**Parcel Number:** 003693001

**Address:** 701 VA DARE TRL N KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 8 **Lot(s):** 1

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 4 Geothermal heat pump systems

**MC2023-051**

**PROJECT NAME:** Dickerson HVAC  
**SITE ADDRESS:** 701 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/13/2023

**EXPIRES:** 09/09/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	68591.14
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	13
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

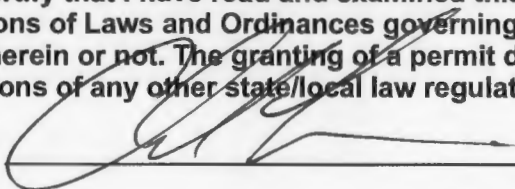
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 3-13-23





**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**

**MC2023-049**

**PROJECT NAME:** Ramada HVAC  
**SITE ADDRESS:** 1701 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/09/2023

**EXPIRES:** 09/05/2023

**APPLICANT:** O W L NEAL PARTNERSHIP  
PO BOX 2716  
KILL DEVIL HILLS, NC 27948

**OWNER:** O W L NEAL PARTNERSHIP  
PO BOX 2716  
KILL DEVIL HILLS, NC 27948

**MECHANICAL, H-3, I:**

MASTER HEATING AND COOLING  
P.O. Box 707  
Kitty Hawk, NC 27949  
255-0095

**License:** 18066  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 989309154444

**Parcel Number:** 008235000

**Address:** 1701 VA DARE TRL S KILL DEVIL HILLS

**Addition:** OCEAN ACRES INC

**Zoning:**  
**Block:** 0 **Lot(s):** C & D

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 5 Ton office HVAC and 1.5 Ton mechanical room HVAC



**PAID**  
OK - Paypsl  
3/10/23

**MC2023-049**

**PROJECT NAME:** Ramada HVAC

**SITE ADDRESS:** 1701 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/09/2023

**EXPIRES:** 09/05/2023

**DETAILS**

**Permit**

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	17800.00
CONSTRUCTION TYPE	II
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** Anthony R Pritchett **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

## Planning and Inspection Department

**MC2023-043**

**PROJECT NAME:**

**SITE ADDRESS:** 1103 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/06/2023

**EXPIRES:** 09/02/2023

**APPLICANT:** Gaston Investments C/O Pat Lawrence  
2612 Coulton Pl.  
Wilmington, NC 28408  
910-264-1832

**OWNER:** Gaston Investments C/O Pat Lawrence  
2612 Coulton Pl.  
Wilmington, NC 28408  
910-264-1832

**ELECTRICAL, PLUMBING AND HEATING:** NORTH BEACH SERVICES  
P.O. Box 181  
Kitty Hawk, NC 27949  
252-491-2878

**License:** 24744-SP-PH  
**Expires:** 04/23/2023

**MECHANICAL H-3 CLASS 1:** NORTH BEACH SERVICES  
P.O. Box 181  
Kitty Hawk, NC 27949  
252-491-2878

**License:** 22053  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988415730827

**Parcel Number:** 003709000

**Address:** 1103 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

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

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 3 Ton HVAC system

PAID

MAR - 9 2023

TOWN OF  
KILL DEVIL HILLS



PAID

Check # 32762  
3/9/23 CR

**MC2023-043**

**PROJECT NAME:**

**SITE ADDRESS:** 1103 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/06/2023

**EXPIRES:** 09/02/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** Ashley Sudduth **Date:** 03 / 06 / 2023



**Town of Kill Devil Hills**

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

**PAID**

MAR - 9 2023

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**MC2023-046**

**PROJECT NAME:**

**SITE ADDRESS:** 110 OREGON AVE E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/08/2023

**EXPIRES:** 09/04/2023

**APPLICANT:** WILLIAMS, KENNETH  
13717 FAIRRIDGE DRIVE  
SILVER SPRING, MD 20904

**OWNER:** WILLIAMS, KENNETH  
13717 FAIRRIDGE DRIVE  
SILVER SPRING, MD 20904

**MECHANICAL H2 AND H3:** R A HOY  
PO Box 265  
Kitty Hawk, NC 27949  
252-261-2008

**License:** 35329  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988420709125

**Parcel Number:** 003836000

**Address:** 110 OREGON AVE E KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 35 **Lot(s):** 7&8

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC change out

**PAID**  
3/9/23  
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**MC2023-046**

**PROJECT NAME:**

**SITE ADDRESS:** 110 OREGON AVE E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/08/2023

**EXPIRES:** 09/04/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10850.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER 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 - 7 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-045**

**PROJECT NAME:** GARDENIA HOUSE HVAC  
**SITE ADDRESS:** 803 Virginia Dare Tr. S. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/06/2023

**EXPIRES:** 09/02/2023

**APPLICANT:** The Gardenia House LLC, Charles Cabaniss  
602 Marlbank Drive  
Yorktown, VA 23692  
757-870-5500

**OWNER:** The Gardenia House LLC, Charles Cabaniss  
602 Marlbank Drive  
Yorktown, VA23692  
757-870-5500

**MECHANICAL H-3:**

DUSTY RHOADS HEATING AND AIR CONDITIONING License: 21691  
INC Expires: 12/31/2023  
P.O. Box 444  
Kitty Hawk, NC 27949  
252-202-6852

**PARCEL:**

**PIN:** 988308993420

**Parcel Number:** 008145002

**Address:** 803 Virginia Dare Tr. S. Kill Devil Hills

**Zoning:** OIR

**Addition:** SUBDIVISION - NONE

**Block:** Lot(s): 2-4

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPLACE 4 HEAT PUMPS

**MC2023-045**

**PROJECT NAME:** GARDENIA HOUSE HVAC  
**SITE ADDRESS:** 803 Virginia Dare Tr. S. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/06/2023

**EXPIRES:** 09/02/2023

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	18578.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

3-7-23





# 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

**MC2023-042**

**PROJECT NAME:**

**SITE ADDRESS:** 1803 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/06/2023

**EXPIRES:** 09/02/2023

**APPLICANT:** THOMAS SHELNUTT  
7584 STONEY LICK RD  
Mt. Crawford, VA 22841

**OWNER:** THOMAS SHELNUTT  
7584 STONEY LICK RD  
Mt. Crawford, VA 22841

**H-1, H-2, H-3, CLASS I:** POP'S REPAIR  
113 E. Sothel St. Unit #5  
Kill Devil Hills, NC 27948  
252-256-0093

**License:** 34144  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988406485482C1

**Parcel Number:** 027988000

**Address:** 1803 VA DARE TRL N KILL DEVIL HILLS

**Addition:** CASA DEL SOL CONDOS

**Zoning:**

**Block:** D

**Lot(s):** UT 1 LTS 12-13 PT 1

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC change out



PAID  
3/7/23

Chk # 4402

**MC2023-042****PROJECT NAME:****SITE ADDRESS:** 1803 VA DARE TRL N KILL DEVIL HILLS**MECHANICAL****ISSUED:** 03/06/2023**EXPIRES:** 09/02/2023**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: Julia Scheer Date: 03 / 06 / 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

<b>MC2022-239</b>	TOWN OF KILL DEVIL HILLS
<b>PROJECT NAME:</b>	<b>MECHANICAL</b>
<b>SITE ADDRESS:</b> 1407 Elizabeth St. Kill Devil Hills	<b>ISSUED:</b> 07/25/2022
	<b>EXPIRES:</b> 01/21/2023

