

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

BJ2023-104

PROJECT NAME: Sandy Bottom Homes New 3 bedroom house **SITE ADDRESS:** 612 Eden Street W Kill Devil Hills

BUILDING JOINT ISSUED: 04/28/2023

EXPIRES: 10/25/2023

APPLICANT: Sandy Bottom H 400 DaVinci Lan kitty hawk, nc 27 757-448-8162	ie		OWNER:	OBX COTTAGE 200 EAST BLAC nags head, nc 2 252-207-5475	CKMAN ST
GENERAL BUILDING-LIMITED:	SANDY BC 400 DaVino kitty hawk, 757-448-81	nc 27949	ES		:ense: 67524 pires: 12/31/2023
PARCEL:					
PIN: 98752090	1167		Parcel Number:		
Address: 612 Eden	Street W Kill Devil H	lills			
			Zon	ing:	
Addition:			Blog	ck:	Lot(s):
Legal Description: Lots 2	4 & 25, Block 78, Vir	rginia Dare S	Shores		
FEES:	Paid	Due	BUILDING AR	EA:	
FEES: Open Deck Fee	<u>Paid</u> \$150.00	<u>Due</u> \$0.00	Residential H		1745 sq. Ft.
Open Deck Fee			Residential H (.75)	leated Space	
	\$150.00	\$0.00	Residential H (.75)		1745 sq. Ft. 109 Sq. Ft
Open Deck Fee Res. Building Permit Fee Covered Porch Residential	\$150.00 \$1,352.35 \$152.25 \$50.00	\$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore	leated Space	
Open Deck Fee Res. Building Permit Fee	\$150.00 \$1,352.35 \$152.25	\$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U	leated Space	109 Sq. Ft
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00	\$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore	leated Space Inheated (.40) ches/Decks	109 Sq. Ft 203 SQFT
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole Land Disturbing Totals	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore Open Decks # of Tempora	leated Space Inheated (.40) ches/Decks ary Poles	109 Sq. Ft 203 SQFT 1 EA
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole Land Disturbing Totals PROJECT DESCRIPTION: new	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00 : \$1,804.60	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore Open Decks # of Tempora	leated Space Inheated (.40) ches/Decks ary Poles	109 Sq. Ft 203 SQFT 1 EA 1 EA
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole Land Disturbing Totals PROJECT DESCRIPTION: new Town of	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00 : \$1,804.60 3 bedroom single fa	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore Open Decks # of Tempora	leated Space Inheated (.40) ches/Decks ny Poles	109 Sq. Ft 203 SQFT 1 EA 1 EA
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole Land Disturbing Totals PROJECT DESCRIPTION: new Town of	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00 : \$1,804.60	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore Open Decks # of Tempora	leated Space Inheated (.40) ches/Decks ny Poles	109 Sq. Ft 203 SQFT 1 EA 1 EA
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole Land Disturbing Totals PROJECT DESCRIPTION: new Town of	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00 : \$1,804.60 3 bedroom single fa	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore Open Decks # of Tempora	leated Space Inheated (.40) ches/Decks ary Poles APR	109 Sq. Ft 203 SQFT 1 EA 1 EA PAID 2 8 2023
Open Deck Fee Res. Building Permit Fee Covered Porch Residential T-Pole Land Disturbing Totals PROJECT DESCRIPTION: new Town of	\$150.00 \$1,352.35 \$152.25 \$50.00 \$100.00 : \$1,804.60 3 bedroom single fa	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Residential H (.75) Resdiential U Covered Pore Open Decks # of Tempora	leated Space Inheated (.40) ches/Decks ary Poles APR	109 Sq. Ft 203 SQFT 1 EA 1 EA PAID 2 8 2023

PROJECT NAME: Sandy Bottom Homes New 3 bedroom house **SITE ADDRESS:** 612 Eden Street W Kill Devil Hills

BUILDING JOINT ISSUED: 04/28/2023

EXPIRES: 10/25/2023

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S8-15879
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	280000.00
LOT COVERAGE	39.80
LIVING SPACE (SQFT)	1745
COVERED PORCHES/DECKS (SQFT)	203
STORAGE (SQFT)	109
OPEN DECK (SQFT)	56
TOTAL SQUARE FOOTAGE	2113
SURVEYOR NAME AND NUMBER	John Mayne
ENGINEER AND LICENSE NUMBER	Ray Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling

Printed by : CTHUMAN on: 04/28/2023 08:52 AM



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

BJ2023-105

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PROJECT NAME: Sandy Bottom Homes New House SITE ADDRESS: 524 W Chowan St Kill Devil Hills BUILDING JOINT ISSUED: 04/28/2023

EXPIRES: 10/25/2023

	SOLES, FRANK 527 Chowan St Kill Devil Hills, NC 2 757-448-8162	27948		52 Kil	DLES, FRANK 7 Chowan St I Devil Hills, NC 27948 7-448-8162
CONTRACTOR	Sandy Bottom Hom 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162		ferenda en señara y desenadoren		
GENERAL BUIL	DING-LIMITED:	SANDY BO 400 DaVinc kitty hawk, 1 757-448-81	nc 27949	ES	License: 67524 Expires: 12/31/2023
PARCEL:					
PIN:	98752081777	9		Parcel Number:	
Address:	524 W Chowa	an St Kill Devil Hil	lls		
714410001					
, 1001 0001				Zoning:	
Addition:				Zoning: Block:	Lot(s):
	ription: Lots 33 8	a 34, Block 67, Vir	ginia Dare S	Block:	Lot(s):
Addition: Legal Desc	ription: Lots 33 8	2 34, Block 67, Vir <u>Paid</u>	ginia Dare S <u>Due</u>	Block:	Lot(s):
Addition: Legal Desc FEES:	ription: Lots 33 8			Block:	
Addition: Legal Desc FEES: Fence		Paid	Due	Block: Shores BUILDING AREA:	
Addition: Legal Desc FEES: Fence Land Disturbing		<u>Paid</u> \$100.00	<u>Due</u> \$0.00	Block: Shores BUILDING AREA: Covered Porches/ Open Decks	/Decks 75 SQFT 1 EA
Addition:		<u>Paid</u> \$100.00 \$100.00	<u>Due</u> \$0.00 \$0.00	Block: Shores BUILDING AREA: Covered Porches/	/Decks 75 SQFT 1 EA
Addition: Legal Desc FEES: Fence Land Disturbing Res. Building Pe T-Pole	ermit Fee	<u>Paid</u> \$100.00 \$100.00 \$1,293.00	<u>Due</u> \$0.00 \$0.00 \$0.00	Block: Shores BUILDING AREA: Covered Porches/ Open Decks Residential Heate	Decks 75 SQFT 1 EA d Space 1724 sq. Ft.
Addition: Legal Desc FEES: Fence Land Disturbing Res. Building Po T-Pole Covered Porch	ermit Fee Residential	<u>Paid</u> \$100.00 \$100.00 \$1,293.00 \$50.00	Due \$0.00 \$0.00 \$0.00 \$0.00	Block: Shores BUILDING AREA: Covered Porches/ Open Decks Residential Heate (.75)	Decks 75 SQFT 1 EA d Space 1724 sq. Ft.
Addition: Legal Desc FEES: Fence Land Disturbing Res. Building Pa	ermit Fee Residential	<u>Paid</u> \$100.00 \$100.00 \$1,293.00 \$50.00 \$56.25	Due \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Block: Shores BUILDING AREA: Covered Porches/ Open Decks Residential Heate (.75)	Decks 75 SQFT 1 EA d Space 1724 sq. Ft.

APR 2 8 2023

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PROJECT NAME: Sandy Bottom Homes New House **SITE ADDRESS:** 524 W Chowan St Kill Devil Hills

BUILDING JOINT ISSUED: 04/28/2023

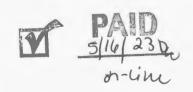
EXPIRES: 10/25/2023

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S3-17545
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.60
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	265000.00
LOT COVERAGE	39.80
LIVING SPACE (SQFT)	1724
COVERED PORCHES/DECKS (SQFT)	75
OPEN DECK (SQFT)	96
TOTAL SQUARE FOOTAGE	1895
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling

P P P P P P P P P P P P P P P P P P P	ROLINA ROLINA	Ki Phone: 252	PO BOX II Devil Hills, 2-449-5318		4102			
	6 IE: Petrovich Repair 3: 1515 WRIGHTSV		L DEVIL HIL	LS			ISSUE	NG JOINT D: 04/21/2023 ES: 10/18/2023
APPLICANT:	Frasca, William - Fra 2401 Colington Road Kill Devil Hills, NC 27 252-480-0515		95	OWNER:	PETROV 4116 BAN WOODBR	CROFT	LANE	
CONTRACTOR:		2401 Coling	gton Road ills, NC 27948	Custom Homes			nse: 72094 res: 12/31	-
PARCEL:								
PIN:	989309055401			Parcel Number:	008	254000		
Address:	1515 WRIGHT	SVILLE BLVD		HILLS				
				Zoni	ng:			
Addition:	OCEAN ACRE	S INC		Bloc	k: 0		Lot(s):	65-66
Legal Desc	ription:							
FEES:		Paid	Due					
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: siding replacement, replace existing decks and stairs to same footprint, replace 13 windows and 1 door, install new plywood over sheathing



PROJECT NAME: Petrovich Repairs **SITE ADDRESS:** 1515 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/21/2023

EXPIRES: 10/18/2023

DETAILS Permit Name Value С ZONING DISTRICT FRONT YARD SETBACK 30 REAR YARD SETBACK 20% Depth >30 SIDE YARD SETBACK 8 CAMA PERMIT N CAMA EXEMPTION N FLOOD ZONE Х SUBSTANTIAL NO IMPROVEMENT PURPOSE Residential Repair/Remodel CONSTRUCTION COST 66525.00 CULVERT N **DRIVEWAY INVERT 2** N OCCUPANCY TYPE One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	
Rough In	
Insulation	

Final

Zoning Final

CONDITIONS

*	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r work is suspended for a period of 12 months at any time after work has started.
*	As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
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* No increase to footprint of existing decks and stairs to be replaced.

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

DEVIL	H	Towr	of Kill	Devil Hill	s		
Birthplace	S.		PO BOX II Devil Hills, I 2-449-5318		4102	PA	ID
TORTH CAR	OLINP V	Planning	and Inspec	tion Depart	tment	MAY 2	2 2023
						TOWN	
	E: ROBERTS REN 1927 BAY DR K		8			ISSUE	ING JOINT D: 05/22/2023 ES: 11/18/2023
	ROBERTS, MARK 8901 REARDEN RD HENRICO, VA 2322		(OWNER:	ROBERTS, 8901 REARI HENRICO, V	DEN RD	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	, XX 00000			License: Unlic Expires: 12/3	
PARCEL:							
PIN:	988405070646	3		Parcel Number:	00907	1000	
Address:	1927 BAY DR	KILL DEVIL HIL	LS				
				Zoni	ng:		
Addition:	WRIGHT'S SH	IORES		Block	k: 0	Lot(s):	52
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit F	ee - Minimum	\$150.00	\$0.00				
Electrical Permit I	Fee	\$150.00	\$0.00				
		\$300.00	\$0.00				

INCLUDE NEW FINISHES, FIATURES, INSTALL NE INODEL INTERIOR I AND ELECTRICAL FOR WASHER AND DRYER, ELECTRICAL PANEL UPGRADE, DECKING, AND WINDOWS

*

Permit

PROJECT NAME: ROBERTS RENOVATIONS SITE ADDRESS: 1927 BAY DR KILL DEVIL HILLS BUILDING JOINT

ISSUED: 05/22/2023

EXPIRES: 11/18/2023

DETAILS

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	19000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

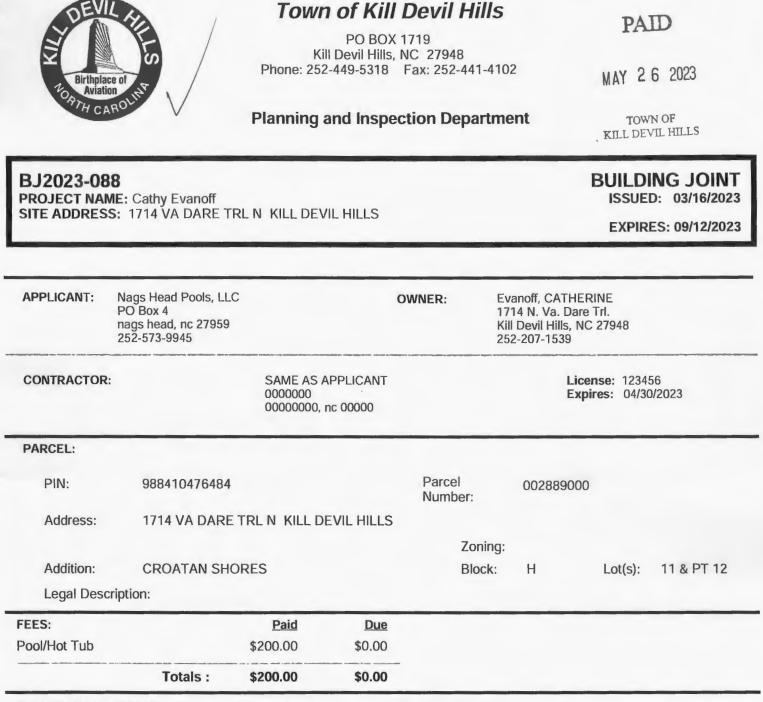
In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

CONDITIONS

* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

* Zoning Final Inspection is required.
* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
* Smoke detectors compliant with R314 required.

Silloke delectors compliant with NS14 required.



PROJECT DESCRIPTION: Install pool, pool deck and code compliant pool barrier

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PROJECT NAME: Cathy Evanoff SITE ADDRESS: 1714 VA DARE TRL N KILL DEVIL HILLS ISSUED: 03/16/2023

EXPIRES: 09/12/2023

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-16390
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	48000.00
LOT COVERAGE	38.00
SURVEYOR NAME AND NUMBER	BILD
CULVERT	N
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Zoning Final
Final	Pool Bonding

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.

* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
* Zoning Final Inspection is required.
* Code compliant pool barrier required per the 2018 NCRC appendix V.



Town of Kill Devil Hills

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

MAY 2 6 2023

Planning and Inspection Department

TOWN OF KILL DEVIL HIT IS

BJ2023-129

PROJECT NAME: WOOD RENOVATIONS SITE ADDRESS: 2015 BAY DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 05/25/2023

EXPIRES: 11/21/2023

APPLICANT:	WOOD, SANDRA 2560 LAKEWOOD (CHESAPEAKE, VA 757-289-9224			OWNER:		VOOD CIRCLE KE, VA 23321	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-000	, XX 00000			License: Unlicens Expires: 12/31/2	
PARCEL:							
PIN:	98740898904	9		Parcel Number:	002011	000	
Address:	2015 BAY DR	KILL DEVIL HILI	LS				
				Zon	ing:		
Addition:	AVALON BEA	CH ANNEX 2 & 3		Bloc	ck: 0	Lot(s):	1041
Legal Desc	cription:						
FEES:		Paid	Due	BUILDING AR	EA:		
Renovation/Ren	model/Relocate	\$189.00	\$0.00	Remodel/Ren	ovation	420 SC	QFT
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$339.00	\$0.00				

AND FLOORING, HVAC CHANGE OUT

Printed by : Jordan Blythe on: 05/25/2023 04:21 PM

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PROJECT NAME: WOOD RENOVATIONS SITE ADDRESS: 2015 BAY DR KILL DEVIL HILLS BUILDING JOINT

ISSUED: 05/25/2023

EXPIRES: 11/21/2023

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	12000.00		
CULVERT	N		
DRIVEWAY INVERT 2	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

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

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

* Zoning Final Inspection is required.

* Smoke detectors compliant with R314 shall be installed.

Y DEVI	HILLS	Ki	PO BOX			PAID MAY 3 1 2023
To Aviation	ROLINA	Planning	and Inspe	ection Departr	nent	TOWN OF KILL DEVIL HILLS
) E: Fiorese Remodel : 101 ASHEVILLE DI	r kill devil	. HILLS			BUILDING JOINT ISSUED: 05/31/2023 EXPIRES: 11/27/2023
APPLICANT:	Sound Design Build LLC 1344 Sound Landing Ro kitty hawk, nc 27949					
BUILDING LIMIT	ED:	Sound Des 1344 Sound kitty hawk,	ign Build LLC d Landing Rd nc 27949			License: 85823 Expires:
PARCEL:						
PIN:	988415539357			Parcel Number:	00401	7000
Address:	101 ASHEVILLE	DR KILL DE	/IL HILLS	Zoning	1.	
Addition:	KITTY HAWK SH	ORES - REV	ISED	Block:		Lot(s): 13 & PT 14
Legal Descr	iption:					
EES:		Paid	Due	BUILDING AREA	.:	
Renovation/Rem	odel/Relocate	\$431.10	\$0.00	Remodel/Renov	vation	958 SQFT

PROJECT DESCRIPTION: replace sub floor, windows, exterior doors, siding, new shower, bathroom finishes, new drywall

PROJECT NAME: Fiorese Remodel SITE ADDRESS: 101 ASHEVILLE DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 05/31/2023

EXPIRES: 11/27/2023

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	8		
STREET SIDE SETBACK	7.5		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	75000.00		
LOT COVERAGE	35.20		
LIVING SPACE (SQFT)	159		
SURVEYOR NAME AND NUMBER	Doug Styons		
CULVERT	N		
DRIVEWAY INVERT 2	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

Framing Rough In Insulation Final

Zoning Final

CONDITIONS

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

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

* 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

BJ2023-108 PROJECT NAME: Larry Cailteux SITE ADDRESS: 1239B VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/27/2023

EXPIRES: 10/24/2023

APPLICANT:	TO THE T CONSTRU 100 Inge Drive Manteo, NC 27954 252-216-8991	UCTION	C	WNER:	Larry Cailteux 601 River Ga chesapeake, 757-546-5111	te Rd. va 23322
GENERAL:		TO THE T 100 Inge D Manteo, NO 252-216-89	27954	ИС		License: 63750 Expires: 12/31/2023
PARCEL:						
PIN:	989309066838	3		Parcel Number:	004882	000
Address:	1239B VA DAR	RE TRL S KILL	DEVIL HILLS			
				Zoni	ng:	
Addition:				Bloc	k: A	Lot(s): 5
Legal Desc	cription:					
EES:		Paid	Due			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PAID

APR 28 2023

TOWN OF KILL DEVIL HILLS

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PROJECT NAME: Larry Cailteux SITE ADDRESS: 1239B VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/27/2023

EXPIRES: 10/24/2023

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	38000.00
CULVERT	Ν
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

In-Slab Plumbing

Slab/Foundation/Piling

Framing

Rough In

Insulation

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.

