



# 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

### BJ2023-136

**PROJECT NAME:** Lane Investment Properties New House  
**SITE ADDRESS:** 1506 DOGWOOD LN KILL DEVIL HILLS

### BUILDING JOINT

**ISSUED:** 06/16/2023

**EXPIRES:** 06/15/2024

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

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

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

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

#### PARCEL:

**PIN:** 988413138613

**Parcel Number:** 026981000

**Address:** 1506 DOGWOOD LN KILL DEVIL HILLS

**Zoning:**

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

**Block:** 0 **Lot(s):** 50

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:	
Land Disturbing	\$100.00	\$0.00	Residential Heated Space	2291 sq. Ft.
Covered Porch Residential	\$77.25	\$0.00	(.75)	
Res. Building Permit Fee	\$1,718.25	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	103 SQFT
<b>Totals :</b>	<b>\$1,945.50</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** New 4 bedroom single family dwelling with fence

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #

T25700

276

**BJ2023-136**

**PROJECT NAME:** Lane Investment Properties New House  
**SITE ADDRESS:** 1506 DOGWOOD LN KILL DEVIL HILLS

**BUILDING JOINT****ISSUED:** 06/16/2023**EXPIRES:** 06/15/2024**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S3-15770
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	633000.00
LOT COVERAGE	17.30
LIVING SPACE (SQFT)	2291
COVERED PORCHES/DECKS (SQFT)	103
TOTAL SQUARE FOOTAGE	2394
SURVEYOR NAME AND NUMBER	Ray Meekins
ENGINEER AND LICENSE NUMBER	Melissa McAllister 028946
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



# Town of Kill Devil Hills

PAID

PO BOX 1719  
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Phone: 252-449-5318 Fax: 252-441-4102

JUN 21 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### BJ2023-146

### BUILDING JOINT

PROJECT NAME: Glenn Edwards  
SITE ADDRESS: 111 WRIGHT AVE E KILL DEVIL HILLS

ISSUED: 06/22/2023  
EXPIRES: 12/19/2023

APPLICANT: Edwards, Glenn  
201 Downing Drive  
chesapeake, va 23322  
757-778-0185

OWNER: Edwards, Glenn  
201 Downing Drive  
chesapeake, va 23322  
757-778-0185

CONTRACTOR: SAME AS OWNER  
UNKNOWN  
UNKNOWN, XX 00000

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

#### PARCEL:

PIN: 988420706714

Parcel Number: 003881000

Address: 111 WRIGHT AVE E KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 37 Lot(s): 18

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$306.00	\$0.00	Residential Heated Space	2606 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	408 SQFT
Res. Building Permit Fee	\$1,954.50	\$0.00	# of Temporary Poles	1 EA
			Open Decks	1 EA
<b>Totals :</b>	<b>\$2,460.50</b>	<b>\$0.00</b>		

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

134

**BJ2023-146****PROJECT NAME:** Glenn Edwards  
**SITE ADDRESS:** 111 WRIGHT AVE E KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/22/2023**EXPIRES:** 12/19/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S3-16661
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	350000.00
LOT COVERAGE	40.00
LIVING SPACE (SQFT)	2606
COVERED PORCHES/DECKS (SQFT)	408
OPEN DECK (SQFT)	240
TOTAL SQUARE FOOTAGE	3254
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	John DeLucia 16759
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

PO BOX 1719  
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## Planning and Inspection Department

**BJ2021-264**

**PROJECT NAME:** Carl Worsley and Associates  
**SITE ADDRESS:** 903 Wrightsville Blvd Kill Devil Hills

**BUILDING JOINT**

**ISSUED: 06/14/2023**

**EXPIRES: 12/11/2023**

**APPLICANT:** WORSLEY, CARL/ WORSLEY COMPANY  
PO Box 188  
Nags Head, NC 27959  
252-441-0500

**OWNER:** WORSLEY, CARL/ WORSLEY COMPANY  
PO Box 188  
Nags Head, NC 27959  
252-441-0500

**GENERAL, UNLIMITED:** CARL WORSLEY & ASSOCIATES  
PO Box 188  
Nags Head, NC 27959  
252-423-0445

**License:** 58569  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988308888569

**Parcel Number:** 004213000

**Address:** 903 Wrightsville Blvd Kill Devil Hills

**Addition:** KILL DEVIL HILLS SEC 1

**Zoning:**  
**Block:** 13 **Lot(s):** 3-4

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$1,637.55	\$0.00	Residential Unheated (.40)	72 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	2145 sq. Ft.
Covered Porch Residential	\$286.50	\$0.00	Covered Porches/Decks	382 SQFT
<b>Totals :</b>	<b>\$1,974.05</b>	<b>\$0.00</b>	# of Temporary Poles	1 EA

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

PAID

JUN 15 2023

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T25701

**BJ2021-264****PROJECT NAME:** Carl Worsley and Associates  
**SITE ADDRESS:** 903 Wrightsville Blvd Kill Devil Hills**BUILDING JOINT****ISSUED:** 06/14/2023**EXPIRES:** 12/11/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28990
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.10
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	450000.00
LOT COVERAGE	38.90
LIVING SPACE (SQFT)	2145
COVERED PORCHES/DECKS (SQFT)	382
STORAGE (SQFT)	72
TOTAL SQUARE FOOTAGE	2599
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	Y
ROLL OUT CAN	2
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**Town of Kill Devil Hills**

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**Planning and Inspection Department**

<b>BJ2023-132</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Jimmy Rivera	<b>ISSUED:</b> 06/07/2023
<b>SITE ADDRESS:</b> 905 DURHAM ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 12/04/2023

<b>APPLICANT:</b> Farrell & Family Construction 113 E Meadowlark St Kill Devil Hills, NC 27948 252-216-8810	<b>OWNER:</b> Rivera, Jimmy 503 Third ST Kill Devil Hills, NC 27948
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<b>UNLIMITED BUILDING:</b> Farrell & Family Construction 113 E Meadowlark St Kill Devil Hills, NC 27948 252-216-8810	<b>License:</b> 86449 <b>Expires:</b> 12/31/2023
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**PARCEL:**

PIN: 988405087291	Parcel Number: 001387000
Address: 905 DURHAM ST W KILL DEVIL HILLS	
Addition: AVALON BEACH ANNEX 2 & 3	Zoning: Block: 0 Lot(s): 682
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:
Land Disturbing	\$100.00	\$0.00	Covered Porches/Decks 120 SQFT
Covered Porch Residential	\$90.00	\$0.00	Residential Unheated (.40) 27 Sq. Ft
Res. Building Permit Fee	\$2,060.55	\$0.00	Residential Unheated (.40) 435 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space 2501 sq. Ft.
<b>Totals :</b>	<b>\$2,300.55</b>	<b>\$0.00</b>	(.75) # of Temporary Poles 1 EA

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

**PAID**

JUN 7 2023

TOWN OF  
KILL DEVIL HILLS

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: 725699

204

**BJ2023-132**

PROJECT NAME: Jimmy Rivera

SITE ADDRESS: 905 DURHAM ST W KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 06/07/2023

EXPIRES: 12/04/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	510000.00
LOT COVERAGE	37.80
LIVING SPACE (SQFT)	2501
COVERED PORCHES/DECKS (SQFT)	120
GARAGE (SQFT)	435
STORAGE (SQFT)	27
TOTAL SQUARE FOOTAGE	3083
SURVEYOR NAME AND NUMBER	Eastern Geomatics
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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## Planning and Inspection Department

<b>BJ2023-131</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Water Oak Residential, LLC	<b>ISSUED:</b> 06/07/2023
<b>SITE ADDRESS:</b> 503 Zen Lane Kill Devil Hills	<b>EXPIRES:</b> 12/04/2023