**APPLICANT:** CATHERINE BARCH AND ADAM BALDWIN  
1720 Sioux Street  
Kill Devil Hills, NC 27948  
449-2222

**OWNER:** CATHERINE BARCH AND ADAM BALDWIN  
1720 Sioux Street  
Kill Devil Hills, NC 27948  
449-2222

**MECHANICAL H-3:** DUSTY RHOADS HEATING AND AIR CONDITIONING License: 21691  
INC Expires: 12/31/2022  
P.O. Box 444  
Kitty Hawk, NC 27949  
252-202-6852

**PARCEL:**

**PIN:** 988316844817

**Parcel Number:** 008232005

**Address:** 1407 Elizabeth St. Kill Devil Hills

**Zoning:**

**Addition:** KILL DEVIL BEACH EXTENDED

**Block:** BB **Lot(s):** 12

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC replacement

**MC2022-239**

**PROJECT NAME:**

**SITE ADDRESS:** 1407 Elizabeth St. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 07/25/2022

**EXPIRES:** 01/21/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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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

PAID

MAR - 2 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

<b>MC2023-041</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/02/2023</b>
<b>SITE ADDRESS:</b> 801 Virginia Dare Tr. S. Kill Devil Hills	<b>EXPIRES: 08/29/2023</b>

<b>APPLICANT:</b> 2NC KDH LLC 1350St. Mortiz Dr. Wilmington, DE 19807	<b>OWNER:</b> 2NC KDH LLC 1350St. Mortiz Dr. Wilmington, DE 19807
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<b>FUEL PIPING:</b>	Piedmont Natural Gas 105 B Impact Blvd. ELIZABETH CITY, NC 27909 252-331-9056	<b>License:</b> 32562 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988308993415	<b>Parcel Number:</b> 008145001
<b>Address:</b> 801 Virginia Dare Tr. S. Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b> Baum Beach	<b>Block:</b> Lot(s): 2
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Run gas piping from meter to tankless water heater location. Water heater to be installed by different contractor.

**MC2023-041**

**PROJECT NAME:**

**SITE ADDRESS:** 801 Virginia Dare Tr. S. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/02/2023

**EXPIRES:** 08/29/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2368.36
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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Final

**CONDITIONS**

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**Issued By:** 

**Contractor or Authorized Agent:** Brian Armstrong **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

PAID

MAR - 2 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-040**

**PROJECT NAME:**  
**SITE ADDRESS:** 111 AVIATION AVE E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/02/2023

**EXPIRES:** 08/29/2023

**APPLICANT:** ROWALT LLC  
105 SKYLINE DR  
MORELAND HILLS, OH 44022

**OWNER:** ROWALT LLC  
105 SKYLINE DR  
MORELAND HILLS, OH 44022

**MECHANICAL H-3:** DUSTY RHOADS HEATING AND AIR CONDITIONING License: 21691  
INC Expires: 12/31/2023  
P.O. Box 444  
Kitty Hawk, NC 27949  
252-202-6852

**PARCEL:**

**PIN:** 988420705906

**Parcel Number:** 003896000

**Address:** 111 AVIATION AVE E KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 38 **Lot(s):** 18

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC change out

**MC2023-040**

**PROJECT NAME:**

**SITE ADDRESS:** 111 AVIATION AVE E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/02/2023

**EXPIRES:** 08/29/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10350.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**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: 3-2-23





# Town of Kill Devil Hills

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

PAID

MAR - 1 2023

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

**MC2023-036**

**PROJECT NAME:** Rollins HAVC  
**SITE ADDRESS:** 3102 LEE AVE KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 02/23/2023

**EXPIRES:** 08/22/2023

**APPLICANT:** ROLLINS, CLAUDE B  
419 Banner Club Ct  
KNIGHTDALE, NC 27545

**OWNER:** ROLLINS, CLAUDE B  
419 Banner Club Ct  
KNIGHTDALE, NC 27545

**MECHANICAL, H-3, I:**

AIR HANDLERS OBX  
8788 Caratoke Hwy  
Harbinger, NC 27941  
252-216-8945

**License:** 23577  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 987516922583

**Parcel Number:** 015454000

**Address:** 3102 LEE AVE KILL DEVIL HILLS

**Addition:** MOOR SHORES

**Zoning:**

**Block:** 0 **Lot(s):** 48

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 2Ton HVAC system

**PAID**  
*Per 2/28/23*  
*Les Pet*

**MC2023-036**

**PROJECT NAME:** Rollins HAVC

**SITE ADDRESS:** 3102 LEE AVE KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 02/23/2023

**EXPIRES:** 08/22/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7158.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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:** Linda Burgess **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 - 1 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-038**

**PROJECT NAME:** Desmond HVAC  
**SITE ADDRESS:** 1102 Cambridge Road 302-A Kill Devil Hills

**MECHANICAL**

**ISSUED: 02/27/2023**

**EXPIRES: 08/26/2023**

**APPLICANT:** Desmond, James  
2672 Route 119 HWY N  
HOME, PA 15747  
724-388-4638

**OWNER:** Desmond, James  
2672 Route 119 HWY N  
HOME, PA 15747  
724-388-4638

**ELECTRICAL, PLUMBING AND HEATING:** NORTH BEACH SERVICES  
P.O. Box 181  
Kitty Hawk, NC 27949  
252-491-2878

**License:** 24744-SP-PH  
**Expires:** 04/23/2023

**MECHANICAL H-3 CLASS 1:** NORTH BEACH SERVICES  
P.O. Box 181  
Kitty Hawk, NC 27949  
252-491-2878

**License:** 22053  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 98830648123809

**Parcel  
Number:**

**Address:** 1102 Cambridge Road 302-A Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Residential Condominium

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** C/O 3 Ton HVAC system

**MC2023-038**

**PROJECT NAME:** Desmond HVAC

**SITE ADDRESS:** 1102 Cambridge Road 302-A Kill Devil Hills

**MECHANICAL**

**ISSUED:** 02/27/2023

**EXPIRES:** 08/26/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8235.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

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: \_\_\_\_\_

3/1/2023



# Town of Kill Devil Hills

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

PAID

MAR - 1 2023

## Planning and Inspection Department

TOWN OF

KILL DEVIL HILLS

**MC2023-039**

PROJECT NAME:

SITE ADDRESS: 304 CHOWAN ST W KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 03/01/2023

EXPIRES: 08/28/2023

**APPLICANT:** Knoepfel, Samuel  
304 W Chowan Street  
Kill Devil Hills, NC 27948

**OWNER:** Knoepfel, Samuel  
304 W Chowan Street  
Kill Devil Hills, NC 27948

**H3, CLASS 1:**

One Hour Heating and Air Conditioning  
701 Fresh Pond West  
Kill Devil Hills, NC 27948  
441-1740

**License:** 12643  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 987520929445

**Parcel Number:** 000553000

**Address:** 304 CHOWAN ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 41 **Lot(s):** 23-25

**Legal Description:**

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** HVAC change out

### DETAILS

#### Permit

Name	Value
CONSTRUCTION COST	7606.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**MC2023-039**

**PROJECT NAME:**

**SITE ADDRESS:** 304 CHOWAN ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/01/2023

**EXPIRES:** 08/28/2023

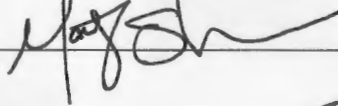
**REQUIRED INSPECTIONS**

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: 3-1-23



# 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

**OP2023-021**

**PROJECT NAME:** Celaj New House  
**SITE ADDRESS:** 428 AYCOCK ST W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/22/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-119

