



Town of Kill Devil Hills

TOWN OF
KILL DEVIL HILLS

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

APR 12 2023

Planning and Inspection Department

PAID

BJ2023-074

PROJECT NAME: Flores New House
SITE ADDRESS: 409 Indian Dr Kill Devil Hills

BUILDING JOINT

ISSUED: 03/28/2023

EXPIRES: 09/24/2023

APPLICANT: DUNSTAN, GARLAND
PO BOX 402
kitty hawk, nc 27949

OWNER: Flores, Jose
1103 Swan St.
KILL DEVIL HILLS, NC 27948
252-256-0460

GENERAL BUILDING - LIMITED: G. Dunstan
PO BOX 402
Kitty Hawk, NC 27949
252-202-1100

License: 19436
Expires: 12/31/2024

PARCEL:

PIN: 988410269221

**Parcel
Number:**

Address: 409 Indian Dr Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 10, Block F, High View Hendricks Addition

| FEES: | Paid | Due | BUILDING AREA: | |
|---------------------------|-------------------|---------------|----------------------------|--------------|
| Covered Porch Residential | \$72.00 | \$0.00 | Covered Porches/Decks | 96 SQFT |
| Res. Building Permit Fee | \$1,650.10 | \$0.00 | Residential Unheated (.40) | 274 Sq. Ft |
| Land Disturbing | \$100.00 | \$0.00 | Residential Heated Space | 2054 sq. Ft. |
| T-Pole | \$50.00 | \$0.00 | (.75) | |
| Totals : | \$1,872.10 | \$0.00 | # of Temporary Poles | 1 EA |

PROJECT DESCRIPTION: new 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T25605

BJ2023-074

PROJECT NAME: Flores New House

SITE ADDRESS: 409 Indian Dr Kill Devil Hills

BUILDING JOINT

ISSUED: 03/28/2023

EXPIRES: 09/24/2023

DETAILS**Permit**

| Name | Value |
|---------------------------------|------------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 8 |
| HEALTH DEPARTMENT PERMIT # | S8-14934 |
| # PARKING SPACES/BEDROOM | 4 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| BASE FLOOD ELEVATION | 8 |
| SUBSTANTIAL IMPROVEMENT | NO |
| PURPOSE | Residential New |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 250000.00 |
| LOT COVERAGE | 37.50 |
| LIVING SPACE (SQFT) | 2054 |
| COVERED PORCHES/DECKS (SQFT) | 96 |
| GARAGE (SQFT) | 274 |
| TOTAL SQUARE FOOTAGE | 2424 |
| SURVEYOR NAME AND NUMBER | JH Miller L-4958 |
| CULVERT | N |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | Y |
| OCCUPANCY TYPE | One & Two Family Dwelling |



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

MC2023-076

PROJECT NAME:

SITE ADDRESS: 519 Walker St. Kill Devil Hills

MECHANICAL

ISSUED: 04/14/2023

EXPIRES: 10/11/2023

APPLICANT: SHANNON, MICHAEL
519 W. WALKER STREET
Kill Devil Hills, NC 27948

OWNER: SHANNON, MICHAEL
519 W. WALKER STREET
Kill Devil Hills, NC 27948

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: 987520904765

Parcel Number: 000724002

Address: 519 Walker St. Kill Devil Hills

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 72 **Lot(s):** 11-13

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID
4/17/23 Dg
on-line

MC2023-076

PROJECT NAME:

SITE ADDRESS: 519 Walker St. Kill Devil Hills

MECHANICAL

ISSUED: 04/14/2023

EXPIRES: 10/11/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11590.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 14 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-090

PROJECT NAME: Ponce HVAC
SITE ADDRESS: 100 GREENSBORO ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: Ponce, Pablo
3543 SW First Ave
MIAMI, FL 33145

OWNER: Ponce, Pablo
3543 SW First Ave
MIAMI, FL 33145

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: 988406295829

Parcel Number: 001934000

Address: 100 GREENSBORO ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 1

Block: 0 **Lot(s):** 504 & 505

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 HVAC system



PAID
4/27/23 DLW

on-line
ck# 3033

MC2023-090

PROJECT NAME: Ponce HVAC

SITE ADDRESS: 100 GREENSBORO ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS**Permit**

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7200.00 |
| 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: Charles ThumanContractor or Authorized Agent: dlRub Date: 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-091

PROJECT NAME: Alperin HVAC
SITE ADDRESS: 3307 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: ALPERIN, CALVIN C
1201 LLEWELLYN AVENUE
NORFOLK, VA 23517

OWNER: ALPERIN, CALVIN C
1201 LLEWELLYN AVENUE
NORFOLK, VA 23517

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: 987516830998

Parcel Number: 000200000

Address: 3307 BAY DR KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 98

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system



PAID

4/27/23 DL

on-line
ck # 3033

MC2023-091

PROJECT NAME: Alperin HVAC

SITE ADDRESS: 3307 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7300.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: dlRub **Date:** 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|---|----------------------------|
| MC2023-092 | MECHANICAL |
| PROJECT NAME: T-Tops HVAC | ISSUED: 04/25/2023 |
| SITE ADDRESS: 1808 CROATAN HWY S. KILL DEVIL HILLS | EXPIRES: 10/22/2023 |

| | |
|--|--|
| APPLICANT: HIGH BANKS LLC C/O RICHARD M QUIDLEY 1634 VILLAGE LANE KILL DEVIL HILLS, NC 27948 252-441-8867 | OWNER: HIGH BANKS LLC C/O RICHARD M QUIDLEY 1634 VILLAGE LANE KILL DEVIL HILLS, NC 27948 252-441-8867 |
|--|--|

| | | |
|------------------------------|--|---|
| 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: 989313044067 | Parcel Number: 008323039 |
| Address: 1808 CROATAN HWY S. KILL DEVIL HILLS | Zoning: |
| Addition: LAKE DRIVE DEVELOPMENT | Block: 0 Lot(s): 41 43 45 47 PT 39 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 4 Ton HVAC system



PAID
4/27/23 Pa
on-line
CK# 3033

MC2023-092

PROJECT NAME: T-Tops HVAC

SITE ADDRESS: 1808 CROATAN HWY S. KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS**Permit**

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 9300.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Merchantile |

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: Charles Thuman

Contractor or Authorized Agent: dSub Date: 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|---|----------------------------|
| MC2023-093 | MECHANICAL |
| PROJECT NAME: Osteen HVAC | ISSUED: 04/25/2023 |
| SITE ADDRESS: 1622 VILLAGE LN KILL DEVIL HILLS | EXPIRES: 10/22/2023 |

| | |
|--|--|
| APPLICANT: Osteen, Pam 1720 Bay Dr Kill Devil Hills, NC 27948 | OWNER: Osteen, Pam 1720 Bay Dr Kill Devil Hills, NC 27948 |
|--|--|


| | | |
|------------------------------|--|---|
| 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: 988410256775 | Parcel Number: 003245003 |
| Address: 1622 VILLAGE LN KILL DEVIL HILLS | Zoning: |
| Addition: FIRST FLIGHT VILLAGE SEC 2 | Block: 0 Lot(s): 267 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

 **PAID**
4/27/23 Du
on-line
CK #3033

MC2023-093

PROJECT NAME: Osteen HVAC

SITE ADDRESS: 1622 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS**Permit**

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7300.00 |
| 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: Charles ThumanContractor or Authorized Agent: dRub Date: 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-094

PROJECT NAME: Gabriele HVAC
SITE ADDRESS: 614 MARTONE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: MARK GARBRIELE
1733 Wild Duck Crossing
CHESAPEAKE, VA 23321

OWNER: MARK GARBRIELE
1733 Wild Duck Crossing
CHESAPEAKE, VA 23321

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: 988405176736

Parcel Number: 002225000

Address: 614 MARTONE LN KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES SEC 2

Block: 0 **Lot(s):** 106

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
4/27/23
on-line
ck# 3033

3-094

PROJECT NAME: Gabriele HVAC
ADDRESS: 614 MARTONE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7300.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: *[Signature]* Date: 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF

KILL DEVIL HILLS

MC2023-085

PROJECT NAME: Wilkerson HVAC
SITE ADDRESS: 1638 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/21/2023

EXPIRES: 10/18/2023

APPLICANT: Wilkerson, Marc
1638 Village Lane
Kill Devil Hills, NC 27948
757-438-6120

OWNER: Wilkerson, Marc
1638 Village Lane
Kill Devil Hills, NC 27948
757-438-6120

ELECTRICAL - UNLIMITED: Comfort First Heating & Cooling
148 IRIE LANE
Powels Point, NC 27966

License: 21474
Expires: 10/06/2023

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

License: 33486
Expires: 12/31/2023

PARCEL:

PIN: 988410360166

Parcel Number: 028407000

Address: 1638 VILLAGE LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 259

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 3Ton HVAC system

MC2023-085

PROJECT NAME: Wilkerson HVAC
SITE ADDRESS: 1638 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/21/2023

EXPIRES: 10/18/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 10448.00 |
| 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: _____

4-27-23



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

| | |
|--|---|
| MC2023-097 PROJECT NAME: Scott HVAC SITE ADDRESS: 1408 Elizabeth St. Kill Devil Hills | TOWN OF KILL DEVIL HILLS MECHANICAL ISSUED: 04/27/2023 EXPIRES: 10/24/2023 |
|--|---|

APPLICANT: Scott, Wayne
4317 S Fourth St
ARLINGTON, VA 22204

OWNER: Scott, Wayne
4317 S Fourth St
ARLINGTON, VA 22204

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: 988316842784

Parcel Number: 004769001

Address: 1408 Elizabeth St. Kill Devil Hills

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

Block: 2 **Lot(s):** 7

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

MC2023-097

PROJECT NAME: Scott HVAC

SITE ADDRESS: 1408 Elizabeth St. Kill Devil Hills

MECHANICAL

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7328.00 |
| 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: 4-27-23



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-096

PROJECT NAME:

SITE ADDRESS: 1814 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

APPLICANT: P&P Dare Trail LLC
PO Box 2776
Alexandria, Va 22301

OWNER: P&P Dare Trail LLC
PO Box 2776
Alexandria, Va 22301

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: 988405271510

Parcel Number: 002450000

Address: 1814 CREEK ST KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

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

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

MC2023-096

PROJECT NAME:

SITE ADDRESS: 1814 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7434.00 |
| 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: 4/27/23



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

| | |
|--|----------------------------|
| MC2023-089 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/24/2023 |
| SITE ADDRESS: 402 WILKINSON ST W KILL DEVIL HILLS | EXPIRES: 10/21/2023 |

APPLICANT: CHOWNS, THOMAS H III
179 COVENTRY ROAD
VIRGINIA BEACH, VA 23462

OWNER: CHOWNS, THOMAS H III
179 COVENTRY ROAD
VIRGINIA BEACH, VA 23462

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: 987520923483

Parcel Number: 000680000

Address: 402 WILKINSON ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 59

Lot(s): 21-22 & 1/2
OF 23

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGEOUT



PAID

4/26/23

on-line

MC2023-089

PROJECT NAME:

SITE ADDRESS: 402 WILKINSON ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 14820.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER **Date:** 04 / 25 / 2023



Town of Kill Devil Hills

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-079

PROJECT NAME: Moser HVAC
SITE ADDRESS: 1103 Cambridge Rd. Unit #303-E Kill Devil Hills

MECHANICAL

ISSUED: 04/18/2023

EXPIRES: 10/15/2023

APPLICANT: Moser, Ryan & Rachel
1103 Cambridge DR 303-E
Kill Devil Hills, NC 27948

OWNER: Moser, Ryan & Rachel
1103 Cambridge DR 303-E
Kill Devil Hills, NC 27948

ELECTRICAL, PLUMBING AND HEATING: Anderson Heating and Cooling Co., LLC
PO Box 396
Kitty Hawk, NC 27949
252-619-3105

License: 30003
Expires: 02/06/2024

MECHANICAL H-3, CLASS 1: Anderson Heating and Cooling Co., LLC
PO Box 396
Kitty Hawk, NC 27949
252-619-3105

License: 31438
Expires: 12/31/2023

PARCEL:

PIN: 98830648015921

**Parcel
Number:**

Address: 1103 Cambridge Rd. Unit #303-E Kill Devil Hills

Zoning: G&I

Addition: Bermuda Bay

Block:

Lot(s):

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system

MC2023-079

PROJECT NAME: Moser HVAC
SITE ADDRESS: 1103 Cambridge Rd. Unit #303-E Kill Devil Hills

MECHANICAL

ISSUED: 04/18/2023

EXPIRES: 10/15/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 9695.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

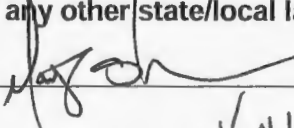
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 4/25/23



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

MC2023-087

PROJECT NAME:

SITE ADDRESS: 1541 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

APPLICANT: SCHLOR, RICK & TRACY
116 TRAILSIDE CT
CORAOPOLIS, PA 15108

OWNER: SCHLOR, RICK & TRACY
116 TRAILSIDE CT
CORAOPOLIS, PA 15108

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: 98841156728620

Parcel Number: 028063000

Address: 1541 VA DARE TRL N KILL DEVIL HILLS

Addition: GOLDEN STRAND CONDOS

Zoning:

Block: A

Lot(s): 1-5 - UNIT
G-2

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT



PAID
4/24/23
on-line

MC2023-087

PROJECT NAME:

SITE ADDRESS: 1541 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11906.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 24 / 2023



Town of Kill Devil Hills

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-088

PROJECT NAME: Ray HVAC
SITE ADDRESS: 409 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

APPLICANT: Ray, Cameron
409 Burns Dr.
Kill Devil Hills, NC 27948
757-653-7142

OWNER: Ray, Cameron
409 Burns Dr.
Kill Devil Hills, NC 27948
757-653-7142

MECHANICAL, H-3, I:

AIRMAKERS INC.
128 Beasley Ln
Kill Devil Hills, NC 27948
252-449-2980

License: 20564
Expires: 12/31/2023

PARCEL:

PIN: 988316835535

Parcel Number: 004993000

Address: 409 BURNS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 2

Zoning:

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

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

MC2023-088

PROJECT NAME: Ray HVAC
SITE ADDRESS: 409 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8540.00 |
| 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: 4/24/23



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

MC2023-081

PROJECT NAME: Hoosier HVAC
SITE ADDRESS: 3201 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

APPLICANT: Hoosier, Lynnette
27325 10th PI
SEATTLE, WA 98198

OWNER: Hoosier, Lynnette
27325 10th PI
SEATTLE, WA 98198

ELECTRICAL - LIMITED: R A HOY
PO Box 265
Kitty Hawk, NC 27949
252-261-2008

License: 22222-L
Expires: 08/31/2023

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: 988513140613

Parcel Number: 000099000

Address: 3201 VA DARE TRL N KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 6

Zoning:
Block: 6 **Lot(s):** 8 S PT 7

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2Ton HVAC system

PAID
4/20/23
on-line

MC2023-081

PROJECT NAME: Hoosier HVAC

SITE ADDRESS: 3201 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11073.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| 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: Charles Thuman

Contractor or Authorized Agent: BREAN LANCASTER **Date:** 04 / 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

MC2023-083

PROJECT NAME: ALLEN HVAC
SITE ADDRESS: 405 CHOWAN ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

APPLICANT: ALLEN, KIM J
405 W CHOWAN ST
KILL DEVIL HILLS, NC 27948

OWNER: ALLEN, KIM J
405 W CHOWAN ST
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: 987520925043

Parcel Number: 026665000

Address: 405 CHOWAN ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 57 **Lot(s):** 16-18

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC C/O

PAID

APR 21 2023

**TOWN OF
KILL DEVIL HILLS**

MC2023-083

PROJECT NAME: ALLEN HVAC

SITE ADDRESS: 405 CHOWAN ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7486.00 |
| 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: _____

4-21-23



Town of Kill Devil Hills

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-086

PROJECT NAME:

SITE ADDRESS: 2005 PORTSMOUTH ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: SUZANNE HEAD
2005 Portsmouth St.
Kill Devil Hills, NC 27948

OWNER: SUZANNE HEAD
2005 Portsmouth St.
Kill Devil Hills, NC 27948

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: 988405084246

Parcel Number: 001085000

Address: 2005 PORTSMOUTH ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 866

Legal Description:

FEES:

| | <u>Paid</u> | <u>Due</u> |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

MC2023-086

PROJECT NAME:

SITE ADDRESS: 2005 PORTSMOUTH ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8385.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: Osby S. S. S.

Date: 4/25/23



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

| | |
|--|----------------------------|
| MC2023-080 | MECHANICAL |
| PROJECT NAME: Kissinger HVAC | ISSUED: 04/19/2023 |
| SITE ADDRESS: 2002 NEW BERN ST KILL DEVIL HILLS | EXPIRES: 10/16/2023 |

| | |
|--|---|
| APPLICANT: KISSINGER, CAROLYN 134 GLOUCESTER RD FRONT ROYAL, VA 22630 | OWNER: KISSINGER, CAROLYN 134 GLOUCESTER RD FRONT ROYAL, VA22630 |
|--|---|

| | | |
|------------------------------|---|---|
| ELECTRICAL - LIMITED: | R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008 | License: 22222-L Expires: 08/31/2023 |
| 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: 988406392653 | Parcel Number: 001913000 |
| Address: 2002 NEW BERN ST KILL DEVIL HILLS | |
| Addition: AVALON BEACH ANNEX 1 | Zoning: |
| Legal Description: | Block: 0 Lot(s): 470 |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O HVAC system with a ducted dehumidifier

PAID
MC 4/20/23
Online

MC2023-080

PROJECT NAME: Kissinger HVAC

SITE ADDRESS: 2002 NEW BERN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11360.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 19 / 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

MC2023-084

PROJECT NAME:

SITE ADDRESS: 1811 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

APPLICANT: MALIYAM, NARUDOL
1811 BAY DR
Kill Devil Hills, NC 27948

OWNER: MALIYAM, NARUDOL
1811 BAY DR
Kill Devil Hills, NC 27948

H-3, CLASS 2 & H-3 CLASS1: R & K Heating and Cooling Inc.
904 Megan Dr
GREENVILLE, NC 27834
252-917-3258

License: 31607
Expires: 12/31/2023

PARCEL:

PIN: 988409062399

Parcel Number: 002526012

Address: 1811 BAY DR KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES INC SEC 1

Block: 19 **Lot(s):** 12

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID
4/20/23 *du*
on-line

MC2023-084

PROJECT NAME:

SITE ADDRESS: 1811 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

DETAILS**Permit**

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6000.00 |
| 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: Marty ShawContractor or Authorized Agent: Robert Taylor Date: 04 / 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

MC2023-069

PROJECT NAME:

SITE ADDRESS: 2024 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

APPLICANT: GREGORY, FRANK & RITA
1707 DARIAN DR
ELIZABETH CITY, NC 27909

OWNER: GREGORY, FRANK & RITA
1707 DARIAN DR
ELIZABETH CITY, NC 27909

HVAC: Armstrong Services
20 Albermarle Shores
Columbia, NC 27925
252-394-5315

License: 21460
Expires:

PARCEL:

PIN: 989313136540

Parcel Number: 004851000

Address: 2024 MEMORIAL BLVD S KILL DEVIL HILLS

Zoning:

Addition:

Block: 11 **Lot(s):** 7

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT



PAID
4/11/23
on-line

MC2023-069

PROJECT NAME:

SITE ADDRESS: 2024 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6200.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: David Armstrong **Date:** 04 / 11 / 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

MC2023-077

PROJECT NAME: Sunny Plaza HVAC
SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/17/2023

EXPIRES: 10/14/2023

APPLICANT: 2701 N Croatan Highway LLC
P O BOX 426
KILL DEVIL HILLS, NC 27948
252-449-5565

OWNER: 2701 N Croatan Highway LLC
P O BOX 426
KILL DEVIL HILLS, NC 27948
252-449-5565

H-3, CLASS I: COMFORT CONNECTION
1527 MONUMENT LN
Kill Devil Hillsl, NC 27948
480-3333

License: 29121
Expires: 12/31/2023

MECHANICAL, PLUMBING, ELECTRICAL: COMFORT CONNECTION
1527 MONUMENT LN
Kill Devil Hillsl, NC 27948
480-3333

License: 30525
Expires: 05/08/2023

PARCEL:

PIN: 988517121167

Parcel Number: 003001001

Address: 2701 Croatan HWY N. KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 19 **Lot(s):** 28,29,30 &

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O HVAC system

PAID

APR 21 2023

TOWN OF
KILL DEVIL HILLS

MC2023-077

PROJECT NAME: Sunny Plaza HVAC
SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/17/2023

EXPIRES: 10/14/2023

DETAILS

Permit

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 6380.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Business |

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: _____



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

MC2023-075

PROJECT NAME: Scoops HVAC
SITE ADDRESS: 710 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

APPLICANT: DANIEL-GAL DEV. LLC
P.O. Box 1532
Kill Devil Hills, NC 27948

OWNER: DANIEL-GAL DEV. LLC
P.O. Box 1532
Kill Devil Hills, NC 27948

H-3, CLASS I: CHUCK'S A.C.R.
2004 S Croatan Hwy
Kill Devil Hills, NC 27948
252-449-6989

License: 23683
Expires: 12/31/2023

PARCEL:

PIN: 988308880735

Parcel Number: 028741000

Address: 710 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 12 **Lot(s):** 5-8 & PT 1-4

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O rooftop unit



PAID
4/17/23
on-line

MC2023-075**PROJECT NAME:** Scoops HVAC**SITE ADDRESS:** 710 CROATAN HWY S KILL DEVIL HILLS**MECHANICAL****ISSUED:** 04/13/2023**EXPIRES:** 10/10/2023

DETAILS**Permit**

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 10961.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Business |

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: Charles Thuman

Contractor or Authorized Agent: Catherine Browning Date: 04 / 17 / 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

MC2023-074

PROJECT NAME: Krucoff HVAC
SITE ADDRESS: 1319 N VA Dare Trl 4-I Kill Devil Hills

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

APPLICANT: Krucoff, Carol
237 Huntington Dr
CHAPEL HILL, NC 27514

OWNER: Krucoff, Carol
237 Huntington Dr
CHAPEL HILL, NC 27514

MECHANICAL, H-3, I: AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

License: 23577
Expires: 12/31/2023

PARCEL:

PIN: 98841564493932

Parcel Number:

Address: 1319 N VA Dare Trl 4-I Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Residential condominium

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system



PAID
4/14/23 De
on-line

MC2023-074

PROJECT NAME: Krucoff HVAC

SITE ADDRESS: 1319 N VA Dare Trl 4-I Kill Devil Hills

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|----------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 6550.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 11 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Linda Burgess Date: 04 / 14 / 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

MC2023-071

PROJECT NAME: Smith HVAC
SITE ADDRESS: 1621 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

APPLICANT: Smith, Edward
903 N Kemper St
ALEXANDRIA, VA 22304

OWNER: Smith, Edward
903 N Kemper St
ALEXANDRIA, VA 22304

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: 98841156485305

Parcel Number: 002775011

Address: 1621 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Block: B **Lot(s):** UNIT 11 PH II LT9-1

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 3-ton HVAC system

PAID
4/12/23
on-line

MC2023-071

PROJECT NAME: Smith HVAC
SITE ADDRESS: 1621 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

DETAILS

Permit

| Name | Value |
|----------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 11925.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: BREAN LANCASTER **Date:** 04 / 12 / 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

MC2023-072

PROJECT NAME: Martin HVAC
SITE ADDRESS: 204 ARCHDALE ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

APPLICANT: Martin, Jon
630 Brandywine Dr.
NEWPORT NEWS, VA 23602
757-879-2274

OWNER: Martin, Jon
630 Brandywine Dr.
NEWPORT NEWS, VA 23602
757-879-2274

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: 988517125494 **Parcel Number:** 026686000
Address: 204 ARCHDALE ST E KILL DEVIL HILLS
Addition: VIRGINIA DARE SHORES AMD BLK 6 **Zoning:**
Block: 6 **Lot(s):** 14
Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2 Ton heat pump only

PAID

APR 13 2023

TOWN OF
KILL DEVIL HILLS

MC2023-072

PROJECT NAME: Martin HVAC

SITE ADDRESS: 204 ARCHDALE ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 3950.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

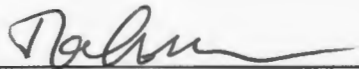
Final

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: 4-13-23



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

MC2023-073

PROJECT NAME: Rippe HVAC
SITE ADDRESS: 310 TERN CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

APPLICANT: Heirs of Ralph Douglas Rippe
310 Tern Ct
Kill Devil Hills, NC 27948
252-305-2490

OWNER: Heirs of Ralph Douglas Rippe
310 Tern Ct
Kill Devil Hills, NC 27948
252-305-2490

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: 988410351772

Parcel Number: 003226237

Address: 310 TERN CT KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 2

Block: 0 **Lot(s):** 237

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

PAID

APR 13 2023

TOWN OF
KILL DEVIL HILLS

MC2023-073

PROJECT NAME: Rippe HVAC
SITE ADDRESS: 310 TERN CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6990.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

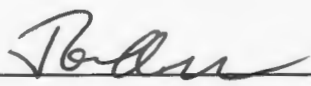
Final

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: 4.13.23



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

| | |
|---|----------------------------|
| MC2023-065 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/04/2023 |
| SITE ADDRESS: 1615 PRINCESS ANNE DR KILL DEVIL HILLS | EXPIRES: 10/01/2023 |

| | |
|--|--|
| APPLICANT: King, James & Holly 1615A PRINCESS ANNE Kill Devil Hills, NC 27948 | OWNER: King, James & Holly 1615A PRINCESS ANNE Kill Devil Hills, NC 27948 |
|--|--|

| | | |
|--------------------|--|---|
| MECHANICAL: | Comfort First Heating & Cooling 148 IRIE LANE Powels Point, NC 27966 | License: 33486 Expires: 12/31/2023 |
|--------------------|--|---|

PARCEL:

| | |
|--|--------------------------------------|
| PIN: 988410466461 | Parcel Number: 003106000 |
| Address: 1615 PRINCESS ANNE DR KILL DEVIL HILLS | |
| Addition: W R DEATON - DELRAY BEACH | Zoning: |
| Legal Description: | Block: 1 Lot(s): PT 18 |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID

APR 10 2023

TOWN OF
KILL DEVIL HILLS

MC2023-065

PROJECT NAME:

SITE ADDRESS: 1615 PRINCESS ANNE DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/04/2023

EXPIRES: 10/01/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11987.00 |
| 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: 4-10-23



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2023-068

PROJECT NAME:

SITE ADDRESS: 1306 Elizabeth St. Kill Devil Hills

MECHANICAL

ISSUED: 04/10/2023

EXPIRES: 10/07/2023

APPLICANT: Russo, Nancy & Timothy
1306 Elizabeth ST
Kill Devil Hills, NC 27948

OWNER: Russo, Nancy & Timothy
1306 Elizabeth ST
Kill Devil Hills, NC 27948

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: 988312850164

Parcel Number: 027354006

Address: 1306 Elizabeth St. Kill Devil Hills

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

Block: 1 **Lot(s):** 3

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: Ground floor mini split system



PAID

4/10/23 B

on-line

MC2023-068

PROJECT NAME:

SITE ADDRESS: 1306 Elizabeth St. Kill Devil Hills

MECHANICAL

ISSUED: 04/10/2023

EXPIRES: 10/07/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5315.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER **Date:** 04 / 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

| | |
|---|----------------------------|
| MC2023-070 | MECHANICAL |
| PROJECT NAME: Shutters HVAC | ISSUED: 04/11/2023 |
| SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS | EXPIRES: 10/08/2023 |

| | |
|---|---|
| APPLICANT: ON TRADING CORP. P. O. Box 389 Kill Devil Hills, NC 27959 | OWNER: ON TRADING CORP. P. O. Box 389 Kill Devil Hills, NC 27959 |
|---|---|


| | | |
|------------------------------|--|---|
| ELECTRICAL-UNLIMITED: | B & M CONTRACTORS 790 Pitts Chapel Rd Elizabeth City, NC 27909 252-338-6090 | License: 10856 Expires: 12/31/2023 |
| H-3, CLASS 1: | B & M CONTRACTORS 790 Pitts Chapel Rd Elizabeth City, NC 27909 252-338-6090 | License: 30322 Expires: 12/31/2023 |

PARCEL:

| | |
|--|--|
| PIN: 988420809320L1 | Parcel Number: 008118000 |
| Address: 405 VA DARE TRL S KILL DEVIL HILLS | Zoning: |
| Addition: SUBDIVISION - NONE | Block: 0 Lot(s): PAR. 2 & 3 & UNBRD. |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: Install mini split system

 **PAID**
4/12/23 *me*
on-line

MC2023-070**PROJECT NAME:** Shutters HVAC**SITE ADDRESS:** 405 VA DARE TRL S KILL DEVIL HILLS**MECHANICAL****ISSUED:** 04/11/2023**EXPIRES:** 10/08/2023**DETAILS****Permit**

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 7750.00 |
| CONSTRUCTION TYPE | II |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Norman L. Morris SSB **Date:** 04 / 12 / 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

MC2023-064

PROJECT NAME:

SITE ADDRESS: 110 WRIGHT AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

APPLICANT: Cook, Teresa
12051 Summer Meadow Ln
Reston, VA 20194

OWNER: Cook, Teresa
12051 Summer Meadow Ln
Reston, VA 20194

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: 988420705858

Parcel Number: 003888000

Address: 110 WRIGHT AVE E KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 38 **Lot(s):** 7

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT



PAID
4/3/23
on-line

MC2023-064

PROJECT NAME:

SITE ADDRESS: 110 WRIGHT AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5173.70 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 03 / 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

MC2023-067

PROJECT NAME: GRADNEY HVAC
SITE ADDRESS: 2041 EDENTON ST ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/06/2023

EXPIRES: 10/03/2023

APPLICANT: JUNIUS GRADNEY
2806 Hollister Avenue
Norfolk, Va 23504

OWNER: JUNIUS GRADNEY
2806 Hollister Avenue
Norfolk, Va 23504

H-3, CLASS I:

ISLAND HEATING AND COOLING
UNKNOWN
UNKNOWN, XX 00000
252-305-5048

License: 22354
Expires: 12/31/2023

PARCEL:

PIN: 987408987978

Parcel Number: 001260000

Address: 2041 EDENTON ST ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 810

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGE OUT

PAID

APR - 6 2023

TOWN OF
KILL DEVIL HILLS

MC2023-067

PROJECT NAME: GRADNEY HVAC
SITE ADDRESS: 2041 EDENTON ST ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/06/2023

EXPIRES: 10/03/2023

DETAILS

| Permit | |
|---------------------|-------------------------------|
| Name | Value |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7054.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |


REQUIRED INSPECTIONS

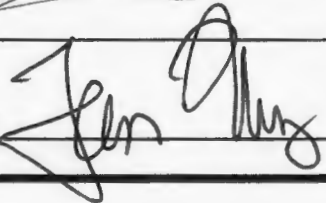
Final

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: 4-6-23



Town of Kill Devil Hills

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

PAID

MAR 31 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-061

PROJECT NAME: 2NC KDH HVAC
SITE ADDRESS: 801 Virginia Dare Tr. S. Kill Devil Hills

MECHANICAL

ISSUED: 03/29/2023

EXPIRES: 09/25/2023

APPLICANT: 2NC KDH LLC
1350St. Mortiz Dr.
Wilmington, DE 19807

OWNER: 2NC KDH LLC
1350St. Mortiz Dr.
Wilmington, DE 19807

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: 988308993415

Parcel Number: 008145001

Address: 801 Virginia Dare Tr. S. Kill Devil Hills

Zoning:

Addition: Baum Beach

Block: Lot(s): 2

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 4 Ton HVAC system and loft heat pump

MC2023-061

PROJECT NAME: 2NC KDH HVAC

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

MECHANICAL

ISSUED: 03/29/2023

EXPIRES: 09/25/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 16453.00 |
| 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:

[Signature]
[Signature]
3/31/23



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

| | |
|---|----------------------------|
| MC2023-060 | MECHANICAL |
| PROJECT NAME: ST JOHN MINI SPLIT | ISSUED: 03/27/2023 |
| SITE ADDRESS: 107 AVALON DR E KILL DEVIL HILLS | EXPIRES: 09/23/2023 |

| | |
|---|---|
| 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 |
|---|---|

| | | |
|---------------------|--|---|
| H3, CLASS 1: | B.A. Lee Mechanical 209 WEST Mobile RD Harbinger, NC 27941 252-202-8168 | License: 13444 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: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: INSTALL 2 MINI SPLIT UNITS ON GROUND FLOOR

PAID
3/31/23
on-line

MC2023-060

PROJECT NAME: ST JOHN MINI SPLIT
SITE ADDRESS: 107 AVALON DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 03/27/2023

EXPIRES: 09/23/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 10500.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| BASE FLOOD ELEVATION | 8.0 |
| 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: Jordan Blythe

Contractor or Authorized Agent: Brett Lee Date: 03 / 30 / 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

MC2023-063

PROJECT NAME:

SITE ADDRESS: 908 CLIPPER CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

APPLICANT: STEVEN ROSE
908 Clipper Ct.
KDH, NC 27948

OWNER: STEVEN ROSE
908 Clipper Ct.
KDH, NC 27948

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: 988413127900

Parcel Number: 003648000

Address: 908 CLIPPER CT KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 3, THE

Block: 0 **Lot(s):** 143

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: NEW MINI SPLIT SYSTEM



PAID

4/3/23
on-line

MC2023-063

PROJECT NAME:

SITE ADDRESS: 908 CLIPPER CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8052.20 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER **Date:** 04 / 03 / 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

| | |
|--|----------------------------|
| MC2023-076 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/14/2023 |
| SITE ADDRESS: 519 Walker St. Kill Devil Hills | EXPIRES: 10/11/2023 |

| | |
|--|--|
| APPLICANT: SHANNON, MICHAEL 519 W. WALKER STREET Kill Devil Hills, NC 27948 | OWNER: SHANNON, MICHAEL 519 W. WALKER STREET Kill Devil Hills, NC 27948 |
|--|--|

| | | |
|------------------------------|--|---|
| MECHANICAL H2 AND H3: | RA HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008 | License: 35329 Expires: 12/31/2023 |
|------------------------------|--|---|

PARCEL:

| | |
|---|---------------------------------------|
| PIN: 987520904765 | Parcel Number: 000724002 |
| Address: 519 Walker St. Kill Devil Hills | Zoning: |
| Addition: VIRGINIA DARE SHORES | Block: 72 Lot(s): 11-13 |
| Legal Description: | |

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

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID
4/17/23 Dg
on-line

MC2023-076

PROJECT NAME:

SITE ADDRESS: 519 Walker St. Kill Devil Hills

MECHANICAL

ISSUED: 04/14/2023

EXPIRES: 10/11/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11590.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 14 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|---|----------------------------|
| MC2023-090 | MECHANICAL |
| PROJECT NAME: Ponce HVAC | ISSUED: 04/25/2023 |
| SITE ADDRESS: 100 GREENSBORO ST KILL DEVIL HILLS | EXPIRES: 10/22/2023 |

APPLICANT: Ponce, Pablo
3543 SW First Ave
MIAMI, FL 33145

OWNER: Ponce, Pablo
3543 SW First Ave
MIAMI, FL 33145

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: 988406295829

Parcel Number: 001934000

Address: 100 GREENSBORO ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 1

Block: 0 **Lot(s):** 504 & 505

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 HVAC system

PAID
4/27/23
on-line
ck# 3033

MC2023-090

PROJECT NAME: Ponce HVAC

SITE ADDRESS: 100 GREENSBORO ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7200.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: dSub **Date:** 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-091

PROJECT NAME: Alperin HVAC
SITE ADDRESS: 3307 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: ALPERIN, CALVIN C
1201 LLEWELLYN AVENUE
NORFOLK, VA 23517

OWNER: ALPERIN, CALVIN C
1201 LLEWELLYN AVENUE
NORFOLK, VA 23517

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: 987516830998

Parcel Number: 000200000

Address: 3307 BAY DR KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 98

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system



PAID

4/27/23 DL

on-line

ck # 3033

MC2023-091

PROJECT NAME: Alperin HVAC

SITE ADDRESS: 3307 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7300.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: [Signature] **Date:** 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-092

PROJECT NAME: T-Tops HVAC
SITE ADDRESS: 1808 CROATAN HWY S. KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: HIGH BANKS LLC
C/O RICHARD M QUIDLEY
1634 VILLAGE LANE
KILL DEVIL HILLS, NC 27948
252-441-8867

OWNER: HIGH BANKS LLC
C/O RICHARD M QUIDLEY
1634 VILLAGE LANE
KILL DEVIL HILLS, NC 27948
252-441-8867

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: 989313044067

Parcel Number: 008323039

Address: 1808 CROATAN HWY S. KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT

Zoning:

Block: 0

Lot(s): 41 43 45 47
PT 39

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 4 Ton HVAC system



PAID

4/27/23 Pa

on-line
CK# 3033

MC2023-092**PROJECT NAME:** T-Tops HVAC**SITE ADDRESS:** 1808 CROATAN HWY S. KILL DEVIL HILLS**MECHANICAL****ISSUED:** 04/25/2023**EXPIRES:** 10/22/2023**DETAILS****Permit**

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 9300.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Merchantile |

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: Charles Thuman**Contractor or Authorized Agent:** *dSub***Date:** 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-093

PROJECT NAME: Osteen HVAC
SITE ADDRESS: 1622 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: Osteen, Pam
1720 Bay Dr
Kill Devil Hills, NC 27948

OWNER: Osteen, Pam
1720 Bay Dr
Kill Devil Hills, NC 27948

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: 988410256775

Parcel Number: 003245003

Address: 1622 VILLAGE LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:

Block: 0 **Lot(s):** 267

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2 Ton HVAC system



PAID

4/27/23 DM

on-line

CK #3033

MC2023-093

PROJECT NAME: Osteen HVAC

SITE ADDRESS: 1622 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7300.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

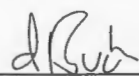
Final

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: Charles Thuman

Contractor or Authorized Agent:  **Date:** 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-094

PROJECT NAME: Garbrielle HVAC
SITE ADDRESS: 614 MARTONE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: MARK GARBRIELE
1733 Wild Duck Crossing
CHESAPEAKE, VA 23321

OWNER: MARK GARBRIELE
1733 Wild Duck Crossing
CHESAPEAKE, VA 23321

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: 988405176736

Parcel Number: 002225000

Address: 614 MARTONE LN KILL DEVIL HILLS

Zoning:


Addition: WRIGHT'S SHORES SEC 2

Block: 0 **Lot(s):** 106

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

 **PAID**
4/27/23
on-line
ck# 3033

3-094

PROJECT NAME: Gabriele HVAC
ADDRESS: 614 MARTONE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7300.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: dlbub Date: 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF

KILL DEVIL HILLS

MC2023-085

PROJECT NAME: Wilkerson HVAC
SITE ADDRESS: 1638 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/21/2023

EXPIRES: 10/18/2023

APPLICANT: Wilkerson, Marc
1638 Village Lane
Kill Devil Hills, NC 27948
757-438-6120

OWNER: Wilkerson, Marc
1638 Village Lane
Kill Devil Hills, NC 27948
757-438-6120

ELECTRICAL - UNLIMITED: Comfort First Heating & Cooling
148 IRIE LANE
Powels Point, NC 27966

License: 21474
Expires: 10/06/2023

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

License: 33486
Expires: 12/31/2023

PARCEL:

PIN: 988410360166

Parcel Number: 028407000

Address: 1638 VILLAGE LN KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 2

Block: 0 **Lot(s):** 259

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 3Ton HVAC system

MC2023-085

PROJECT NAME: Wilkerson HVAC
SITE ADDRESS: 1638 VILLAGE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/21/2023

EXPIRES: 10/18/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 10448.00 |
| 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: _____

4-27-23



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS
MECHANICAL
ISSUED: 04/27/2023
EXPIRES: 10/24/2023

| |
|---|
| MC2023-097 |
| PROJECT NAME: Scott HVAC |
| SITE ADDRESS: 1408 Elizabeth St. Kill Devil Hills |

| | |
|---|---|
| APPLICANT: Scott, Wayne 4317 S Fourth St ARLINGTON, VA 22204 | OWNER: Scott, Wayne 4317 S Fourth St ARLINGTON, VA 22204 |
|---|---|

| | | |
|---------------------|--|---|
| 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: 988316842784 | Parcel Number: 004769001 |
| Address: 1408 Elizabeth St. Kill Devil Hills | Zoning: |
| Addition: KILL DEVIL BEACH EXTENDED | Block: 2 Lot(s): 7 |
| Legal Description: | |

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

MC2023-097

PROJECT NAME: Scott HVAC

SITE ADDRESS: 1408 Elizabeth St. Kill Devil Hills

MECHANICAL

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7328.00 |
| 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:** 4-27-23