<b>APPLICANT:</b> SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>OWNER:</b> Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
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<b>GENERAL - UNLIMITED:</b>	SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>License:</b> 62306 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988414229882	<b>Parcel Number:</b> 004045044
<b>Address:</b> 503 Zen Lane Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> <b>Lot(s):</b>
<b>Legal Description:</b> Lot 44, Phase 2, Water Oak Residential Community	

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,477.95	\$0.00	Residential Unheated (.40)	498 Sq. Ft
Covered Porch Residential	\$280.50	\$0.00	Covered Porches/Decks	374 SQFT
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1705 sq. Ft.
<b>Totals :</b>	<b>\$1,808.45</b>	<b>\$0.00</b>	# of Temporary Poles	1 EA

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

**PAID**

JUN 7 2023

TOWN OF  
KILL DEVIL HILLS

<sup>176</sup> Town of Kill Devil Hills  
Water Charges  
**PAID**

Water T. c. #

**BJ2023-131****PROJECT NAME:** Water Oak Residential, LLC  
**SITE ADDRESS:** 503 Zen Lane Kill Devil Hills**BUILDING JOINT****ISSUED:** 06/07/2023**EXPIRES:** 12/04/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LIVING SPACE (SQFT)	1705
COVERED PORCHES/DECKS (SQFT)	374
GARAGE (SQFT)	498
TOTAL SQUARE FOOTAGE	2577
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

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## Planning and Inspection Department

<b>MC2023-145</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> HAYMAN	<b>ISSUED:</b> 06/13/2023
<b>SITE ADDRESS:</b> 1603 WRIGHTSVILLE BLVD KILL DEVIL HILLS	<b>EXPIRES:</b> 12/10/2023

<b>APPLICANT:</b> HAYMAN, SHAUN 2605 SOUTH COMPASS LN nags head, nc 27959	<b>OWNER:</b> HAYMAN, SHAUN 2605 SOUTH COMPASS LN nags head, nc 27959
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<b>MECHANICAL H-3:</b>	ARMSTRONG AND SON 3978 Albermarle Curch rd. Columbia, NC 27925 252-394-5316	<b>License:</b> 22516 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 989309056204	<b>Parcel Number:</b> 008257000
<b>Address:</b> 1603 WRIGHTSVILLE BLVD KILL DEVIL HILLS	
<b>Addition:</b> OCEAN ACRES INC	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 71-73

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

 **PAID**  
6/19/23  
*[Signature]*

**MC2023-145**

**PROJECT NAME:** HAYMAN

**SITE ADDRESS:** 1603 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	17000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Lori B Armstrong Date: 06 / 13 / 2023



# Town of Kill Devil Hills

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

**PAID**

**Planning and Inspection Department**

**MAY 31 2023**

<b>BP2023-144</b> PROJECT NAME: DAVIS DECK REBUILD SITE ADDRESS: 205 SUFFOLK ST KILL DEVIL HILLS	TOWN OF KILL DEVIL HILLS
	<b>BUILDING</b>
	ISSUED: 05/31/2023
	EXPIRES: 11/27/2023

**APPLICANT:** DAVIS, JAMES  
205 SUFFOLK ST  
Kill Devil Hills, NC 27948  
252-599-7294

**OWNER:** DAVIS, JAMES  
205 SUFFOLK ST  
Kill Devil Hills, NC 27948  
252-599-7294

**GENERAL, UNLICENSED:** CCPR CONSTRUCTION  
801 W AVAL DR  
Kill Devil Hills, NC 27948  
252-305-5758

**License:** XXXXXX  
**Expires:**

**PARCEL:**

**PIN:** 988517107131

**Parcel Number:** 001961000

**Address:** 205 SUFFOLK ST KILL DEVIL HILLS

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

**Zoning:**

**Block:** 0 **Lot(s):** 788

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>
Open Deck Fee	\$300.00	\$0.00	Open Decks 2 EA
<b>Totals :</b>	<b>\$300.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** REBUILD FRONT AND REAR DECK

**BP2023-144**

**PROJECT NAME:** DAVIS DECK REBUILD  
**SITE ADDRESS:** 205 SUFFOLK ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 05/31/2023

**EXPIRES:** 11/27/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	24964.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

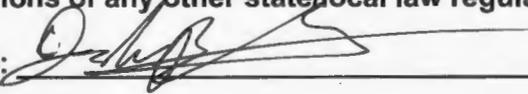
Zoning Final

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:** 5-31-23



# Town of Kill Devil Hills

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PAID

JUN 5 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BP2023-145**

**PROJECT NAME:** Newman Stair Replacement  
**SITE ADDRESS:** 209 MARTIN ST E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/02/2023

**EXPIRES:** 11/29/2023

**APPLICANT:** FIVE STAR CONSTRUCTION  
1004 INDIAN DR  
Kill Devil Hills, NC 27948  
252-489-1252

**OWNER:** Newman, Michelle  
102 Whispering WAY  
YORKTOWN, VA 23692  
757-532-3780

**GENERAL, UNLICENSED:** FIVE STAR CONSTRUCTION  
1004 INDIAN DR  
Kill Devil Hills, NC 27948  
252-489-1252

**License:** XXX  
**Expires:**

**PARCEL:**

**PIN:** 988312976414

**Parcel Number:** 004231001

**Address:** 209 MARTIN ST E KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS SEC 1

**Block:** 16 **Lot(s):** 1

**Legal Description:**

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

**PROJECT DESCRIPTION:** replace deck boards and handrails on rear deck, replace rear stairs to same footprint

**BP2023-145**

**PROJECT NAME:** Newman Stair Replacement  
**SITE ADDRESS:** 209 MARTIN ST E KILL DEVIL HILLS

**BUILDING****ISSUED:** 06/02/2023**EXPIRES:** 11/29/2023**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13000.00
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.

\* Zoning Final Inspection is required.



# Town of Kill Devil Hills

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PAID

JUN 5 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BP2023-147**

**PROJECT NAME:** CARRADINE SHED  
**SITE ADDRESS:** 2044 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/05/2023

**EXPIRES:** 12/02/2023

**APPLICANT:** Carradine, Jim  
300 Irwin Run Road  
WEST MIFFLIN, PA 15122  
412-216-7974

**OWNER:** Carradine, Jim  
300 Irwin Run Road  
WEST MIFFLIN, PA 15122  
412-216-7974

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

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

**PARCEL:**

**PIN:** 988517200176

**Parcel Number:** 001316000

**Address:** 2044 CROATAN HWY N KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 551

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Accessory Residential (MIN)	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 10X12 STORAGE SHED IN REAR YARD

**BP2023-147**

**PROJECT NAME:** CARRADINE SHED  
**SITE ADDRESS:** 2044 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/05/2023

**EXPIRES:** 12/02/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

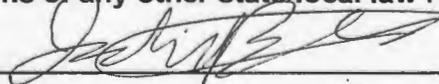
Zoning Final

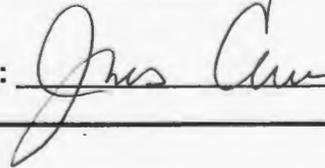
Final

**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.
- \* Zoning Final Inspection is required.
- \* 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:** 6/5/23



# Town of Kill Devil Hills

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

**PAID**

**JUN 5 2023**

**Planning and Inspection Department**

<b>BP2023-146</b> <b>PROJECT NAME:</b> Garrott New Deck <b>SITE ADDRESS:</b> 104 GREENSBORO ST KILL DEVIL HILLS	<b>TOWN OF</b>
	<b>KILL DEVIL HILLS</b>
	<b>BUILDING</b>
	<b>ISSUED: 06/02/2023</b>
	<b>EXPIRES: 11/29/2023</b>

**APPLICANT:** GARROTT, RYAN  
311 SIR CHANDLER DR  
Kill Devil Hills, NC 27948  
252-305-7248

**OWNER:** Horizon Properties Obx Llc  
311 Sir Chandler Dr  
Kill Devil Hills, NC 27948

**UNLICENSED - REMODELING:** GARROTT, RYAN  
311 SIR CHANDLER DR  
Kill Devil Hills, NC 27948  
252-305-7248

**License:** XXXXXX  
**Expires:** 12/31/2030

**PARCEL:**

**PIN:** 988406295996

**Parcel Number:** 001874000

**Address:** 104 GREENSBORO ST KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH ANNEX 1

**Block:** 0 **Lot(s):** 429

**Legal Description:**

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

**PROJECT DESCRIPTION:** new 32x8 side yard deck and front stairs

**BP2023-146**

**PROJECT NAME:** Garrott New Deck

**SITE ADDRESS:** 104 GREENSBORO ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/02/2023

**EXPIRES:** 11/29/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S22-18653
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
LOT COVERAGE	49.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Timothy Fish
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.