	Totals :	\$150.00	\$0.00				
	Fee - Minimum	\$150.00	\$0.00				
FEES:		Paid	Due				
Legal Desc	cription:						
Addition:	KILL DEVIL H	ILLS SEC 1		Block	x: 4	Lot(s):	1-8/CONDO- BLDGS 1-2
				Zonii	ng:		
Address:	1110 VA DAR	E TRL S KILL D	EVIL HILLS				
PIN:	989305080055	501		Parcel Number:	027867	7000	
PARCEL:							
BUILDING:				ł		License: 789 Expires: 01/0	
	252-722-2358						
APPLICANT:	Carolina Coastal OB 188 Harbinger Ridge Harbinger, NC 2794	Road	C	OWNER:	1110S. Va. I	NKS BEACH Cl Dare Tr. Is, NC 27948	UB
SITE ADDRES	SS: 1110 VA DARE	TRL S KILL DE\	/IL HILLS			EXPI	RES: 11/13/2023
	ME: Outer Banks Be					ISSU	BUILDING ED: 05/17/2023
AJH CI	AROLINA	Planning	and Inspec	ction Depar	ment		N OF VIL HILLS
Birthpla Zo Aviat	to at at	K Phone: 25	PO BOX ill Devil Hills, i 2-449-5318		4102	MAY 1	7 2023
		Town	n of Kill		5	PF	JID

PROJECT DESCRIPTION: Walkway extensions

. . .

BP2023-125

PROJECT NAME: Outer Banks Beach Club SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS BUILDING ISSUED: 05/17/2023

EXPIRES: 11/13/2023

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Υ	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	OIR	
PURPOSE	Commercial Accessory	
FLOOD ZONE	VE	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	68000.00	
CONSTRUCTION TYPE	V	
SURVEYOR NAME AND NUMBER	Coastal Engineering	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Zoning Final

CONDITIONS

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

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

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

* Zoning Final Inspection is required.

* Follow conditions on CAMA Permit.

VDEVIL	THE	1		PO BOX 1	Devil Hi	IIS	PAID
ž j	L'S	Pho	Kill De	vil Hills, N	C 27948 ax: 252-441	-4102	FAID
ZORTH CAR	OLINP	/					MAY 1 8 2023
	V	Plan	ning and	Inspec	tion Depa	rtment	TOWN OF
EL2023-051 PROJECT NAME	E: Old Town	Hall Water Pum	p Station				ELECTRICAL ISSUED: 05/17/2023
SITE ADDRESS:	: 1634 CRO	ATAN HWY N I		HILLS			EXPIRES: 11/13/2023
APPLICANT:	TOWN OF KI	LL DEVIL HILLS		0	WNER:	TOWN OF	KILL DEVIL HILLS
	P O BOX 171 102 Town Hal KILL DEVIL H					P O BOX 1 102 Town KILL DEVI	
ELECTRICAL - LI	MITED:	470 San	County Cont 8 Deep River ford, NC 273 -201-1236	Rd			License: 35674 Expires: 10/13/2023
PARCEL:							
PIN:	9884103	369451			Parcel Number:	0081	29000
Address:	1634 CF	ROATAN HWY N	KILL DEV	IL HILLS			
						ing:	
Addition: Legal Descri		ISION - NONE			Blo	ck: 0	Lot(s): 0
EES:		Pa	id	Due			
Electrical Permit I	Fee	\$0.0	00	\$0.00			
	Tota	ls : \$0.0	00	\$0.00			
PROJECT DESCR	RIPTION: R	eplace generato	r				
Permit			D	ETAILS			
Name		Value		-			
ZONING DISTR	ICT	C					
PURPOSE		Commercial Repair/Remo	odel				
CONSTRUCTIO	N COST	130438.59					

1 5

EL2023-051 PROJECT NAME: Old Town Hall Water Pump Station SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL ISSUED: 05/17/2023

EXPIRES: 11/13/2023

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: **Contractor or Authorized Agent:** Date:

Y DEV	L HILL	/		PO BOX		ills		I	PAID
Birthple ToRTH C	ace of the second	\checkmark			Fax: 252-44	1-4102		MAY	- 1 2023
ATHC	AROL		Planning	and Inspe	ection Depa	rtment			OWN OF DEVIL HILLS
	ME: Parrot		Storage Buildin IWY S KILL DE					ISSUE	ING JOINT D: 04/26/2023 ES: 10/23/2023
APPLICANT:	Wp808, L PO BOX Kill Devil I		948		OWNER:		X 1636	NC 27948	
BUILDING, REI	MODELING		BILL FROE PO Box 333 Kill Devil Hi 207-7999					cense: 6223 xpires: 12/3	
GENERAL:			Self UNKNOWN UNKNOWN 000-000-000	1, XX 00000				icense: Unlic xpires: 12/3	
PARCEL:									
PIN:	9883	08882361			Parcel Number:	00)43520	00	
Address:	808	CROATAN	HWYS KILL	DEVIL HILLS					
						ning:			0705705
Addition:	KILL	DEVIL HI	LLS REALTY CO	ORP	Blo	ock: 1	1	Lot(s):	6-7 & PT 3-5 & PT 8
Legal Des	cription:								
EES:			Paid	Due	BUILDING A	REA:			
	cture		\$360.00	\$0.00	Commercial	Accessor	У	800	Sq. Ft.
Accessory Stru					Structure				

PROJECT DESCRIPTION: construct detached 800 square foot storage building at rear of property

PROJECT NAME: Parrott Bay New Storage Building SITE ADDRESS: 808 CROATAN HWY S KILL DEVIL HILLS

EXPIRES: 10/23/2023

	DET	AILS
Permit		
Name	Value	
NING DISTRICT	С	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
HEALTH DEPARTMENT PERMIT #	S22-17039	
# PARKING SPACES/BEDROOM	33	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	Х	
BASE FLOOD ELEVATION	8	
Proposed First Floor Elevation	11.00	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Commercial Accessory	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	50000.00	
LOT COVERAGE	55.50	
STORAGE (SQFT)	800	
SURVEYOR NAME AND NUMBER	Michael Strader	
ENGINEER AND LICENSE NUMBER	Ray Pate 13018	
CULVERT	Ν	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	Storage	

REQUIRED INSPECTIONS

In-Slab Plumbing
Slab/Foundation/Piling
Framing
Rough In

Insulation Final Zoning Final

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							
)7 ME: Melvin Addition SS: 512 COPLEY DR	R KILL DEVIL HII	LS			BUILDING JOINT ISSUED: 05/03/2023 EXPIRES: 10/30/2023	
APPLICANT:	COASTAL NC HOLE PO BOX 1446 kitty hawk, nc 27949 252-573-9547	DINGS, LLC		OWNER:	Melvin, Matthe PO BOX 1083 Kill Devil Hills,	3	
BUILDING LIM	ITED:	COASTAL PO BOX 14 kitty hawk, r 252-573-95	ac 27949	SS, LLC		License: 79309 Expires: 12/31/2023	
PARCEL:							
PIN:	988316823868	3		Parcel Number:	0050330	000	
Address:	512 COPLEY	DR KILL DEVIL	HILLS				
				Zoni	ng:		
Addition: Legal Des		S TRACT 3 SEC	2	Bloc	k: I	Lot(s): 12	
EES:		Paid	Due	BUILDING ARI	EA:		
Open Deck Fee	e	\$150.00	\$0.00	Covered Porc		48 SQFT	
Covered Porch	Residential	\$36.00	\$0.00	Open Decks		1 EA	
Res. Building F	Permit Fee	\$408.00	\$0.00	Residential H	eated Space	544 sq. Ft.	
allen i Lindriender is piele vir siedene	Totals :	\$594.00	\$0.00	- (.75)			
PROJECT DES	Totals :	\$594.00 om addition to re	\$0.00	~ (.75)	•	ravel driveway, 3 total	

PAID

MAY - 9 2023

TOWN OF KILL DEVIL HILLS

Printed by : Marty Shaw on: 05/03/2023 09:51 AM

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4

PROJECT NAME: Melvin Addition SITE ADDRESS: 512 COPLEY DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 05/03/2023

EXPIRES: 10/30/2023

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	125000.00
LOT COVERAGE	33.00
LIVING SPACE (SQFT)	544
COVERED PORCHES/DECKS (SQFT)	48
OPEN DECK (SQFT)	104
TOTAL SQUARE FOOTAGE	696
SURVEYOR NAME AND NUMBER	William Yetzer
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

1						
N'DEV	L HILL		PO BOX		ls	PAID
Birthpla 20 Aviat	ion R		ill Devil Hills 2 -4 49-5318	, NC 27948 Fax: 252-441-	4102	MAY 1 0 2023
MTH CI	AROL	Planning a	and Inspe	ection Depar	tment	TOWN OF KILL DEVIL HILLS
	6 ME: First Flight Retre S: 815 S Va Dare T					BUILDING JOINT ISSUED: 05/10/2023 EXPIRES: 11/06/2023
APPLICANT:	FIRST FLIGHT RETI 815 South Virginia D Kill Devil Hills, NC 27	are Trail		OWNER:	815 South	GHT RETREAT Virginia Dare Trail Iills, NC 27948
CONTRACTOR	: Dan Osman P. O. Box 7403 Kill Devil Hillsl, NC 2 202-4599	7948				
GENERAL BUI	LDING:		403 illsl, NC 27948	8		License: 76259 Expires: 12/31/2023
		252-202-45	99			
PARCEL:		252-202-45	999			
PARCEL: PIN:	988308994203		999	Parcel Number:		
PIN: Address:		300		Number: Zoni	-	
PIN: Address: Addition:	815 S Va Dare	300 Trl Kill Devil Hil	lls	Number:	-	Lot(s):
PIN: Address:	815 S Va Dare	300	lls	Number: Zoni	-	Lot(s):
PIN: Address: Addition: Legal Desc FEES:	815 S Va Dare	300 Trl Kill Devil Hil t Retreat Condos <u>Paid</u>	lls 3 <u>Due</u>	Number: Zoni	k:	Lot(s):
PIN: Address: Addition:	815 S Va Dare	300 Trl Kill Devil Hil t Retreat Condos	lls	Number: Zoni Bloc	k: E A:	Lot(s): 320 Sq. Ft.

PROJECT NAME: First Flight Retreat Pool SITE ADDRESS: 815 S Va Dare Trl Kill Devil Hills BUILDING JOINT ISSUED: 05/10/2023

EXPIRES: 11/06/2023

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	OIR	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	CAMA	
SIDE YARD SETBACK	10	
HEALTH DEPARTMENT PERMIT #	S22-17471	
# PARKING SPACES/BEDROOM	74	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
FLOOD ZONE	X	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Commercial Addition	
CONSTRUCTION COST	300000.00	
LOT COVERAGE	48.10	
SURVEYOR NAME AND NUMBER	Cathleen Saunders	
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540	
CULVERT	N	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	Residential	

REQUIRED INSPECTIONS

In-Slab Plumbing
Slab/Foundation/Piling
Framing
Rough In

Insulation

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.

Birthplace Birthplace Aviation	a cump	Ki Phone: 252	PO BO) II Devil Hills 2-449-5318	I Devil H x 1719 s, NC 27948 Fax: 252-44 ection Depa	1-4102		PAI	2023 OF
BJ2023-120 PROJECT NAM SITE ADDRESS		LL DEVIL HIL	LS				ISSUE	ING JOINT D: 05/12/2023 ES: 11/08/2023
APPLICANT:	Setser, Trish 307 Burns Drive Kill Devil Hills, NC 27948 304-887-2648	3		OWNER:		rıs Drive I Hills, NC	27948	
CONTRACTOR:		SAME AS O UNKNOWN UNKNOWN					nse: Same res: 12/3 ⁻	e as Owner 1/2023
PARCEL:								1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -
PIN:	988316941013			Parcel Number:	008	8465000		
Address:	307 BURNS DR	KILL DEVIL H	IILLS	70	ning:			
Addition:	OCEAN ACRES	RACT 3 SEC	C 1		ock: F		Lot(s):	7
Addition.	iption:							
Legal Descr								
Legal Descr		Paid	Due					
		<u>Paid</u> \$200.00	<u>Due</u> \$0.00					

PROJECT DESCRIPTION: Inground concrete pool

PROJECT NAME: Trish Setser SITE ADDRESS: 307 BURNS DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 05/12/2023

EXPIRES: 11/08/2023

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	Υ
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	65000.00
SURVEYOR NAME AND NUMBER	Styons Surveying Services
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Pool Bonding

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.

* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.

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

* Zoning Final Inspection is required.

-					NO		
DEV	LA	Town	of Kill	Devil Hil	ls		
Ĭ	5		PO BOX II Devil Hills, -449-5318		4102	P	AID .
TORTH CH	te of the second	1 1016. 202		1 47. 202 -111	1102	MAY	1 7 2023
TH CF	AROU	Planning a	and Inspe	ction Depar	tment	***	
							WN OF EVIL HILLS
	ME: Imperial Investme						ING JOINT D: 05/16/2023
SHE ADDRES	S: 1316 VA DARE TR	L N KILL DEV				EXPIR	ES: 11/12/202
APPLICANT:	HASKETT, JEFFREY F P.O. Box 1024 4711 Lindberg Ave. Kitty Hawk, NC 27949 267-1777	1.		OWNER:	Imperial Inve 307 woodard kitty hawk, no		LC
GENERAL:		HASKETT, P.O. Box10 4711 Lindbe Kitty Hawk, 267-1777	erg Ave.			License: 1464 Expires:	5
PARCEL:							
PIN:	988415640765			Parcel Number:	004041	000	
Address:	1316 VA DARE	TRL N KILL DI	EVIL HILLS				
				Zoni	ng:		
Addition:				Bloc	k: 0	Lot(s):	PAR A
Legal Desc	cription:						
EES:	-	Paid	Due	BUILDING ARE	EA:		
Renovation/Ren	model/Relocate	\$756.00	\$0.00	Remodel/Ren	ovation	1680	SQFT
	Totals :	\$756.00	\$0.00				

1

PROJECT DESCRIPTION: Replace paneling/flooring/kitchen/bathroom/paint Apts. 1&2

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PROJECT NAME: Imperial Investments SITE ADDRESS: 1316 VA DARE TRL N KILL DEVIL HILLS BUILDING JOINT ISSUED: 05/16/2023

EXPIRES: 11/12/2023

DETAILS Permit Name Value **ZONING DISTRICT** RL CAMA PERMIT N CAMA EXEMPTION N FLOOD ZONE Х SUBSTANTIAL NO **IMPROVEMENT** PURPOSE Residential Repair/Remodel V CONSTRUCTION TYPE CONSTRUCTION COST 50000.00 CULVERT Ν **DRIVEWAY INVERT 2** N OCCUPANCY TYPE Residential **REQUIRED INSPECTIONS**

In-Slab Plumbing Slab/Foundation/Piling Framing Rough In Insulation

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.

Birthplace o Aviation	Still S A	Ki Phone: 252	PO BOX 1 II Devil Hills, N 2-449-5318		102			
BJ2023-122 PROJECT NAME SITE ADDRESS:			EVIL HILLS			В	ISSUE	NG JOINT D: 05/16/2023 ES: 11/12/2023
P	nfinity Contractors, I 20 BOX 1627 3ELMONT, NC 2801		C	WNER:	7-ELEVEN 5300 Shav Alexandria 703-658-7	vnee Dr. , VA 0000		
	DING:	Infinity Con PO BOX 16 BELMONT,				Licens Expire	e: L.781 s:	09
PARCEL:								
PIN:	989309053045	5		Parcel Number:	0123	74000		
Address:	1601 CROATA	N HWY S KILL	DEVIL HILLS					
				Zonir	ng:			
Addition:	OCEAN ACRE	S INC		Block	k: 0		Lot(s):	5-10
Legal Descrip	tion:							
FEES:		Paid	Due					
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: interior finishes remodel, new tile, paint, wall repair, no change to footprint or interior layout

on-line

PROJECT NAME: 7 Eleven Remodel SITE ADDRESS: 1601 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT ISSUED: 05/16/2023

EXPIRES: 11/12/2023

DETAILS

Permit	
Name	Value
ZONING DISTRICT	С
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	65000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Merchantile

REQUIRED INSPECTIONS

Final

Mechanical

Electrical

Indi

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.

* Trade affidavits required for electrical and mechanical work, all work must be performed by NC Licensed Contractors.