Town of Kill Devil Hills

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

PAID

APR 27 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-096

PROJECT NAME:

SITE ADDRESS: 1814 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

APPLICANT: P&P Dare Trail LLC
PO Box 2776
Alexandria, Va 22301

OWNER: P&P Dare Trail LLC
PO Box 2776
Alexandria, Va 22301

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: 988405271510

Parcel Number: 002450000

Address: 1814 CREEK ST KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

Zoning:

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

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

MC2023-096

PROJECT NAME:

SITE ADDRESS: 1814 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7434.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

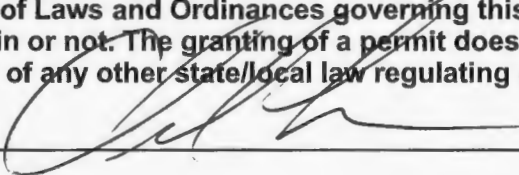
REQUIRED INSPECTIONS


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: 4/27/23



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

MC2023-089

PROJECT NAME:

SITE ADDRESS: 402 WILKINSON ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

APPLICANT: CHOWNS, THOMAS H III
179 COVENTRY ROAD
VIRGINIA BEACH, VA 23462

OWNER: CHOWNS, THOMAS H III
179 COVENTRY ROAD
VIRGINIA BEACH, VA23462

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: 987520923483

Parcel Number: 000680000

Address: 402 WILKINSON ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 59 **Lot(s):** 21-22 & 1/2 OF 23

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT



PAID
4/26/23
on-line

MC2023-089

PROJECT NAME:

SITE ADDRESS: 402 WILKINSON ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 14820.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER **Date:** 04 / 25 / 2023



Town of Kill Devil Hills

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-079

PROJECT NAME: Moser HVAC
SITE ADDRESS: 1103 Cambridge Rd. Unit #303-E Kill Devil Hills

MECHANICAL

ISSUED: 04/18/2023

EXPIRES: 10/15/2023

APPLICANT: Moser, Ryan & Rachel
1103 Cambridge DR 303-E
Kill Devil Hills, NC 27948

OWNER: Moser, Ryan & Rachel
1103 Cambridge DR 303-E
Kill Devil Hills, NC 27948

ELECTRICAL, PLUMBING AND HEATING: Anderson Heating and Cooling Co., LLC
PO Box 396
Kitty Hawk, NC 27949
252-619-3105

License: 30003
Expires: 02/06/2024

MECHANICAL H-3, CLASS 1: Anderson Heating and Cooling Co., LLC
PO Box 396
Kitty Hawk, NC 27949
252-619-3105

License: 31438
Expires: 12/31/2023

PARCEL:

PIN: 98830648015921

**Parcel
Number:**

Address: 1103 Cambridge Rd. Unit #303-E Kill Devil Hills

Zoning: G&I

Addition: Bermuda Bay

Block: Lot(s):

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system

MC2023-079

PROJECT NAME: Moser HVAC

SITE ADDRESS: 1103 Cambridge Rd. Unit #303-E Kill Devil Hills

MECHANICAL

ISSUED: 04/18/2023

EXPIRES: 10/15/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 9695.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

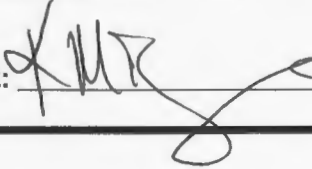
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 4/25/23



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

MC2023-087

PROJECT NAME:

SITE ADDRESS: 1541 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

APPLICANT: SCHLOR, RICK & TRACY
116 TRAILSIDE CT
CORAOPOLIS, PA 15108

OWNER: SCHLOR, RICK & TRACY
116 TRAILSIDE CT
CORAOPOLIS, PA 15108

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: 98841156728620

Parcel Number: 028063000

Address: 1541 VA DARE TRL N KILL DEVIL HILLS

Addition: GOLDEN STRAND CONDOS

Zoning:

Block: A

Lot(s): 1-5 - UNIT
G-2

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGEOUT



PAID
4/24/23
on-line

MC2023-087

PROJECT NAME:

SITE ADDRESS: 1541 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11906.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 24 / 2023



Town of Kill Devil Hills

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-088

PROJECT NAME: Ray HVAC
SITE ADDRESS: 409 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

APPLICANT: Ray, Cameron
409 Burns Dr.
Kill Devil Hills, NC 27948
757-653-7142

OWNER: Ray, Cameron
409 Burns Dr.
Kill Devil Hills, NC 27948
757-653-7142

MECHANICAL, H-3, I: AIRMAKERS INC.
128 Beasley Ln
Kill Devil Hills, NC 27948
252-449-2980

License: 20564
Expires: 12/31/2023

PARCEL:

PIN: 988316835535

Parcel Number: 004993000

Address: 409 BURNS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 2

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

MC2023-088

PROJECT NAME: Ray HVAC
SITE ADDRESS: 409 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/24/2023

EXPIRES: 10/21/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8540.00 |
| 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: 4/24/23



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

MC2023-081

PROJECT NAME: Hoosier HVAC
SITE ADDRESS: 3201 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

APPLICANT: Hoosier, Lynnette
27325 10th Pl
SEATTLE, WA 98198

OWNER: Hoosier, Lynnette
27325 10th Pl
SEATTLE, WA 98198

ELECTRICAL - LIMITED: R A HOY
PO Box 265
Kitty Hawk, NC 27949
252-261-2008

License: 22222-L
Expires: 08/31/2023

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: 988513140613

Parcel Number: 000099000

Address: 3201 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH BLK 6

Block: 6 **Lot(s):** 8 S PT 7

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2Ton HVAC system



PAID
4/20/23
on-line

MC2023-081

PROJECT NAME: Hoosier HVAC

SITE ADDRESS: 3201 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

DETAILS**Permit**

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11073.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| 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: Charles ThumanContractor or Authorized Agent: BREAN LANCASTER Date: 04 / 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

MC2023-083

PROJECT NAME: ALLEN HVAC
SITE ADDRESS: 405 CHOWAN ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

APPLICANT: ALLEN, KIM J
405 W CHOWAN ST
KILL DEVIL HILLS, NC 27948

OWNER: ALLEN, KIM J
405 W CHOWAN ST
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: 987520925043

Parcel Number: 026665000

Address: 405 CHOWAN ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 57 **Lot(s):** 16-18

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC C/O

PAID

APR 21 2023

TOWN OF
KILL DEVIL HILLS

MC2023-083

PROJECT NAME: ALLEN HVAC

SITE ADDRESS: 405 CHOWAN ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7486.00 |
| 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: 4-21-23



Town of Kill Devil Hills

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-086

PROJECT NAME:

SITE ADDRESS: 2005 PORTSMOUTH ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: SUZANNE HEAD
2005 Portsmouth St.
Kill Devil Hills, NC 27948

OWNER: SUZANNE HEAD
2005 Portsmouth St.
Kill Devil Hills, NC 27948

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: 988405084246

Parcel Number: 001085000

Address: 2005 PORTSMOUTH ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 866

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

MC2023-086

PROJECT NAME:

SITE ADDRESS: 2005 PORTSMOUTH ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8385.00 |
| 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: _____

Marty Shaw

Contractor or Authorized Agent: _____

Osby S. S. S.

Date: _____

4/25/23



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

MC2023-080

PROJECT NAME: Kissinger HVAC
SITE ADDRESS: 2002 NEW BERN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

APPLICANT: KISSINGER, CAROLYN
134 GLOUCESTER RD
FRONT ROYAL, VA 22630

OWNER: KISSINGER, CAROLYN
134 GLOUCESTER RD
FRONT ROYAL, VA22630

ELECTRICAL - LIMITED: R A HOY
PO Box 265
Kitty Hawk, NC 27949
252-261-2008

License: 22222-L
Expires: 08/31/2023

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: 988406392653

Parcel Number: 001913000

Address: 2002 NEW BERN ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 1

Block: 0 **Lot(s):** 470

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O HVAC system with a ducted dehumidifier



PAID

*rc 4/20/23
Online*

MC2023-080

PROJECT NAME: Kissinger HVAC

SITE ADDRESS: 2002 NEW BERN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11360.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: BRADY LANCASTER **Date:** 04 / 19 / 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

| | |
|---|----------------------------|
| MC2023-084 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/20/2023 |
| SITE ADDRESS: 1811 BAY DR KILL DEVIL HILLS | EXPIRES: 10/17/2023 |

| | |
|---|---|
| APPLICANT: MALIYAM, NARUDOL 1811 BAY DR Kill Devil Hills, NC 27948 | OWNER: MALIYAM, NARUDOL 1811 BAY DR Kill Devil Hills, NC 27948 |
|---|---|

| | | |
|---------------------------------------|--|---|
| H-3, CLASS 2 & H-3 CLASS1: | R & K Heating and Cooling Inc. 904 Megan Dr GREENVILLE, NC 27834 252-917-3258 | License: 31607 Expires: 12/31/2023 |
|---------------------------------------|--|---|

PARCEL:

| | |
|--|------------------------------------|
| PIN: 988409062399 | Parcel Number: 002526012 |
| Address: 1811 BAY DR KILL DEVIL HILLS | Zoning: |
| Addition: CROATAN SHORES INC SEC 1 | Block: 19 Lot(s): 12 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID
4/20/23 DL
on-line

MC2023-084

PROJECT NAME:

SITE ADDRESS: 1811 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

DETAILS**Permit**

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6000.00 |
| 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: Marty ShawContractor or Authorized Agent: Robert Taylor Date: 04 / 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

| | |
|--|----------------------------|
| MC2023-069 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/11/2023 |
| SITE ADDRESS: 2024 MEMORIAL BLVD S KILL DEVIL HILLS | EXPIRES: 10/08/2023 |


| | |
|---|---|
| APPLICANT: GREGORY, FRANK & RITA 1707 DARIAN DR ELIZABETH CITY, NC 27909 | OWNER: GREGORY, FRANK & RITA 1707 DARIAN DR ELIZABETH CITY, NC 27909 |
|---|---|

| | | |
|--------------|--|--|
| HVAC: | Armstrong Services 20 Albermarle Shores Columbia, NC 27925 252-394-5315 | License: 21460 Expires: |
|--------------|--|--|

| | | | |
|---------------------------|---------------------------------------|-----------------------|---------------------|
| PARCEL: | | | |
| PIN: | 989313136540 | Parcel Number: | 004851000 |
| Address: | 2024 MEMORIAL BLVD S KILL DEVIL HILLS | | |
| Addition: | | Zoning: | |
| Legal Description: | | Block: | 11 Lot(s): 7 |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

 **PAID**
4/11/23
on-line

MC2023-069

PROJECT NAME:

SITE ADDRESS: 2024 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6200.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: david armstrong **Date:** 04 / 11 / 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

MC2023-077

PROJECT NAME: Sunny Plaza HVAC
SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/17/2023

EXPIRES: 10/14/2023

APPLICANT: 2701 N Croatan Highway LLC
P O BOX 426
KILL DEVIL HILLS, NC 27948
252-449-5565

OWNER: 2701 N Croatan Highway LLC
P O BOX 426
KILL DEVIL HILLS, NC 27948
252-449-5565

H-3, CLASS I: COMFORT CONNECTION
1527 MONUMENT LN
Kill Devil Hills, NC 27948
480-3333

License: 29121
Expires: 12/31/2023

MECHANICAL, PLUMBING, ELECTRICAL: COMFORT CONNECTION
1527 MONUMENT LN
Kill Devil Hills, NC 27948
480-3333

License: 30525
Expires: 05/08/2023

PARCEL:

PIN: 988517121167

Parcel Number: 003001001

Address: 2701 Croatan HWY N. KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 19 **Lot(s):** 28,29,30 &

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O HVAC system

PAID

APR 21 2023

TOWN OF
KILL DEVIL HILLS

MC2023-077

PROJECT NAME: Sunny Plaza HVAC

SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/17/2023

EXPIRES: 10/14/2023

DETAILS

Permit

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 6380.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Business |

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: _____

4/21/23



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

| | |
|---|----------------------------|
| MC2023-075 | MECHANICAL |
| PROJECT NAME: Scoops HVAC | ISSUED: 04/13/2023 |
| SITE ADDRESS: 710 CROATAN HWY S KILL DEVIL HILLS | EXPIRES: 10/10/2023 |

| | |
|--|--|
| APPLICANT: DANIEL-GAL DEV. LLC P.O. Box 1532 Kill Devil Hills, NC 27948 | OWNER: DANIEL-GAL DEV. LLC P.O. Box 1532 Kill Devil Hills, NC 27948 |
|--|--|

| | | |
|----------------------|--|---|
| H-3, CLASS I: | CHUCK'S A.C.R. 2004 S Croatan Hwy Kill Devil Hills, NC 27948 252-449-6989 | License: 23683 Expires: 12/31/2023 |
|----------------------|--|---|

PARCEL:

| | |
|--|--|
| PIN: 988308880735 | Parcel Number: 028741000 |
| Address: 710 CROATAN HWY S KILL DEVIL HILLS | Zoning: |
| Addition: KILL DEVIL HILLS REALTY CORP | Block: 12 Lot(s): 5-8 & PT 1-4 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O rooftop unit

PAID
4/17/23
on-line

MC2023-075

PROJECT NAME: Scoops HVAC

SITE ADDRESS: 710 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 10961.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Business |