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

\* 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

**BP2023-152**

**PROJECT NAME:** Sawyer Deck Repair/Replacement  
**SITE ADDRESS:** 213 WILKINSON ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/08/2023

**EXPIRES:** 12/05/2023

**APPLICANT:** GEORGE SAWYER  
213 Wilkerson St.  
KDH, NC 27848

**OWNER:** GEORGE SAWYER  
213 Wilkerson St.  
KDH, NC 27848

**GENERAL, UNLIMITED:** RELIANT CONSTRUCTION LLC  
4275 Worthington Lane  
kitty hawk, nc 27949  
252-202-7007

**License:** 62339  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988513022774

**Parcel Number:** 000528000

**Address:** 213 WILKINSON ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 33 **Lot(s):** 11-13

**Legal Description:**

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

**PROJECT DESCRIPTION:** Remove top level deck, replace decking, handrails, and stairs. Existing joist, girders, pilings to remain.

**PAID**

**JUN 8 2023**

TOWN OF  
KILL DEVIL HILLS

**BP2023-152**

**PROJECT NAME:** Sawyer Deck Repair/Replacement  
**SITE ADDRESS:** 213 WILKINSON ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/08/2023

**EXPIRES:** 12/05/2023

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**DETAILS**

**Permit**

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<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
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.  
.....



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BP2023-151</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Goldberg Deck	<b>ISSUED:</b> 06/07/2023
<b>SITE ADDRESS:</b> 1728 SOBLE DR KILL DEVIL HILLS	<b>EXPIRES:</b> 12/04/2023

**APPLICANT:** goldberg, eric  
123 riverside dr  
suffolk, va 23435  
757-676-9026

**OWNER:** goldberg, eric  
123 riverside dr  
suffolk, va 23435  
757-676-9026

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

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

**PARCEL:**

**PIN:** 988410470412

**Parcel Number:** 002763000

**Address:** 1728 SOBLE DR KILL DEVIL HILLS

**Addition:** HEDRICKS ADD-PAR B CROATAN SH

**Zoning:**  
**Block:** 0 **Lot(s):** 28

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>
Open Deck Fee	\$150.00	\$0.00	Open Decks 1 EA
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** addition of 3rd level deck

PAID

JUN 7 2023

TOWN OF  
KILL DEVIL HILLS

**BP2023-151****PROJECT NAME:** Goldberg Deck  
**SITE ADDRESS:** 1728 SOBLE DR KILL DEVIL HILLS**BUILDING****ISSUED:** 06/07/2023**EXPIRES:** 12/04/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
LOT COVERAGE	38.00
COVERED PORCHES/DECKS (SQFT)	184
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Marty Barnette
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

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**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

**BP2023-142**

**PROJECT NAME:** Jewel Bond  
**SITE ADDRESS:** 1219B VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/07/2023

**EXPIRES:** 12/04/2023

**APPLICANT:** BARRETT & HABER, LLC Emanuelson & Dad  
PO BOX 448  
nags head, nc 27959  
252-261-2212

**OWNER:** BOND, W E JR  
P O BOX 7540  
KILL DEVIL HILLS, NC 27948

**RESIDENTIAL - LIMITED:** Barrett and Haber, LLC T/A; Emanuelson & Dad  
PO Box 448  
6705 S. Croatan Hwy.  
nags head, nc 27959  
252-261-2212

**License:** 87233  
**Expires:** 01/01/2024

**PARCEL:**

**PIN:** 989309073348 **Parcel Number:** 004876000

**Address:** 1219B VA DARE TRL S KILL DEVIL HILLS

**Addition:** **Zoning:**

**Legal Description:** **Block:** 5 **Lot(s):** 6

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

**PROJECT DESCRIPTION:** Replace 40 pilings

**PAID**  
6/14/23  
on-line

**BP2023-142**

PROJECT NAME: Jewel Bond

SITE ADDRESS: 1219B VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

ISSUED: 06/07/2023

EXPIRES: 12/04/2023

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	38000.00
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling Final  
Zoning Final

**CONDITIONS**

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Lorelei Zumbrenner Date: 06 / 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

**BP2023-149**

**PROJECT NAME:** Higginbotham Pier  
**SITE ADDRESS:** 2030 Bay Dr. Kill Devil Hills

**BUILDING**

**ISSUED:** 06/08/2023

**EXPIRES:** 12/05/2023

**APPLICANT:** DOUGLAS HIGGINBOTHAM  
540 Thistley Lane  
Chesapeake, Va 23322

**OWNER:** DOUGLAS HIGGINBOTHAM  
540 Thistley Lane  
Chesapeake, Va 23322

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

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

**PARCEL:**

**PIN:** 987408985332

**Parcel Number:** 001998001

**Address:** 2030 Bay Dr. Kill Devil Hills

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

**Zoning:**

**Block:** Lot(s): 1026

**Legal Description:**

FEES:	Paid	Due
Pier/Bulkhead	\$200.00	\$0.00
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 200' pier with 14'x14' platform and gazebo

**PAID**

JUN 9 2023

TOWN OF  
KILL DEVIL HILLS

**BP2023-149**

**PROJECT NAME:** Higginbotham Pier  
**SITE ADDRESS:** 2030 Bay Dr. Kill Devil Hills

**BUILDING**

**ISSUED:** 06/08/2023

**EXPIRES:** 12/05/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	AE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	63600.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Kirk R Foreman
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

---

**CONDITIONS**

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

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

\* Zoning Final Inspection is required.



# Town of Kill Devil Hills

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

**PAID**

JUN 13 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

<b>BP2023-156</b>	<b>PAID WITH CASH</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Raleigh Thompson		<b>ISSUED:</b> 06/13/2023
<b>SITE ADDRESS:</b> 504 THIRD ST W KILL DEVIL HILLS		<b>EXPIRES:</b> 12/10/2023

<b>APPLICANT:</b> Thompson, Raleigh 504 West Third Street Kill Devil Hills, NC 27948 252-202-0545	<b>OWNER:</b> Thompson, Raleigh 504 West Third Street Kill Devil Hills, NC 27948 252-202-0545
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<b>CONTRACTOR:</b>	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	<b>License:</b> Same as Owner <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988409272132	<b>Parcel Number:</b> 002490000
<b>Address:</b> 504 THIRD ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> CROATAN SHORES INC SEC 1	<b>Block:</b> 5 <b>Lot(s):</b> 3
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Accessory Residential (MIN)	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 8' X 12' Storage Shed

**BP2023-156**

**PROJECT NAME:** Raleigh Thompson  
**SITE ADDRESS:** 504 THIRD ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
LOT COVERAGE	34.20
STORAGE (SQFT)	96
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Gloria Rogers
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.