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: 05 / 17 / 2023

Printed by : CTHUMAN on: 05/16/2023 12:51 PM

Birthplac Zogrid CA	ROLINA	K Phone: 25	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				PAID MAY 2 6 2023 TOWN OF KILL DEVIL HILLS		
	9 IE: Salazar Addition 3: 1005 NINTH AVI		ILLS			1	ISSUE	NG JOINT D: 04/28/2023 ES: 10/25/2023	
APPLICANT:	Salazar, Nemesio OWNEI PO BOX 2183 Kill Devil Hills, NC 27948				Salazar, Nemesio PO BOX 2183 Kill Devil Hills, NC 27948				
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	N, XX 00000				nse: Unlice res: 12/31		
PARCEL:									
PIN:	988311659745	i		Parcel Number:	0045	90000			
Address:	1005 NINTH A	VE KILL DEVIL	HILLS						
				Zonin	g:				
Addition:	KILL DEVIL HI	LLS REALTY CO	ORP	Block	51		Lot(s):	8	
Legal Descr	iption:								
FEES:		Paid	Due	BUILDING AREA	A:				
Open Deck Fee Renovation/Remodel/Relocate		\$150.00	\$0.00	Remodel/Renor	vation		398 \$	SQFT	
		\$179.10	\$0.00	Open Decks		1 EA			
	Totals :	\$329.10	\$0.00						

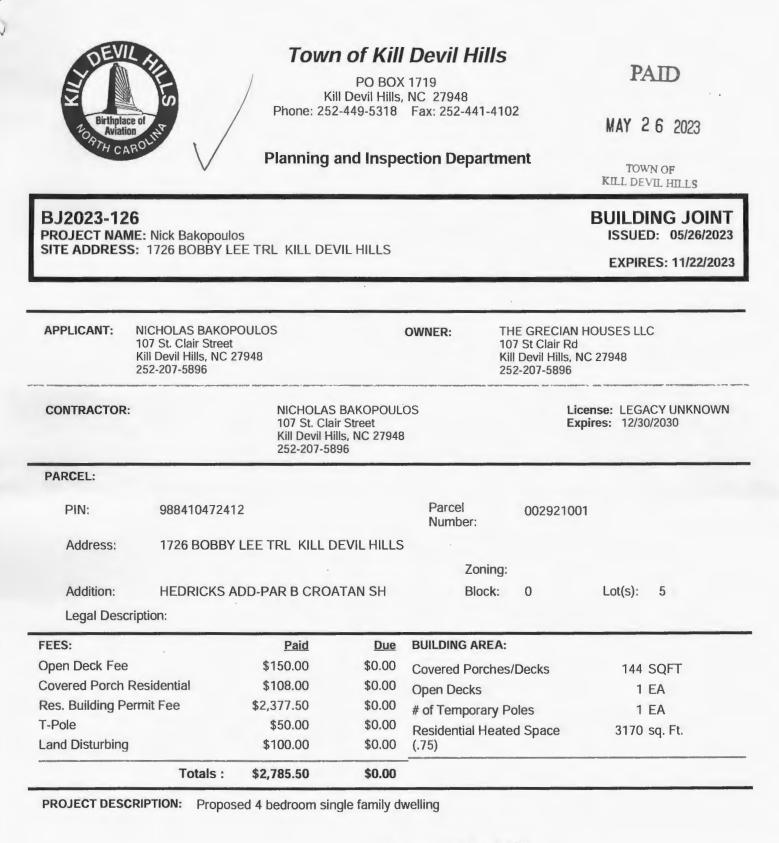
PROJECT DESCRIPTION: replace front and side deck and rear stairs to same footprint, add 398 square ft of living space between two trailers, add new gravel driveway

PROJECT NAME: Salazar Addition SITE ADDRESS: 1005 NINTH AVE KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/28/2023

EXPIRES: 10/25/2023

		DETAILS		
Permit				
Name	Value			
ZONING DISTRICT	LI-2			
FRONT YARD SETBACK	30			
REAR YARD SETBACK	20% Depth >30			
SIDE YARD SETBACK	10			
STREET SIDE SETBACK	15			
HEALTH DEPARTMENT PERMIT #	S22-15990			
# PARKING SPACES/BEDROOM	4			
CAMA PERMIT	N			
CAMA EXEMPTION	N			
FLOOD ZONE	Х			
BASE FLOOD ELEVATION	8			
SUBSTANTIAL IMPROVEMENT	NO			
PURPOSE	Residential Addition			
CONSTRUCTION TYPE	V			
CONSTRUCTION COST	20000.00			
LOT COVERAGE	34.00			
LIVING SPACE (SQFT)	398			
OPEN DECK (SQFT)	204			
TOTAL SQUARE FOOTAGE	602			
SURVEYOR NAME AND NUMBER	Marty Barnette			
CULVERT	N			
DRIVEWAY INVERT 2	N			
OCCUPANCY TYPE	One & Two Family Dwelling			



3

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PROJECT NAME: Nick Bakopoulos SITE ADDRESS: 1726 BOBBY LEE TRL KILL DEVIL HILLS

BUILDING JOINT ISSUED: 05/26/2023

EXPIRES: 11/22/2023

	D	ETAILS	
Permit			
Name	Value	-	
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	30		
SIDE YARD SETBACK	8		
# PARKING SPACES/BEDROOM	4		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	YES		
PURPOSE	Residential New		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	350000.00		
LOT COVERAGE	39.70		
LIVING SPACE (SQFT)	3170		
COVERED PORCHES/DECKS (SQFT)	144		
OPEN DECK (SQFT)	144		
TOTAL SQUARE FOOTAGE	3458		
ENGINEER AND LICENSE NUMBER	JOHN DELUCIA 16759		
CULVERT	N		
ROLL OUT CAN	2		
DRIVEWAY INVERT 2	Υ		
OCCUPANCY TYPE	One & Two Family Dwelling		

DEV	LAD /	Towr	of Kill	Devil Hil	ls		
KIL	LS		PO BOX Il Devil Hills, 2-449-5318		-4102	P	AID
TORTH C	AROLINA					MAR 3	0 2023
		Planning	and Inspe	ction Depar	tment		N OF
	63 ME: Boyd Stair Repla SS: 1304 Elizabeth S						BUILDING ED: 03/21/2023 RES: 09/17/2023
APPLICANT:	BOYD, TROY 1304 Elizabeth St Kill Devil Hills, NC 27	7948		OWNER:	BOYD, TRO 1304 Elizab Kill Devil Hi	DY leth St lls, NC 27948	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	I, XX 00000	der men en de la der der de senere en de		License: Unl Expires: 12/	
PARCEL:							
PIN:	988312850149	Э		Parcel Number:	02735	4001	
Address:	1304 Elizabeth	n St. Kill Devil Hi	lls				
				Zoni	ing:		
Addition:	KILL DEVIL BI	EACH EXTENDE	ED	Bloc	sk: 1	Lot(s)	: 2
Legal Des	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace existing stairs and handrails to same footprint

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

EXPIRES: 09/17/2023

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
RONT YARD SETBACK	30		
DE YARD SETBACK	8		
EAR YARD SETBACK	20% Depth >30		
LOOD ZONE	Х		
INAL ELEVATION ERTIFICATE	Ν		
ONSTRUCTION COST	1200.00		
SURVEYOR NAME AND	Jason Mizelle		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

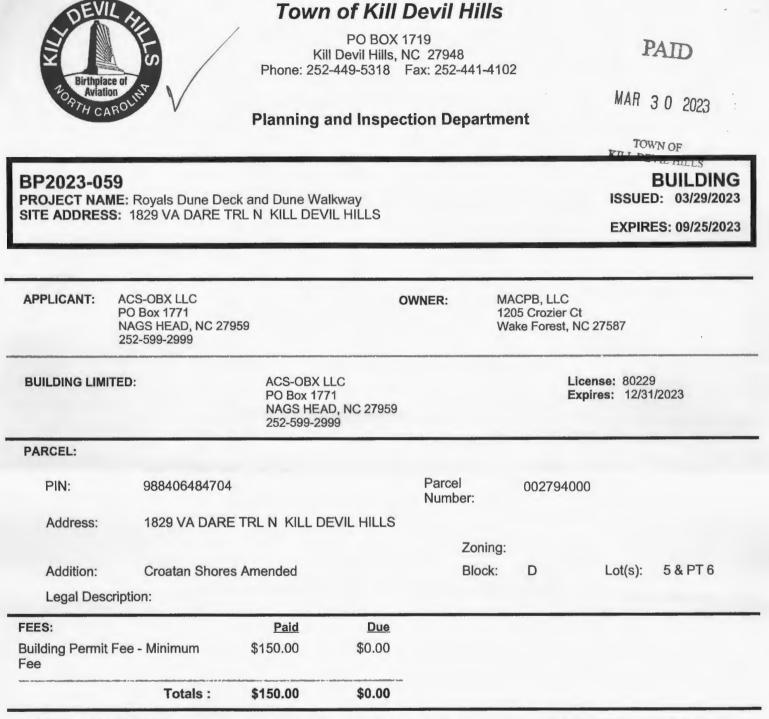
Zoning Final

Final

CONDITIONS

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

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



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

3

PROJECT NAME: Royals Dune Deck and Dune Walkway SITE ADDRESS: 1829 VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 03/29/2023

EXPIRES: 09/25/2023

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

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Zoning Final

CONDITIONS

* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
 * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

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

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

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

MAR 3 0 2023

BP2023-073

*

PROJECT NAME: JACKSON DECK REPAIR SITE ADDRESS: 411 WALLACE ST KILL DEVIL HILLS ISSUED: 03/30/2023

BUILDING

EXPIRES: 09/26/2023

78 S	ACKSON, MICHAE 810 CRITTENDEN UFFOLK, VA 23432 57-339-0886	RD	C	OWNER:	IICHAEL ENDEN RD A 23432 3			
UNLICENSED BUILDER:		1005 RIVE	HAPPY HOUSE HOME IMPROVEMENTS 1005 RIVERSIDE AVE ELIZABETH CITY, NC 27909 252-339-0886			S License: XXXXXX Expires:		
PARCEL:								
PIN:	987516835408	3		Parcel Number:	000265	000		
Address:	411 WALLACE	ST KILL DEVI	L HILLS					
				Zonin	g:			
Addition:	ORVILLE BEA	CH WEST		Block	: 0	Lot(s): 1	79	
Legal Descrip	tion:							
FEES:		Paid	Due					
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00					
e a sapagaalharika iki dalifarkahara-ainu shu sabiidi	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: REPLACE DECKING, RAILING, AND STRINGERS

Dormit

15

PROJECT NAME: JACKSON DECK REPAIR SITE ADDRESS: 411 WALLACE ST KILL DEVIL HILLS BUILDING ISSUED: 03/30/2023

EXPIRES: 09/26/2023

DETAILS

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

Contractor or Authorized Agent:

Date: 3-30-23

Building Permit Fee	t Fee - Minimum	\$150.00	\$0.00					
FEES:		Paid	Due					
Legal Des	cription:							
Addition:		SHORES - REV	ISED	Blo	ck:	39	Lot(s):	15 & PT 14
					ning:			
Address:	105 PINEHUR	ST AVE KILL D	EVIL HILLS					
PIN:	988419712143	3		Parcel Number:	(00391000	0	
PARCEL:								
UNLICENSED	- REMODELING:	RKM Prope 180 Charles GRANDY, I		е			ense: 1234 pires:	5
APPLICANT:	Scribner, Jay 26 Paddock LN HAMPTON, VA 2366	9	0	WNER:	26 P	ner, Jay addock LN PTON, VA		
	ME: Schribner Deck a SS: 105 PINEHURST							D: 03/29/2023 ES: 09/25/2023
BP2023-0							KILL DEVI	
LOATH C.	AROL	Planning	and Inspec	tion Depa	rtmen	t .	MAR 29	
Aviat	ace of st	Ki	PO BOX 1 PO BOX 1 Il Devil Hills, N 2-449-5318	719 IC 27948			PAI	D

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

Dennald

BP2023-067 PROJECT NAME: Schribner Deck and Stair Rebuild SITE ADDRESS: 105 PINEHURST AVE KILL DEVIL HILLS

BUILDING ISSUED: 03/29/2023

EXPIRES: 09/25/2023

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	7800.00
LOT COVERAGE	27.95
SURVEYOR NAME AND NUMBER	Carlos F Gomex
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

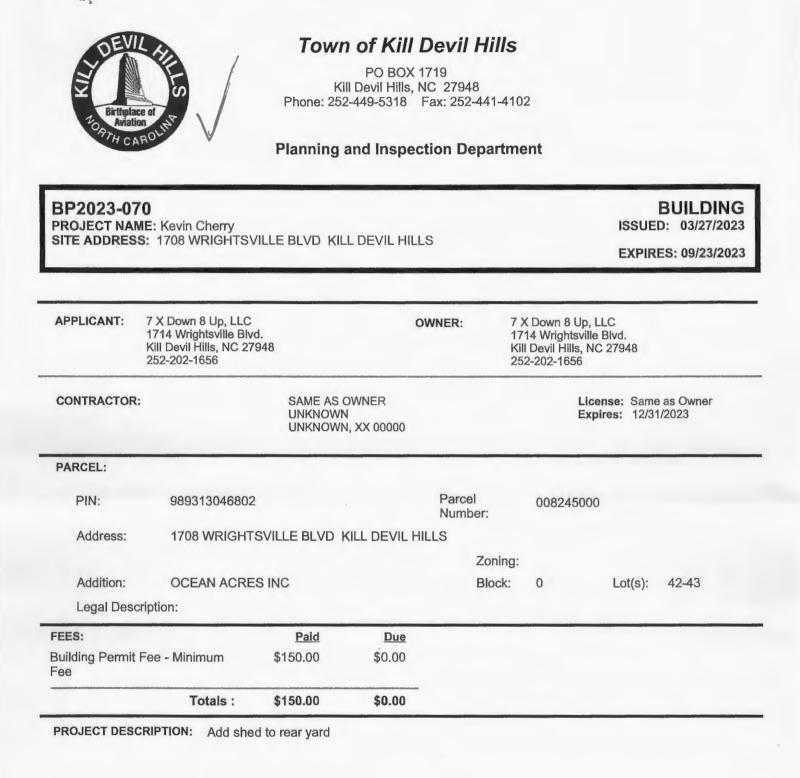
Zoning Final

Final

Slab/Foundation/Piling

CONDITIONS

* This permit becomes null and void if work or construction authorized is not commenced within 6 months or it construction	
or work is suspended for a period of 12 months at any time after work has started.	
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.	
* Zoning Final Inspection is required.	



PAID

MAR 2 7 2023

TOWN OF KILL DEVIL HILLS

2

PROJECT NAME: Kevin Cherry SITE ADDRESS: 1708 WRIGHTSVILLE BLVD KILL DEVIL HILLS BUILDING ISSUED: 03/27/2023

EXPIRES: 09/23/2023

DETAILS

Value
Ν
N
С
Residential Accessory
30
8
20% Depth >30
S22-16978
Х
Ν
4385.00
Styons
One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

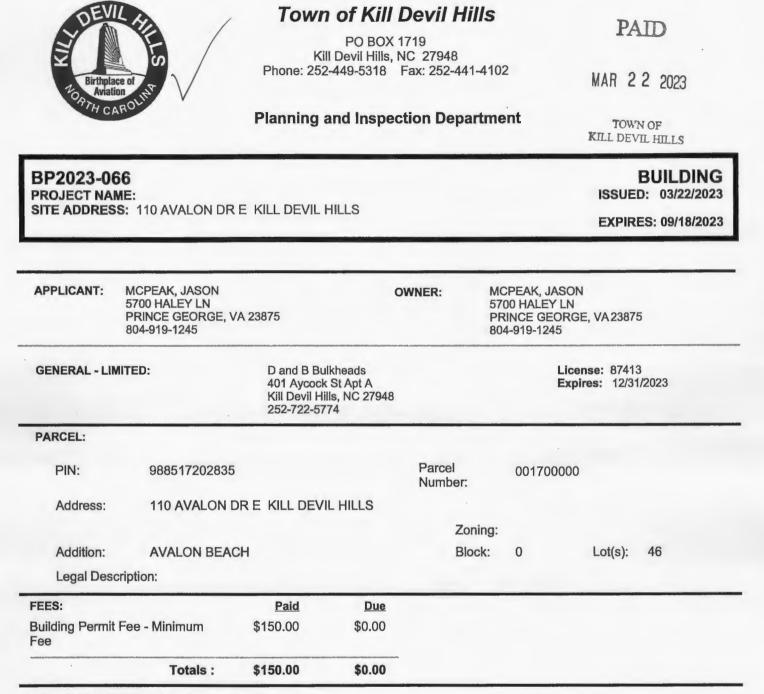
CONDITIONS

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

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

- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

* Zoning Final Inspection is required.



PROJECT DESCRIPTION: Replace one house piling

EXPIRES: 09/18/2023

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

REQUIRED INSPECTIONS

Final

Slab/Foundation/Piling

CONDITIONS

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

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. Marty Shaw

Issued By:

Lam Milton

Contractor or Authorized Agent:

Date: 03 / 22 / 2023



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-064

PROJECT NAME: Beveridge Dune Walkover Rebuild SITE ADDRESS: 1011 VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 03/22/2023

EXPIRES: 09/18/2023

APPLICANT:	Josh Beveridge 207 Soundview Drive Kill Devil Hills, NC 27		C	WNER:	BEVERIDGE, P. O. BOX 86 KESWICK, V/ 703-987-8016	22947	
UNLICENSED	- REMODELING:	Josh Bever 207 Sound Kill Devil H	idge view Drive ills, NC 27948			License: 1234 Expires:	5
PARCEL:					· · · · · · · · · · · · · · · · · · ·		
PIN:	988415732472	2		Parcel Number:	0037050	001	
Address:	1011 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zoni	ing:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Bloc	ik: 11	Lot(s):	2
Legal Des	scription:						
FEES:		Paid	Due				
Building Permi	it Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace existing dune walkover to same footprint

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MAR 2 2 2023

TOWN OF KILL DEVIL HILLS PROJECT NAME: Beveridge Dune Walkover Rebuild SITE ADDRESS: 1011 VA DARE TRL N KILL DEVIL HILLS ISSUED: 03/22/2023

EXPIRES: 09/18/2023

DETAILS

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Property and available ava	ce of nor	Ki Phone: 252	PO BOX 7 II Devil Hills, 1 2-449-5318		102		P. L.V MAR 2 2 2023 TOV/N OF CIL DEV ELLS
	51 Me: Manganello S: 1401 4-a va dai						BUILDING SUED: 03/17/2023 XPIRES: 09/13/2023
APPLICANT:	MANGANELLO, ALB 252A MILLERTOWN BLOOMSBURG, PA	ROAD	C	OWNER:	252A MILL	ELLO, ALBEI ERTOWN R BURG, PA 17	OAD
BUILDING UNL	IMITED:	Gibbs, Clar Po Box 238 Manteo, NO	37			License: Expires:	76990 12/31/2023
PARCEL:							
PIN:	988411654107	10		Parcel Number:	0281	24000	
Address:	1401 4-A VA E	ARE TRL N KIL	L DEVIL HILI	LS			
				Zonin	g:		
Addition:				Block	: 0	Lo	t(s): UNIT 4-A
Legal Desc	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
No chadhlandadh maraidh br isl van gradh	Totals :	\$150.00	\$0.00				

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

4

2

3

4

PROJECT NAME: MANGANELLO STAIR REPLACEMENT **SITE ADDRESS:** 1401 4-A VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 03/17/2023

EXPIRES: 09/13/2023

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	OIR	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	12	
REAR YARD SETBACK	CAMA	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	11.00	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	6130.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning Final

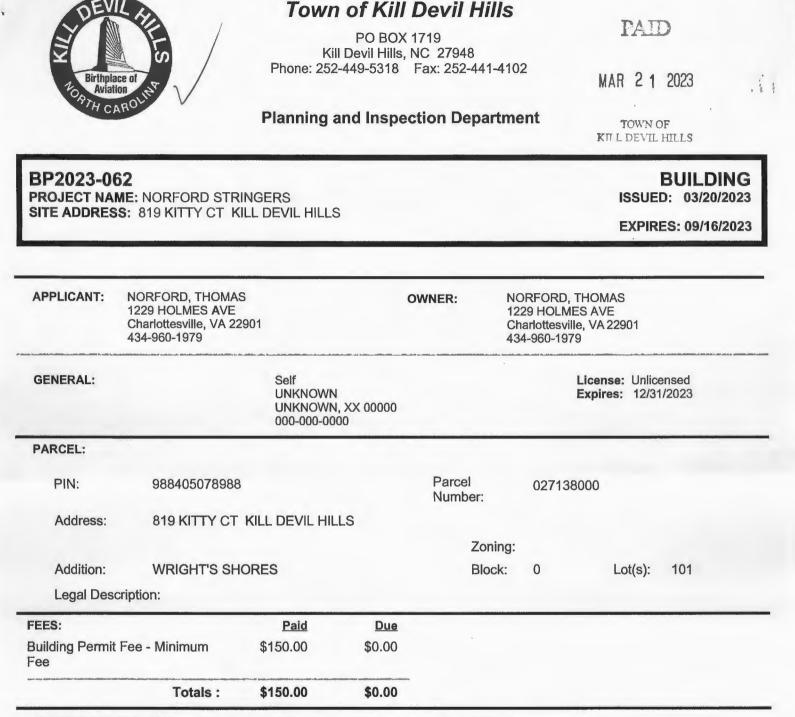
Final

Slab/Foundation/Piling

CONDITIONS

*	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r work is suspended for a period of 12 months at any time after work has started.
	Pilings shall have 16' embedment.