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: Charles Thuman

Contractor or Authorized Agent: Catherine Browning Date: 04 / 17 / 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

| | |
|--|----------------------------|
| MC2023-074 | MECHANICAL |
| PROJECT NAME: Krucoff HVAC | ISSUED: 04/13/2023 |
| SITE ADDRESS: 1319 N VA Dare Trl 4-I Kill Devil Hills | EXPIRES: 10/10/2023 |

| | |
|--|--|
| APPLICANT: Krucoff, Carol 237 Huntington Dr CHAPEL HILL, NC 27514 | OWNER: Krucoff, Carol 237 Huntington Dr CHAPEL HILL, NC 27514 |
|--|--|

| | | |
|----------------------------|--|---|
| MECHANICAL, H-3, I: | AIR HANDLERS OBX 8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945 | License: 23577 Expires: 12/31/2023 |
|----------------------------|--|---|

PARCEL:

| | |
|---|------------------------------|
| PIN: 98841564493932 | Parcel Number: |
| Address: 1319 N VA Dare Trl 4-I Kill Devil Hills | Zoning: |
| Addition: | Block: Lot(s): |
| Legal Description: Residential condominium | |

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
4/14/23
on-line

MC2023-074

PROJECT NAME: Krucoff HVAC
SITE ADDRESS: 1319 N VA Dare Trl 4-I Kill Devil Hills

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|----------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 6550.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 11 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Linda Burgess **Date:** 04 / 14 / 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

MC2023-071

PROJECT NAME: Smith HVAC
SITE ADDRESS: 1621 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

APPLICANT: Smith, Edward
903 N Kemper St
ALEXANDRIA, VA 22304

OWNER: Smith, Edward
903 N Kemper St
ALEXANDRIA, VA 22304

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: 98841156485305

Parcel Number: 002775011

Address: 1621 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Block: B

Lot(s): UNIT 11 PH II
LT9-1

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 3-ton HVAC system

PAID
4/12/23
on-line

MC2023-071

PROJECT NAME: Smith HVAC

SITE ADDRESS: 1621 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

DETAILS

Permit

| Name | Value |
|----------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 11925.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 12 / 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

| | |
|---|----------------------------|
| MC2023-072 | MECHANICAL |
| PROJECT NAME: Martin HVAC | ISSUED: 04/13/2023 |
| SITE ADDRESS: 204 ARCHDALE ST E KILL DEVIL HILLS | EXPIRES: 10/10/2023 |

APPLICANT: Martin, Jon
630 Brandywine Dr.
NEWPORT NEWS, VA 23602
757-879-2274

OWNER: Martin, Jon
630 Brandywine Dr.
NEWPORT NEWS, VA 23602
757-879-2274

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: 988517125494 | Parcel Number: 026686000 |
| Address: 204 ARCHDALE ST E KILL DEVIL HILLS | Zoning: |
| Addition: VIRGINIA DARE SHORES AMD BLK 6 | Block: 6 Lot(s): 14 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2 Ton heat pump only

PAID

APR 13 2023

TOWN OF
KILL DEVIL HILLS

MC2023-072

PROJECT NAME: Martin HVAC

SITE ADDRESS: 204 ARCHDALE ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 3950.00 |
| 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: 4-13-23



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

| | |
|---|----------------------------|
| MC2023-073 | MECHANICAL |
| PROJECT NAME: Rippe HVAC | ISSUED: 04/13/2023 |
| SITE ADDRESS: 310 TERN CT KILL DEVIL HILLS | EXPIRES: 10/10/2023 |

APPLICANT: Heirs of Ralph Douglas Rippe
310 Tern Ct
Kill Devil Hills, NC 27948
252-305-2490

OWNER: Heirs of Ralph Douglas Rippe
310 Tern Ct
Kill Devil Hills, NC 27948
252-305-2490

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: 988410351772

Parcel Number: 003226237

Address: 310 TERN CT KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 237

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

PAID

APR 13 2023

TOWN OF
KILL DEVIL HILLS

MC2023-073

PROJECT NAME: Rippe HVAC
SITE ADDRESS: 310 TERN CT KILL DEVIL HILLS

MECHANICAL
ISSUED: 04/13/2023
EXPIRES: 10/10/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6990.00 |
| 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: 4.13.23



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

| | |
|---|----------------------------|
| MC2023-065 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/04/2023 |
| SITE ADDRESS: 1615 PRINCESS ANNE DR KILL DEVIL HILLS | EXPIRES: 10/01/2023 |

| | |
|--|--|
| APPLICANT: King, James & Holly 1615A PRINCESS ANNE Kill Devil Hills, NC 27948 | OWNER: King, James & Holly 1615A PRINCESS ANNE Kill Devil Hills, NC 27948 |
|--|--|

| | | |
|--------------------|--|---|
| MECHANICAL: | Comfort First Heating & Cooling 148 IRIE LANE Powels Point, NC 27966 | License: 33486 Expires: 12/31/2023 |
|--------------------|--|---|

PARCEL:

| | |
|--|--------------------------------------|
| PIN: 988410466461 | Parcel Number: 003106000 |
| Address: 1615 PRINCESS ANNE DR KILL DEVIL HILLS | |
| Addition: W R DEATON - DELRAY BEACH | Zoning: |
| Legal Description: | Block: 1 Lot(s): PT 18 |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID

APR 10 2023

TOWN OF
KILL DEVIL HILLS

MC2023-065

PROJECT NAME:

SITE ADDRESS: 1615 PRINCESS ANNE DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/04/2023

EXPIRES: 10/01/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 11987.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

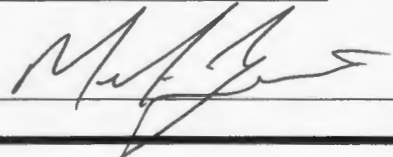
Final

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:** 4-10-23



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2023-068

PROJECT NAME:

SITE ADDRESS: 1306 Elizabeth St. Kill Devil Hills

MECHANICAL

ISSUED: 04/10/2023

EXPIRES: 10/07/2023

APPLICANT: Russo, Nancy & Timothy
1306 Elizabeth ST
Kill Devil Hills, NC 27948

OWNER: Russo, Nancy & Timothy
1306 Elizabeth ST
Kill Devil Hills, NC 27948

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: 988312850164

Parcel Number: 027354006

Address: 1306 Elizabeth St. Kill Devil Hills

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

Block: 1 **Lot(s):** 3

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: Ground floor mini split system

PAID
4/10/23
on-line

MC2023-068

PROJECT NAME:

SITE ADDRESS: 1306 Elizabeth St. Kill Devil Hills

MECHANICAL

ISSUED: 04/10/2023

EXPIRES: 10/07/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5315.00 |
| 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: Marty Shaw

Contractor or Authorized Agent: BRAN LANCASTER **Date:** 04 / 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

MC2023-070

PROJECT NAME: Shutters HVAC
SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

APPLICANT: ON TRADING CORP.
P. O. Box 389
Kill Devil Hills, NC 27959

OWNER: ON TRADING CORP.
P. O. Box 389
Kill Devil Hills, NC 27959

ELECTRICAL-UNLIMITED: B & M CONTRACTORS
790 Pitts Chapel Rd
Elizabeth City, NC 27909
252-338-6090

License: 10856
Expires: 12/31/2023

H-3, CLASS 1: B & M CONTRACTORS
790 Pitts Chapel Rd
Elizabeth City, NC 27909
252-338-6090

License: 30322
Expires: 12/31/2023

PARCEL:

PIN: 988420809320L1

Parcel Number: 008118000

Address: 405 VA DARE TRL S KILL DEVIL HILLS

Zoning:


Addition: SUBDIVISION - NONE

Block: 0 **Lot(s):** PAR. 2 & 3 & UNBRD.

Legal Description:

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

PROJECT DESCRIPTION: Install mini split system

 **PAID**
4/12/23 *me*
on-line

MC2023-070

PROJECT NAME: Shutters HVAC

SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

DETAILS**Permit**

| Name | Value |
|---------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 7750.00 |
| CONSTRUCTION TYPE | II |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Norman L. Morris III Date: 04 / 12 / 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

MC2023-064

PROJECT NAME:

SITE ADDRESS: 110 WRIGHT AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

APPLICANT: Cook, Teresa
12051 Summer Meadow Ln
Reston, VA 20194

OWNER: Cook, Teresa
12051 Summer Meadow Ln
Reston, VA 20194

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: 988420705858

Parcel Number: 003888000

Address: 110 WRIGHT AVE E KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 38 **Lot(s):** 7

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: HVAC CHANGEOUT

PAID
4/3/23 *me*
on-line

MC2023-064

PROJECT NAME:

SITE ADDRESS: 110 WRIGHT AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5173.70 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 03 / 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

| | |
|--|----------------------------|
| MC2023-067 | MECHANICAL |
| PROJECT NAME: GRADNEY HVAC | ISSUED: 04/06/2023 |
| SITE ADDRESS: 2041 EDENTON ST ST KILL DEVIL HILLS | EXPIRES: 10/03/2023 |

| | |
|--|--|
| APPLICANT: JUNIUS GRADNEY 2806 Hollister Avenue Norfolk, Va 23504 | OWNER: JUNIUS GRADNEY 2806 Hollister Avenue Norfolk, Va 23504 |
|--|--|

| | | |
|----------------------|--|---|
| H-3, CLASS I: | ISLAND HEATING AND COOLING UNKNOWN UNKNOWN, XX 00000 252-305-5048 | License: 22354 Expires: 12/31/2023 |
|----------------------|--|---|

PARCEL:

| | |
|---|------------------------------------|
| PIN: 987408987978 | Parcel Number: 001260000 |
| Address: 2041 EDENTON ST ST KILL DEVIL HILLS | Zoning: |
| Addition: AVALON BEACH ANNEX 2 & 3 | Block: 0 Lot(s): 810 |
| Legal Description: | |

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

PAID
APR - 6 2023

TOWN OF
KILL DEVIL HILLS

MC2023-067

PROJECT NAME: GRADNEY HVAC

SITE ADDRESS: 2041 EDENTON ST ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/06/2023

EXPIRES: 10/03/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7054.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

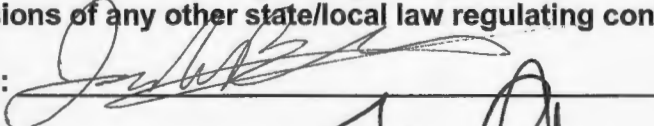
Final

CONDITIONS

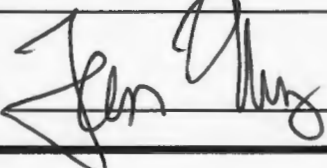
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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:

4-6-23



Town of Kill Devil Hills

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

PAID

MAR 31 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2023-061

PROJECT NAME: 2NC KDH HVAC
SITE ADDRESS: 801 Virginia Dare Tr. S. Kill Devil Hills

MECHANICAL

ISSUED: 03/29/2023

EXPIRES: 09/25/2023

APPLICANT: 2NC KDH LLC
1350St. Mortiz Dr.
Wilmington, DE 19807

OWNER: 2NC KDH LLC
1350St. Mortiz Dr.
Wilmington, DE 19807

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: 988308993415

Parcel Number: 008145001

Address: 801 Virginia Dare Tr. S. Kill Devil Hills

Addition: Baum Beach

Zoning:
Block: Lot(s): 2

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 4 Ton HVAC system and loft heat pump

MC2023-061

PROJECT NAME: 2NC KDH HVAC

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

MECHANICAL

ISSUED: 03/29/2023

EXPIRES: 09/25/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 16453.00 |
| 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: 3/31/23



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

| | |
|---|----------------------------|
| MC2023-060 | MECHANICAL |
| PROJECT NAME: ST JOHN MINI SPLIT | ISSUED: 03/27/2023 |
| SITE ADDRESS: 107 AVALON DR E KILL DEVIL HILLS | EXPIRES: 09/23/2023 |

| | |
|---|---|
| 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 |
|---|---|


| | | |
|---------------------|--|---|
| H3, CLASS 1: | B.A. Lee Mechanical 209 WEST Mobile RD Harbinger, NC 27941 252-202-8168 | License: 13444 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: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: INSTALL 2 MINI SPLIT UNITS ON GROUND FLOOR

 **PAID**
3/31/23
on-line

MC2023-060

PROJECT NAME: ST JOHN MINI SPLIT
SITE ADDRESS: 107 AVALON DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 03/27/2023

EXPIRES: 09/23/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 10500.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| BASE FLOOD ELEVATION | 8.0 |
| 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: Jordan Blythe

Contractor or Authorized Agent: Brett Lee **Date:** 03 / 30 / 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

| | |
|--|----------------------------|
| MC2023-063 | MECHANICAL |
| PROJECT NAME: | ISSUED: 04/03/2023 |
| SITE ADDRESS: 908 CLIPPER CT KILL DEVIL HILLS | EXPIRES: 09/30/2023 |

| | |
|---|---|
| APPLICANT: STEVEN ROSE 908 Clipper Ct. KDH, NC 27948 | OWNER: STEVEN ROSE 908 Clipper Ct. KDH, NC 27948 |
|---|---|


| | | |
|------------------------------|---|---|
| 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: 988413127900 | Parcel Number: 003648000 |
| Address: 908 CLIPPER CT KILL DEVIL HILLS | Zoning: |
| Addition: LANDING SECTION 3, THE | Block: 0 Lot(s): 143 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: NEW MINI SPLIT SYSTEM

 **PAID**
4/3/23
on-line

MC2023-063

PROJECT NAME:

SITE ADDRESS: 908 CLIPPER CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8052.20 |
| 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: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 04 / 03 / 2023



Town of Kill Devil Hills

TOWN OF
KILL DEVIL HILLS

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

APR 12 2023

Planning and Inspection Department

PAID

| | |
|---|----------------------------|
| BJ2023-074 | BUILDING JOINT |
| PROJECT NAME: Flores New House | ISSUED: 03/28/2023 |
| SITE ADDRESS: 409 Indian Dr Kill Devil Hills | EXPIRES: 09/24/2023 |

| | |
|--|---|
| APPLICANT: DUNSTAN, GARLAND PO BOX 402 kitty hawk, nc 27949 | OWNER: Flores, Jose 1103 Swan St. KILL DEVIL HILLS, NC 27948 252-256-0460 |
|--|---|

| | |
|---|---|
| GENERAL BUILDING - LIMITED: G. Dunstan PO BOX 402 Kitty Hawk, NC 27949 252-202-1100 | License: 19436 Expires: 12/31/2024 |
|---|---|