\* 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

**PAID**

JUN 13 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BP2023-155**

**PROJECT NAME:** Paul Anderson  
**SITE ADDRESS:** 307 OCEAN ACRES DR W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**APPLICANT:** PAUL ANDERSON  
307 Ocean Acres Drive  
KDH, NC 27948  
757-373-2145

**OWNER:** PAUL ANDERSON  
307 Ocean Acres Drive  
KDH, NC 27948  
757-373-2145

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

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

**PARCEL:**

**PIN:** 988316932880

**Parcel Number:** 008485000

**Address:** 307 OCEAN ACRES DR W KILL DEVIL HILLS

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

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Accessory Residential (MIN)	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 8' X 10' shed

**BP2023-155**

**PROJECT NAME:** Paul Anderson

**SITE ADDRESS:** 307 OCEAN ACRES DR W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1800.00
LOT COVERAGE	32.00
SURVEYOR NAME AND NUMBER	William S. Jones
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

**Issued By:** *Jordan Blythe*

**Contractor or Authorized Agent:** *Pamela Anderson* **Date:** *6/13/23*



**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

**BP2023-133**

**PROJECT NAME:** Derek Wood and Jill Kumot  
**SITE ADDRESS:** 200 FRESH POND DR E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 05/23/2023

**EXPIRES:** 11/19/2023

**APPLICANT:** BARRETT & HABER, LLC Emanuelson & Dad  
PO BOX 448  
nags head, nc 27959  
252-261-2212

**OWNER:** Wood, Derek  
200 East Fresh Pond Drive  
Kill Devil Hills, NC 27948  
850-428-1952

**RESIDENTIAL - LIMITED:** BARRETT & HABER, LLC Emanuelson & Dad  
PO BOX 448  
nags head, nc 27959  
252-261-2212

**License:** 87233  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 989313140155 **Parcel Number:** 004953000

**Address:** 200 FRESH POND DR E KILL DEVIL HILLS

**Addition:** LAKE DRIVE DEVELOPMENT SEC 2 **Zoning:**

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace 3 pilings

 **PAID**  
6/14/23  
on-line

**BP2023-133**

**PROJECT NAME:** Derek Wood and Jill Kurnot  
**SITE ADDRESS:** 200 FRESH POND DR E KILL DEVIL HILLS

**BUILDING**

ISSUED: 05/23/2023

EXPIRES: 11/19/2023

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3300.00
CONSTRUCTION TYPE	V
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: Lorelei Zumbrennen Date: 06 / 14 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2023-154**

**PROJECT NAME:** Mark Schwartzberg  
**SITE ADDRESS:** 337 PALMETTO ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**APPLICANT:** Schwartzberg, Mark  
337 W. Palmetto Street  
Kill Devil Hills, NC 27948  
914-320-1384

**OWNER:** Schwartzberg, Mark  
337 W. Palmetto Street  
Kill Devil Hills, NC 27948  
914-320-1384

**BUILDING LIMITED:** EVANS HOMES LLC.  
5121 WINDSOR PL  
kitty hawk, nc 27949  
252-207-8127

**License:** 49040  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988517006521

**Parcel Number:** 000629000

**Address:** 337 PALMETTO ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 49 **Lot(s):** 1 & 2

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace deck boards, rails, stairs, stringers within existing footprint

**PAID**

**JUN 13 2023**

TOWN OF  
KILL DEVIL HILLS

**BP2023-154**

**PROJECT NAME:** Mark Schwartzberg

**SITE ADDRESS:** 337 PALMETTO ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4500.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S. Jones
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

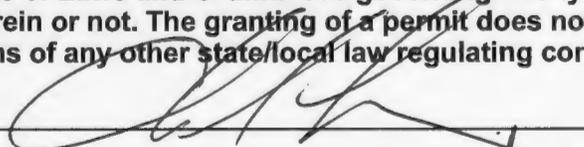
**CONDITIONS**

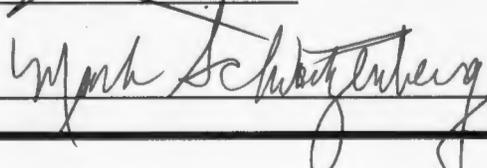
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

\* 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:** 6/13/23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2023-158**

**PROJECT NAME:** KELLY DECK REBUILD  
**SITE ADDRESS:** 211 SEA VILLAGE LN KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/14/2023

**EXPIRES:** 12/11/2023

**APPLICANT:** SUSANNE D KELLY  
P O BOX 743  
Kitty Hawk, NC 27949

**OWNER:** SUSANNE D KELLY  
P O BOX 743  
Kitty Hawk, NC 27949

**UNLICENSED BUILDER:** COASTLINE PROPERTY SERVICES  
8252 CARATOKE HWY  
Powels Point, NC 27966  
252-305-7774

**License:** XXXXXX  
**Expires:**

**PARCEL:**

**PIN:** 988513132529

**Parcel Number:** 000973000

**Address:** 211 SEA VILLAGE LN KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 31

**Legal Description:**

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

**PROJECT DESCRIPTION:** REBUILD FRONT DECK TO EXISTING FOOTPRINT



**PAID**  
6/15/23

**BP2023-158**

**PROJECT NAME:** KELLY DECK REBUILD

**SITE ADDRESS:** 211 SEA VILLAGE LN KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/14/2023

**EXPIRES:** 12/11/2023

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5500.00
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: Jordan Blythe

Contractor or Authorized Agent: [Signature] Date: 06 / 14 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

### BP2023-150

**PROJECT NAME:** Stallings Deck Repair  
**SITE ADDRESS:** 504 FIFTH ST W KILL DEVIL HILLS

### BUILDING

**ISSUED:** 06/07/2023  
**EXPIRES:** 12/04/2023

**APPLICANT:** OVERTON CONTRACTING LLC  
PO BOX 7804  
Kill Devil Hills, NC 27948  
252-441-9239

**OWNER:** STALLINGS, A F  
P O BOX 188  
HOBBSVILLE, NC 27946

**BUILDING UNLIMITED:** OVERTON CONTRACTING LLC  
PO BOX 7804  
Kill Devil Hills, NC 27948  
252-441-9239

**License:** 86646  
**Expires:** 01/01/2024

#### PARCEL:

**PIN:** 988405186545

**Parcel Number:** 002072000

**Address:** 504 FIFTH ST W KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 18

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>
Open Deck Fee	\$150.00	\$0.00	Open Decks 1 EA
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** replace existing deck, stairs, railings and pilings, add 1.1 of deck to east side of existing deck

# PAID

## JUN 15 2023

TOWN OF  
KILL DEVIL HILLS

**BP2023-150**

**PROJECT NAME:** Stallings Deck Repair  
**SITE ADDRESS:** 504 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/07/2023

**EXPIRES:** 12/04/2023

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**DETAILS**

**Permit**

---

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
LOT COVERAGE	34.00
OPEN DECK (SQFT)	93
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Doug Styons
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

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**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

PAID

JUN 20 2023

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

**BP2023-159**

**PROJECT NAME:** AYDLETT SHED  
**SITE ADDRESS:** 1205 EIGHTH AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/20/2023

**EXPIRES:** 12/17/2023

**APPLICANT:** AYDLETT, DUNCAN  
P.O. BOX 1649  
kitty hawk, nc 27949  
252-599-7855

**OWNER:** AYDLETT, DUNCAN  
P.O. BOX 1649  
kitty hawk, nc 27949  
252-599-7855

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

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

**PARCEL:**

**PIN:** 988312756201

**Parcel Number:** 004572000

**Address:** 1205 EIGHTH AVE KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 48

**Lot(s):** PT 5, PT  
BOUNDARY  
S

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Accessory Residential (MIN)	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** CONSTRUCT 10'X11' SHED IN REAR YARD

**BP2023-159**

**PROJECT NAME:** AYDLETT SHED  
**SITE ADDRESS:** 1205 EIGHTH AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/20/2023