**APPLICANT:** Celaj, Eder  
328 Bickett St.  
KILL DEVIL HILLS, NC 27948  
252-202-2209

**OWNER:** Celaj, Eder  
328 Bickett St.  
KILL DEVIL HILLS, NC 27948  
252-202-2209

**CONTRACTOR:** Hughes, Ryland James  
3945 Pineway Drive  
kitty hawk, nc 27949  
252-202-4111

**BUILDING LIMITED:** Hughes, Ryland James  
3945 Pineway Drive  
kitty hawk, nc 27949  
252-202-4111

**License:** 76503  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 987520909993

**Parcel Number:** 000656000

**Address:** 428 AYCOCK ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 53 **Lot(s):** 21-35

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** New 3 Bedroom Single Family Dwelling

MAR 24 2023

KILL DEVIL HILLS

**OP2023-021**

**PROJECT NAME:** Celaj New House  
**SITE ADDRESS:** 428 AYCOCK ST W KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 03/22/2023

**EXPIRES:**

**DETAILS**

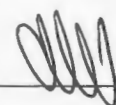
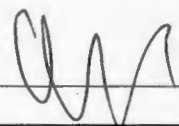
**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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: 3/24/2023





# 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

**OP2023-025**

**PROJECT NAME:** Palm and Pine Ventures  
**SITE ADDRESS:** 205 HAYMAN BLVD E KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/29/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-051

**APPLICANT:** Michael Hamilton  
1513 Glider Court  
Kill Devil Hills, NC 27948  
858-866-4970

**OWNER:** Palm and Pine Ventures  
1513 Glider Ct  
Kill Devil Hills, NC 27948

**CONTRACTOR:** SAME AS APPLICANT  
0000000  
00000000, nc 00000

**License:** 123456  
**Expires:** 04/30/2023

**PARCEL:**

**PIN:** 988513125563

**Parcel Number:** 000785000

**Address:** 205 HAYMAN BLVD E KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES AMD BLK 6

**Zoning:**

**Block:** 6 **Lot(s):** 9

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

PAID

MAR 31 2023

TOWN OF  
KILL DEVIL HILLS

**OP2023-025**

**PROJECT NAME:** Palm and Pine Ventures

**SITE ADDRESS:** 205 HAYMAN BLVD E KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/29/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	C
FLOOD ZONE	X
BASE FLOOD ELEVATION	8.0
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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: \_\_\_\_\_

3/31/23



# 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

### OP2023-026

**PROJECT NAME:** East Coast Construction New 4 Bedroom SFD  
**SITE ADDRESS:** 912 CONSOLE LN KILL DEVIL HILLS

### OCCUPANCY

**ISSUED:** 03/30/2023

**EXPIRES:**

PARENT PERMIT #: BJ2022-258

**APPLICANT:** EAST COAST CONSTRUCTION GROUP  
PO Box 329  
KILL DEVIL HILLS, NC 27948  
252-202-1600

**OWNER:** LANE INVESTMENT PROPERTIES NC LLC  
P.O. Box 329  
KDH, NC 27948

**GENERAL:** EAST COAST CONSTRUCTION GROUP  
PO Box 329  
KILL DEVIL HILLS, NC 27948  
252-202-1600

**License:** 34495  
**Expires:** 01/01/2024

### PARCEL:

**PIN:** 988409078439

**Parcel Number:** 002299000

**Address:** 912 CONSOLE LN KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES SEC 2

**Zoning:**

**Block:** 0 **Lot(s):** 82

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** new 4 bedroom single family dwelling

**OP2023-026**

**PROJECT NAME:** East Coast Construction New 4 Bedroom SFD  
**SITE ADDRESS:** 912 CONSOLE LN KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/30/2023

**EXPIRES:**

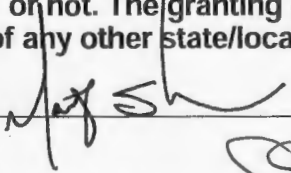
**DETAILS**

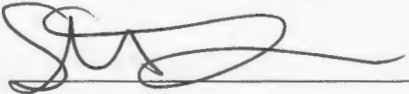
**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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 23 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

<b>OP2023-022</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Gomez New House	<b>ISSUED:</b> 03/23/2023
<b>SITE ADDRESS:</b> 307 GUNAS DR KILL DEVIL HILLS	<b>EXPIRES:</b>

PARENT PERMIT #: BJ2022-011

**APPLICANT:** SUITER, O S JR  
BOX 887  
AHOSKIE, NC 27910

**OWNER:** GOMEZ, ELMER  
5122 Mashie Ct  
nags head, nc 27959

**GENERAL BUILDING:** Dan Osman  
P. O. Box 7403  
Kill Devil Hills, NC 27948  
252-202-4599

**License:** 76259  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988316935655

**Parcel Number:** 008436000

**Address:** 307 GUNAS DR KILL DEVIL HILLS

**Addition:** OCEAN ACRES TRACT 3 SEC 1

**Zoning:**  
**Block:** D **Lot(s):** 15

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** New 4 Bedroom single family dwelling including pool.

**OP2023-022**

**PROJECT NAME:** Gomez New House  
**SITE ADDRESS:** 307 GUNAS DR KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 03/23/2023

**EXPIRES:**

**DETAILS**

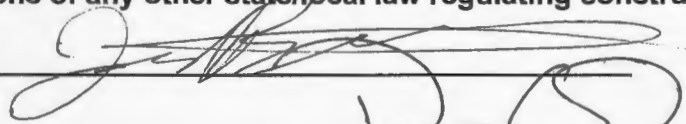
**Permit**

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

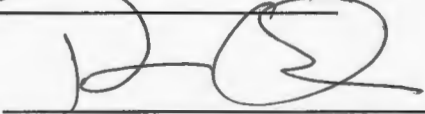
**CONDITIONS**

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: \_\_\_\_\_

3-23-23



# Town of Kill Devil Hills

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

**PAID**

**MAR 24 2023**

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**OP2023-023**

**PROJECT NAME:** Leonard Zyka  
**SITE ADDRESS:** 1102 DURHAM ST W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/24/2023

**EXPIRES:**

PAID  
WITH  
CASH

**PARENT PERMIT #:** BJ2022-151

**APPLICANT:** Zyka, Leonard  
700 Skipjack Lane  
Kill Devil Hills, NC 27948  
252-207-8247

**OWNER:** Zyka, Leonard  
700 Skipjack Lane  
Kill Devil Hills, NC 27948  
252-207-8247

**CONTRACTOR:** SAME AS OWNER  
UNKNOWN  
UNKNOWN, XX 00000

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

**PARCEL:**

**PIN:** 988405083131

**Parcel Number:** 001401000

**Address:** 1102 DURHAM ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH ANNEX 2 & 3

**Block:** 0 **Lot(s):** 699

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**OP2023-023**

**PROJECT NAME:** Leonard Zyka  
**SITE ADDRESS:** 1102 DURHAM ST W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/24/2023

**EXPIRES:**

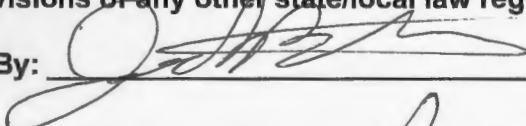
**DETAILS**

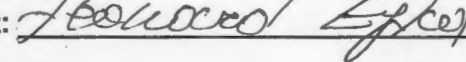
**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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: 3-24-2023