PARCEL:

| | |
|---|-----------------------|
| PIN: 988410269221 | Parcel Number: |
| Address: 409 Indian Dr Kill Devil Hills | Zoning: |
| Addition: | Block: Lot(s): |
| Legal Description: Lot 10, Block F, High View Hendricks Addition | |

| FEES: | Paid | Due | BUILDING AREA: | |
|---------------------------|-------------------|---------------|--------------------------------|--------------|
| Covered Porch Residential | \$72.00 | \$0.00 | Covered Porches/Decks | 96 SQFT |
| Res. Building Permit Fee | \$1,650.10 | \$0.00 | Residential Unheated (.40) | 274 Sq. Ft |
| Land Disturbing | \$100.00 | \$0.00 | Residential Heated Space (.75) | 2054 sq. Ft. |
| T-Pole | \$50.00 | \$0.00 | # of Temporary Poles | 1 EA |
| Totals : | \$1,872.10 | \$0.00 | | |

PROJECT DESCRIPTION: new 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T25605

BJ2023-074**PROJECT NAME:** Flores New House
SITE ADDRESS: 409 Indian Dr Kill Devil Hills**BUILDING JOINT****ISSUED:** 03/28/2023**EXPIRES:** 09/24/2023

DETAILS**Permit**

| Name | Value |
|------------------------------|---------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 8 |
| HEALTH DEPARTMENT PERMIT # | S8-14934 |
| # PARKING SPACES/BEDROOM | 4 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| BASE FLOOD ELEVATION | 8 |
| SUBSTANTIAL IMPROVEMENT | NO |
| PURPOSE | Residential New |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 250000.00 |
| LOT COVERAGE | 37.50 |
| LIVING SPACE (SQFT) | 2054 |
| COVERED PORCHES/DECKS (SQFT) | 96 |
| GARAGE (SQFT) | 274 |
| TOTAL SQUARE FOOTAGE | 2424 |
| SURVEYOR NAME AND NUMBER | JH Miller L-4958 |
| CULVERT | N |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | Y |
| OCCUPANCY TYPE | One & Two Family Dwelling |



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

OP2023-030

PROJECT NAME: Downing New House
SITE ADDRESS: 701 Sixth Ave Kill Devil Hills

OCCUPANCY

ISSUED: 04/19/2023

EXPIRES:

PARENT PERMIT #: BJ2022-088

APPLICANT: DAVID DOWNING
108 West Barnes Street
Nags Head, NC 27959

OWNER: DAVID DOWNING
108 West Barnes Street
Nags Head, NC 27959

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988307770708

**Parcel
Number:**

Address: 701 Sixth Ave Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Kill Devil Hills Rlty Corp Add; Lot: 5 Blk: 31

| FEES: | Paid | Due |
|------------------------------|-----------------|---------------|
| Certificate of Occupancy Fee | \$50.00 | \$0.00 |
| Residential Trash Can | \$106.75 | \$0.00 |
| Totals : | \$156.75 | \$0.00 |

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

PAID

APR 19 2023

TOWN OF
KILL DEVIL HILLS

OP2023-030

PROJECT NAME: Downing New House
SITE ADDRESS: 701 Sixth Ave Kill Devil Hills

OCCUPANCY

ISSUED: 04/19/2023

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

* Property shall not be offered for rent, lease or sale for a period of one year from the date of issue of the Occupancy Permit. Failure to comply will result in the Occupancy Permit being revoked.

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: _____

4-19-23



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2023-008

PROJECT NAME: Wawa
SITE ADDRESS: 1900 N CROATAN HWY KILL DEVIL HILLS

SIGN

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

APPLICANT: Palmetto Signs
1562 Calamus Pond Road
Summerville, SC 29486
484-883-3640

OWNER: ARISTA KDH LLC
450 Station Ave
SOUTH YARMOUTH, MA 02664

SIGN: Palmetto Signs
1562 Calamus Pond Road
Summerville, SC 29486
484-883-3640

License: 123456
Expires: 04/30/2024

PARCEL:

PIN: 988406288549

Parcel Number: 029831000

Address: 1900 N CROATAN HWY KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:

Block: 0

Lot(s): PT PARCEL B

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Sign Permit Fee | \$500.00 | \$0.00 |
| Totals : | \$500.00 | \$0.00 |

PROJECT DESCRIPTION: New free-standing sign and signs on the building



PAID
4/11/23
on-line

SG2023-008

PROJECT NAME: Wawa

SITE ADDRESS: 1900 N CROATAN HWY KILL DEVIL HILLS

SIGN

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

DETAILS**Permit**

| Name | Value |
|---------------------------------------|----------------------|
| # OF SIGNS | 5 |
| SIGN - FREE STANDING PERMITTED (SQFT) | 64.00 |
| SIGN - FREE STANDING PROPOSED (SQ FT) | 58.50 |
| SIGN - WALL PERMITTED (SQFT) | 182.60 |
| SIGN- WALL PROPOSED (SQ FT) | 120.29 |
| ZONING DISTRICT | C |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 24173.00 |
| FLOOD ZONE | X |

REQUIRED INSPECTIONS

Slab/Foundation/Piling Final
Electrical

CONDITIONS

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

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

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

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

* Window signs cannot exceed 25% of the gross glazing area of the building and cannot be separately illuminated or backlit by lighting installed for that purpose.

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2023-010

PROJECT NAME: The Salt Marsh Home
SITE ADDRESS: 1706 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

APPLICANT: McClanahan, Amber
116 Gabbard Lane
Powells Point, NC 27966
252-619-2244

OWNER: Bailets, Jason
109 White Birch Rd
SUNBURY, PA17801

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2023

PARCEL:

PIN: 989313043372

Parcel Number: 008448000

Address: 1706 CROATAN HWY S KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:
Block: D **Lot(s):** 28

Legal Description:

| FEES: | <u>Paid</u> | <u>Due</u> |
|-----------------|-----------------|---------------|
| Sign Permit Fee | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: Free-standing sign

PAID

APR 11 2023

TOWN OF
KILL DEVIL HILLS

SG2023-010

PROJECT NAME: The Salt Marsh Home
SITE ADDRESS: 1706 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/11/2023

EXPIRES: 10/08/2023

DETAILS

Permit

| Name | Value |
|---------------------------------------|----------------------|
| # OF SIGNS | 1 |
| SIGN - FREE STANDING PERMITTED (SQFT) | 36.00 |
| SIGN - FREE STANDING PROPOSED (SQ FT) | 48.23 |
| ZONING DISTRICT | C |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 2000.00 |
| FLOOD ZONE | X |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

* Zoning Final Inspection is required.

* Will be using existing pilings and frame.

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:** 4-11-2023



Town of Kill Devil Hills

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

PAID

APR 14 2023

Planning and Inspection Department

TOWN OF

KILL DEVIL HILLS

| | |
|---|----------------------------|
| SG2023-009 | SIGN |
| PROJECT NAME: Parrot Bay | ISSUED: 04/06/2023 |
| SITE ADDRESS: 808 CROATAN HWY S KILL DEVIL HILLS | EXPIRES: 10/03/2023 |

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

OWNER: BOYD, JOHN W
P O BOX 985
NAGS HEAD, NC 27959
252-202-5319

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

License: LEGACY UNKNOWN
Expires: 12/31/2030

PARCEL:

PIN: 988308882361

Parcel Number: 004352000

Address: 808 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 11

Lot(s): 6-7 & PT 3-5 & PT 8

Legal Description:

| FEES: | <u>Paid</u> | <u>Due</u> |
|-----------------|-----------------|---------------|
| Sign Permit Fee | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: New sign on the building

SG2023-009

PROJECT NAME: Parrot Bay

SITE ADDRESS: 808 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/06/2023

EXPIRES: 10/03/2023

DETAILS

Permit

| Name | Value |
|------------------------------|----------------------|
| # OF SIGNS | 1 |
| SIGN - WALL PERMITTED (SQFT) | 205.00 |
| SIGN- WALL PROPOSED (SQ FT) | 190.89 |
| ZONING DISTRICT | C |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 14000.00 |
| FLOOD ZONE | X |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

* Window signs cannot exceed 25% of the gross glazing area of the building and cannot be separately illuminated or backlit by lighting installed for that purpose.

* Zoning Final Inspection is required.

* 30.5 square foot sign will be removed from the back/west side of the building in order to conform with the sign ordinance. Once that sign is removed and the 44.55 square sign is added the total amount of signage on the building will be 190.89.



Town of Kill Devil Hills

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

PAID

APR 14 2023

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

SG2023-006

PROJECT NAME: Barrier Island Shipping
SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 03/13/2023

EXPIRES: 09/09/2023

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

OWNER: OLIVOLA, MARK
NANCY O WALTON
P O BOX 364
KILL DEVIL HILLS, NC 27948

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

License: LEGACY UNKNOWN
Expires: 12/31/2030

PARCEL:

PIN: 988410374122

Parcel Number: 002739000

Address: 1700 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: HEDRICKS ADDITION - CROATAN SH

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

Legal Description:

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

PROJECT DESCRIPTION: Sign on the building

SG2023-006

PROJECT NAME: Barrier Island Shipping
SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

SIGN**ISSUED:** 03/13/2023**EXPIRES:** 09/09/2023**DETAILS****Permit**

| Name | Value |
|------------------------------|----------------------|
| # OF SIGNS | 1 |
| SIGN - WALL PERMITTED (SQFT) | 36.00 |
| SIGN- WALL PROPOSED (SQ FT) | 28.79 |
| ZONING DISTRICT | C |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| FLOOD ZONE | X |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

* Window signs cannot exceed 25% of the gross glazing area of the building and cannot be separately illuminated or backlit by lighting installed for that purpose.

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

1000

APR - 3 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2023-027

PROJECT NAME: H and K Lots - Frank Soles
SITE ADDRESS: 303 Cameron St Kill Devil Hills

OCCUPANCY

ISSUED: 04/03/2023

EXPIRES:

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

OWNER: H & K Lots LLC
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

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

License: 67524
Expires: 12/31/2023

PARCEL:

PIN: 987516941604

Parcel Number: 000153000

Address: 303 Cameron St Kill Devil Hills

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 37

Legal Description:

| FEES: | Paid | Due |
|------------------------------|-----------------|---------------|
| Certificate of Occupancy Fee | \$50.00 | \$0.00 |
| Residential Trash Can | \$106.75 | \$0.00 |
| Totals : | \$156.75 | \$0.00 |

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

OP2023-027

PROJECT NAME: H and K Lots - Frank Soles
SITE ADDRESS: 303 Cameron St Kill Devil Hills

OCCUPANCY
ISSUED: 04/03/2023

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: 4-3-23



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

OP2023-028

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 513 Zen Lane Kill Devil Hills

OCCUPANCY

ISSUED: 04/04/2023

EXPIRES:

PARENT PERMIT #: BJ2022-211

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

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

GENERAL - 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

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: 988414227608

**Parcel
Number:**

Address: 513 Zen Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 49, Phase 2, Water Oak Residential Community

| FEES: | Paid | Due |
|------------------------------|-----------------|---------------|
| Certificate of Occupancy Fee | \$50.00 | \$0.00 |
| Residential Trash Can | \$106.75 | \$0.00 |
| Totals : | \$156.75 | \$0.00 |

PAID

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

APR 4 2023

TOWN OF
KILL DEVIL HILLS

OP2023-028

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 513 Zen Lane Kill Devil Hills

OCCUPANCY
ISSUED: 04/04/2023

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: Graceyn Morick Date: 4-4-2023



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

OP2023-029

PROJECT NAME: Yang New House
SITE ADDRESS: 1303 VA DARE TRL S KILL DEVIL HILLS

OCCUPANCY

ISSUED: 04/06/2023

EXPIRES:

PARENT PERMIT #: BJ2022-058

APPLICANT: CONWAY CONSTRUCTION
208 Shiloh Street
Kill Devil Hills, NC 27948
252-207-5322

OWNER: Yang, Ju
1228 Stockwell Ct
Virginia Beach, Va 23455

GENERAL, UNLIMITED:

ST. MICHAELS CONSTRUCTION, LLC
1375 Bridgewater Blvd
St. Petersburg Fla. 33704-3807
UNKNOWN, XX 00000

License: 57219-U
Expires: 12/31/2023

PARCEL:

PIN: 989309067763

Parcel Number: 004663000

Address: 1303 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

Zoning:

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

Legal Description:

| FEES: | Paid | Due |
|------------------------------|----------------|---------------|
| Certificate of Occupancy Fee | \$50.00 | \$0.00 |
| Totals : | \$50.00 | \$0.00 |

PROJECT DESCRIPTION: New 22 Bedroom Single Family Dwelling

PAID

APR - 6 2023

TOWN OF
KILL DEVIL HILLS

OP2023-029

PROJECT NAME: Yang New House

SITE ADDRESS: 1303 VA DARE TRL S KILL DEVIL HILLS

OCCUPANCY

ISSUED: 04/06/2023

EXPIRES:


DETAILS

Permit

| Name | Value |
|----------------------|-----------------|
| # OF TRASH CANS | 0 |
| PURPOSE | Residential New |
| ZONING DISTRICT | OIR |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 10 |

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: 4-6-23



Town of Kill Devil Hills

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

PAID

APR 19 2023

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

OP2023-031

PROJECT NAME: Cabral New House
SITE ADDRESS: 906 Console Lane Kill Devil Hills

OCCUPANCY
ISSUED: 04/19/2023

EXPIRES:

PARENT PERMIT #: BJ2022-200

APPLICANT: Shawn and Lisa Cabral
164 Drum Hill Road
CORAPEAKE, NC 27926
252-333-0365

OWNER: Shawn and Lisa Cabral
164 Drum Hill Road
CORAPEAKE, NC 27926
252-333-0365

CONTRACTOR: Cabral Construction
310 Drum Hill Road
CORAPEAKE, NC 27926

BUILDING LIMITED: Cabral Construction
310 Drum Hill Road
CORAPEAKE, NC 27926

License: 70222
Expires: 12/31/2023

PARCEL:

PIN: 988405079651
Address: 906 Console Lane Kill Devil Hills

Parcel Number:

Addition:
Legal Description: Lot 85, Wright's Shores, Section 2

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

| FEES: | Paid | Due |
|------------------------------|-----------------|---------------|
| Certificate of Occupancy Fee | \$50.00 | \$0.00 |
| Residential Trash Can | \$106.75 | \$0.00 |
| Totals : | \$156.75 | \$0.00 |

PROJECT DESCRIPTION: new 3 bedroom single family dwelling

OP2023-031

PROJECT NAME: Cabral New House
SITE ADDRESS: 906 Console Lane Kill Devil Hills

OCCUPANCY

ISSUED: 04/19/2023

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: _____

Hisa Cabral

4-19-23



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

MC2023-078

PROJECT NAME: Eason HVAC
SITE ADDRESS: 411 APACHE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/18/2023

EXPIRES: 10/15/2023

APPLICANT: EASON, CARL R
3449 PITTMANTOWN ROAD
SUFFOLK, VA 23438

OWNER: EASON, CARL R
3449 PITTMANTOWN ROAD
SUFFOLK, VA 23438

ELECTRICAL, PLUMBING AND HEATING: Soundside Heating & Air Conditioning, LLC
106 Robert Bruce DR
Manteo, NC 27954
252-216-6866

License: 34997 SP PH
Expires: 01/18/2024

H-2, H-3,: Soundside Heating & Air Conditioning, LLC
106 Robert Bruce DR
Manteo, NC 27954
252-216-6866

License: 34278
Expires: 12/31/2023

PARCEL:

PIN: 988410256372

Parcel Number: 009152000

Address: 411 APACHE ST KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 2

Block: 0 **Lot(s):** 208

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Mechanical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system



PAID
4/19/23
on-line

MC2023-078

PROJECT NAME: Eason HVAC

SITE ADDRESS: 411 APACHE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/18/2023

EXPIRES: 10/15/2023

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 8140.00 |
| 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: Charles Thuman

Contractor or Authorized Agent: Joseph W. Mabry Date: 04 / 18 / 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

PL2023-007

PROJECT NAME:

SITE ADDRESS: 1617 VA DARE TRL N KILL DEVIL HILLS

PLUMBING

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

APPLICANT: THE SILVER QUEEN LLC.
P.O. BOX 1124
GEORGETOWN, CO 80444

OWNER: THE SILVER QUEEN
PO BOX 1124
GEORGETOWN, CO 80444

PLUMBING CLASS I: ABSOLUTE PLUMBING
101 Quarter Landing
Harbinger, NC 27941
252-489-1439

License: 30190
Expires: 12/31/2023

PARCEL:

PIN: 988411564644C2

Parcel Number: 002778000

Address: 1617 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:
Block: B **Lot(s):** 11-13

Legal Description:

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

PROJECT DESCRIPTION: Replace tile shower, lavatory and tub faucets in master bathroom



PAID
4/3/23
on-line

PL2023-007

PROJECT NAME:

SITE ADDRESS: 1617 VA DARE TRL N KILL DEVIL HILLS

PLUMBING

ISSUED: 04/03/2023

EXPIRES: 09/30/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 23000.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 12 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

Rough In

Shower Pan

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: 04 / 03 / 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

EG2023-007

PROJECT NAME: First Flight Retreat Parking Lot demo
SITE ADDRESS: 815 S Va Dare Trl Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 04/06/2023

EXPIRES: 10/03/2023

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

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

BUILDING LIMITED: H&H Land Development,
313 Ascension Drive
Kitty Hawk, NC 27949
252-261-5143

License: 62986
Expires: 12/31/2023

PARCEL:

PIN: 98830899420300

**Parcel
Number:**

Address: 815 S Va Dare Trl Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: First Flight Retreat Condos

| FEES: | <u>Paid</u> | <u>Due</u> |
|-----------------|--------------------|-------------------|
| Land Disturbing | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: remove nothern section of parking area for future pool construction, and land disturbance

PAID

APR - 6 2023

TOWN OF
KILL DEVIL HILLS

EG2023-007

PROJECT NAME: First Flight Retreat Parking Lot demo

SITE ADDRESS: 815 S Va Dare Trl Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 04/06/2023

EXPIRES: 10/03/2023

DETAILS

Permit

| Name | Value |
|-----------------------------|-------------------|
| ESTIMATED CONSTRUCTION COST | 10000.00 |
| ZONING DISTRICT | OIR |
| CAMA PERMIT | N |
| FLOOD ZONE | X |
| ENGINEER AND LICENSE NUMBER | Cathleen Saunders |

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.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Building Permit required for construction of pool, pool buildings, and gazebo.

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: 4-6-23



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

HM2023-001

PROJECT NAME: Anthony Jordan
SITE ADDRESS: 2021 VA DARE TRL S KILL DEVIL HILLS

HOUSE MOVING

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

APPLICANT: Hardy, Dan
172 S. Dogwood Trl.
kitty hawk, nc 27949
252-573-9941

OWNER: JORDAN, ANTHONY
10311 New Germany Rd
GRANTSVILLE, MD 21536

GENERAL: Elite Structural Movers
8011 US Hwy. 264 East
WASHINGTON, NC 27889
252-402-7818

License: 11111
Expires: 04/30/2024

PARCEL:

PIN: 989313240251

Parcel Number: 012375000

Address: 2021 VA DARE TRL S KILL DEVIL HILLS

Addition: NAGS HEAD SHORES AMENDED SEC 4

Zoning:
Block: 3 **Lot(s):** PT 2

Legal Description:

| FEES: | <u>Paid</u> | <u>Due</u> |
|---|-------------------------------|------------|
| Building Permit Fee Minimum Fee | \$150.00 250.00 | \$0.00 |
| Totals : | \$150.00 250.00 | \$0.00 |

PROJECT DESCRIPTION: Move house to Kitty Hawk

DETAILS

| Permit Name | Value |
|--------------------------|----------|
| ZONING DISTRICT | OIR |
| FLOOD ZONE | VE |
| SURVEYOR NAME AND NUMBER | Seaboard |

\$39,000.00

PAID

APR - 5 2023

TOWN OF
KILL DEVIL HILLS

HM2023-001

PROJECT NAME: Anthony Jordan

SITE ADDRESS: 2021 VA DARE TRL S KILL DEVIL HILLS

HOUSE MOVING

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

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.
- * NCDOT permit shall be submitted prior to moving structure
- * Structure shall be inspected by KDH Building Inspector prior to being moved.

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

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

Planning and Inspection Department

| | |
|--|----------------------------|
| DM2023-003 | DEMOLITION |
| PROJECT NAME: SAGA Site Demo | ISSUED: 04/05/2023 |
| SITE ADDRESS: 2021 VA DARE TRL S KILL DEVIL HILLS | EXPIRES: 10/02/2023 |

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

OWNER: JORDAN, ANTHONY
10311 New Germany Rd
GRANTSVILLE, MD 21536

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: 989313240251

Parcel Number: 012375000

Address: 2021 VA DARE TRL S KILL DEVIL HILLS

Addition: NAGS HEAD SHORES AMENDED SEC 4

Zoning:

Block: 3 **Lot(s):** PT 2

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Demolition | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: remove pilings, septic, fence, driveway and dune walkway after existing house is relocated off site

DETAILS

Permit

| Name | Value |
|-------------------|--------------|
| ZONING DISTRICT | OIR |
| FLOOD ZONE | VE |
| CONSTRUCTION COST | 20000.00 |

PAID

APR 13 2023

DM2023-003

PROJECT NAME: SAGA Site Demo

SITE ADDRESS: 2021 VA DARE TRL S KILL DEVIL HILLS

DEMOLITION

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

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.
- * Driveway shall be removed before closure of permit.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 4/13/2023



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

APR 27 2023

DW2023-006

PROJECT NAME: Kneas Driveway
SITE ADDRESS: 2004 CROATAN HWY N KILL DEVIL HILLS

DRIVEWAY
ISSUED: 04/27/2023
EXPIRES: 10/24/2023

APPLICANT: KNEAS, JAMES E
RT. 1 , BOX 516
ROSELAND, VA 22967

OWNER: KNEAS, JAMES E
RT. 1 , BOX 516
ROSELAND, VA 22967

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988406295343

Parcel Number: 001297000

Address: 2004 CROATAN HWY N KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 531

Legal Description:

| FEES: | Paid | Due |
|---------------------|----------------|---------------|
| Driveway Permit Fee | \$50.00 | \$0.00 |
| Totals : | \$50.00 | \$0.00 |

PROJECT DESCRIPTION: add 20'x30' driveway addition off of Durham St side property line
15' PL

DW2023-006

PROJECT NAME: Kneas Driveway

SITE ADDRESS: 2004 CROATAN HWY N KILL DEVIL HILLS

DRIVEWAY

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

DETAILS

Permit

| Name | Value |
|--------------------------|----------------|
| DRIVEWAY INVERT 2 | N |
| CULVERT | N |
| SURVEYOR NAME AND NUMBER | Kirk R Foreman |
| ZONING DISTRICT | C |
| CONSTRUCTION COST | 3000.00 |
| FLOOD ZONE | X |
| LOT COVERAGE | 25.00 |

REQUIRED INSPECTIONS

Zoning Final

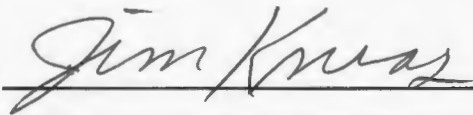
Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * 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:** 4/27/23



Town of Kill Devil Hills

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

PAID

APR 24 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|--|----------------------------|
| DW2023-005 | DRIVEWAY |
| PROJECT NAME: Henry Mason | ISSUED: 04/21/2023 |
| SITE ADDRESS: 203 FIRST ST E KILL DEVIL HILLS | EXPIRES: 10/18/2023 |

APPLICANT: KICZ Maintenance
PO BOX 875
GRANDY, NC 27939
252-455-0960

OWNER: Mason Insurance Co
164 Madison Rd
ORANGE, VA 22960
540-672-4644

BUILDING LIMITED: KICZ Maintenance
PO BOX 875
GRANDY, NC 27939
252-455-0960

License: 84184
Expires: 12/31/2023

PARCEL:

PIN: 988411562077

Parcel Number: 003179000

Address: 203 FIRST ST E KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

Block: D **Lot(s):** PT 21 & 22

Legal Description:

| FEES: | Paid | Due |
|---------------------|----------------|---------------|
| Driveway Permit Fee | \$50.00 | \$0.00 |
| Totals : | \$50.00 | \$0.00 |

PROJECT DESCRIPTION: Driveway repair and replacement

DETAILS

Permit

| Name | Value |
|-------------------|--------------|
| DRIVEWAY INVERT 2 | Y |
| CULVERT | N |
| ZONING DISTRICT | RL |
| CONSTRUCTION COST | 12475.00 |
| FLOOD ZONE | X |

DW2023-005

PROJECT NAME: Henry Mason

SITE ADDRESS: 203 FIRST ST E KILL DEVIL HILLS

DRIVEWAY

ISSUED: 04/21/2023

EXPIRES: 10/18/2023

REQUIRED INSPECTIONS

Zoning Final

Final

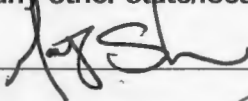
CONDITIONS

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

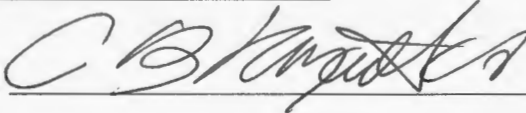
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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: _____

4/24/23



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

| | |
|--|----------------------------|
| EL2023-043 | ELECTRICAL |
| PROJECT NAME: | ISSUED: 04/26/2023 |
| SITE ADDRESS: 705 EIGHTH AVE KILL DEVIL HILLS | EXPIRES: 10/23/2023 |

| | |
|---|---|
| APPLICANT: Brickhouse, Darrell 705 Eighth Ave Kill Devil Hills, NC 27948 252-473-0981 | OWNER: Brickhouse, Darrell 705 Eighth Ave Kill Devil Hills, NC 27948 252-473-0981 |
|---|---|

| | | |
|----------------------------|--|--|
| ELECTRICAL-LIMITED: | NeSmith Electric 817 Shadowood LN chesapeake, va 23322 757-410-4485 | License: 27981 Expires: |
|----------------------------|--|--|

PARCEL:

| | |
|---|-----------------------------------|
| PIN: 988311675181 | Parcel Number: 030498003 |
| Address: 705 EIGHTH AVE KILL DEVIL HILLS | Zoning: |
| Addition: KILL DEVIL HILLS RLTY CORP ADD | Block: 43 Lot(s): 7 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: Relocate electrical panel and replace service entrance cable.

PAID
5/1/23 *su*
on-line

EL2023-043

PROJECT NAME:

SITE ADDRESS: 705 EIGHTH AVE KILL DEVIL HILLS

ELECTRICAL

ISSUED: 04/26/2023

EXPIRES: 10/23/2023

DETAILS

Permit

| Name | Value |
|-------------------|-------------------------------|
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 1100.00 |
| 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.