**EXPIRES:** 12/17/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	LI-1
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

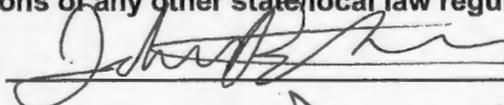
Zoning Final

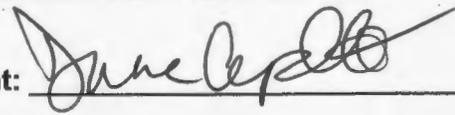
Final

**CONDITIONS**

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

**Issued By:** 

**Contractor or Authorized Agent:**  **Date:** 6/20/23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2023-160**

**PROJECT NAME:** Gilbert Steppe  
**SITE ADDRESS:** 100 OREGON AVE E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/23/2023

**EXPIRES:** 12/20/2023

**APPLICANT:** Coast Construction  
311 Sir Chandler Dr.  
Kill Devil Hills, NC 27948  
252-305-7248

**OWNER:** STEPPE, GILBERT A  
14 STRATFORD DR  
WEST GROVE, PA 19390

**GENERAL REMODELING-UNLICENSED:** Coast Construction  
311 Sir Chandler Dr.  
Kill Devil Hills, NC 27948  
252-305-7248

**License:** 12356999  
**Expires:**

**PARCEL:**

**PIN:** 988420707004

**Parcel Number:** 003840000

**Address:** 100 OREGON AVE E KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 35 **Lot(s):** 12

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace first and second level decks including new pilings, framing, stairs, decking and rails

**PAID**

**JUN 23 2023**

TOWN OF  
KILL DEVIL HILLS

**BP2023-160****PROJECT NAME:** Gilbert Steppe**SITE ADDRESS:** 100 OREGON AVE E KILL DEVIL HILLS**BUILDING****ISSUED:** 06/23/2023**EXPIRES:** 12/20/2023**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	7.5
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	26500.00
LOT COVERAGE	38.80
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	M2C Geomatics and Design, PLLC
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.



# Town of Kill Devil Hills

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

**PAID**

JUN 26 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### BP2023-161

**PROJECT NAME:** Loren Beard  
**SITE ADDRESS:** 300 CHOWAN ST W KILL DEVIL HILLS

### BUILDING

**ISSUED:** 06/23/2023  
**EXPIRES:** 12/20/2023

**APPLICANT:** Harrup Construction  
119 John Lloyd Drive  
Point Harbor, NC 27964  
252-489-0523

**OWNER:** Beard, Loren  
32109 Cedar Ct  
FRANKLIN, VA 23851

**UNLICENSED - REMODELING:** Harrup Construction  
119 John Lloyd Drive  
Point Harbor, NC 27964  
252-489-0523

**License:** 12345  
**Expires:** 06/07/2030

#### PARCEL:

**PIN:** 988517020408

**Parcel Number:** 000552000

**Address:** 300 CHOWAN ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 41      **Lot(s):** 21-22

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace front entry stairs and landing

**BP2023-161****PROJECT NAME:** Loren Beard**SITE ADDRESS:** 300 CHOWAN ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 06/23/2023**EXPIRES:** 12/20/2023**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	7.5
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4800.00
LOT COVERAGE	34.10
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Styons
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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



# 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

**BP2023-162**

**PROJECT NAME:** BRIGHT DRIVEWAY AND STAIR  
**SITE ADDRESS:** 1828 VA DARE TRL N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/27/2023

**EXPIRES:** 12/24/2023

**APPLICANT:** Bright, Greg  
110 Eyrie Lane  
ELIZABETH CITY, NC 27909  
252-339-5534

**OWNER:** Bright, Greg  
110 Eyrie Lane  
ELIZABETH CITY, NC 27909  
252-339-5534

**GENERAL - LIMITED:** Bright Construction LLC  
1261 Florida Rd.  
ELIZABETH CITY, NC 27909  
252-339-5534

**License:** 49215  
**Expires:**

**PARCEL:**

**PIN:** 988406480599

**Parcel Number:** 002868001

**Address:** 1828 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** Croatan Shores Amended

**Block:** G **Lot(s):** 5, 23, 24

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Driveway Permit Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REMOVE AND REPOUR DRIVEWAY, RELOCATE FRONT EXTERIOR STAIRS

**PAID**  
6/27/23  
94

**BP2023-162****PROJECT NAME:** BRIGHT DRIVEWAY AND STAIR  
**SITE ADDRESS:** 1828 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 06/27/2023**EXPIRES:** 12/24/2023

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13620.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

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**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.

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



# 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

**BP2023-163**

**PROJECT NAME:** E&B PILING REPAIR  
**SITE ADDRESS:** 1307 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/27/2023

**EXPIRES:** 12/24/2023

**APPLICANT:** E&B INC  
124 MILL STREAM WAY  
WILLIAMSBURG, VA 23185  
757-645-5085

**OWNER:** E&B INC  
124 MILL STREAM WAY  
WILLIAMSBURG, VA 23185  
757-645-5085

**RESIDENTIAL - LIMITED:** BARRETT & HABER, LLC Emanuelson & Dad  
PO BOX 448  
nags head, nc 27959  
252-261-2212

**License:** 87233  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 989309060255 **Parcel Number:** 027656014  
**Address:** 1307 WRIGHTSVILLE BLVD KILL DEVIL HILLS  
**Addition:** KILL DEVIL BEACH SEC 1 REVISED **Zoning:**  
**Block:** G **Lot(s):** 14  
**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE (2) 8X8X16, SISTER (1) 6X6X12



**PAID**  
6/28/23  
on-line

**BP2023-163**

PROJECT NAME: E&amp;B PILING REPAIR

SITE ADDRESS: 1307 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

ISSUED: 06/27/2023

EXPIRES: 12/24/2023

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2700.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

*Jordan Blythe*

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

*Jordan Barrett for Emmanuel and Rod*

Date: 06 / 28 / 2023



# Town of Kill Devil Hills

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

PAID

JUN 30 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### BP2023-167

**PROJECT NAME:** Zinovis Repairs  
**SITE ADDRESS:** 102 WRIGHT AVE W KILL DEVIL HILLS

### BUILDING

**ISSUED:** 06/30/2023  
**EXPIRES:** 12/27/2023

**APPLICANT:** NASH, ADAM  
329 EVAN'S PLACE  
Kill Devil Hills, NC 27948  
757-376-0170

**OWNER:** Zinovis, Constantine  
1720 Virginia Ave  
Kill Devil Hills, NC 27948  
757-287-0686

**UNLICENSED BUILDER:** NASH, ADAM  
329 EVAN'S PLACE  
Kill Devil Hills, NC 27948  
757-376-0170

**License:** XXXXXX  
**Expires:** 07/01/2031

#### PARCEL:

**PIN:** 988419700672

**Parcel Number:** 017197000

**Address:** 102 WRIGHT AVE W KILL DEVIL HILLS

**Addition:** BAUM BAY SHORES - REVISED

**Zoning:**

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** replace front stairs to same footprint, replace 2nd floor piling on porch, replace railings and stair treads on back deck

**BP2023-167**

**PROJECT NAME:** Zinovis Repairs

**SITE ADDRESS:** 102 WRIGHT AVE W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/30/2023

**EXPIRES:** 12/27/2023

---

**DETAILS**

**Permit**

---

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S Jones
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

---

**CONDITIONS**

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

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

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# Town of Kill Devil Hills

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

**PAID**

JUN 30 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BP2023-168**

**PROJECT NAME:** NEAL STAIRS  
**SITE ADDRESS:** 1706 BELL AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/30/2023

**EXPIRES:** 12/27/2023

**APPLICANT:** NEAL, THERESA GAYLE  
P O BOX 12522  
NORFOLK, VA 23502

**OWNER:** NEAL, THERESA GAYLE  
P O BOX 12522  
NORFOLK, VA 23502

**BUILDING, REMODELING:** Ron Gregory  
205 Sir Chandler Rd.  
Kill Devil Hills, NC 27948  
202-4633

**License:** werty  
**Expires:**

**PARCEL:**

**PIN:** 988316930323

**Parcel Number:** 005039000

**Address:** 1706 BELL AVE KILL DEVIL HILLS

**Addition:** OCEAN ACRES TRACT 3 SEC 2

**Zoning:** .  
**Block:** J **Lot(s):** 2

**Legal Description:**

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

**PROJECT DESCRIPTION:** REBUILD EXTERIOR STAIR IN SAME LOCATION

**BP2023-168**

**PROJECT NAME:** NEAL STAIRS

**SITE ADDRESS:** 1706 BELL AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 06/30/2023

**EXPIRES:** 12/27/2023

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2600.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

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**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.