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



PROJECT DESCRIPTION: REPLACE STAIR STINGERS, RAILINGS TO REMAIN

3

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

EXPIRES: 09/16/2023

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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:
0 1 0 2-71-72
Contractor or Authorized Agent: The mon Make Date: 3-21-23



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-058

PROJECT NAME: Bailey Front Deck and Stair Rebuild SITE ADDRESS: 1716 SUNSET AVE KILL DEVIL HILLS BUILDING ISSUED: 03/16/2023

EXPIRES: 09/12/2023

APPLICANT:	BAILEY, DIANA B BOX 2041 KILL DEVIL HILLS, M	NC 27948		OWNER:	BAILEY, D BOX 2041 KILL DEVI	IANA B L HILLS, NC 2794	8
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	00000 XX 0			License: Unlic Expires: 12/3	
PARCEL:							
PIN:	988409057756	5		Parcel Number:	0026	19013	
Address:	1716 SUNSET	AVE KILL DEV	IL HILLS				
				Zor	ning:		
Addition:	CROATAN SH	ORES SUBDIV		Blo	ck: 20	Lot(s):	13
Legal Dese	cription:						
FEES:	· · · · · · · · · · · · · · · · · · ·	Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
drig + 4 of feld well-species of a rest up and appears dates	Totals :	\$150.00	\$0.00				

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

PAID

MAR 1 7 2023

TOWN OF KILL DEVIL HILLS

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

BUILDING

ISSUED: 03/16/2023

EXPIRES: 09/12/2023

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-060 PROJECT NAME: SITE ADDRESS: 2004 SMITHFIELD

BUILDING ISSUED: 03/15/2023

SITE ADDRESS: 2004 SMITHFIELD ST KILL DEVIL HILLS

EXPIRES: 09/11/2023

2	BERNARD, L LEON 217 NORTH BLAKE F NORFOLK, VA 23505	ROAD	C		Bernard, L 217 North Norfolk, V	BLAKE ROAD	
RESIDENTIAL - L	IMITED:	BARRETT PO BOX nags head, 252-261-22	448 nc 27959	Emanuelson & D		License: 87233 Expires: 12/31/2023	
PARCEL:							
PIN:	988405186922			Parcel Number:	001417	000	
Address:	2004 SMITHFII	ELD ST KILL D	EVIL HILLS				
				Zoning	g:		
Addition:	AVALON BEAC	CH ANNEX 2 & 3	3	Block:	0	Lot(s): 1277	
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit Fe	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace 12 8x8 pilings in same location

pd. on line

Printed by : Marty Shaw on: 03/15/2023 01:29 PM

Page 1 of 2

BP2023-060 PROJECT NAME:

SITE ADDRESS: 2004 SMITHFIELD ST KILL DEVIL HILLS

BUILDING ISSUED: 03/15/2023

EXPIRES: 09/11/2023

DETAILS

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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: Lambrunnen

Date: 03 / 15 / 2023

Birthplan NogTH CA		k Phone: 25	n of Kill Do PO BOX 171 (ill Devil Hills, NC 52-449-5318 Fa and Inspectio	19 27948 x: 252-441-4	102	PAID MAR 1 3 2023
		5				TOWN OF KILL DEVIL HILLS
BP2023-05						BUILDING
PROJECT NAM	E: Seagate North Sh 3105 CROATAN H	opping Cente WY N KILL D	r re-roof project DEVIL HILLS			ISSUED: 03/08/2023
						EXPIRES: 09/04/2023
APPLICANT:	JOHN HIGH 203 Forest Hill Ave. Rocky Mount, NC 2780	1	ow	NER:	JOHN HIG 203 Fores Rocky Mor	
GENERAL BUIL	DING INTERMEDIATE:	673 Old W	ROOFING AND RE /harf Road 9, NC 27981 269	MODELING,	INC.	License: 32504 Expires: 12/31/2023
PARCEL:						
PIN:	988513035596			Parcel Number:	0029	91000
Address:	3105 CROATAN	HWY N KILI	DEVIL HILLS			
				Zonir	-	
Addition:	SUBDIVISION -	NONE		Block	c: 0	Lot(s): 0
Legal Desc	nption:					· · · · · · · · · · · · · · · · · · ·
EES:	Fee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00			
ee	ree - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESC	RIPTION: Re roof 2	portions with	single ply membra	ane roof mat	terial per s	upplied details and specs.
			DETAILS			
Permit	topic -			P		PAID
Name	Valu	e			Y	3/13/23 04
CAMA PERMI					C	K# 81094
CAMA EXEMP FINAL ELEVA CERTIFICATE	TION N	P	155-11:	3.07	200	1
	on: 03/08/2023 02:22 PM	t	# 11.	d 202	0.	X

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

BUILDING ISSUED: 03/08/2023

EXPIRES: 09/04/2023

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

03/09/2023 Date:

Ĭ	Es /		PO BOX		1102	PA	ND
LORTH CA	POLINE V	F1006, 232	-449-5510	1 ax. 232-441-	4102	MAR 1	3 2023
H CA		Planning	and Inspe	ection Depart	ment	TOW KILL DEV	N OF
BP2023-05 PROJECT NAM SITE ADDRESS	7 ME: Office Space Re S: 2600 CROATAN	emodel HWYN KILL DI	EVIL HILLS				BUILDING D: 03/13/2023 ES: 09/09/2023
APPLICANT:	Regan, Martin 2600 N. Croatan Hig Kill Devil Hills, NC 27 571-246-1213	hway 7948		OWNER:	2mugsies PO BOX 2 kitty hawk,	391 .	
UNLICENSED B	BUILDER:	2600 N CR	OATAN HWY IIs, NC 27948		GEMENT	License: 1234 Expires:	5
PARCEL:							
PIN:	988517111827	7		Parcel Number:	0284	26000	
Address:	2600 CROATA	N HWY N KILL	DEVIL HILL	S			
				Zonir	ng:		
Addition:	VIRGINIA DAR	RE SHORES		Block	k: 20	Lot(s):	38-40 PT 37
Legal Desc	ription:						
FEES:		Paid	Due	BUILDING ARE	A:		
Renovation/Ren	nodel/Relocate	\$241.20	\$0.00	Remodel/Rend	ovation	536	SQFT

Town of Kill Devil Hills

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

DEV

BP2023-057 PROJECT NAME: Office Space Remodel SITE ADDRESS: 2600 CROATAN HWY N KILL DEVIL HILLS

BUILDING ISSUED: 03/13/2023

EXPIRES: 09/09/2023

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

REQUIRED INSPECTIONS

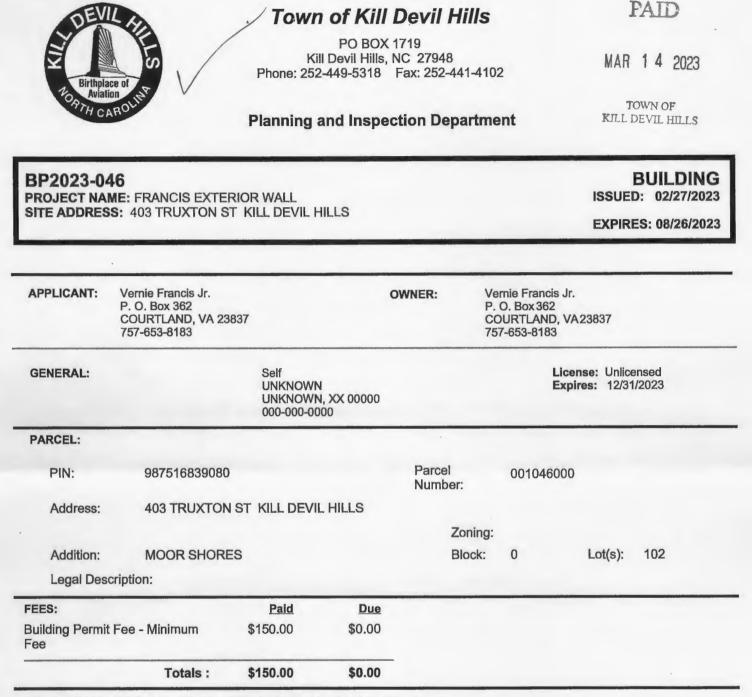
Rough In Framing Slab/Foundation/Piling Zoning Final

Final

CONDITIONS

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

I hereby certify that I have read and examined this application and know the All provisions of Laws and Ordinances governing this type of work will be of specified herein or not. The granting of a permit does not presume to give a the provisions of any other state/local law regulating construction or the pe	complied with whether authority to violate or cancel
Issued By: Motor	
Contractor or Authorized Agent: Lawan Peger	Date: 03-13-2023



PROJECT DESCRIPTION: REMOVE EXTERIOR DOOR AND FILL IN

PROJECT NAME: FRANCIS EXTERIOR WALL SITE ADDRESS: 403 TRUXTON ST KILL DEVIL HILLS BUILDING ISSUED: 02/27/2023

EXPIRES: 08/26/2023

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

REQUIRED INSPECTIONS

Zoning Final Final Framing

Insulation

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.

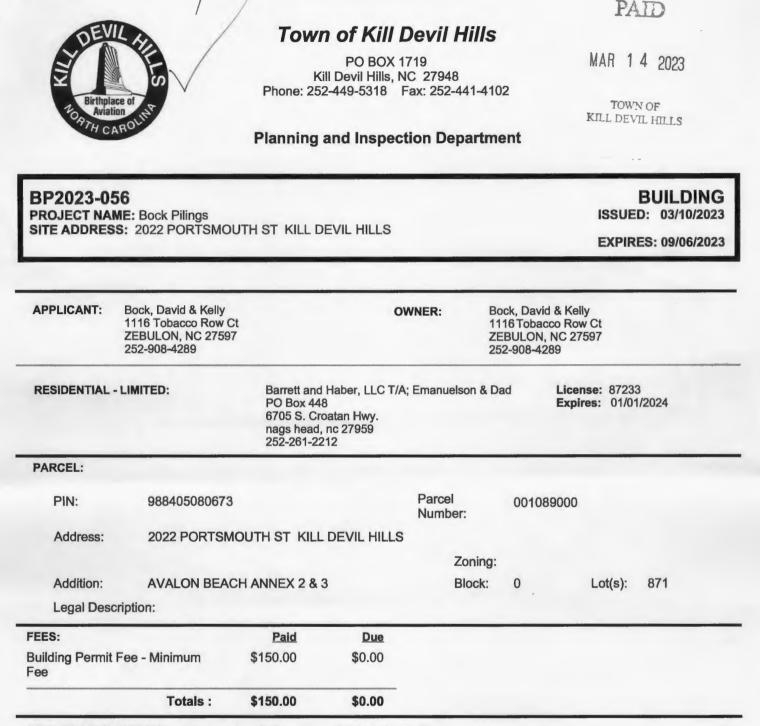
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Contractor or Authorized Agent:

Date: 02 / 27 / 2023

Printed by : Jordan Blythe on: 02/27/2023 02:36 PM

Page 2 of 2



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

2

BP2023-056 **PROJECT NAME: Bock Pilings** SITE ADDRESS: 2022 PORTSMOUTH ST KILL DEVIL HILLS

BUILDING ISSUED: 03/10/2023

EXPIRES: 09/06/2023

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

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Zoning Final

CONDITIONS

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

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: 03 / 10 / 2023

Page 2 of 2

Town of Kill Devil Hills

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

MAR 1 3 2023

Planning and Inspection Department

TOWN OF

BP2023-053 PROJECT NAME: Scott Deck SITE ADDRESS: 1512 CAPTAIN'S LN KILL DEVIL HILLS

APPLICANT:	B & A BUILDERS 180 Watersedge Drive Kill Devil Hills, NC 27948 441-6366		(OWNER:	Davis, Scott 6763 Summe REMINGTO		1	
RESIDENTIAL-	INTERMEDIATE:		DERS edge Drive ills, NC 27948			License: 45496 Expires: 01/01,		
PARCEL:								
PIN:	988413131507			Parcel Number:	028504	1150		
Address:	1512 CAPTAIN'S L	N KILL DE	VIL HILLS					
				Zonin	g:			
Addition:				Block	: 0	Lot(s):	150	
Legal Desc	cription:							
FEES:		Paid	Due					
Building Permit	Fee - Minimum	\$150.00	\$0.00					

\$0.00

Fee

PROJECT DESCRIPTION: add 8'x23' rear deck

Totals :

\$150.00



EXPIRES: 09/05/2023

ISSUED: 03/09/2023

BUILDING

KILL DEVIL HILLS

2

PROJECT NAME: Scott Deck SITE ADDRESS: 1512 CAPTAIN'S LN KILL DEVIL HILLS BUILDING

ISSUED: 03/09/2023

EXPIRES: 09/05/2023

DETAILS

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

REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

CONDITIONS

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

*	Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
*	Zoning Final Inspection is required.
*	The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
*	Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
÷ •	

		/						
SY DEV	HILL		PO BOX ill Devil Hills,		s		PA	JD
Birthple Torrad				Fax: 252-441-4	102		MAR -	8 2023
.4 61	AHC	Planning	and Inspec	ction Depart	nent		TOW7	, NOF
							KILL DEV	
	55 ME: Padilla pilings SS: 1002 AVALON D						ISSUE	BUILDING D: 03/08/2023
SITE ADDRES	S. 1002 AVALON L	NR WV KILL DEVI					EXPIR	ES: 09/04/202
APPLICANT:	PADILLA, LAWRENG 1000 AVALON DRIV KILL DEVIL HILLS, M	Έ	(1000 AVA	LON DR	NCE EDW IVE , NC 2794	
BUILDER:			BLE BILL'S	0			ise: Unlice res: 12/3	
		nags head, 252-489-95	nc 27959	6		САри	. 12/0	12020
PARCEL:		nags head,	nc 27959	G				
PARCEL: PIN:	987408998551	nags head, 252-489-95	nc 27959	Parcel Number:	0016	607000		
		nags head, 252-489-95	nc 27959 555	Parcel	0016			
PIN:		nags head, 252-489-95	nc 27959 555	Parcel				
PIN:		nags head, 252-489-95 I DR W KILL DE	nc 27959 555	Parcel Number:	g:		Lot(s):	251
PIN: Address:	1002 AVALON AVALON BEA	nags head, 252-489-95 I DR W KILL DE	nc 27959 555	Parcel Number: Zoning	g:			
PIN: Address: Addition: Legal Desc	1002 AVALON AVALON BEA	nags head, 252-489-95 I DR W KILL DE	nc 27959 555	Parcel Number: Zoning	g:			
PIN: Address: Addition: Legal Desc FEES:	1002 AVALON AVALON BEA	nags head, 252-489-95 I DR W KILL DE CH	NC 27959	Parcel Number: Zoning	g:			

PROJECT DESCRIPTION: Replace two pilings on west side of structure

PROJECT NAME: Padilla pilings SITE ADDRESS: 1002 AVALON DR W KILL DEVIL HILLS BUILDING ISSUED: 03/08/2023

EXPIRES: 09/04/2023

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

REQUIRED INSPECTIONS

Slab/Foundation/Piling	
Zoning Final	

Final

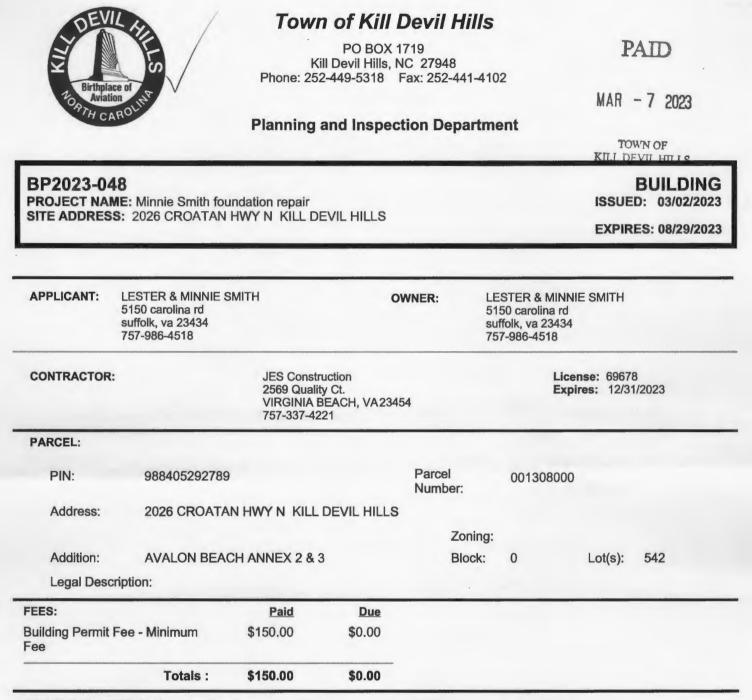
CONDITIONS

* 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.

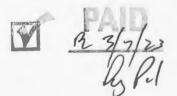
* Pilings notched over 50 percent require 4"x18" steel plates on each of load bearing girders.

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

Issued By:	1			
Contractor or Authorized Agent:	Deresa	Egn	_ Date: _	3823



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



.....