# Town of Kill Devil Hills

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

PAID

MAR 24 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### OP2023-024

**PROJECT NAME:** Remodel Existing KMART into Target Store  
**SITE ADDRESS:** 1901 CROATAN HWY N KILL DEVIL HILLS

### OCCUPANCY

**ISSUED:** 03/24/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-185

**APPLICANT:** Target Corporation  
1000 Nicollet Mall  
MINNEAPOLIS, MN 55403

**OWNER:** Target Corporation  
1000 Nicollet Mall  
MINNEAPOLIS, MN 55403

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

**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
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** remodel existing site and existing building into one Target Store 119,823 total square feet

**OP2023-024**

**PROJECT NAME:** Remodel Existing KMART into Target Store  
**SITE ADDRESS:** 1901 CROATAN HWY N KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/24/2023

**EXPIRES:**

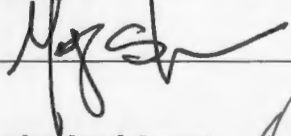
**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
ZONING DISTRICT	C
FLOOD ZONE	X
OCCUPANCY TYPE	Business

**CONDITIONS**

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: 3/24/24



# Town of Kill Devil Hills

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

PAID

MAR 22 2023

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

**OP2023-020**

**PROJECT NAME:** DeMasi Addition  
**SITE ADDRESS:** 1813 UPPER DUNE RD KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/21/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-229

**APPLICANT:** DeMasi, Joseph  
1813 Upper Dune Road  
Kill Devil Hills, NC 27948  
757-717-3886

**OWNER:** DeMasi, Joseph  
1813 Upper Dune Road  
Kill Devil Hills, NC 27948  
757-717-3886

**CONTRACTOR:** JENNINGS, DONALD  
P. O. Box 1102  
nags head, nc 27959  
252-207-4936

**RESIDENTIAL - INTERMEDIATE:** JENNINGS, DONALD  
P. O. Box 1102  
nags head, nc 27959  
252-207-4936

**License:** 32637  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988409162978

**Parcel Number:** 002385000

**Address:** 1813 UPPER DUNE RD KILL DEVIL HILLS

**Zoning:**

**Addition:** SEA HOLLY RIDGE

**Block:** D **Lot(s):** 5

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** addition of living space under existing house, 3 total bedrooms, additional driveway

**OP2023-020**

**PROJECT NAME:** DeMasi Addition

**SITE ADDRESS:** 1813 UPPER DUNE RD KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/21/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	0
PURPOSE	Residential Addition
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

**OP2023-019**

**PROJECT NAME:** C&T Contracting  
**SITE ADDRESS:** 802 DEAN ST KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 03/10/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-117

**APPLICANT:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**OWNER:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**BUILDING LIMITED:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**License:** 45367  
**Expires:** 12/31/2023

**BUILDING LIMITED:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**License:** 45367  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988316840550

**Parcel Number:** 004789000

**Address:** 802 DEAN ST KILL DEVIL HILLS

**Addition:** KILL DEVIL BEACH EXTENDED

**Zoning:**

**Block:** 4 **Lot(s):** 10-11

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

**PAID**

**MAR 13 2023**

TOWN OF  
KILL DEVIL HILLS

**OP2023-019**

**PROJECT NAME:** C&T Contracting  
**SITE ADDRESS:** 802 DEAN ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/10/2023

**EXPIRES:**

**DETAILS**

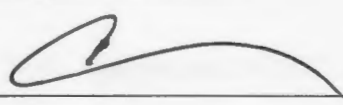
**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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: 3-13-23



# 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

**OP2023-018**

**PROJECT NAME:** Harris Addition  
**SITE ADDRESS:** 103 MEADOWLARK ST E KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/08/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-265

**APPLICANT:** NATE HARRIS  
103 E MEADOWLARK ST  
Kill Devil Hills, NC 27948  
435-232-5508

**OWNER:** NATE HARRIS  
103 E MEADOWLARK ST  
Kill Devil Hills, NC 27948  
435-232-5508

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988308799740

**Parcel Number:** 003812000

**Address:** 103 MEADOWLARK ST E KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 33 **Lot(s):** 14

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

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

**PAID**

**MAR - 8 2023**

**TOWN OF  
KILL DEVIL HILLS**

**OP2023-018**

**PROJECT NAME:** Harris Addition

**SITE ADDRESS:** 103 MEADOWLARK ST E KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/08/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	0
PURPOSE	Residential Addition
ZONING DISTRICT	C
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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: \_\_\_\_\_





# Town of Kill Devil Hills

PAID

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

MAR - 6 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**OP2023-017**

**PROJECT NAME:** Water Oak New 3 Bedroom Single Family Dwelling  
**SITE ADDRESS:** 709 Zen Lane Kill Devil Hills

**OCCUPANCY**

**ISSUED: 03/03/2023**

**EXPIRES:**

PARENT PERMIT #: BJ2022-195

**APPLICANT:** SAGA CONSTRUCTION INC.  
1314 S Croatan Hwy, Suite 301  
Kill Devil Hills, NC 27948  
252-441-9003

**OWNER:** Water Oak Residential, LLC  
PO Box 90  
Kill Devil Hills, NC 27948  
252-441-9003

**GENERAL - UNLIMITED:** SAGA CONSTRUCTION  
1314 S Croatan Hwy, Suite 301  
PO Box 90  
Kill Devil Hills, NC 27948  
252-441-9003

**License:** 62306  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988417220374

**Parcel  
Number:**

**Address:** 709 Zen Lane Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 61, Water Oak Residential

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** new 3 bedroom single family dwelling

**OP2023-017**

**PROJECT NAME:** Water Oak New 3 Bedroom Single Family Dwelling  
**SITE ADDRESS:** 709 Zen Lane Kill Devil Hills

**OCCUPANCY**

**ISSUED:** 03/03/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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: \_\_\_\_\_

*Gracelyn Mueck*

*3.6.23*



# 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

<b>OP2023-016</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Clark New House	<b>ISSUED:</b> 03/02/2023
<b>SITE ADDRESS:</b> 534 Anchor Ct KILL DEVIL HILLS	<b>EXPIRES:</b>

PARENT PERMIT #: BJ2022-081

<b>APPLICANT:</b> 2 GUYS SERVICES 605 W. Archdale St. Kill Devil Hills, NC 27948 252-489-8753	<b>OWNER:</b> CLARK, KYLE 534 Anchor Ct Kill Devil Hills, NC 27948
--	--

<b>GENERAL BUILDING - LIMITED:</b>	2 GUYS SERVICES 605 W. Archdale St. Kill Devil Hills, NC 27948 252-489-8753	<b>License:</b> 75144 <b>Expires:</b> 01/01/2024
<b>GENERAL BUILDING - LIMITED:</b>	2 GUYS SERVICES 605 W. Archdale St. Kill Devil Hills, NC 27948 252-489-8753	<b>License:</b> 75144 <b>Expires:</b> 01/01/2024

<b>PARCEL:</b>			
<b>PIN:</b>	988413232383	<b>Parcel Number:</b>	003629000
<b>Address:</b>	534 Anchor Ct KILL DEVIL HILLS		
<b>Addition:</b>	LANDING SECTION 3, THE	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	0 <b>Lot(s):</b> 113

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** New 4 Bedroom single family dwelling

**PAID**

MAR - 2 2023

TOWN OF  
KILL DEVIL HILLS

**OP2023-016**

**PROJECT NAME:** Clark New House  
**SITE ADDRESS:** 534 Anchor Ct KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/02/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

PAID

MAR - 2 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS  
**OCCUPANCY**  
ISSUED: 02/24/2023  
EXPIRES:

### OP2023-012

PROJECT NAME: Zyka New House  
SITE ADDRESS: 310 FIL LN KILL DEVIL HILLS

PARENT PERMIT #: BJ2022-084

**APPLICANT:** VLADIMIR ZYKA  
302 Fil Ln.  
Kill Devil Hills, NC 27948  
252-207-8247

**OWNER:** VLADIMIR ZYKA  
302 Fil Ln.  
Kill Devil Hills, NC 27948  
252-207-8247

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

**License:** Unlicensed  
**Expires:** 12/31/2023

### PARCEL:

**PIN:** 988405282387

**Parcel Number:** 002240136

**Address:** 310 FIL LN KILL DEVIL HILLS

**Zoning:**

**Addition:** WRIGHT'S SHORES SEC 2

**Block:** 0 **Lot(s):** 136

**Legal Description:**

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** New 3 Bedroom Single Family Dwelling

**OP2023-012**

**PROJECT NAME:** Zyka New House  
**SITE ADDRESS:** 310 FIL LN KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 02/24/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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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

**PAID**

## Planning and Inspection Department

MAR - 2 2023

### OP2023-015

**PROJECT NAME:** Bryan and Joan Hudgins  
**SITE ADDRESS:** 303 ST LOUIS ST KILL DEVIL HILLS

**OCCUPANCY**  
ISSUED: 03/01/2023

**EXPIRES:**

PARENT PERMIT #: BJ2022-148

**APPLICANT:** FRANK SOLES/SANDY BOTTOM HOMES  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**OWNER:** Hudgins, Bryan and Joan  
149 Corner High Road  
eure, nc 27935  
252-333-8958

**GENERAL BUILDING-LIMITED:** SANDY BOTTOM HOMES  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**License:** 67524  
**Expires:** 12/31/2023

### PARCEL:

**PIN:** 987516942307

**Parcel Number:** 002956000

**Address:** 303 ST LOUIS ST KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**  
**Block:** 0 **Lot(s):** 80

**Legal Description:**

FEES:	<u>Paid</u>	<u>Due</u>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
<b>Totals :</b>	<b>\$156.75</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**OP2023-015**

**PROJECT NAME:** Bryan and Joan Hudgins  
**SITE ADDRESS:** 303 ST LOUIS ST KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 03/01/2023  
**EXPIRES:**

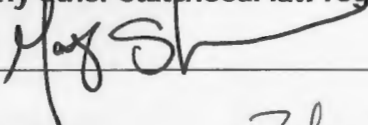
**DETAILS**

**Permit**

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

**PAID**

MAR 23 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**EL2023-039**

**PROJECT NAME:** ST JOHN RANGE CIRCUIT  
**SITE ADDRESS:** 107 AVALON DR E KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/23/2023

**EXPIRES:** 09/19/2023

**APPLICANT:** ST JOHN, STEPHEN  
1014 LARABEE LN  
APEX, NC 27523  
803-466-1014

**OWNER:** ST JOHN, STEPHEN  
1014 LARABEE LN  
APEX, NC 27523  
803-466-1014

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988517202617

**Parcel Number:** 001693000

**Address:** 107 AVALON DR E KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 38

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REMOVE UNPERMITTED RANGE AND MICROWAVE CIRCUIT, RETURN GROUND FLOOR TO MUDROOM, STORAGE AND BATHROOM

**EL2023-039**

**PROJECT NAME:** ST JOHN RANGE CIRCUIT  
**SITE ADDRESS:** 107 AVALON DR E KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/23/2023

**EXPIRES:** 09/19/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**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.

\* Home not approved as duplex.

\* No bedroom permitted on ground floor.

**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:** 3/23/23



# Town of Kill Devil Hills

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

PAID

MAR 21 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**EL2023-038**

**PROJECT NAME:**

**SITE ADDRESS:** 2704 VA DARE TRL N KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/21/2023

**EXPIRES:** 09/17/2023

**APPLICANT:** ELLEN BEDICHEK  
9287 Greywood Dr.  
Mechanicsville, VA 23116

**OWNER:** ELLEN BEDICHEK  
9287 Greywood Dr.  
Mechanicsville, VA 23116

**ELECTRICAL - UNLIMITED:** Angel Advanced Technologies, LLC  
9138 Caratoke Hwy  
Point Harbor, NC 27964  
252-256-2773

**License:** 30701-U  
**Expires:** 12/07/2023

**PARCEL:**

**PIN:** 988513128625

**Parcel Number:** 027470000

**Address:** 2704 VA DARE TRL N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES AMD BLK 6

**Zoning:**

**Block:** 6 **Lot(s):** 3

**Legal Description:**

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace wiring for existing hot tub.



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3/21/23

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**EL2023-038**

**PROJECT NAME:**

**SITE ADDRESS:** 2704 VA DARE TRL N KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/21/2023

**EXPIRES:** 09/17/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1055.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AO
OCCUPANCY TYPE	One & Two Family Dwelling

**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:** Marty Shaw

**Contractor or Authorized Agent:** [Signature] **Date:** 03 / 21 / 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

<b>EL2023-035</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> PARADISE GOLF ELECTRICAL SERVICE	<b>ISSUED:</b> 03/15/2023
<b>SITE ADDRESS:</b> 3300 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/11/2023

<b>APPLICANT:</b> IG HOLDING, LLC P. O. Box 120 Kitty Hawk, NC 27949	<b>OWNER:</b> IG HOLDING, LLC P. O. Box 120 Kitty Hawk, NC 27949
--	--

<b>ELECTRICAL-LIMITED:</b>	BRS ELECTRICAL SERVICES PO Box 2108 Kill Devil Hills, NC 27948 252-207-5334	<b>License:</b> 23077 <b>Expires:</b> 07/31/2023
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**PARCEL:**

<b>PIN:</b> 987516944597	<b>Parcel Number:</b> 000331000
<b>Address:</b> 3300 CROATAN HWY N KILL DEVIL HILLS	
<b>Addition:</b> ORVILLE BEACH WEST	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 254

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** INSTALL 400 AMP SERVICE TO ACCOMODATE NEW AMUSEMENT RIDE

**PAID**

**MAR 15 2023**

TOWN OF  
KILL DEVIL HILLS

**EL2023-035**

**PROJECT NAME:** PARADISE GOLF ELECTRICAL SERVICE  
**SITE ADDRESS:** 3300 CROATAN HWY N KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/15/2023

**EXPIRES:** 09/11/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	8000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	Assembly

**REQUIRED INSPECTIONS**

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:** 3/15/23



# 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

<b>EL2023-033</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/02/2023</b>
<b>SITE ADDRESS: 1812 SUNSET AVE KILL DEVIL HILLS</b>	<b>EXPIRES: 08/29/2023</b>

<b>APPLICANT:</b> Brown, Cindy 1812 Sunset Ave Kill Devil Hills, NC 27948	<b>OWNER:</b> Brown, Cindy 1812 Sunset Ave Kill Devil Hills, NC 27948
---	---

<b>ELECTRICAL - LIMITED:</b>	Bredell Electrical Systems 100 SOUTH DOGWOOD TR kitty hawk, nc 27949 313-938-6585	<b>License:</b> 20220 <b>Expires:</b> 03/31/2024
------------------------------	--	---

**PARCEL:**

<b>PIN:</b> 988409063459	<b>Parcel Number:</b> 002525013
<b>Address:</b> 1812 SUNSET AVE KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> CROATAN SHORES INC SEC 1	<b>Block:</b> 19 <b>Lot(s):</b> 13
<b>Legal Description:</b>	

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Line & low voltage wiring. Run line voltage power from main power to outdoor unit.