\* Zoning Final Inspection is required.

\* 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

PAID

JUN 2 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2023-137**

**PROJECT NAME:** Schub Fence and Storage Room  
**SITE ADDRESS:** 2033 EDENTON ST ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/02/2023

**EXPIRES:** 11/29/2023

**APPLICANT:** SCHUB, ERIK  
2033 EDENTON ST  
Kill Devil Hills, NC 27948  
252-422-2731

**OWNER:** SCHUB, ERIK  
2033 EDENTON ST  
Kill Devil Hills, NC 27948  
252-422-2731

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

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

**PARCEL:**

**PIN:** 987408988870

**Parcel Number:** 001266000

**Address:** 2033 EDENTON ST ST KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 818

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$250.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 8'x16' storage room under existing house, fence around rear yard

**BJ2023-137**

**PROJECT NAME:** Schub Fence and Storage Room  
**SITE ADDRESS:** 2033 EDENTON ST ST KILL DEVIL HILLS

**BUILDING JOINT****ISSUED:** 06/02/2023**EXPIRES:** 11/29/2023**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S22-18494
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.73
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	20000.00
LOT COVERAGE	39.80
STORAGE (SQFT)	128
TOTAL SQUARE FOOTAGE	128
SURVEYOR NAME AND NUMBER	WL Norris
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline	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.



# Town of Kill Devil Hills

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

**PAID**

**JUN 5 2023**

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2023-135**

**PROJECT NAME:** Leonard Addition  
**SITE ADDRESS:** 2407 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/02/2023

**EXPIRES:** 11/29/2023

**APPLICANT:** J & T Construction  
P. O. box 1316  
Kill Devil Hills, NC 27948  
252-489-3950

**OWNER:** Cliff Leonard  
2407 Bay Dr.  
Kill Devil Hills, NC 27948  
252-202-1981

**GENERAL BUILDING-UNLIMITED:** J & T Construction  
P. O. box 1316  
Kill Devil Hills, NC 27948  
252-489-3950

**License:** 84960  
**Expires:** 01/01/2024

**PARCEL:**

**PIN:** 987520809292

**Parcel Number:** 000730000

**Address:** 2407 BAY DR KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 78 **Lot(s):** 1

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>	
Renovation/Remodel/Relocate	\$27.23	\$0.00	Relocation	60 SQFT
Res. Building Permit Fee	\$192.00	\$0.00	Residential Heated Space (.75)	256 sq. Ft.
<b>Totals :</b>	<b>\$219.23</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** 16'x16' bedroom lateral addition, 3 total bedrooms

**BJ2023-135****PROJECT NAME:** Leonard Addition**SITE ADDRESS:** 2407 BAY DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/02/2023**EXPIRES:** 11/29/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S5-9998
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	12.78
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	42800.00
LOT COVERAGE	28.50
SURVEYOR NAME AND NUMBER	WL Norris
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**



**Town of Kill Devil Hills**

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

**PAID**

**JUN 5 2023**

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**BJ2023-134**

**PROJECT NAME:** Hodges Addition  
**SITE ADDRESS:** 804 CARDINAL ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/02/2023

**EXPIRES:** 11/29/2023

**APPLICANT:** MACKO OBX CONSTRUCTION, INC  
P.O. BOX 3689  
Kill Devil Hills, NC 27948  
252-480-6411

**OWNER:** HODGES, WALTER  
804 Cardinal Street  
Kill Devil Hills, NC 27948

**BUILDING UNLIMITED:** MACKO OBX CONSTRUCTION, INC  
P.O. BOX 3689  
Kill Devil Hills, NC 27948  
252-480-6411

**License:** 81540  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988308775668

**Parcel Number:** 004434000

**Address:** 804 CARDINAL ST KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 26 **Lot(s):** 3

**Legal Description:**

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

**PROJECT DESCRIPTION:** one room addition, no addition of bedrooms, 3 total bedrooms, bordered gravel driveway addition

**BJ2023-134****PROJECT NAME:** Hodges Addition  
**SITE ADDRESS:** 804 CARDINAL ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/02/2023**EXPIRES:** 11/29/2023

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**DETAILS****Permit**

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<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S22-18353
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.93
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	45000.00
LOT COVERAGE	28.85
LIVING SPACE (SQFT)	128
TOTAL SQUARE FOOTAGE	128
SURVEYOR NAME AND NUMBER	Doug Styons
ARCHITECT NAME AND LICENSE NUMBER	Mark Kasten 7220
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2023-139**

**PROJECT NAME:** Ladd Addition and Fire Repair  
**SITE ADDRESS:** 1706 SIOUX ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED: 06/08/2023**

**EXPIRES: 12/05/2023**

**APPLICANT:** RELIANT CONSTRUCTION LLC  
4275 Worthington Lane  
kitty hawk, nc 27949  
252-202-7007

**OWNER:** LADD, NATHAN  
1706 Sioux St  
Kill Devil Hills, NC 27948

**GENERAL, UNLIMITED:** RELIANT CONSTRUCTION LLC  
4275 Worthington Lane  
kitty hawk, nc 27949  
252-202-7007

**License:** 62339  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988409264321

**Parcel Number:** 002698000

**Address:** 1706 SIOUX ST KILL DEVIL HILLS

**Addition:** HIGH VIEW - HEDRICKS ADD

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$382.65	\$0.00	Covered Porches/Decks	104 SQFT
Renovation/Remodel/Relocate	\$923.40	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$78.00	\$0.00	Remodel/Renovation	2052 SQFT
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	141 Sq. Ft
<b>Totals :</b>	<b>\$1,534.05</b>	<b>\$0.00</b>	Residential Heated Space (.75)	435 sq. Ft.

**PROJECT DESCRIPTION:** repair damage from fire, add bedroom, 4 total, add living space on side of house, add gravel driveway, deck addition

**PAID**

**JUN 9 2023**

TOWN OF  
KILL DEVIL HILLS

**BJ2023-139****PROJECT NAME:** Ladd Addition and Fire Repair  
**SITE ADDRESS:** 1706 SIOUX ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/08/2023**EXPIRES:** 12/05/2023

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S22-17852
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	350000.00
LOT COVERAGE	38.10
LIVING SPACE (SQFT)	435
COVERED PORCHES/DECKS (SQFT)	104
STORAGE (SQFT)	141
OPEN DECK (SQFT)	128
TOTAL SQUARE FOOTAGE	808
SURVEYOR NAME AND NUMBER	Jamie Furr
ENGINEER AND LICENSE NUMBER	Melissa McAllister 028946
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BJ2023-148</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Ground floor renovation	<b>ISSUED:</b> 06/14/2023
<b>SITE ADDRESS:</b> 1005 DEAN ST KILL DEVIL HILLS	<b>EXPIRES:</b> 12/11/2023

<b>APPLICANT:</b> Simple Side Construction 308 W. Helga St. Kill Devil Hills, NC 27948 252-564-8307	<b>OWNER:</b> Simple Side Construction 308 W. Helga St. Kill Devil Hills, NC 27948 252-564-8307
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<b>BUILDING LIMITED:</b>	Simple Side Construction 308 W. Helga St. Kill Devil Hills, NC 27948 252-564-8307	<b>License:</b> 78583 <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988316745062	<b>Parcel Number:</b> 028647000
<b>Address:</b> 1005 DEAN ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL BEACH EXTENDED	<b>Block:</b> 10 <b>Lot(s):</b> 3
<b>Legal Description:</b>	

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>
Renovation/Remodel/Relocate	\$219.15	\$0.00	Remodel/Renovation 487 SQFT
<b>Totals :</b>	<b>\$219.15</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** Renovate ground floor plan layout from previously submitted drawings.