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

BUILDING ISSUED: 03/02/2023

EXPIRES: 08/29/2023

DETAILS

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

REQUIRED INSPECTIONS

Final

Slab/Foundation/Piling

CONDITIONS

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

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.

Marty Shaw **Issued By:**

Contractor or Authorized Agent: Kayley Campbell

Date: 03 / 03 / 2023

Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
FEES:		Paid	Due			
Legal Des	cription: First Flight	t Retreat Condos	;			
Addition:				Bloc	k:	Lot(s):
				Zoni	-	
Address:	815 S Va Dare	Trl Kill Devil Hil	IS			
				Number:		
PIN:	988308994203	800		Parcel		
PARCEL:						
UNLICENSED	BUILDER:	Silva Paintir PO BOX 24 Kill Devil Hil				License: 12345 Expires:
	815 South Virginia Da Kill Devil Hills, NC 27				Kill Devil Hil	/irginia Dare Trail Is, NC 27948
APPLICANT:	FIRST FLIGHT RET		01	WNER:		HTRETREAT
						EXPIRES: 09/03/2023
BP2023-0		d Kill Devil Hille				BUILDING ISSUED: 03/07/2023
						TOWN OF KILL DEVIL HILLS
TH CF	ROL	Planning a	and Inspect	tion Depart	ment	
Birthplace of Aviation Aviation CAROLINE Planning and Inspection Department						MAR - 7 2023
E I			PO BOX 1			PAID
		10001		Jevii mili	3	
DEV		Town	of Kill L	Dovil Hill	Ic	

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

Reality 23

EXPIRES: 09/03/2023

DETAILS

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

REQUIRED INSPECTIONS

Zoning Final

dia .

Final

CONDITIONS

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

Building code requirements for pool barriers must be maintained.

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

Bilk

Issued By:

Contractor or Authorized Agent:

Date: 03 / 07 / 2023



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-049

PROJECT NAME: JACOCKS DUNE DECK SITE ADDRESS: 1233 VA DARE TRL S KILL DEVIL HILLS BUILDING ISSUED: 03/03/2023

EXPIRES: 08/30/2023

APPLICANT:	JACOCKS, SYLVIA 206 W. Wood Hill Dinags head, nc 2795 252-423-2230	r.		OWNER:	JACOCKS, S 206 W. Wood nags head, no 252-423-2230	c 27959
GENERAL:		Self UNKNOWN UNKNOWN 000-000-000	N, XX 00000			License: Unlicensed Expires: 12/31/2023
PARCEL:						
PIN:	98930907509	4		Parcel Number:	004659	000
Address:	1233 VA DAR	E TRL S KILL D	EVIL HILLS			
				Zoni	ing:	
Addition:	KILL DEVIL BEACH SEC 1 REVISED		VISED	Bloc	k: A	Lot(s): 7
Legal Descri	iption:					
FEES:		Paid	Due			
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00	-		

PAID

MAR - 3 2023

TOWN OF KILL DEVIL HILLS

BP2023-049

PROJECT NAME: JACOCKS DUNE DECK SITE ADDRESS: 1233 VA DARE TRL S KILL DEVIL HILLS BUILDING ISSUED: 03/03/2023

EXPIRES: 08/30/2023

PermitNameValueCAMA PERMITNCAMA EXEMPTIONNZONING DISTRICTOIRPURPOSEResidential AccessoryFRONT YARD SETBACK30SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
CAMA PERMITNCAMA EXEMPTIONNZONING DISTRICTOIRPURPOSEResidential AccessoryFRONT YARD SETBACK30SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
CAMA EXEMPTIONNZONING DISTRICTOIRPURPOSEResidential AccessoryFRONT YARD SETBACK30SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
ZONING DISTRICTOIRPURPOSEResidential AccessoryFRONT YARD SETBACK30SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
PURPOSEResidential AccessoryFRONT YARD SETBACK30SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
FRONT YARD SETBACK30SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
SIDE YARD SETBACK10REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
REAR YARD SETBACKCAMAFLOOD ZONEVEBASE FLOOD ELEVATION10.00	
FLOOD ZONEVEBASE FLOOD ELEVATION10.00	
BASE FLOOD ELEVATION 10.00	
FINAL ELEVATION N CERTIFICATE	
CONSTRUCTION COST 20000.00	
CONSTRUCTION TYPE V	
OCCUPANCY TYPE One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

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

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

1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.

2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.

3. In the VE Zone, there shall be no fill used for stuctual support.

4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

DEVELOPER MUST OBTAIN ALL THE NECCESSARY FEDERAL, STATE AND LOCA	AL PERMITS BEFORE THIS PERMIT
CAN BE ISSUED.	

* Zoning Final Inspection is required.



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2023-050

PROJECT NAME: MAYER WINDOWS SITE ADDRESS: 313 OCEAN ACRES DR W KILL DEVIL HILLS BUILDING ISSUED: 03/03/2023

EXPIRES: 08/30/2023

3	Mayer, Gregory 332 Canal Dr Kill Devil Hills, NC 279	948	C	WNER:	Mayer, Grego 332 Canal Dr Kill Devil Hills,		
GENERAL:		Self UNKNOWN UNKNOWN, X 000-000-0000	X 00000			license: Unlice Expires: 12/31	
PARCEL:				-			
PIN:	988316931648			Parcel Number:	0084910	000	
Address:	313 OCEAN AG	RES DR W KILL	DEVIL HIL	LS			
				Zoni	ng:		
Addition:	OCEAN ACRES	S TRACT 3 SEC 1		Bloc	k: G	Lot(s):	13
Legal Descrip	ption:						
FEES:		Paid	Due			AL 4 10444	
Building Permit Fe	ee - Minimum	\$150.00	\$0.00	•			
**************************************	Totals :	\$150.00	\$0.00				

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

PAID

MAR - 3 2023

TOWN OF KILL DEVIL HILLS

BP2023-050 PROJECT NAME: MAYER WINDOWS SITE ADDRESS: 313 OCEAN ACRES DR W KILL DEVIL HILLS

ISSUED: 03/03/2023

EXPIRES: 08/30/2023

D	E	Т	A		L	S
				-		-

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

REQUIRED INSPECTIONS

Zoning Final

Final

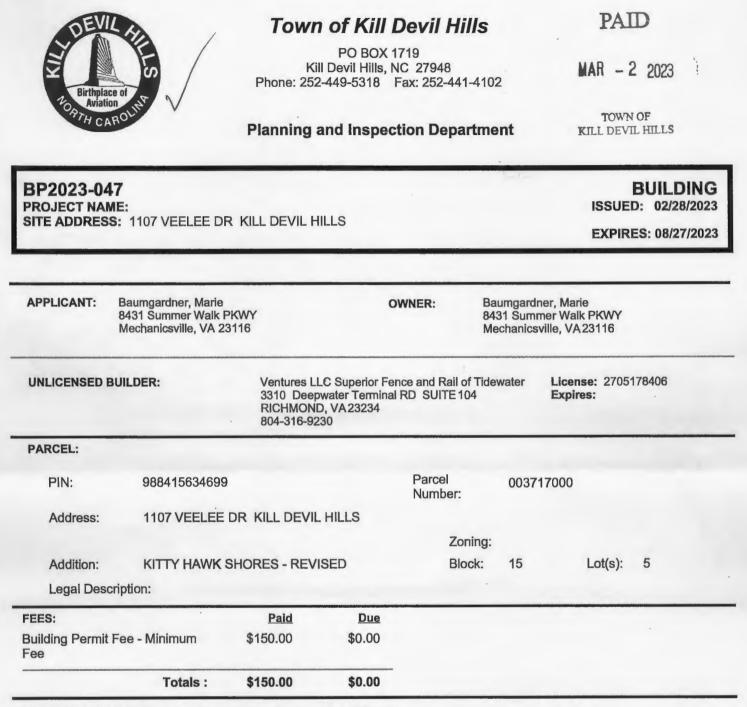
CONDITIONS

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

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

C

I hereby certify that I have read and examined this application All provisions of Laws and Ordinances governing this type of specified herein or not. The granting of a permit does not pre the provisions of any other state/local law regulating constru	f work will be complied with whether sume to give authority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 3/3/23



PROJECT DESCRIPTION: Replace privacy fence and pool barrier.

M 3/2/2

BP2023-047 PROJECT NAME: SITE ADDRESS: 1107 VEELEE DR KILL DEVIL HILLS

BUILDING ISSUED: 02/28/2023

EXPIRES: 08/27/2023

DETAILS

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

REQUIRED INSPECTIONS

Zoning Final

Final

Stringline

CONDITIONS

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All provisions of Laws and Ordinances governing this type of work will be complied with whether
specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.

Issued By:	Marty	Shaw
------------	-------	------

Contractor or Authorized Agent:

Brittany Washington

Date: 02 / 28 / 2023

7-1							
DEV		Tow	n of Kill	Devil Hil	ls	PAID	
Rithala	E Co		PO BOX ill Devil Hills, I 2-449-5318		4102	MAR - 2 20	8
ZORTH CA	ROLINA	Planning	and Inspec	tion Depart	tment	TOWN OF KILL DEVIL HILL	s .S
BP2023-04 PROJECT NAM SITE ADDRESS	12 ME: Repair damage to S: 701 Bermuda Bay	o recycle buildir Bvld. KILL DE	ng VIL HILLS			BU ISSUED: 0 EXPIRES: 0	
APPLICANT:	TOWN OF KILL DEVI P O BOX 1719 102 Town Hall Drive		C	WNER:	P O BOX 171 102 Town Ha	ILL DEVIL HILLS 19 III Drive	
CONTRACTOR:	KILL DEVIL HILLS, NG PITTS, ADRIAN DEAN 1807 Bay Drive Kill Devil Hills, NC 279	N				HILLS, NC 27948	
GENERAL BUIL	DING-LIMITED:	1807 Bay D	RIAN DEAN Drive Ills, NC 27948			License: 48669 Expires: 12/31/2023	3
PARCEL:							
PIN:	988307582495			Parcel Number:	008165	001	
Address:	701 Bermuda B	ay Bvid. KILL [DEVIL HILLS				
				Zonir	ng:		
Addition:	SUBDIVISION -	NONE		Block	c: 0	Lot(s): 0	
Legal Desc	ription:						
FEES:		Paid	Due				
TELO.			00.00				
Com. Building P	ermit Fees	\$0.00	\$0.00				

PROJECT DESCRIPTION: repair block column damaged by tractor

1 ...

BP2023-042

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

EXPIRES: 08/23/2023

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By:	
Contractor or Authorized Agent:	Date: 3/2/23



Town of Kill Devil Hills

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

Planning and Inspection Department

EG2023-005

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

EXCAVATION AND GRADING

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

APPLICANT:	Lenz, Edward 20564 Captains Walł SMITHVILLE, VA 234 757-287-4474	¢ 430		OWNER:	20564 Ca	perties Llc optains Walk ELD, VA 2343	30	
CONTRACTOR:		SAME AS / 0000000 00000000,	APPLICANT			License: Expires:	123456 04/30/2023	
PARCEL:								
PIN:	989313048533			Parcel Number:	0049	908007		
Address:	107 CAROLYN	DR KILL DEVI	L HILLS					
				Zon	ing:			
Addition:				Bloc	:k: 0	Lo	t(s): 7	
Legal Desci	ription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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

PAID

MAR 2 2 2023

TOWN OF KILL DEVIL HILLS

EG2023-005

PROJECT NAME: Lenz Properties, LLC SITE ADDRESS: 107 CAROLYN DR KILL DEVIL HILLS **EXCAVATION AND GRADING**

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

DETAILS

Fernin	
Name	Value
ESTIMATED CONSTRUCTION COST	7500.00
ZONING DISTRICT	С
CAMA PERMIT	N
FLOOD ZONE	Х
SURVEYOR NAME AND NUMBER	Styons Surveying

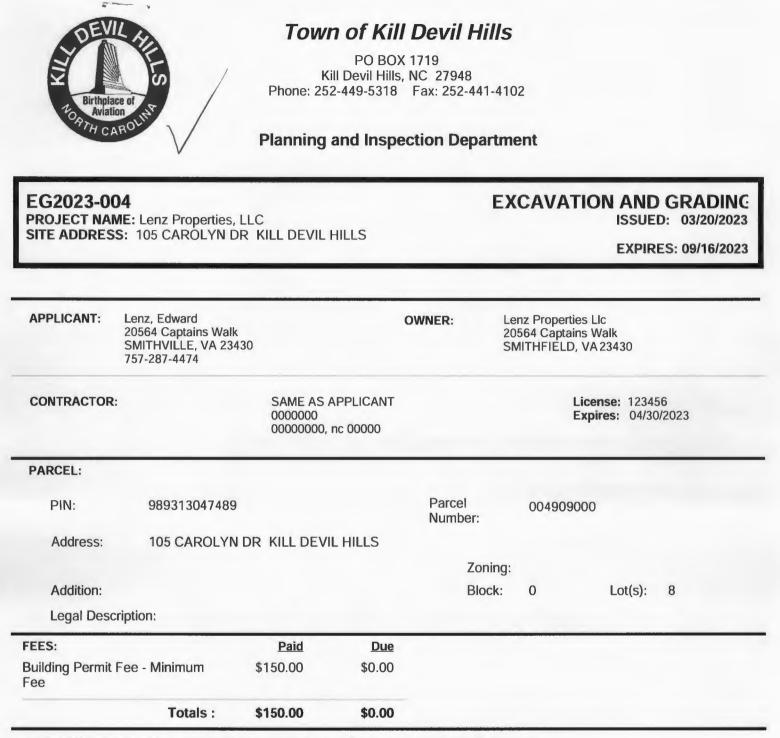
REQUIRED INSPECTIONS

Final

Permit

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.



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

PAD

MAR 2 2 2023

TOWN OF KILL DEVIL HILLS

EG2023-004

2

PROJECT NAME: Lenz Properties, LLC SITE ADDRESS: 105 CAROLYN DR KILL DEVIL HILLS **EXCAVATION AND GRADING**

ISSUED: 03/20/2023

EXPIRES: 09/16/2023

DETAILS

remit	
Name	Value
ESTIMATED CONSTRUCTION COST	7500.00
ZONING DISTRICT	С
CAMA PERMIT	N
FLOOD ZONE	Х
SURVEYOR NAME AND NUMBER	Styons Surveying

REQUIRED INSPECTIONS

Final

Dormit

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: _

Z.R. Mus

Date: 3-22-23

Birthplace Rogerthy CAN	Round		K Phone: 25	PO BOX 1 PO BOX 1 II Devil Hills, N 2-449-5318 and Inspec	1719 NC 27948 Fax: 252-44	1-4102		PA MAR 3 TOWN KILL DEVI	0 2023
SG2023-00 PROJECT NAM SIGN SITE ADDRESS	E: OUTERB				NG	_			SIGN 3D: 03/30/2023 3ES: 09/26/2023
APPLICANT:	OUTER BANK 1110 S. Va. D Kill Devil Hills,	are Tr.		o	WNER:	111	10S. Va. Da	(S BEACH CL are Tr. NC 27948	UB
CONTRACTOR:				Boundry Street ills, NC 27948		4		icense: LEG, Expires: 12/3	ACY UNKNOWN 1/2030
PARCEL:									
PIN:	9893050				Parcel Number:		0278670	000	
Address:	1110 VA	DARE	TRLS KILL D	EVIL HILLS	70	ning			
Addition:	KILL DE		LS SEC 1			ning: ock:	4	Lot(s):	1-8/CONDO- BLDGS 1-2
Legal Descr	ription:								
F EES: Sign Permit Fee			<u>Paid</u> \$200.00	<u>Due</u> \$0.00					
PROJECT DESC			\$200.00 E (2) FREEST/						
TROJECT BESS				DETAIL		V LIT C			
Permit									
Name # OF SIGNS ZONING DISTF	RICT	Val 2 C	ue						
PURPOSE			nmercial Acces	sory					

3

EXPIRES: 09/26/2023

REQUIRED INSPECTIONS

Slab/Foundation/Piling

CONDITIONS

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

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

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

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

- * Free-standing sign cannot exceed 20 feet in elevation above street grade measured from ground elevation to the top of the sign structure. Sign cannot overhang into the right of way.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Electrical sign off required prior to C.C.
- Electrical sign of required prior to C.C.

1

Final

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: Zour Michaes Date: 3/30/23 Contractor or Authorized Agent:

r								
DEVILA		/	Town	of Kill I	Devil	Hills		PAID
E NY	-	/		PO BOX 1				
Birtiplace of Aviation	S		Kil Phone: 252	l Devil Hills, N -449-5318 I	IC 2794 Fax: 252	8 -441-4102	2	MAR 1 0 2023
Aviation Aviation			Planning a	and Inspec	tion De	epartme	nt	TOWN OF KT L DEVIL HILLS
BANNNER202								BANNER
PROJECT NAME: Ta	01 CROA	tan HW	YN KILL DE	EVIL HILLS				ISSUED: 03/07/2023
						_		EXPIRES: 06/05/2023
7130	Jennings, li) Glen Fore mond, Va 2	st Drive,	Suite 410	C	WNER:	100	get Corpora 00 Nicollet N NNEAPOLIS	ation Aall S, MN 55403
an ferfen gen gegen stead en mal har tils stad de chardes skannen her de skrive			11.07.04.04.04.05.05.04.04.04.04.04.04.04.04.04.04.04.04.04.	y to an	ang kang pang kang pang pang pang pang pang pang pang p	Annie gespielektor von sonnie kom die in sonn	,	
BUILDING-UNLIMITE	D:		L.F. Jenning 7130 Glen I Richmond,	Forest Drive, S	uite 410			icense: 46356 xpires:
PARCEL:								
PIN:	98840638	3994L1			Parce Numb		0298320	01
Address:	1901 CR0	DATAN	WYN KILL	DEVIL HILLS	3			
						Zoning:		
Addition: Legal Description	WRIGHT' n:	S SHOR	ES			Block:	0	Lot(s): 0
EES:			Paid	Due				· · · · ·
Banner Fee			\$100.00	\$0.00				
	Totals	:	\$100.00	\$0.00				
PROJECT DESCRIPT	ION: 26	'x16' ten	p banners or	n building				
				DETAIL	S			(
Permit								
Name		Value						
# OF BANNERS		2						
ZONING DISTRICT		C						
PURPOSE	0007		ercial Acces	sory				
CONSTRUCTION C	OST	300.00	J					
FLOOD ZONE		Х						

BANNNER2023-002

PROJECT NAME: Target Banner SITE ADDRESS: 1901 CROATAN HWY N KILL DEVIL HILLS BANNER ISSUED: 03/07/2023

EXPIRES: 06/05/2023

Date: 3/10/23

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone. * No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.