PAID  
Rc 3/7/23  
Pj PJ

**EL2023-033**

**PROJECT NAME:**

**SITE ADDRESS:** 1812 SUNSET AVE KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/02/2023

**EXPIRES:** 08/29/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7813.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** Steve Sub **Date:** 03 / 02 / 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

**EL2023-034**

**PROJECT NAME:** OUTER BANKS PRESBYTERIAN LIGHTING  
**SITE ADDRESS:** 907 CROATAN HWY S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/02/2023

**EXPIRES:** 08/29/2023

**APPLICANT:** OUTER BANKS PRESBYTERIAN  
PO BOX 2199  
KILL DEVIL HILLS, NC 27948

**OWNER:** OUTER BANKS PRESBYTERIAN  
PO BOX 2199  
KILL DEVIL HILLS, NC 27948

**ELECTRICAL INTERMEDIATE:** Seacoast Electric  
4400 Ridge RD  
kitty hawk, nc 27949  
252-261-6229

**License:** 07781  
**Expires:** 01/31/2024

**PARCEL:**

**PIN:** 988308886310

**Parcel Number:** 008529000

**Address:** 907 CROATAN HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 3

**Lot(s):** 1-4 & 7-10  
PT OF 5

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPLACE 1 ROW OF FLUORESCENT LIGHTS WITH LED

**EL2023-034**

**PROJECT NAME:** OUTER BANKS PRESBYTERIAN LIGHTING  
**SITE ADDRESS:** 907 CROATAN HWY S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/02/2023

**EXPIRES:** 08/29/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	1655.00
CONSTRUCTION TYPE	IV
FLOOD ZONE	X
OCCUPANCY TYPE	Assembly

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

3/2/2023



# 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

**EL2023-031**

**PROJECT NAME:** Beauchamp Electric  
**SITE ADDRESS:** 2035 VA DARE TRL S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 02/23/2023

**EXPIRES:** 08/22/2023

**APPLICANT:** BEAUCHAMP, MARY  
1 Colley Ave No 1503  
NORFOLK, VA 23510

**OWNER:** BEAUCHAMP, MARY  
1 Colley Ave No 1503  
NORFOLK, VA 23510

**ELECTRICAL - UNLIMITED:**

Angel Advanced Technologies, LLC  
9138 Caratoke Hwy  
Point Harbor, NC 27964  
252-256-2773

**License:** 30701-U  
**Expires:** 12/07/2023

**PARCEL:**

**PIN:** 98931323283907

**Parcel Number:** 028904000

**Address:** 2035 VA DARE TRL S KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** 3

**Lot(s):** 9-11 PT 12  
UNIT 7

**Legal Description:**

FEES:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace 200AMP panel



PAID  
MAR 3/2/23  
[Signature]

**EL2023-031**

**PROJECT NAME:** Beauchamp Electric  
**SITE ADDRESS:** 2035 VA DARE TRL S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 02/23/2023

**EXPIRES:** 08/22/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2815.58
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 02 / 23 / 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

<b>EL2023-036</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> HARRINGTON SERVICRE CHANGEOUT	<b>ISSUED:</b> 03/20/2023
<b>SITE ADDRESS:</b> 104 GODDARD AVE E KILL DEVIL HILLS	<b>EXPIRES:</b> 09/16/2023

<b>APPLICANT:</b> John Harrington 259 Ashridge Ln Newport News, VA 23602	<b>OWNER:</b> John Harrington 259 Ashridge Ln Newport News, VA 23602
--	--

<b>ELECTRICAL -LIMITED:</b>	W. M. Ferrell Electric 5224 Lunar Dr. kitty hawk, nc 27949 252-475-7084	<b>License:</b> 30086-L <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988308891359	<b>Parcel Number:</b> 003793000
<b>Address:</b> 104 GODDARD AVE E KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KITTY HAWK SHORES - REVISED	<b>Block:</b> 32 <b>Lot(s):</b> 9
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Electrical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** CHANGE OUT 200 AMP METERBASE AND SERVICE DROP

PAID  
MAR 20 2023  
TOWN OF  
KILL DEVIL HILLS

**EL2023-036**

**PROJECT NAME:** HARRINGTON SERVICE CHANGEOUT  
**SITE ADDRESS:** 104 GODDARD AVE E KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/20/2023

**EXPIRES:** 09/16/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	750.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

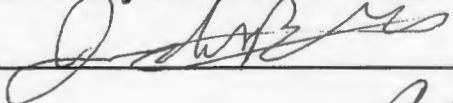
**REQUIRED INSPECTIONS**

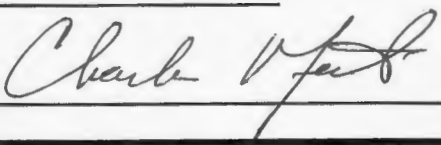
Final

**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:** 3/20/23



# 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

**ZP2023-024**

**PROJECT NAME:**

**SITE ADDRESS:** 102 PORTHOLE CT KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/24/2023

**EXPIRES:** 09/20/2023

**APPLICANT:** BAGLEY, JAMES  
100 WOOD DUCK DR  
currituck, nc 27929

**OWNER:** BAGLEY, JAMES  
100 WOOD DUCK DR  
currituck, nc 27929

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988414449640

**Parcel Number:** 003551000

**Address:** 102 PORTHOLE CT KILL DEVIL HILLS

**Addition:** LANDING SECTION 1, THE

**Zoning:**

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Rear privacy fence

**PAID**  
3/24/23 *PH*  
*online*

**ZP2023-024**

**PROJECT NAME:**

**SITE ADDRESS:** 102 PORTHOLE CT KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/24/2023

**EXPIRES:** 09/20/2023

**DETAILS**

**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	2000.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

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.

\* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

**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:** Joe Boylston **Date:** 03/24/2023





# Town of Kill Devil Hills

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

PAID

MAR 23 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**PL2023-006**

**PROJECT NAME:**

**SITE ADDRESS:** 1110 VA DARE TRL S KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 03/23/2023

**EXPIRES:** 09/19/2023

**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

**PLUMBING, CLASS I:** WES MORTON PLUMBING INC.  
211 HARBOUR RD  
Kill Devil Hills, NC 27948  
910-409-9052

**License:** 32201  
**Expires:**

**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:	<u>Paid</u>	<u>Due</u>
Plumbing Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Add second drain to pool.

### DETAILS

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9500.00
CONSTRUCTION TYPE	II
FLOOD ZONE	X
OCCUPANCY TYPE	Residential

**PL2023-006**

**PROJECT NAME:**

**SITE ADDRESS:** 1110 VA DARE TRL S KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 03/23/2023

**EXPIRES:** 09/19/2023

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**REQUIRED INSPECTIONS**

Final

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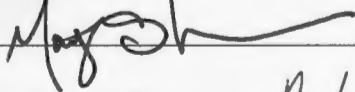
**CONDITIONS**

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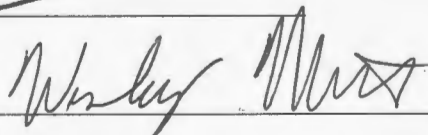
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**Issued By:** \_\_\_\_\_



**Contractor or Authorized Agent:** \_\_\_\_\_



**Date:** \_\_\_\_\_

3/23/23



# Town of Kill Devil Hills

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

PAID

MAR 22 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**ZP2023-021**

**PROJECT NAME:** Collins Fence  
**SITE ADDRESS:** 706 THIRD ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/20/2023