# PAID

## JUN 14 2023

TOWN OF  
KILL DEVIL HILLS

**BJ2023-148**

**PROJECT NAME:** Ground floor renovation  
**SITE ADDRESS:** 1005 DEAN ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/14/2023

**EXPIRES:** 12/11/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	8000.00
LIVING SPACE (SQFT)	487
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

Zoning Final

---

**CONDITIONS**

- \* Foundation survey will be required prior to rough-in inspection.
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Inspections to coincide with main building permit/construction.



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>BJ2023-151</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Michael Davis	<b>ISSUED:</b> 06/16/2023
<b>SITE ADDRESS:</b> 114 WILSON ST KILL DEVIL HILLS	<b>EXPIRES:</b> 12/13/2023

<b>APPLICANT:</b> DAVIS, MICHAEL W 1718 N Utah St Arlington, VA 22207 571-289-8470	<b>OWNER:</b> DAVIS, MICHAEL W 1718 N Utah St Arlington, VA 22207 571-289-8470
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<b>CONTRACTOR:</b>	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	<b>License:</b> Same as Owner <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 988517204648	<b>Parcel Number:</b> 001813000
<b>Address:</b> 114 WILSON ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 1	<b>Block:</b> 0 <b>Lot(s):</b> 364
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** Remodel kitchen and dining area

**PAID**  
6/19/23  
on-line

**BJ2023-151**

**PROJECT NAME:** Michael Davis  
**SITE ADDRESS:** 114 WILSON ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/16/2023

**EXPIRES:** 12/13/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	6500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Final
Rough In	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.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



# Town of Kill Devil Hills

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

PAID

JUN 16 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2023-145**

**PROJECT NAME:** Sinasky Deck  
**SITE ADDRESS:** 100 BICKETT ST E KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/13/2023

**EXPIRES:** 12/10/2023

**APPLICANT:** SINASKY, MATTHEW  
984 SPEIGHT LYONS LOOP  
chesapeake, va 23322  
757-995-5847

**OWNER:** SINASKY, MATTHEW  
984 SPEIGHT LYONS LOOP  
chesapeake, va 23322  
757-995-5847

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

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

**PARCEL:**

**PIN:** 988517118037

**Parcel Number:** 000815000

**Address:** 100 BICKETT ST E KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORE AMD BLK 24

**Zoning:**  
**Block:** 24 **Lot(s):** PT 9 & 10

**Legal Description:**

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

**PROJECT DESCRIPTION:** rebuild existing deck to same footprint, add front stairs and landing, rebuild existing storage room under porch

**BJ2023-145**

PROJECT NAME: Sinasky Deck

SITE ADDRESS: 100 BICKETT ST E KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 06/13/2023

EXPIRES: 12/10/2023

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7000.00
LOT COVERAGE	20.00
SURVEYOR NAME AND NUMBER	WL Norris
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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.

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

\* 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

TOWN OF  
KILL DEVIL HILLS

JUN 30 2023

## Planning and Inspection Department

PAID

**BJ2023-158**

**PROJECT NAME:** DENBY RENOVATIONS  
**SITE ADDRESS:** 2016 NORFOLK ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 06/28/2023

**EXPIRES:** 12/25/2023

**APPLICANT:** DENBY, ERIN  
737 COUNTY CREEK WAY  
PALMYRA, VA 22963  
434-996-8207

**OWNER:** DENBY, ERIN  
737 COUNTY CREEK WAY  
PALMYRA, VA 22963  
434-996-8207

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

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

**PARCEL:**

**PIN:** 988405199413

**Parcel Number:** 001215000

**Address:** 2016 NORFOLK ST KILL DEVIL HILLS

**Zoning:**

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

**Block:** 0 **Lot(s):** 761

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace flooring, kitchen cabinets, siding and windows.



PAID

th 6/29/23  
check # 2754

**BJ2023-158****PROJECT NAME:** DENBY RENOVATIONS  
**SITE ADDRESS:** 2016 NORFOLK ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/28/2023**EXPIRES:** 12/25/2023**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	30000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Framing

Final

**CONDITIONS**

- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Foundation survey will be required prior to rough-in inspection.

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

**Issued By:***Marty Shaw***Contractor or Authorized Agent:***E. Denby***Date:** 06 / 28 / 2023



**Town of Kill Devil Hills**

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

**PAID**

**MAY - 1 2023**

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**MC2023-101**

**PROJECT NAME:** LANGFORD HVAC  
**SITE ADDRESS:** 1711 Croatan HWY N. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 05/01/2023

**EXPIRES:** 10/28/2023

**APPLICANT:** LANGFORD, HARVEY  
P. O. BOX 2672  
Kill Devil Hills, NC 27948  
252-564-2408

**OWNER:** LANGFORD, HARVEY  
P. O. BOX 2672  
Kill Devil Hills, NC 27948  
252-564-2408

**H-1, H-2, H-3, CLASS I & ELECTRIC:** Schwartz and Strawser, LLC  
148 Fields Dr  
Wanchese, NC 27954  
252-423-1015

**License:** 34529,SP,PH 33318  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988410460996

**Parcel Number:** 028373000

**Address:** 1711 Croatan HWY N. Kill Devil Hills

**Addition:** LONG LAKE

**Zoning:**

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

**MC2023-101**

**PROJECT NAME:** LANGFORD HVAC  
**SITE ADDRESS:** 1711 Croatan HWY N. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 05/01/2023

**EXPIRES:** 10/28/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

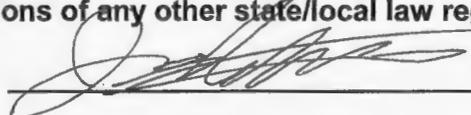
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

**Issued By:** 

**Contractor or Authorized Agent:**  **Date:** 5-1-23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-095**

**PROJECT NAME:** Lee HVAC  
**SITE ADDRESS:** 1105 NINTH AVE KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 04/25/2023

**EXPIRES:** 10/22/2023

**APPLICANT:** Lee, Brenda  
1105 Ninth Ave  
Kill Devil Hills, NC 27948

**OWNER:** Lee, Brenda  
1105 Ninth Ave  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988311752206

**Parcel Number:** 004599000

**Address:** 1105 NINTH AVE KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 52 **Lot(s):** 9

**Legal Description:**

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

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

**PAID**  
12/4/22/23  
Online

**MC2023-095**

PROJECT NAME: Lee HVAC

SITE ADDRESS: 1105 NINTH AVE KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 04/25/2023

EXPIRES: 10/22/2023

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential New
CONSTRUCTION COST	9906.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Charles ThumanContractor or Authorized Agent: Linda Burgess Date: 04 / 26 / 2023



# Town of Kill Devil Hills

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

PAID

MAY - 2 2023

## Planning and Inspection Department

**MC2023-106**

**PROJECT NAME:** VIRGINIA DARE HVAC C/O  
**SITE ADDRESS:** 701 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/02/2023