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

Issued By:

Contractor or Authorized Agent:



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2023-004 PROJECT NAME: Nags Head Pools, LLC SITE ADDRESS: 208 FRESH POND DR W KILL DEVIL HILLS

SIGN ISSUED: 01/19/2023

EXPIRES: 07/18/2023

APPLICANT:	Nags Head Pools, LL PO Box 4 nags head, nc 27959 252-573-9945	ags head, nc 27959			Strum, Brendan 4708 S Cobia W Nags Head, NC 252-489-4776	lay	
CONTRACTOR:		SAME AS / 0000000 00000000,	APPLICANT			cense: 123456 pires: 04/30/2023	
PARCEL:							
PIN:	989313033568	3	•	Parcel Number:	00493100	0	
Address:	208 FRESH P	OND DR W KILI	L DEVIL HILL	S			
				Zoni	ng:		
Addition:	LAKE DRIVE	DEVELOPMENT	SEC 2	Bloc	k: 0	Lot(s): 92-	93
Legal Descr	ription:						
FEES:		Paid	Due				
Sign Permit Fee		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				
PROJECT DESC	RIPTION: Sign on	the building					
							R
		DATO					0
		PAID					
		110 1 5 0000					
	1	MAR 1 5 2023					

TOWN OF KILL DEVIL HILLS PROJECT NAME: Nags Head Pools, LLC SITE ADDRESS: 208 FRESH POND DR W KILL DEVIL HILLS SIGN ISSUED: 01/19/2023

EXPIRES: 07/18/2023

DETAILS

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

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone. * Zoning Final Inspection is required.

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

Issued By: hi llidgett Date: 3-15-23 Contractor or Authorized Agent:

Birthplace To Aviation	A STHE	K Phone: 25	PO BOX 7 III Devil Hills, N 2-449-5318 and Inspec	1719 NC 27948 Fax: 252-441-	4102	PA MAR - TOW KILL DEV	NOF
SG2023-00 PROJECT NAM SITE ADDRESS		HWY S KILL D	EVIL HILLS				SIGN ED: 02/28/2023 RES: 08/27/2023
APPLICANT:	Denyse Signs Inc. 4521 Industrial Acce DOUGLASVILLE, G/ 770-942-0688		O	WNER:			
SIGN:			trial Access Roa VILLE, GA 3013			License: SP E Expires:	S 28435
PARCEL:							
PIN:	989313133228	3		Parcel Number:	0083510	000	
Address:	2011 CROATA	N HWY S KILL	DEVIL HILLS				
				Zoni	ng:		
Addition:	Fresh Pond Be	eaches		Bloc	k: 1	Lot(s):	2,3,4,6,PT 9
Legal Descr	iption:						
FEES:		Paid	Due				
Sign Permit Fee		\$200.00	\$0.00				
Sign Fernin Fee							

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

1 1 3/2/23 BP21

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r.

SG2023-005

PROJECT NAME: Caliber SITE ADDRESS: 2011 CROATAN HWY S KILL DEVIL HILLS SIGN ISSUED: 02/28/2023

EXPIRES: 08/27/2023

DETAILS

Value
2
64.00
64.00
72.00
Q 71.40
С
Commercial Accessory
86000.00
х

REQUIRED INSPECTIONS

Slab/Foundation/Piling Electrical Final

CONDITIONS

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

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

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

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

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

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

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

* Zoning Final Inspection is required.



7

Town of Kill Devil Hills

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

Planning and Inspection Department

BANNNER2023-003

PROJECT NAME: OCEAN REEF BANNERS SITE ADDRESS: 107 VA DARE TRL S KILL DEVIL HILLS BANNER ISSUED: 03/22/2023

EXPIRES: 06/20/2023

APPLICANT:	OCEAN REEF HOTEL LLC 107 S VA DARE TRAIL Kill Devil Hills, NC 27948		(OCEAN REEF HOTEL LLC 107 S VA DARE TRAIL Kill Devil Hills, NC 27948			
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	, XX 00000			License: Unlicensed Expires: 12/31/2023		
PARCEL:								
PIN:	9884208058	22		Parcel Number:	003669	000		
Address:	107 VA DAF	RE TRL S KILL DE	VIL HILLS					
				Zoning	g:			
Addition:	KITTY HAW	K SHORES - REV	ISED	Block	2	Lot(s): 1-4		
Legal Descr	iption:							
FEES:		Paid	Due					
Banner Fee		\$100.00	\$0.00					
nanalar ananan alkalakan karakan karakan di karakan karakan karakan karakan karakan karakan karakan karakan ka	Totals :	\$100.00	\$0.00					
PROJECT DESC	RIPTION: 2-803	SQFT WYNDGATE	BANNER O					
Permit		(-)				PAID		
Name		Value						
Name # OF BANNER	s ź	2	_			PAID MAR 2 3 2023		
Name # OF BANNER: ZONING DISTR	S 2 RICT (2 DIR						
Name # OF BANNER	S 2 RICT (2	sory					

BANNNER2023-003 PROJECT NAME: OCEAN REEF BANNERS SITE ADDRESS: 107 VA DARE TRL S KILL DEVIL HILLS

BANNER ISSUED: 03/22/2023

EXPIRES: 06/20/2023

Date: 3-23-2023

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone. * No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.

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

QQL

Issued By:

Contractor or Authorized Agent:



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

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-18168

05/15/2023

Parcel Number: Location: Subdivision: Legal Description:	025425000 1319 BURNSIDE RD – MANTEO SUBDIVISION - NONE LOT: 2 & 3 & 30 FT ROAD AREA BLK: SEC:				
Owner Name: Owner Mail Address: Owner Phone and email:	KENNETH R MEL P O BOX 7 COLU				
Contractor Name:	PINE PROPERTIE				
Contractor Mail Address:		SS DR, PINEHURST, NC 28374			
Contractor Phone:	9106840479	Contractor NC License#: BOND 790	01079171		
BUILDING INFORMATION					
Proposed Construction Use:	SINGLE FAMILY	WELLING NEW , NEW CONSTRUCTION SP	D / MODULAR		
Proposed Construction Type:	SFD	Cost of Construction:	\$287,500		
Finished Square Footage:	1932	CAMA Permit#:	NA		
Unfinished Square Footage:	160	Septic Permit#:	29848		
Stories:	2.0	Septic Permit Date:	7/31/2020		
Total Rooms:	9	Survey/Site Plan:	YES		
Footing Type:	COMBINATION	Water Tap#:	53600		
Exterior Finish:	VINYL SIDING	Water Type:	Central Water		
Proposed Finished Floor Elevation:	8.0	Flood Zone:	AE		
		Base Flood Elevation:	8.0		
Bedrooms:	4	Lot/Ground Elevation:	3.2		
		Baths/half baths:	3.00/0		
Comments: Any deviation from	n the building plan	PERMIT FEE		\$1,513.00	
or site plan requires prior appr		FLOOD DEVELOPMENT BLDG PERMIT	10	75.00	
BOTTON OF FLOOR JOIST MUS		HOME OWNERS RECOVERY FEE	149	10.00	
AS BUILT SURVEY REQUIRED U CONSTRUCTION AND FINAL CO REQUIRED		RESIDENTIAL ZONING APPROVAL		100.00	
	1-	TOTAL FEES:		\$1,698.00	
Applicant Signature:	EP.	PINE PROPERTIES	S, LLC		
Inspector Signature:	J-T	SF			

Application Reference # 4975 on 10/05/2021

DocuSign Envelope ID: E5858837-C13D-4247-9A18-820E7358F00F



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

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-18428

05/25/2023

Parcel Number: Location: Subdivision: Legal Description:	024225057 262 SHADY PINES LN – MANTEO SUBDIVISION - NONE				
Owner Name: Owner Mail Address: Owner Phone and email:	OLD NORTH END P O BOX 2405 M	LLC ANTEO, NC 27954			
Contractor Name: Contractor Mail Address: Contractor Phone:	HATCHELL CONC PO BOX 2405, M 252-473-6074	RETE, INC ANTEO, NC 27954 Contractor NC License#: 34205			
BUILDING INFORMATION	Contraction of the				
Proposed Construction Use:		WELLING NEW , NEW SFD	4250.000		
Proposed Construction Type:	SFD	Cost of Construction:	\$250,000 N/A		
Finished Square Footage: Unfinished Square Footage:	1521 558	CAMA Permit#: Septic Permit#:	S8-18390		
Stories:	1.0	Septic Permit Date:	05/23/2023		
Building Height:	12	Survey/Site Plan:	YES		
Total Rooms:	9	Water Tap#:	53682		
Footing Type:	PILING	Water Type:	Community W	ater	
Exterior Finish:	LAP SIDING	Flood Zone:	X		
Proposed Finished Floor Elevation:	15	Base Flood Elevation: Lot/Ground Elevation:	8.0 11		
Bedrooms:	3	Baths/half baths:	2.00/0		
Comments: Any deviation from or site plan requires prior appr Under construction elevation of prior to rough-in inspection. As Finished Construction elevation required prior to final inspection	oval. ertificate required s-Built Survey and n certificate	PERMIT FEE HOME OWNERS RECOVERY FEE RESIDENTIAL ZONING APPROVAL	164	\$1,363.95 10.00 100.00	
is 8.0' above msl.		TOTAL FEES:		\$1,473.95	
Applicant Signature	EU CONCRETE	HATCHELL CONC	RETE, INC		
Inspector Signature	iford	SF 5/25/2023			

Application Reference # 11459 on 05/23/2023



BUILDING PERMIT#: R-18429

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

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

RESIDENTIAL BUILDING PERMIT

05/25/2023

above msl.		TOTAL FEES:		\$1,434.60			
Comments: Any deviation from or site plan requires prior appr Under construction elevation of prior to rough-in inspection. As Final construction elevation ce prior to final inspection. Minim	oval. ertificate required s-built Survey and rtificate required	PERMIT FEE HOME OWNERS RECOVERY FEE RESIDENTIAL ZONING APPROVAL	167	\$1,324.60 10.00 100.00			
Bedrooms:	3	Baths/half baths:	2.00/0				
Proposed Finished Floor Elevation:	15	Base Flood Elevation: Lot/Ground Elevation:	8.0 11				
Exterior Finish:	LAP SIDING	Flood Zone:	Х				
Footing Type:	PILING	Water Type:	Community W	/ater			
Total Rooms:	10	Water Tap#:	53685				
Building Height:	0	Survey/Site Plan:	YES				
Stories:	1.0	Septic Permit Date:	05/23/2023				
Unfinished Square Footage:	499	Septic Permit#:	S8-18392				
Finished Square Footage:	1500	CAMA Permit#:	N/A				
Proposed Construction Type:	SFD	Cost of Construction:	\$250,000				
Proposed Construction Use:	SINGLE FAMILY D	WELLING NEW, NEW SFD					
BUILDING INFORMATION							
Contractor Phone:	252-473-6074	Contractor NC License#: 34205					
Contractor Mail Address:		IANTEO, NC 27954					
Contractor Name:	HATCHELL CONC	RETE, INC					
Owner Phone and email:	P O BOX 2403 W	ANTLO, NC 27334					
Owner Name: Owner Mail Address:	OLD NORTH END) LLC ANTEO, NC 27954					
Legal Description:							
Subdivision:	SUBDIVISION - N	SUBDIVISION - NONE					
Location:	258 SHADY PINES LN – MANTEO						
Parcel Number:	024225058						

Docu8ign				
Applicant Signature: HATCH	EU CONCRETE		HATCHELL CONCRETE, INC	
FAA7DA4	D00F450	5/25/2023		
DocuSign	ed by:	-,,		
Inspector Signature	wiford		SF	
	DEE94FA	5/25/2023		

Application Reference # 11460 on 05/23/2023



BUILDING PERMIT#: R-18311

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

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

RESIDENTIAL BUILDING PERMIT

05/19/2023

Parcel Number:	023031000			
Location:	1015 COOPER AVENUE	- MANTEO		
Subdivision:	WOODLEY PARK REVISE	ED		
Legal Description:	LOT: 26 BLK: C SEC:			
Owner Name:	ELEEN VANESSA BRYAN	т		
Owner Mail Address:	P O BOX 2085 MANTEC), NC 27954		
Owner Phone and email:	252-423-1305 eleenbr	yant@gmail.com		
Contractor Name:	MITCHELL HOMES, INC			
Contractor Mail Address:	14300 SOMMERVILLE C	T, MIDLOTHIAN, VA 23113		
Contractor Phone:	804-510-0787 0	Contractor NC License#: 76127		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY DWELLI	NG NEW , SFD 2-story 3 beds 2.5 b	aths	
Proposed Construction Type:	SFD	Cost of Construction:	\$274,867	
Finished Square Footage:	1591	CAMA Permit#:	N/A	
Unfinished Square Footage:	100	Septic Permit#:	s3-18162	
Stories:	2.0	Septic Permit Date:	5/15/23	
Building Height:	25	Survey/Site Plan:	YES	
Total Rooms:	11	Water Tap#:	51487	
Footing Type:	MASONARY	Water Type:	Central Water	
Exterior Finish:	LAP SIDING	Flood Zone:	X	
Proposed Finished Floor	9.5	Base Flood Elevation:	8.0	
roposed misned root	9.5	Lot/Ground Elevation:	7.3	
Elevation:				

PERMIT FEE	
HOME OWNERS RECOVER	RY
RESIDENTIAL ZONING API	PR

\$1,233.25
10.00
100.00

		TOTAL FEES:		\$1,343.25
Applicant Signature:	Docusigned by: Stephanie Hicks/ M	nitchell Homes Inc.	MITCHELL HOMES, INC	
	-DocuSigned by:	5/19/2023		
Inspector Signature:	keil Twiford		SF	
		5/19/2023		

Application Reference # 11255 on 05/05/2023

Comments: Any deviation from the building plan or site plan requires prior approval. AS BUILT SURVEY REQUIRED, BOTTOM OF FLOOR JOIST MUST BE AT ELEVATION of 8'. UNDER			FEE TIAL ZONING APPROVAL EVELOPMENT BLDG PERMIT	190	\$1,666.05 100.00 75.00	
Bedrooms:	3		Lot/Ground Elevation: Baths/half baths:	3.00/0		
Proposed Finished Floor Elevation:	8 Or Greater		Base Flood Elevation:	8.0		
Exterior Finish:	LAP SIDING		Flood Zone:	AE		
Footing Type:	PILING		Water Type:	Central Water		
Total Rooms:	8		Water Tap#:	51554		
Building Height:	30'		Survey/Site Plan:	YES		
Stories:	2.0		Septic Permit Date:	06/01/22		
Unfinished Square Footage:	1197		Septic Permit#:	S22-11099		
Finished Square Footage:	1583		CAMA Permit#:	NA		
Proposed Construction Type:	SFD	- ALLING	Cost of Construction:	\$300,000		
Proposed Construction Use:	SINGLE FAMILY D	NELLING	NEW . NEW SED			
BUILDING INFORMATION						
Contractor Phone:	252-489-1178		ontractor NC License#: OWI	NER/BUILDER		
Contractor Mail Address:		334 W WALTER ST KILL DEVIL HILLS, NC 27948				
Contractor Name:	KENNETH HOWA	RD SAVA	GE			
Owner Phone and email:	252-489-1178					
Owner Mail Address:		T KILL DE	VIL HILLS, NC 27948			
Owner Name:	KENNETH HOWAR					
Legal Description:	LOT: 2 BLK: SEC:					
Subdivision:	SUBDIVISION - NO	DNE				
Location:	BURNSIDE RD - M		1271 Burnside			
Parcel Number:	025368001					
BUILDING PERMIT#: R-18280					05/18/2023	
	RESID	ENTIAL B	UILDING PERMIT			
ATH CAROLIN				-		
		PO Box Drawer 1000 Manteo NC 27954		Northern Beach: (252) 475-587 Frisco: (252) 475-587		
			ng Office	Manteo: (252) 475-587(
		y of Dare				

		TOTAL FEES:		\$1,841.05
Applicant Signature:	Though of	-4	KENNETH HOWARD SAVAGE	

Inspector Signature: Kell Twiford -/75F SF

Application Reference # 11284 on 05/08/2023

and the second s				
Contraction of the second		County of Dare Planning Office	Manteo: (25	2) 475-587
	р	PO Box Drawer 1000	Northern Beach: (25	
TOTAL CAROLINE		Manteo NC 27954	Frisco: (25	
	RESIDE	ENTIAL BUILDIŅG PERMIT		
BUILDING PERMIT#: R-18212	2			05/16/2023
Parcel Number:	024410024			
Location:	126 WEIR POINT D	DR – MANTEO		
Subdivision:	HERITAGE POINT F	PHASE 2		
Legal Description:	LOT: 66 BLK: SEC:			
Owner Name:	BRADLEY R HACHA	AT		
Owner Mail Address:	1119 MAYBERRY H	ITS CYPRESS, TX 77433		
Owner Phone and email:				
Contractor Name:	BARKER & BARKER	CUSTOM HOMES, LLC		
Contractor Mail Address:	112 WALTER CT, M	MANTEO, NC 27954		
Contractor Phone:	2523335449	Contractor NC License#: 84173		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY DW	VELLING NEW , NEW SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$850,000	
Finished Square Footage:	2968	CAMA Permit#:	NA	
Unfinished Square Footage:	1770	Septic Permit#:	S8-18151	
Stories:	2.0	Septic Permit Date:	05/12/2023	
Building Height:	33'3"	Survey/Site Plan:	YES	
Total Rooms:	13	Water Tap#:	31797	
Footing Type:	PILING	Water Type:	Central Water	
Exterior Finish:	WOOD SHINGLES	Flood Zone:	SHX	
Proposed Finished Floor	12	Base Flood Elevation:	8.0	
Elevation:	12	Lot/Ground Elevation:	4.5	
Bedrooms:	3	Baths/half baths:	3.00/1	

Comments: Any deviation from the building plan or site plan requires prior approval.