**EXPIRES:** 09/16/2023

**APPLICANT:** COLLINS, GARY  
206 Breezy Bay Ln  
SUMTER, SC 29150

**OWNER:** COLLINS, GARY  
206 Breezy Bay Ln  
SUMTER, SC 29150

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988409166861

**Parcel Number:** 002427000

**Address:** 706 THIRD ST W KILL DEVIL HILLS

**Addition:** SEA HOLLY RIDGE

**Zoning:**  
**Block:** E **Lot(s):** 18

**Legal Description:**

FEES:	Paid	Due
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** replace existing fence to same footprint

PAID  
M 3/21/23  
online payment





# 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

**ZP2023-018**

**PROJECT NAME:** DEMATTEO FENCE  
**SITE ADDRESS:** 115 AVALON DR E KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/17/2023

**EXPIRES:** 09/13/2023

**APPLICANT:** JOSEPH DEMATTEO  
24534 BOWS AND ARROWS RD  
Zuni, VA 23898  
757-876-5187

**OWNER:** JOSEPH DEMATTEO  
24534 BOWS AND ARROWS RD  
Zuni, VA 23898  
757-876-5187

**GENERAL:** PRUITT, ERIC GLADSTONE  
2055 New Bern Street  
Kill Devil Hills, NC 27948

**License:** 21008  
**Expires:** 01/31/2024

**PARCEL:**

**PIN:** 988517204707

**Parcel Number:** 001689001

**Address:** 115 AVALON DR E KILL DEVIL HILLS

**Addition:** AVALON BEACH

**Zoning:**

**Block:** 0 **Lot(s):** 34

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REBUILD FENCE ALONG PROPERTY LINE

**PAID**

**MAR 17 2023**

TOWN OF  
KILL DEVIL HILLS

**ZP2023-018**

**PROJECT NAME:** DEMATTEO FENCE  
**SITE ADDRESS:** 115 AVALON DR E KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/17/2023

**EXPIRES:** 09/13/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4500.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

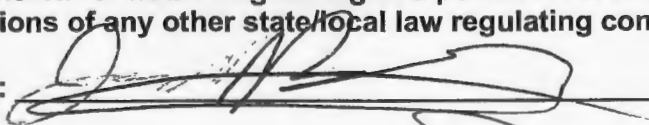
Stringline

**CONDITIONS**

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**Issued By:**



**Contractor or Authorized Agent:**



**Date:**

3/17/23



# Town of Kill Devil Hills

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

PAID

MAR 21 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**ZP2023-019**

**PROJECT NAME:** C E Batschelet/CT Contracting  
**SITE ADDRESS:** 802 DEAN ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/20/2023

**EXPIRES:** 09/16/2023

**APPLICANT:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**OWNER:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**BUILDING LIMITED:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**License:** 45367  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988316840550

**Parcel Number:** 004789000

**Address:** 802 DEAN ST KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL BEACH EXTENDED

**Block:** 4 **Lot(s):** 10-11

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Fence

**ZP2023-019**

**PROJECT NAME:** C E Batschelet/CT Contracting  
**SITE ADDRESS:** 802 DEAN ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/20/2023

**EXPIRES:** 09/16/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	10000.00
SURVEYOR NAME AND NUMBER	Styons
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

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.

\* Call for a string line inspection before installing the fence.

**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

**ZP2023-022**

**PROJECT NAME:** Russell Fence  
**SITE ADDRESS:** 502 DURHAM ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/21/2023

**EXPIRES:** 09/17/2023

**APPLICANT:** RUSSELL, ELIZABETH  
1919 Lisbon Road  
CHESAPEAKE, VA 23321  
757-620-3137

**OWNER:** RUSSELL, ELIZABETH  
1919 Lisbon Road  
CHESAPEAKE, VA 23321  
757-620-3137

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988405186845

**Parcel Number:** 001353000

**Address:** 502 DURHAM ST W KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 2 & 3

**Zoning:**

**Block:** 0 **Lot(s):** 639

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** fence around rear and side yard



**PAID**  
3/21/23 *DL*

*Handwritten note:*  
" X " "  
Flood Zone

**ZP2023-022**

**PROJECT NAME:** Russell Fence

**SITE ADDRESS:** 502 DURHAM ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/21/2023

**EXPIRES:** 09/17/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Accessory
CONSTRUCTION COST	1500.00
SURVEYOR NAME AND NUMBER	JH Miller
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

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:** Ryan Lang

**Contractor or Authorized Agent:** Ryan Russell **Date:** 03 / 21 / 2023

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Title	502 W. Durham St: ZP2023-022
File name	502 Durham permit.pdf
Document ID	96b4b711c98542342e2f6ade2ffaad7def3094c4
Audit trail date format	MM / DD / YYYY
Status	<span>●</span> Signed

Document History



SENT

**03 / 21 / 2023**

09:14:13 UTC-4

Sent for signature to Ryan Russell (russell@2pavers.com) and Permits KDH (permits@kdhnc.com) from permits@kdhnc.com  
IP: 204.84.167.13



VIEWED

**03 / 21 / 2023**

09:16:41 UTC-4

Viewed by Ryan Russell (russell@2pavers.com)  
IP: 174.73.75.147



SIGNED

**03 / 21 / 2023**

09:22:29 UTC-4

Signed by Ryan Russell (russell@2pavers.com)  
IP: 174.73.75.147



VIEWED

**03 / 21 / 2023**

11:18:44 UTC-4

Viewed by Permits KDH (permits@kdhnc.com)  
IP: 204.84.167.13



SIGNED

**03 / 21 / 2023**

11:18:59 UTC-4

Signed by Permits KDH (permits@kdhnc.com)  
IP: 204.84.167.13



COMPLETED

**03 / 21 / 2023**

11:18:59 UTC-4

The document has been completed.



# 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

**ZP2023-017**

**PROJECT NAME:** Wright Fence  
**SITE ADDRESS:** 1103 TENTH AVE KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/16/2023

**EXPIRES:** 09/12/2023

**APPLICANT:** Wright, Sam  
1103 Boundary St  
Kill Devil Hills, NC 27948

**OWNER:** Wright, Sam  
1103 Boundary St  
Kill Devil Hills, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988311659150

**Parcel Number:** 004620000

**Address:** 1103 TENTH AVE KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 57 **Lot(s):** 7

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** fence along rear property line

**PAID**

**MAR 16 2023**

**TOWN OF  
KILL DEVIL HILLS**

**ZP2023-017**

**PROJECT NAME:** Wright Fence  
**SITE ADDRESS:** 1103 TENTH AVE KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/16/2023

**EXPIRES:** 09/12/2023

**DETAILS**

**Permit**

Name	Value
ZONING DISTRICT	LI-2
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	900.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

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:** 3-16-2023



**Town of Kill Devil Hills**

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

PAID

MAR 17 2023

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

<b>ZP2023-016</b>	<b>ZONING PERMIT</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/16/2023</b>
<b>SITE ADDRESS: 3000 RAYMOND AVE KILL DEVIL HILLS</b>	<b>EXPIRES: 09/12/2023</b>

**APPLICANT:** Perry, David  
3000 Raymond AVE  
Kill Devil Hills, NC 27948

**OWNER:** Perry, David  
3000 Raymond AVE  
Kill Devil Hills, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988513039070

**Parcel Number:** 000421000

**Address:** 3000 RAYMOND AVE KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 16 **Lot(s):** 23-24

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace fence along North side and connectors to main structure.