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: Pull up ASO **Date:** 04 / 26 / 2023



Town of Kill Devil Hills

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

PAID

APR 20 2023

Planning and Inspection Department

TOWN OF

KILL DEVIL HILLS

EL2023-042

PROJECT NAME: Askew

SITE ADDRESS: 1006 SUFFOLK ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

APPLICANT: ASKEW, STEVE
129 WHITE OAK ROAD
EURE, NC 27935

OWNER: ASKEW, STEVE
129 WHITE OAK ROAD
EURE, NC 27935

ELECTRICAL - LIMITED: GEORGE & CO.
105 Beau Pkwy
Elizabeth City, NC 27909
335-2596

License: 18979 L
Expires: 01/05/2024

PARCEL:

PIN: 987408998284

Parcel Number: 001970000

Address: 1006 SUFFOLK ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 Lot(s): 969

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: Service C/O and upgrade

EL2023-042

PROJECT NAME: Askew

SITE ADDRESS: 1006 SUFFOLK ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

DETAILS

Permit

| Name | Value |
|-------------------|-------------------------------|
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 2400.00 |
| 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.

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: 4-20-2023



Town of Kill Devil Hills

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

PAID

APR 17 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2023-041

PROJECT NAME: SEAWALK METERBASE C/O
SITE ADDRESS: 2035 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 04/17/2023

EXPIRES: 10/14/2023

APPLICANT: SEAWALK PROPERTY OWNERS
N/A
UNKNOWN, XX 00000

OWNER: SEAWALK PROPERTY OWNERS
N/A
UNKNOWN, XX 00000

ELECTRICAL - UNLIMITED: KREISER ELECTRIC INC
3847 IVY LN
kitty hawk, nc 27949
252-564-2367

License: 31684
Expires:

PARCEL:

PIN: 98931323283900

Parcel Number: 028907999

Address: 2035 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

Block: 3

Lot(s): 9-11PT12
COMM.
PROP

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$900.00 | \$0.00 |

PROJECT DESCRIPTION: REPLACEMENT OF 20 METERBASES AN DISCONNECTS (6 GANGS)

EL2023-041

PROJECT NAME: SEAWALK METERBASE C/O
SITE ADDRESS: 2035 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 04/17/2023

EXPIRES: 10/14/2023

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| ZONING DISTRICT | OIR |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 25000.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 10.00 |
| 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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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: 4-17-23



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

EL2023-040

PROJECT NAME: STREETY SERVICE CHANGE OUT
SITE ADDRESS: 2003 YORKTOWN KILL DEVIL HILLS

ELECTRICAL

ISSUED: 04/10/2023

EXPIRES: 10/07/2023

APPLICANT: STREETY, ROBERT J
2003 YORKTOWN STREET
KILL DEVIL HILLS, NC 27948

OWNER: STREETY, ROBERT J
2003 YORKTOWN STREET
KILL DEVIL HILLS, NC 27948

ELECTRICAL, LIMITED: H. W. Olds Framing and Mechanical
139 Holly Crescent
GRANDY, NC 27939
252-455-0647

License: 6341- L
Expires: 01/01/2024

PARCEL:

PIN: 988405183637

Parcel Number: 001365000

Address: 2003 YORKTOWN KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 653

Legal Description:

| FEES: | Paid | Due |
|-----------------------|-----------------|---------------|
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: 100AMP SERVICE CHANGE OUT - DOMINION PROJECT# 3362-4416

PAID

APR 10 2023

TOWN OF
KILL DEVIL HILLS

EL2023-040

PROJECT NAME: STREETY SERVICE CHANGE OUT
SITE ADDRESS: 2003 YORKTOWN KILL DEVIL HILLS

ELECTRICAL
ISSUED: 04/10/2023
EXPIRES: 10/07/2023

DETAILS

Permit

| Name | Value |
|-------------------|-------------------------------|
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 2000.00 |
| 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.

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

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

PAID

APR 25 2023

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2023-035

PROJECT NAME: Fence
SITE ADDRESS: 100 Fifth Street E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

APPLICANT: 5th Street KDH LLC
200 E Blackman Street
nags head, nc 27959

OWNER: 5th Street KDH LLC
200 E Blackman Street
nags head, nc 27959

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

License: 67524
Expires: 12/31/2023

PARCEL:

PIN: 988406391318

Parcel Number: 029832100

Address: 100 Fifth Street E KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES

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

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: Construct fence along north side of property

ZP2023-035

PROJECT NAME: Fence

SITE ADDRESS: 100 Fifth Street E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

DETAILS

Permit

| Name | Value |
|-------------------|-----------------------|
| ZONING DISTRICT | C |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 35000.00 |
| 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.

* 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: 4-25-23



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

| | |
|---|----------------------------|
| ZP2023-027 | ZONING PERMIT |
| PROJECT NAME: | ISSUED: 04/05/2023 |
| SITE ADDRESS: 1302 ELIZABETH ST KILL DEVIL HILLS | EXPIRES: 10/02/2023 |

APPLICANT: Marvel, James & Taylor
1302 ELIZABETH ST
Kill Devil Hills, NC 27948

OWNER: Marvel, James & Taylor
1302 ELIZABETH ST
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988312850213

Parcel Number: 004763000

Address: 1302 ELIZABETH ST KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

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

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: Fence in rear yard

PAID
4/5/23
online

ZP2023-027

PROJECT NAME:

SITE ADDRESS: 1302 ELIZABETH ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

DETAILS

Permit

| Name | Value |
|-------------------|-----------------------|
| ZONING DISTRICT | RL |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 5638.00 |
| 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: Jm **Date:** 04 / 05 / 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

| | |
|--|----------------------------|
| ZP2023-026 | ZONING PERMIT |
| PROJECT NAME: Eric Caudill | ISSUED: 03/31/2023 |
| SITE ADDRESS: 206 FIFTH ST W KILL DEVIL HILLS | EXPIRES: 09/27/2023 |

| | |
|---|---|
| APPLICANT: Caudill, Eric 13978 Baton Rouge Ct. CENTREVILLE, VA 20121 703-399-4022 | OWNER: Caudill, Eric 13978 Baton Rouge Ct. CENTREVILLE, VA 20121 703-399-4022 |
|---|---|


| | | |
|--------------------|---|---|
| CONTRACTOR: | SAME AS OWNER UNKNOWN UNKNOWN, XX 00000 | License: Same as Owner Expires: 12/31/2023 |
|--------------------|---|---|

PARCEL:

| | |
|---|----------------------------------|
| PIN: 988405282993 | Parcel Number: 002058000 |
| Address: 206 FIFTH ST W KILL DEVIL HILLS | Zoning: |
| Addition: WRIGHT'S SHORES | Block: 0 Lot(s): 4 |
| Legal Description: | |

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: Fence

 **PAID**
4/3/23 due
on-line

ZP2023-026

PROJECT NAME: Eric Caudill

SITE ADDRESS: 206 FIFTH ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 03/31/2023

EXPIRES: 09/27/2023

DETAILS

Permit

| Name | Value |
|--------------------------|-----------------------|
| ZONING DISTRICT | RL |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 6000.00 |
| SURVEYOR NAME AND NUMBER | JH Miller |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

REQUIRED INSPECTIONS

Stringline

Zoning Final

Final


CONDITIONS

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

* 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: Charles Thuman

Contractor or Authorized Agent:  Date: 04 / 03 / 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

ZP2023-028

PROJECT NAME: PENNINGTON FENCE
SITE ADDRESS: 2040 NEWPORT NEWS ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

APPLICANT: PENNINGTON, JANE
2040 NEWPORT NEWS ST
Kill Devil Hills, NC 27948
252-619-0820

OWNER: PENNINGTON, JANE
2040 NEWPORT NEWS ST
Kill Devil Hills, NC 27948
252-619-0820

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988405194803

Parcel Number: 000950000

Address: 2040 NEWPORT NEWS ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 1237

Legal Description:

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

PROJECT DESCRIPTION: CONSTRUCT FENCE ALONG PROPERTY LINE

PAID

APR - 5 2023

TOWN OF
KILL DEVIL HILLS

ZP2023-028

PROJECT NAME: PENNINGTON FENCE
SITE ADDRESS: 2040 NEWPORT NEWS ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/05/2023

EXPIRES: 10/02/2023

DETAILS

Permit

| Name | Value |
|--------------------|-------------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 2850.00 |
| 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.

* Stringline inspection to be completed prior to building 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: [Signature]

Contractor or Authorized Agent: J. Elizabeth Pennington Date: 4-5-23



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

| | |
|---|----------------------------|
| ZP2023-032 | ZONING PERMIT |
| PROJECT NAME: BEACH REALTY FENCE | ISSUED: 04/20/2023 |
| SITE ADDRESS: 113 CHOWAN ST E KILL DEVIL HILLS | EXPIRES: 10/17/2023 |

APPLICANT: BEACH REALTY
4826 N Croatan Hwy
kitty hawk, nc 27949
252-441-7166

OWNER: BEACH REALTY
4826 N Croatan Hwy
kitty hawk, nc 27949
252-441-7166

GENERAL: BEACH REALTY AND CONSTRUCTION COMPANY **License:** 23201
4826 North Croatan Highway **Expires:**
Kitty Hawk, NC 27949

PARCEL:

PIN: 988513029874

Parcel Number: 000425000

Address: 113 CHOWAN ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 17 **Lot(s):** 15-16

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: CONSTRUCT FENCE ALONG WEST PROPERTY LINE

PAID

APR 21 2023

TOWN OF
KILL DEVIL HILLS

ZP2023-032

PROJECT NAME: BEACH REALTY FENCE
SITE ADDRESS: 113 CHOWAN ST E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

DETAILS

Permit

| Name | Value |
|--------------------|-----------------------|
| ZONING DISTRICT | C |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| 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

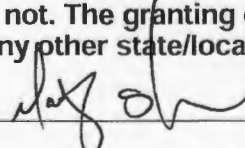
Stringline

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.

* Stringline inspection to be approved prior to construction.

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: 4-21-23



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

| | |
|---|----------------------------|
| ZP2023-034 | ZONING PERMIT |
| PROJECT NAME: | ISSUED: 04/20/2023 |
| SITE ADDRESS: 405 AVALON DR W KILL DEVIL HILLS | EXPIRES: 10/17/2023 |

| | |
|--|--|
| APPLICANT: Harry, Nora 103 Brian Lane Colonial Hts., Va 23834 | OWNER: Harry, Nora 103 Brian Lane Colonial Hts., Va 23834 |
|--|--|

| | | |
|-----------------|--|---|
| BUILDER: | Hands of Gold 207 Clamshell Dr. Kill Devil Hills, NC 27948 449-0340 | License: unlicensed Expires: |
|-----------------|--|---|

| | | | |
|--|---------------------------------|--------------------|--|
| PARCEL: | | | |
| PIN: 988517101088 | Parcel Number: 001521000 | | |
| Address: 405 AVALON DR W KILL DEVIL HILLS | | Zoning: | |
| Addition: AVALON BEACH | Block: 0 | Lot(s): 152 | |
| Legal Description: | | | |

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: FENCE

PAID
4/20/23
on-line

ZP2023-034

PROJECT NAME:

SITE ADDRESS: 405 AVALON DR W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/20/2023

EXPIRES: 10/17/2023

DETAILS

Permit

| Name | Value |
|-------------------|-----------------------|
| ZONING DISTRICT | RL |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 7500.00 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent:  **Date:** 04 / 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

ZP2023-029

PROJECT NAME: Arista KDH, LLC/Wawa
SITE ADDRESS: 1900 N CROATAN HWY KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/13/2023

EXPIRES: 10/10/2023

APPLICANT: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

OWNER: ARISTA KDH LLC
450 Station Ave
SOUTH YARMOUTH, MA02664

CONTRACTOR: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

License: LEGACY UNKNOWN
Expires: 12/31/2025

PARCEL:

PIN: 988406288549

Parcel Number: 029831000

Address: 1900 N CROATAN HWY KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:
Block: 0 **Lot(s):** PT PARCEL B

Legal Description:

| FEES: | Paid | Due |
|-----------------|---------------|---------------|
| Tent Permit Fee | \$0.00 | \$0.00 |
| Totals : | \$0.00 | \$0.00 |

PROJECT DESCRIPTION: Tent for ground breaking event



PAID
4/14/23
on-line

ZP2023-029**PROJECT NAME:** Arista KDH, LLC/Wawa**SITE ADDRESS:** 1900 N CROATAN HWY KILL DEVIL HILLS**ZONING PERMIT****ISSUED:** 04/13/2023**EXPIRES:** 10/10/2023**DETAILS****Permit**

| Name | Value |
|-------------------|----------------------|
| ZONING DISTRICT | C |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Commercial Accessory |
| 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 Fire Department for an inspection once the tent is erected.

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: Donna Elliot

Contractor or Authorized Agent: Samantha Blackwell Date: 04 / 13 / 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

ZP2023-030

PROJECT NAME: Adams Fence
SITE ADDRESS: 1811 SIOUX ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

APPLICANT: ADAMS, AMANDA
3841 N Croatan Hwy No 2055
kitty hawk, nc 27949

OWNER: ADAMS, AMANDA
3841 N Croatan Hwy No 2055
kitty hawk, nc 27949

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

License: Unlicensed
Expires: 12/31/2023

PARCEL:

PIN: 988409270374

Parcel Number: 002447000

Address: 1811 SIOUX ST KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

Zoning:
Block: G **Lot(s):** 4

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: fence around rear and side yard



PAID
4/27/23
on-line

ZP2023-030

PROJECT NAME: Adams Fence
SITE ADDRESS: 1811 SIOUX ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/19/2023

EXPIRES: 10/16/2023

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 | 900.00 |
| SURVEYOR NAME AND NUMBER | Doug Styons |
| 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: AJ Adams **Date:** 04 / 19 / 2023