1	PERMIT FEE	
	HOME OWNERS RECOVERY FEE	
	RESIDENTIAL ZONING APPROVAL	
	FLOOD DEVELOPMENT BLDG PERMIT	

\$2,934.00 10.00 20 100.00 75.00

	TOTAL FEES:	\$3,119.00
Applicant Signature:	MAD	BARKER & BARKER CUSTOM HOMES, LLC
Inspector Signature:	157-11-	SF

Application Reference # 11285 on 05/08/2023

	Contractor NC License#: NGLE FAMILY DWELLING NEW, SFD WITH IND FIBERGLASS POOL Cost of Construction: CAMA Permit#: Flood Zone:	POOL \$1,076,000 NA X
RESIDENTIAL - SIM ADD ON IN-GROU 08/25/22 53543	NGLE FAMILY DWELLING NEW, SFD WITH IND FIBERGLASS POOL Cost of Construction: CAMA Permit#:	\$1,076,000 NA
RESIDENTIAL - SIN ADD ON IN-GROU 08/25/22	NGLE FAMILY DWELLING NEW, SFD WITH IND FIBERGLASS POOL Cost of Construction:	\$1,076,000
RESIDENTIAL - SIN ADD ON IN-GROU	GLE FAMILY DWELLING NEW, SFD WITH	POOL
RESIDENTIAL - SIM	GLE FAMILY DWELLING NEW, SFD WITH	POOL
252.441.1515	Contractor NC License#:	
252 111 1515	Contractor NC Liconcott	
2506 S CRUATAN		
LOT: PT 3 BLK: SI	EC:	
W S DOUGH HRS	5 DB 31 PG 190	
109 OLD NC 345	- MANTEO	
025009000		
.8365		05/22/2023
	ACCESSORY PERMIT	
		Frisco: (252) 475-5878
		Manteo: (252) 475-5870 KDH: (252) 475-5871
	County of Dare	
	025009000 109 OLD NC 345 W S DOUGH HRS LOT: PT 3 BLK: SI MARK RECONNL 3833 BARNSDAL STAN WHITE REA 2506 S CROATAN	8365 025009000 109 OLD NC 345 MANTEO W S DOUGH HRS DB 31 PG 190 LOT: PT 3 BLK: SEC: MARK RECONNU 3833 BARNSDALE DR WADE, NC 28395 STAN WHITE REALTY & CONSTRUCTION 2506 S CROATAN HWY, NAGS HEAD, NC 27959

TOTAL FEES:

\$300.00

Applicant Signature the	STAN WHITE REALTY & CONSTRUCTION
Inspector Signature:	SF

Application Reference # 8622 on 09/02/2022

	PO Box D	ng Office Drawer 1000 DNC 27954	KDH: (252) 475-5870 252) 475-5871 252) 475-5878
	ACCESSO	RY PERMIT		
ACCESSORY PERMIT#: ACC-:	18535			05/31/2023
Parcel Number:	025867000			
Location:	128 TOLER RD - MANTEO			
Subdivision:	SUBDIVISION - NONE			
Legal Description:	LOT: PARCEL A BLK: SEC:			
Owner Name:	HEATHER LEIGH FREEMAN			
Owner Mail Address:	875 GREEN LEVEL RD APE	K, NC 27523		
Owner Phone and email:				
Contractor Name:	D&B BULKHEADS			
Contractor Mail Address:	5217 LUNAR DR, KITTY HA			
Contractor Phone:	704-418-8667 Con	tractor NC License#: 87413		
ACCESSORY INFORMATION				
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS;PIERS BULKHEAD	BULKHDS, BOATLFTS, BULK		
		Cost of Construction:	\$26,430	
	•	CAMA Permit#: Flood Zone:	89723	
		Base Flood Elevation:	AE 0.0	
		Lot/Ground Elevation:	0.0	
Comments:	PERMIT	ĒĒ		\$250.00
	TOTAL FE	ES:		\$250.00
()	•			
pplicant Signature: Ka	n mide	D&B BULKHEADS		

Application Reference # 11506 on 05/26/2023

DocuSign Envelope ID: 7EA425FE-FDEC-477A-9490-761D1990A486



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

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-18366

05/22/2023

Parcel Number: Location: Subdivision: Legal Description:	023967005 8479 SHIPYARD SUBDIVISION - N LOT: BLK: SEC:	RD – MANNS HARBO IONE	DR		
Owner Name: Owner Mail Address: Owner Phone and email:	CHARLES D REED 8479 SHIPYARD	DY RD MANNS HARBOF	R, NC 27953		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	NORTHEASTERN PO BOX 42, KITT 2522613682	Y HAWK, NC 27949	license#: 30026		
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS, PIER 75X5 PIER 12X16 PLATFORM LOWER 27X4 PLATFORM & ADDED RIPRAP & BOAT L 700LBS 13X13			OAT LIFT	
		CAM, Flood	of Construction: A Permit#: Zone: Flood Elevation:	\$50,000 89673 AE 8.0	
Comments:		PERMIT FEE			\$250.00
		TOTAL FEES:			\$250.00
Applicant Signature:	Ngmod by: GMONY	5/23/2023	NORTHEASTERN	MARINE INC	
Inspector Signature:	twiferd	5/23/2023	SF		

Application Reference # 11389 on 05/16/2023

DocuSign Envelope ID: 7D02A9E2-E76F-4B61-8EE3-D3977B262981



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

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-18528

05/30/2023

Parcel Number:	016232028		
Location:	197 LANGLEY LN - MAN	ITEO	
Subdivision:	DOGWOOD HILLS		
Legal Description:	LOT: 28 BLK: SEC:		
Owner Name:	MARY M TTEE BURKAR	т	
Owner Mail Address:	197 LANGLEY LN - MAN	ITEO, NC 27954	
Owner Contact Information			
Contractor Name:	SOUNDSIDE HEATING A	ND AIR CONDITIONING,	
Contractor Mail Address:	106 ROBERT BRUCE DR	- MANTEO, NC 27954	
Contractor Phone:	2524737769		
Contractor NC License#:	L.34278		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$9,500
Electrical Contractor ID:	34997		
	1	MECHANICAL PROJECT FEE:	\$150.00

Comments: Replacing existing equipment with Trane 14 SEER 2.5 ton heat pump split system

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

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

Applicant Signature:	Joseph Malory		SOUNDSIDE HEATING AND AIR CONDITIONING,
	AF8BDF35E3F84D1	5/30/2023	soundsidehvac@gmail.com
Inspector Signature:	Leil Twiford		SF
		5/30/2023	

Application Reference # 11507 on 05/28/2023



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

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-18181

05/15/2023

Parcel Number:	016165000		
Location:	119 ALGONKIAN DR - M	IANTEO	
Subdivision:	BECKONRIDGE ESTATES		
Legal Description:	LOT: 23 BLK: SEC:		
Owner Name:	GARY FRANCIS BRANT		
Owner Mail Address:	119 ALGONKIAN DR - N	1ANTEO, NC 27954	
Owner Contact Information	:		
Contractor Name:	DELTA HEATING AND AI	R CONDITIONING	
Contractor Mail Address:	162 YAUPON TRL - KITT	Y HAWK, NC 27949	
Contractor Phone:	252-261-0404		
Contractor NC License#:	NA		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$5,500
Electrical Contractor ID:	33705		
Units	1	MECHANICAL PROJECT FEE:	\$150.00

Comments: INSTALL MITSUBISHI 18000 BTU 18 SEER DUCTLESS WALL MOUNTED HEAT PUMP MINI SPLIT

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

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

Applicant Signature:	Delta + Heating & dir		
		5/15/2023	_
Inspector Signature:	Lui twiford		SF
		5/15/2023	

Application Reference # 11338 on 05/11/2023

DocuSign Envelope ID: FC36E5D8-C4A8-4354-BCA0-BCE329125E07



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

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-18220

05/16/2023

Parcel Number:	024652061			
Location:	107 MAID MARIAN CT – MANTEO			
Subdivision:	NOTTINGHAM PHASE 2	NOTTINGHAM PHASE 2		
Legal Description:	LOT: 50 BLK: SEC:			
Owner Name:	CANDACE JEAN JACKSON			
Owner Mail Address:	5608 RAPAHANNOCK RD -	VIRGINIA BEACH, VA 23462		
Owner Contact Information:				
Contractor Name:	ARMSTRONG AND SON HE	ATING AND AIR LLC		
Contractor Mail Address:	3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925			
Contractor Phone:	252-797-4100			
Contractor NC License#:	L22516			
DETAILS	RESIDENTIAL			
		Cost of Job:	\$5,800	
Electrical Contractor ID:	L.06248			
Units	1	MECHANICAL PROJECT FEE:	\$150.00	

Comments: CHANGE OUT 1.5 TON HEATR PUMP & AIR HANDLER

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

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

Applicant Signature:	Armstrong & Son Heating & lir, W 14116D082C08445	ARMSTRONG AND SON HEATING AND AIR LLC
Inspector Signature:	Doousigned by: Leil Twiford 602828E30EE94FA. 5/17/2023	SF

Application Reference # 11283 on 05/08/2023

	Plann PO Box I	y of Dare ing Office Drawer 1000 DNC 27954		Manteo: (252) 475-5870 1 Beach: (252) 475-5871 Frisco: (252) 475-5878
ATH CAROLIN				
	MECHANI	CAL PROJECT		
MECHANICAL PROJECT#: M	ECH-18271			05/18/2023
Parcel Number:	024067000			
Location:	177 BAYVIEW DR - STUM	177 BAYVIEW DR – STUMPY POINT		
Subdivision:	Subdivision: SUBDIVISION - NONE			
Legal Description:	LOT: BLK: SEC:			
Owner Name:	LARRY D BRINN			
Owner Mail Address:	177 BAYVIEW DR - STUM	PY POINT, NC 27978		
Owner Contact Information				
Contractor Name:	GIBBS HEATING AND AC			
Contractor Mail Address:	17649 US HWY 264 - SWA	N QUARTER, NC 27885		
Contractor Phone:	252-943-7582			
Contractor NC License#:	L30488			
DETAILS	RESIDENTIAL			
		Cost of Job:		\$2,200
Electrical Contractor ID:	N/A			
Units	0	MECHANICAL P	ROJECT FEE:	\$150.00

Comments: MNI SPLIT CHANGE, RUSTED OUT

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

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

Applicant Signature:

GIBBS HEATING AND AC

Inspector Signature: Keil Twiford -155 SF

Application Reference # 11405 on 05/18/2023

DocuSign Envelope ID: 0B350389-C50C-4443-8641-9501063126EA



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

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-18377

05/23/2023

Parcel Number:	025151000			
Location:	209 ROOSEVELT ST – MANTEO			
Subdivision:	MARY M BEAUCHAMP D	MARY M BEAUCHAMP DIVISION		
Legal Description:	LOT: 2 BLK: SEC:	LOT: 2 BLK: SEC:		
Owner Name:	JOHN L FERTAL			
Owner Mail Address:	PO BOX 341 - MANTEO,	NC 27954		
Owner Contact Information:				
Contractor Name:	R A HOY HEATING AND AIR CONDITIONING INC			
Contractor Mail Address:	PO BOX 265 - KITTY HAWK, NC 27949			
Contractor Phone:	252-261-8178			
Contractor NC License#:	L13056			
DETAILS	RESIDENTIAL			
		Cost of Job:	\$10,954	
	22222-L			
lectrical Contractor ID:				

Comments: SINGLE C/O. TRANE 15 SEER 3 TON H/P SYSTEM THAT SERVICES THE DOWNSTAIRS. NEW LINE SET

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

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

Applicant Signature:	K & Hoy Heating and his	r Conditioning 5/23/2023	R A HOY HEATING AND AIR CONDITIONING INC Brian@rahoy.com
Inspector Signature:	Docusigned by: Lecil Twiford 007828E30EE84FA	5/23/2023	_ SF

Application Reference # 11417 on 05/18/2023



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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-18420

05/24/2023

Parcel Number:	016160000			
Location:	131 ALGONKIAN DR - N	131 ALGONKIAN DR – MANTEO		
Subdivision:	BECKONRIDGE ESTATES	BECKONRIDGE ESTATES		
Legal Description:	LOT: 18 BLK: SEC:	LOT: 18 BLK: SEC:		
Owner Name:	JACQUELINE M PARKER			
Owner Mail Address:	131 ALGONKIAN DR - M	MANTEO, NC 27954		
Owner Contact Information				
Contractor Name:	R A HOY HEATING AND	AIR CONDITIONING INC		
Contractor Mail Address:	PO BOX 265 - KITTY HAWK, NC 27949			
Contractor Phone:	252-261-8178			
Contractor NC License#:	L13056			
DETAILS	RESIDENTIAL			
		Cost of Job:	\$13,451	
Electrical Contractor ID:	22222-L			
	1	MECHANICAL PROJECT FEE:	\$150.00	

Comments: SINGLE C/O. TRANE 16 SEER 2 TON H/P SYSTEM -- (2) STAGE THAT S ERVICES THE UPSTAIRS. NEW STAND

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

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

Applicant Signature:	R & Hoy Acating and hir Conditioning 0200018806778484	R A HOY HEATING AND AIR CONDITIONING INC Brian@rahoy.com
Inspector Signature:	Leil Twiford 007828E30EE84FA 5/24/2023	SF

Application Reference # 11470 on 05/23/2023

	Plannir PO Box Di	of Dare ng Office rawer 1000 NC 27954		/lanteo: (252) 47 Beach: (252) 47 Frisco: (252) 47	75-5871
	MECHANIC	AL PROJECT			
MECHANICAL PROJECT#: M	ECH-18504			05/3	30/2023
Parcel Number:	016319000				
Location:	348 AIRPORT RD - MANTEO	0			
Subdivision: ROANOKE COLONY					
Legal Description:	LOT: 4 BLK: SEC: 1				
Owner Name:	KRISTINA LYNN FAIR				
Owner Mail Address: Owner Contact Information	348 AIRPORT RD - MANTEC	D, NC 27954			
Contractor Name:	HOUSTON HEATING AND A	IR COND INC			
Contractor Mail Address:	PO BOX 1448 - GRIFTON, N	IC 28530			
Contractor Phone:	252-524-5828				
Contractor NC License#:	108083				
DETAILS	RESIDENTIAL				
		Cost of Job:		\$7,000	
Electrical Contractor ID:	35831				
Units	1 .	MECHANICAL P	ROJECT FEE:	\$150.00	

Comments: REPLACING OUTDOOR HEAT PUMP AND INDOOR AIR HANDLER

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

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

in Bleelere, Hanna Applicant Signature:

HOUSTON HEATING AND AIR COND INC

Inspector Signature: Keil Twiford - ASF SF

Application Reference # 11517 on 05/30/2023

A F	PO E	anning Office Box Drawer 1000 Inteo NC 27954	-Manteo: (252) 475 Northern Beach: (252) 475 Frisco: (252) 475	587
	RESIDENT	AL BUILDING PERMIT		
BUILDING PERMIT#: ACC-184	166		05/26/	202
Parcel Number:	025192000			
Location:	116 JAYHUE DR - MA	NTEO		
Subdivision:	LUCRETIA ETHERIDGE	ESTATE		
Legal Description:	LOT: BLK: SEC:			
Owner Name:	MELISSA ANNE CLARK	:		
Owner Mail Address:	158 STEVE BASNIGHT RD MANTEO, NC 27954			
Owner Phone and email:	N/A			
Contractor Name:	OWNER/BUILDER			
Contractor Mail Address:	158 STEVE BASNIGHT	RD. MANTEO, NC 27954		
Contractor Phone:	N/A	Contractor NC Licens	se#: N/A	
BUILDING INFORMATION				
Proposed Construction Use:	ACCESSORY STRUCT O	VER 12 FT , PREFABRICATED ACC	CESSORY DWELLING 14X24	
Proposed Construction Type:	ADU	Cost of Construction:	\$23,000	
Finished Square Footage:	336	CAMA Permit#:	N/A	
Unfinished Square Footage:	0	Septic Permit#:	12.5	
Stories:	1.0	Septic Permit Date:	05/15/2023	
Building Height:	0	Survey/Site Plan:	336	
Total Rooms:	2	Water Tap#:	S9-18160	
Footing Type:	MASONARY	Water Type:		
Exterior Finish:	LAP SIDING	Flood Zone:	Х	
Bedrooms:	1	Base Flood Elevation:	8.0	
		Baths/half baths:	1.00/0	

\$252.00

MELISSA ANNE CLARK

SF

NC Building code, permanent HVAC system must be installed.
TOTAL FEES:

Applicant Signature: Men Gal

Inspector Signature: Keil Twiford - ASP

Application Reference # 10682 on 03/15/2023

	P	County of Dare Planning Office O Box Drawer 1000 Manteo NC 27954	Manteo: (252) 475-5870 Northern Beach: (252) 475-5871 Frisco: (252) 475-5878
WITH CAROLIN	PECIDE	ENTIAL BUILDING PERMIT	
	RESIDE	INTIAL BOILDING PERMIT	
BUILDING PERMIT#: R-18422	2		05/24/2023
Parcel Number:	017505000		
Location:	5978 MUSIC LN -	MANNS HARBOR	
Subdivision:	SUBDIVISION - NO	NE	
Legal Description:	LOT: PARCEL 1 BLK: SEC:		
Owner Name:	RAYE LYNN J TAYL	OR	
Owner Mail Address:	P O BOX 82 MANN	IS HARBOR, NC 27953	
Owner Phone and email:	252-216-5060 ray	elynnjohnson@gmail.com	
Contractor Name:	OWNER/BUILDER		
Contractor Mail Address:	P.O. BOX 82 MAN	NS HARBOR	
Contractor Phone:	252-216-5060	Contractor NC License#: N/	'A
BUILDING INFORMATION			
Proposed Construction Use:	RESIDENTIAL ADDI	TION, DECK & PORCH ADDITION,	12X23.5
Proposed Construction Type:	SFD	Cost of Construction	n: \$6,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	288	Septic Permit#:	S22-18358
Stories:	0.0	Septic Permit Date:	05/22/2023
Building Height:	n/a	Survey/Site Plan:	YES
Base Flood Elevation:	8.0	Water Tap#:	n/a
.ot/Ground Elevation:	n/a	Flood Zone:	AE
Proposed Finished Floor Elevation:	n/a		

Comments: Any deviation from the building plan or site plan requires prior approval. Dwelling must be inspected prior to CO to ensure intent of Building Code has been met.