**ZP2023-016**

**PROJECT NAME:**

**SITE ADDRESS:** 3000 RAYMOND AVE KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/16/2023

**EXPIRES:** 09/12/2023

**DETAILS**

**Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4200.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

Stringline

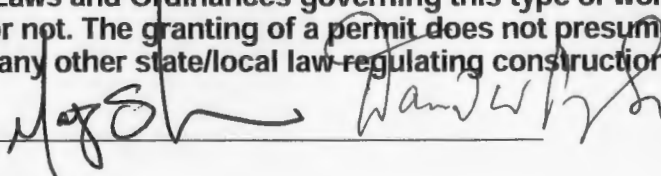
**CONDITIONS**

\* 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.

\* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

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: \_\_\_\_\_

3/17/23



**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

<b>PL2023-005</b>	<b>PLUMBING</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/10/2023</b>
<b>SITE ADDRESS: 106 MEMORIAL BLVD S KILL DEVIL HILLS</b>	<b>EXPIRES: 09/06/2023</b>

<b>APPLICANT:</b> WILLIAM BARNES JR. 9713 Hollywood Dr. Disutanta, VA 23842	<b>OWNER:</b> WILLIAM BARNES JR. 9713 Hollywood Dr. Disutanta, VA 23842
---	---

<b>PLUMBING CLASS I:</b>	ABSOLUTE PLUMBING 101 Quarter Landing Harbinger, NC 27941 252-489-1439	<b>License:</b> 30190 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988420709465	<b>Parcel Number:</b> 003847001
<b>Address:</b> 106 MEMORIAL BLVD S KILL DEVIL HILLS	
<b>Addition:</b> KITTY HAWK SHORES - REVISED	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 36 <b>Lot(s):</b> 4

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Plumbing Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPLACE MAIN SERVICE LINE WITH SECONDARY SHUTOFF

**PAID**  
3/14/23  
Pug Pol



**PL2023-005**

**PROJECT NAME:**

**SITE ADDRESS:** 106 MEMORIAL BLVD S KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 03/10/2023

**EXPIRES:** 09/06/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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:** Marty Shaw

**Contractor or Authorized Agent:** [Signature] **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

## Planning and Inspection Department

**ZP2023-014**

**PROJECT NAME:** White Fence  
**SITE ADDRESS:** 706 CEDAR DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/08/2023

**EXPIRES:** 09/04/2023

**APPLICANT:** WHITE, JAMES RICHARD  
P O BOX 2781  
KILL DEVIL HILLS, NC 27948

**OWNER:** WHITE, JAMES RICHARD  
P O BOX 2781  
KILL DEVIL HILLS, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988413138319

**Parcel Number:** 026993000

**Address:** 706 CEDAR DR KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VLG PH A SEC 3

**Zoning:**  
**Block:** 0 **Lot(s):** 75

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** fence around side yard

**PAID**

**MAR 10 2023**

TOWN OF  
KILL DEVIL HILLS

**ZP2023-014**

**PROJECT NAME:** White Fence

**SITE ADDRESS:** 706 CEDAR DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/08/2023

**EXPIRES:** 09/04/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	4500.00
SURVEYOR NAME AND NUMBER	John M Hurdle
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

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:** 3/10/23



# Town of Kill Devil Hills

**PAID**

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

MAR - 7 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**ZP2023-013**

**PROJECT NAME:** Mustico Fence  
**SITE ADDRESS:** 1100 INDIAN DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/07/2023

**EXPIRES:** 09/03/2023

**APPLICANT:** Mustico, Josh  
1100 Indian Dr  
Kill Devil Hills, NC 27948

**OWNER:** Mustico, Josh  
1100 Indian Dr  
Kill Devil Hills, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988409152541 **Parcel Number:** 002613000

**Address:** 1100 INDIAN DR KILL DEVIL HILLS

**Addition:** CROATAN SHORES SUBDIV **Zoning:**  
**Block:** 18 **Lot(s):** 30

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** fence around yard

**ZP2023-013**

**PROJECT NAME:** Mustico Fence  
**SITE ADDRESS:** 1100 INDIAN DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/07/2023

**EXPIRES:** 09/03/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	3700.00
LOT COVERAGE	35.30
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

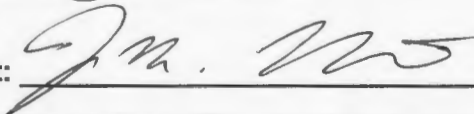
Final

**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: 3/7/23



# 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

<b>ZP2023-015</b>	<b>ZONING PERMIT</b>
<b>PROJECT NAME:</b> LEWIS FENCE	<b>ISSUED:</b> 03/15/2023
<b>SITE ADDRESS:</b> 1715 WYANDOTTE ST KILL DEVIL HILLS	<b>EXPIRES:</b> 09/11/2023

<b>APPLICANT:</b> LEWIS, MARY 9315 PENSURST TRCE CHARLOTTE, NC 28210 704-236-5548	<b>OWNER:</b> LEWIS, MARY 9315 PENSURST TRCE CHARLOTTE, NC 28210 704-236-5548
--	--

<b>BUILDING, REMODELING:</b>	Manning Construction of the Outer Banks 1812 Seminole Street Kill Devil Hills, NC 27948 843-291-3050	<b>License:</b> 123456 <b>Expires:</b> 06/30/2024
------------------------------	---	--

**PARCEL:**

<b>PIN:</b> 988409262417	<b>Parcel Number:</b> 002692006
<b>Address:</b> 1715 WYANDOTTE ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> HIGH VIEW - HEDRICKS ADD	<b>Block:</b> D <b>Lot(s):</b> 6
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** CONSTRUCT FENCE ALONG PROPERTY LINE

**PAID**

**PAID WITH CASH**

**MAR 15 2023**

TOWN OF  
KILL DEVIL HILLS

**ZP2023-015**

**PROJECT NAME:** LEWIS FENCE

**SITE ADDRESS:** 1715 WYANDOTTE ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/15/2023

**EXPIRES:** 09/11/2023

**DETAILS**

**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

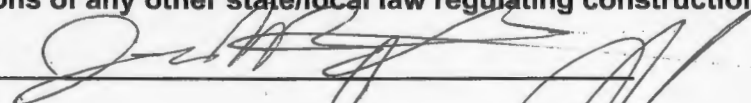
Stringline


**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.

\* 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:** 3-15-23



# 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

**EG2023-006**

**PROJECT NAME:** RIVERA LOT CLEARING  
**SITE ADDRESS:** 905 DURHAM ST W KILL DEVIL HILLS

**EXCAVATION AND GRADING**

**ISSUED:** 03/30/2023

**EXPIRES:** 09/26/2023

**APPLICANT:** Rivera, Jimmy  
503 Third ST  
Kill Devil Hills, NC 27948

**OWNER:** Rivera, Jimmy  
503 Third ST  
Kill Devil Hills, NC 27948

**UNLIMITED BUILDING:** Farrell & Family Construction  
113 E Meadowlark St  
Kill Devil Hills, NC 27948  
252-216-8810

**License:** 86449  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988405087291

**Parcel Number:** 001387000

**Address:** 905 DURHAM ST W KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 2 & 3

**Zoning:**  
**Block:** 0 **Lot(s):** 682

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** CLEARING LOT AND BRINGING IN FILL

### DETAILS

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	4000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	X

**PAID**

**MAR 30 2023**

TOWN OF  
KILL DEVIL HILLS



**EG2023-006**

**PROJECT NAME:** RIVERA LOT CLEARING

**SITE ADDRESS:** 905 DURHAM ST W KILL DEVIL HILLS

**EXCAVATION AND GRADING**

**ISSUED:** 03/30/2023

**EXPIRES:** 09/26/2023

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