PERMIT FEE FLOOD DEVELOPMENT BLDG PERMIT

\$150.00 75.00

		TOTAL FEES:	\$225.00
Applicant Signature:	Jan D	RAYE LYNN J TAYLO	DR
Inspector Signature:	Keil Twiford - 755	SF	

Application Reference # 11453 on 05/23/2023

		County of Dare Planning Office PO Box Drawer 1000 Manteo NC 27954	Manteo: (252) 475-5870 Northern Beach: (252) 475-5871 Frisco: (252) 475-5878	
	RESID	ENTIAL BUILDING PERMIT		
BUILDING PERMIT#: R-18298			05/19/2023	
Parcel Number:	025507000			
Location:	805 LINDBERGH	BERRY RD – MANTEO		
Subdivision:	SUBDIVISION - NO	DNE		
Legal Description:	LOT: BLK: SEC:			
Owner Name:	NATALIE ARZU-RO	DCHEZ		
Owner Mail Address:	PO BOX 33 MANT	EO, NC 27954		
Owner Phone and email:	monyzay32@yahoo.com			
Contractor Name:	NATALIE ARZU-RO	DCHEZ		
Contractor Mail Address:	PO BOX 33, MAN	ITEO, NC 27954		
Contractor Phone:	252-305-6716 Contractor NC License#: OWNER/BLDR			
BUILDING INFORMATION				
Proposed Construction Use:	RESIDENTIAL ADD	ITION , ADDITIONS OF A 8X12 COV	ERED PORCH AND A 12X16 PORCH	
Proposed Construction Type:	SFD	Cost of Construction	: \$20,000	
Finished Square Footage:	0	CAMA Permit#:	NA	
Unfinished Square Footage:	192	Septic Permit#:	27983	
Stories:	0.0	Septic Permit Date:	7/31/2018	
Building Height:	N/a	Survey/Site Plan:	YES	
Total Rooms:	0	Water Tap#:	Existing	
Footing Type:	PILING	Flood Zone:	SHX	
Proposed Finished Floor Elevation:	n/a	Base Flood Elevation	: 8.0	
Lot/Ground Elevation:	N/A			

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

\$150.00

	TOTAL FEES:	\$150.00
Applicant Signature:	NATALIE ARZU	-ROCHEZ
nspector Signature:	SF	

Application Reference # 7510 on 05/20/2022

DocuSign Envelope	ID: 828675E4-CA73-4029-BED6-107D8BDE76D9
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Manteo: (252) 475-5870 Northern Beach: (252) 475-5871 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-18273

05/18/2023

Parcel Number:	016239040						
Location:	147 DOGWOOD TRL – MANTEO						
Subdivision:	DOGWOOD HILLS	DOGWOOD HILLS					
Legal Description:	LOT: 40 BLK: SEC:	LOT: 40 BLK: SEC:					
Owner Name:	DAWN M TTEE K	ONIG-HILDRETH					
Owner Mail Address:	2213 GARRITY RD	SAINT LEONARD, MD 20685					
Owner Phone and email:							
Contractor Name:	TO THE T CONSTR	UCTION					
Contractor Mail Address:	209 GREENS DR,	MANTEO, NC 27954					
Contractor Phone:	252-216-8991	Contractor NC License#: 63750					
BUILDING INFORMATION							
Proposed Construction Use:		CT OVER 12 FT , DETACHED GARAGE FO ECTROCK ELECTRICAL ONLY	R VEHICLE ONLY, NO				
Proposed Construction Type:	STR	Cost of Construction:	\$60,000				
Finished Square Footage:	0	CAMA Permit#:	N/A				
Unfinished Square Footage:	384	Septic Permit#:	S22-17795				
Stories:	0.0	Septic Permit Date:	04/27/2023				
Building Height:	384	Survey/Site Plan:	YES				
Footing Type:	MASONARY	Flood Zone:	х				
Lot/Ground Elevation:	10.00	Base Flood Elevation:	8.0				

Comments: Any deviation from the building plan or site plan requires prior approval.

As-Built Survey Required prior to final inspection.

	B	TOTAL FEES:		\$153.60
Applicant Signature:	TTA	5/18/2023	TO THE T CONSTRUCTION	
Inspector Signature:	buil Twiford	5/18/2023	SF	

Application Reference # 11201 on 05/02/2023

	County of Dare Planning Office PO Box Drawer 1000 Manteo NC 27954		Manteo: (252) 475-587 Northern Beach: (252) 475-587 Frisco: (252) 475-587	
	RESIDENTIAL B	UILDING PERMIT		
BUILDING PERMIT#: REPAIR-	18167			05/15/2023
Parcel Number: Location:	023373000 3117 NC 345 – WANCHESE			
Subdivision:	SUBDIVISION - NONE			
Legal Description:	LOT: BLK: SEC:			
Owner Name: Owner Mail Address: Owner Phone and email:	MOLLIE E SILVER 593 BAUMTOWN RD WAN	ICHESE, NC 27981		
Contractor Name: Contractor Mail Address: Contractor Phone:	OWNER/BUILDER Contractor NC Lice	ense#: N/A		
BUILDING INFORMATION				
Proposed Construction Use:	REPAIR , DECK REPAIR			
Proposed Construction Type:	RESIDENTIAL	Cost of Construction:	\$10,000	
		Flood Zone:	AE	
		Base Flood Elevation:	8.0	
Comments: Any deviation from or site plan requires prior appro		FEE		\$150.00
	TOTAL F	EES:		\$150.00
Applicant Signature:	Pen (1) Sk-	MOLLIE E SIL	VER	
Applicant Signature.	Thursday of	Mar and Mar		

Application Reference # 11373 on 05/15/2023

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

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

05/09/2023

\$150.00

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-18046 Parcel Number: 025862005 Location: 627 SKYCO RD – MANTEO Subdivision: ASHBY HARBOR Legal Description: LOT: 5 BLK: SEC: Owner Name: MELINDA DOWDY KURENT Owner Mail Address: 2962 WILDERNESS BLVD E PARRISH, FL 34219

Owner Phone and email:			
Contractor Name:	JES CONSTRUCTION	LLC	
Contractor Mail Address:	1741 CORPORATE LA	NDING PKWY STE 101, VIRGINIA E	BEACH, VA 23454
Contractor Phone:	757-558-9909	Contractor NC License#: 69678	
BUILDING INFORMATION			
Proposed Construction Use:	REPAIR , INSTALLATIO FOOTINGS	N OF 18 IMG INTELLIJACKS W/ END	UROCRETE PREFORM CONCRETE
Proposed Construction Type:	RESIDENTIAL	Cost of Construction:	\$20,000
		Flood Zone:	AE

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

		TOTAL FEES:		\$150.00
Applicant Signature:	JES Construction	5/9/2023	JES CONSTRUCTION LLC	
Inspector Signature:	buil twiford	5/9/2023	SF	

Application Reference # 11290 on 05/08/2023

CAPOLITY CAPOLITY	F	Planning Office PO Box Drawer 1000 Manteo NC 27954	Manteo: (252) 475-58 Northern Beach: (252) 475-58 Frisco: (252) 475-58	
	RESIDE	ENTIAL BUILDING PERMIT		
BUILDING PERMIT#: R-18040)			05/09/202
Parcel Number:	023612000			
Location:	4195 MILL LANDIN	NG RD – WANCHESE		
Subdivision:	SUBDIVISION - NO	INE		
Legal Description:	LOT: BLK: SEC:			
Owner Name:	JEFFREY H GARRIS	ON		
Owner Mail Address:	4195 MILL LANDIN			
Owner Phone and email:	252-305-5575 ob			
Contractor Name:	OWNER/BUILDER			
Contractor Mail Address:	4195 MILL LANDIN	G RD. WANCHESE, NC 27981		
Contractor Phone:	252-305-5575	Contractor NC License#: N/A		
BUILDING INFORMATION				
Proposed Construction Use:	RESIDENTIAL ENCL	OSURE, ENCLOSURE OF UNDERNEA	TH OF HOME 12X32	
Proposed Construction Type:	SFD	Cost of Construction:	\$1,000	
Finished Square Footage:	0	CAMA Permit#:	NA	
Unfinished Square Footage:	420	Septic Permit#:	S22-17762	
Stories:	1.0	Septic Permit Date:	04/26/23	
Total Rooms:	4	Flood Zone:	SHX	
Footing Type:	PILING	Base Flood Elevation:	8.0	
Exterior Finish:	LAP SIDING	Baths/half baths:	2.00/0	
Bedrooms:	2			
Comments: Any deviation from	the building plan	PERMIT FEE		\$168.00
or site plan requires prior appro	oval.	FLOOD DEVELOPMENT BLDG PERMI	Т	75.00
	-	TOTAL FEES:		\$243.00

SF

Application Reference # 11205 on 05/02/2023

Inspector Signature:



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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-17840

05/02/2023

Parcel Number:	025860000			
.ocation:	664 SKYCO RD – MANTEO			
Subdivision:	SUBDIVISION - NONE			
.egal Description:	LOT: BLK: SEC:			
Owner Name:	SHEILA R STONE			
Owner Mail Address: Owner Phone and email:	P O BOX 454 OJAI, CA 93024			
Contractor Name:	TO THE T CONSTRUCTION	·····		
Contractor Mail Address:	209 GREENS DR, MANTEO, N	C 27954		
Contractor Phone:	252-216-8991 Contra	ctor NC License#: 63750		
ACCESSORY INFORMATION				
Proposed Construction:	RESIDENTIAL - DOCKS; PIERS; BL	ILKHDS, BOATLFTS,		
Description of Work	REMOVAL OF OLD WALKWAY T	O "BEACH" & INSTALL NEW		
		Cost of Construction:	\$2,800	
		CAMA Permit#:	2023-12	
		Flood Zone:	AE	
		Base Flood Elevation:	0.0	
		Lot/Ground Elevation:	n/a	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES	:		\$250.00
Applicant Signature:	100	TO THE T CONSTR	RUCTION	
	1			
	1th	SF		
nspector Signature:	HT	SF		

Application Reference # 11160 on 04/28/2023



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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-17995

05/08/2023

Parcel Number:	025122000						
Location:	119 ELIZABETH DR – MANTEO						
Subdivision:	SUBDIVISION - NO	DNE					
Legal Description:	LOT: BLK: SEC:	LOT: BLK: SEC:					
Owner Name:	HOWARD O III RO	СК					
Owner Mail Address:	119 ELIZABETH DI	119 ELIZABETH DR MANTEO, NC 27954					
Owner Phone and email:							
Contractor Name:	SWIMME AND SO	N					
Contractor Mail Address:	184 LOVERS LANE	, ELIZABETH CITY, NC 27909					
Contractor Phone:	252-338-2443	Contractor NC License#: 43338					
BUILDING INFORMATION							
Proposed Construction Use:	REMODEL RES, REI FIXTURES	PLACE EXISITING BATHROOM TILE SHOW	WER & FLOOR WITH NEW TILE &				
Flood Zone:	х	Cost of Construction:	\$20,938				
Septic Permit Date:	N/A	CAMA Permit#:	N/A				
Water Tap#:	EXISTING	Septic Permit#:	N/A				

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

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\$210.00

		TOTAL FEES:		\$210.00
	Docu8igned by:			
Applicant Signature:	Swimme & Son Build	ling (sometractors	SWIMME AND SON	
	Docutigned by:			
Inspector Signature:	buil twiford	5/8/2023	SF	
	607829E30EE94FA			

Application Reference # 11131 on 04/26/2023

Se a tra	County of Dare	
U 1070 A B TTT	Planning Office	Manteo: (252) 475-587
· (@)	PO Box Drawer 1000	Northern Beach: (252) 475-587
Torth CAROLIS	Manteo NC 27954	Frisco: (252) 475-587
and the second se	ANTENNA INSTALLATION - REPLACE PERMIT	
PERMIT#: C-18126		05/12/202
Parcel Number:	026395003	
Location:	14622 HWY 64 – EAST LAKE	
Subdivision:	SUBDIVISION - NONE	
Legal Description:	LOT: LEASEHOLD BLK: SEC:	
Owner Name:	ATC SEQUOIA LLC	
Owner Mail Address:	10 PRESIDENTIAL WAY - WOBURN, MA 01801	
Owner Contact Information:		
Contractor Name:	KMM TELECOMMUNICATIONS	
Contractor Mail Address:	1900 LAKEWAY DR. ST. 100 - LEWISVILLE, TX 75057	
Contractor Phone:	phone: NA Contractor NC License#: 86291	
BUILDING INFORMATION		
BUILDING INFORMATION	ANTENNA INSTALLATION - REDLACE	
	ANTENNA INSTALLATION - REPLACE	
Proposed Construction Use:	ANTENNA INSTALLATION - REPLACE Replace 9 antennas on existing 229' tower 9 Cost of Constructior	n: \$24,456
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower 9 Cost of Construction	n: \$24,456
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower	n: \$24,456
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower 9 Cost of Construction	n: \$24,456 \$300.0
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval.	
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval.	\$300.0
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval. PERMIT FEE	\$300.0
Proposed Construction Use: Number of Antennas:	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval. PERMIT FEE	\$300.0
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES:	\$300.0
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES:	\$300.0
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction In the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES: M. Facil Line 4 Co (an struction 5 /12 /2022	\$300. \$300.
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction In the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES: M. Facil Line 4 Co (an struction 5 /12 /2022	\$300.0 \$300. 0
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction In the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES: M. Facil Line 4 Co (an struction 5 /12 /2022	\$300.0 \$300.0
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction n the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES: NET PERMIT Science NET	
Proposed Construction Use: Number of Antennas: Comments: Any deviation from	Replace 9 antennas on existing 229' tower 9 Cost of Construction In the building plan or site plan requires prior approval. PERMIT FEE TOTAL FEES: M. Facil Line 4 Co (an struction 5 /12 /2022	\$300.0 \$300.0

Application Reference # 11289 on 05/08/2023

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

COMMERCIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-18283

05/18/2023

Parcel Number: Location: Subdivision: Legal Description:	023090000 814 N HWY 64/264 – MANTEO ROANOKE PARK LOT:PART OF BLK G & J BLK: SEC:						
Owner Name: Owner Mail Address:		814 ELIZABETHAN LLC P O BOX 90 KILL DEVIL HILLS, NC 27948					
Owner Phone and email:		252-256-9137 jcargill@icrsaga.com					
Contractor Name:	SAGA CONSTRU	CTION INC					
Contractor Mail Address:	STE 301, 1314 S	CROATAN HWY KILL DEVIL HILLS, NC	27948				
Contractor Phone:	252-441-9003	Contractor NC License#: 62306					
BUILDING INFORMATION							
Proposed Construction Use: Construction of room and appur		a 1320 sq. ft. commercial swimming p tenances.	bool w/associative e	quipment			
Proposed Construction Type:	COMMERCIAL	Cost of Construction:	\$195,000				
Survey/Site Plan:	YES	CAMA Permit#:	NA				
Water Tap#:	NA	Septic Permit#:	S22-17414				
Flood Zone:	X	Septic Permit Date:	4/11/2023				
Base Flood Elevation:	8.0			_			
Comments: Any deviation fro	m the building plan	POOL PERMIT FEE		\$300.00			
or site plan requires prior app		PENALTY NO PERMIT		150.00			
COVERAGE SHALL BE LESS TH, ON SITE PLAN.	AN 50% AS STATED	ACCESSORY STRUCTURE OVER 12FT		150.00			
		TOTAL FEES:		\$600.00			
Applicant Signature:	elyn Mirick	5/18/2023 SAGA CONSTR					
Inspector Signature:	turford.	5/18/2023 SF					

Application Reference # 11345 on 05/12/2023



PERMIT#: R-18145

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

MOBILE HOME PERMIT

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

05/12/2023

Parcel Number:	025931000			
Location:	60A FRIENDLY DR – WANCHESE			
Subdivision:	SUBDIVISION - NONE LOT: BLK: SEC:			
Mobile Home Park:				
OWNER INFORMATION	REX EDWARD SIMPSON			
	7838 HWY 17 N WANCH	ESE, NC 27981		
MOBILE HOME INSTALLER	D AND D MOBILE HOME MOVERS			
	7838 HWY 17 N WASHINGTON, NC 27889			
	252-944-6422 NC Lice	nse#: 3261		
MOBILE HOME MOVER	D AND D MOBILE HOME MOVERS			
	7838 HWY 17 N WASHINGTON, NC 27889			
	252-944-6422 NC License#: 3261			
OTHER	CLAYTON HOMES INC			
	1560 NORTH ROAD ST EL	IZABETH CITY, NC 27909		
	252-335-1070			
DETAILS	MOBILE HOME INSTALLATION			
Living Space	1680	Estimated Cost:	\$137,000	
Non-living Space	100	CAMA Permit#:	NA	
Make:	CLAYTON	Septic Permit#:	S22-16751	
Model:	ULTRA AO	Septic Permit Date:	03/14/2023	
Year:	2022	Survey/Site Plan:	YES	
Serial #:	0HC031524NCAB	Water Tap#:	EXISTING	
Bedrooms:	4	Bathroom:	2	
Width in feet:	28	Flood Zone:	х	
Length in feet:	60	Base Flood Elevation:	8.0	
Hurricane Built:	3	Lot/Ground Elevation:		
Footing/foundation Type:	CONCRETE	Application Number:	11229	

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

\$840.00

TOTAL FEES:		\$840.00
L 1 th		
Applicant Signature:		
Inspector Signature:	SF	

Application Reference # 11229 on 05/04/2023



MOBILE HOME PERMIT

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

M

PERMIT#: R-17892

05/03/2023

Bathrooms.	2		
Bedrooms:	Z	Application Number:	10980
Length in feet:	72	Lot/Ground Elevation:	
Width in feet:	14	Base Flood Elevation:	8.0
Serial #:	HDNC27614FK2218674	Flood Zone:	x
Year:	1987	Septic Permit Date:	03/29/2023
Make:	OAKWOOD	Septic Permit#:	S22-17116
Non-living Space	0	CAMA Permit#:	NA
Living Space	1008	Estimated Cost:	\$4,000
DETAILS	MOBILE HOME		
	252-948-2478 NC Licens	e#: 32077	
	804 DOWN HOME LANE W	ASHINGTON, NC 27889	
MOBILE HOME INSTALLE	R DOWN HOME MOVERS		
	804 DOWN HOME LANE M	ANTEO, NC 27954	
OWNER INFORMATION	WILLIAM ARTHUR CARVER		
Mobile Home Park:			
Subdivision:	JEROME B GRIFFIN PROPER	TY LOT: 6-7 BLK: SEC:	
Location:	709 FERNANDO ST – MANT	EO	
Parcel Number:	025520000		

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

\$504.00

\$504.00

		TOTAL FEES:	
Applicant Signature:	michael E	Thas	
Inspector Signature:	+++++++		SF

Application Reference # 10980 on 04/12/2023