**EXPIRES:** 10/29/2023

**APPLICANT:** VIRGINIA DARE LLC  
201 DEXTER ST W  
CHESAPEAKE, VA 23324  
757-812-2042

**OWNER:** VIRGINIA DARE LLC  
201 DEXTER ST W  
CHESAPEAKE, VA 23324  
757-812-2042

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

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

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

**PARCEL:**

**PIN:** 988308992609

**Parcel Number:** 027931000

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

**Zoning:**

**Addition:** SUBDIVISION - NONE

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

7  
**MC2023-106**

**PROJECT NAME:** VIRGINIA DARE HVAC C/O  
**SITE ADDRESS:** 701 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/02/2023

**EXPIRES:** 10/29/2023

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8100.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

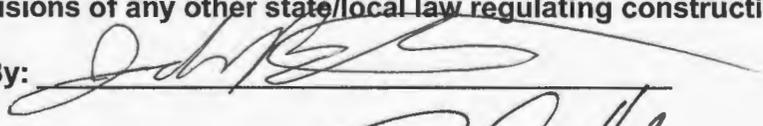
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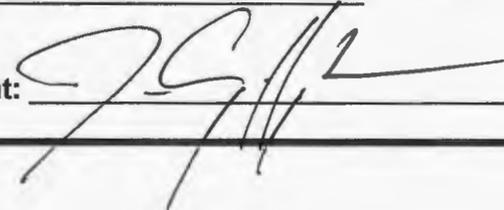
**CONDITIONS**

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---

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**Issued By:** 

**Contractor or Authorized Agent:** 

**Date:** 5/2/23



# Town of Kill Devil Hills

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

PAID

MAY - 2 2023

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

**MC2023-105**

**PROJECT NAME:**

**SITE ADDRESS:** 801 THIRD ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/02/2023

**EXPIRES:** 10/29/2023

**APPLICANT:** KEVIN YOUNG, BARBARA HUGHES  
801 WEST THIRD ST  
Kill Devil Hills, NC 27948

**OWNER:** KEVIN YOUNG, BARBARA HUGHES  
801 WEST THIRD ST  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988409166641

**Parcel Number:** 002502001

**Address:** 801 THIRD ST W KILL DEVIL HILLS

**Addition:** CROATAN SHORES INC SEC 1

**Zoning:**  
**Block:** 12 **Lot(s):** 1

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**MC2023-105**

**PROJECT NAME:**

**SITE ADDRESS:** 801 THIRD ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/02/2023

**EXPIRES:** 10/29/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9734.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

5/2/23



# 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

<b>MC2023-104</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Tres HVAC	<b>ISSUED:</b> 05/01/2023
<b>SITE ADDRESS:</b> 2026 HAMPTON ST KILL DEVIL HILLS	<b>EXPIRES:</b> 10/28/2023

<b>APPLICANT:</b> Brenda Williams 2026 Hampton St. Kill Devil Hills, NC 27948 919-795-3759	<b>OWNER:</b> Tres, Rebecca 9487 Laurel Grove Rd Mechanicsville, VA 23116
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<b>ELECTRICAL - LIMITED:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 22222-L <b>Expires:</b> 08/31/2023
<b>MECHANICAL H2 AND H3:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 35329 <b>Expires:</b> 12/31/2023

**PARCEL:**

<b>PIN:</b> 988405082769	<b>Parcel Number:</b> 000867000
<b>Address:</b> 2026 HAMPTON ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 1123
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC system with duct modification and line set

**PAID**  
12/2/23  
online payment

**MC2023-104**

PROJECT NAME: Tres HVAC

SITE ADDRESS: 2026 HAMPTON ST KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 05/01/2023

EXPIRES: 10/28/2023

**DETAILS****Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	16355.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Charles Thuman

Contractor or Authorized Agent: BREAN LANCASTER Date: 05/01/2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-103</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Vanhorn HVAC	<b>ISSUED:</b> 05/01/2023
<b>SITE ADDRESS:</b> 907 SPORTSMAN DR W KILL DEVIL HILLS	<b>EXPIRES:</b> 10/28/2023

**APPLICANT:** Thomas H Vanhorn  
4228 Kersey Cir  
DUMFRIES, VA 22025

**OWNER:** Thomas H Vanhorn  
4228 Kersey Cir  
DUMFRIES, VA 22025

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

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

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

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

**PARCEL:**

**PIN:** 987408999637

**Parcel Number:** 001614000

**Address:** 907 SPORTSMAN DR W KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 258

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2.5 Ton HVAC system

 **PAID**  
R/S 5/11/23  
on line payment

**MC2023-103**

**PROJECT NAME:** Vanhorn HVAC

**SITE ADDRESS:** 907 SPORTSMAN DR W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/01/2023

**EXPIRES:** 10/28/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** BREAN LANCASTER **Date:** 05 / 01 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-102**

**PROJECT NAME:** Marshall HVAC  
**SITE ADDRESS:** 205 SEA VILLAGE LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/01/2023

**EXPIRES:** 10/28/2023

**APPLICANT:** MARSHALL, W RICHARD  
2036 ORCHARD DRIVE  
POCOMOKE CITY, MD 21851-2873

**OWNER:** MARSHALL, W RICHARD  
2036 ORCHARD DRIVE  
POCOMOKE CITY, MD 21851-2873

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

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

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

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

**PARCEL:**

**PIN:** 988513130570

**Parcel Number:** 009121000

**Address:** 205 SEA VILLAGE LN KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 28

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2.5 Ton HVAC system and duct work



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

**MC2023-102**

**PROJECT NAME:** Marshall HVAC

**SITE ADDRESS:** 205 SEA VILLAGE LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/01/2023

**EXPIRES:** 10/28/2023

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	16602.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** BREAN LANCASTER **Date:** 05 / 01 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-099**

**PROJECT NAME:** Morgan HVAC  
**SITE ADDRESS:** 205 CHOWAN ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED: 04/27/2023**

**EXPIRES: 10/24/2023**

**APPLICANT:** Morgan, John  
3852 Sir Francis Drake Dr  
CHESAPEAKE, VA 23321

**OWNER:** Morgan, John  
3852 Sir Francis Drake Dr  
CHESAPEAKE, VA 23321

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

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

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

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

**PARCEL:**

**PIN:** 988513132082

**Parcel Number:** 000409000

**Address:** 205 CHOWAN ST E KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 8 **Lot(s):** 13-14

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC system with duct work

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

**MC2023-099**

PROJECT NAME: Morgan HVAC

SITE ADDRESS: 205 CHOWAN ST E KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 04/27/2023

EXPIRES: 10/24/2023

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	16799.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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Issued By: Charles ThumanContractor or Authorized Agent: BREAN LANCASTER Date: 04 / 27 / 2023



# Town of Kill Devil Hills

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

PAID

MAY - 3 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-098**

**PROJECT NAME:** Franks HVAC  
**SITE ADDRESS:** 540 PARKWOOD DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 04/27/2023

**EXPIRES:** 10/24/2023

**APPLICANT:** KIMBERLY FRANKS  
540 Parkwood Drive  
Kill Devil Hills, NC 27948

**OWNER:** KIMBERLY FRANKS  
540 Parkwood Drive  
Kill Devil Hills, NC 27948

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

**License:** 20564  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988417223235

**Parcel Number:** 004046004

**Address:** 540 PARKWOOD DR KILL DEVIL HILLS

**Zoning:**

**Addition:** WRIGHT WOODS

**Block:** 0 **Lot(s):** 4

**Legal Description:**

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

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

**MC2023-098**

**PROJECT NAME:** Franks HVAC

**SITE ADDRESS:** 540 PARKWOOD DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 04/27/2023

**EXPIRES:** 10/24/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

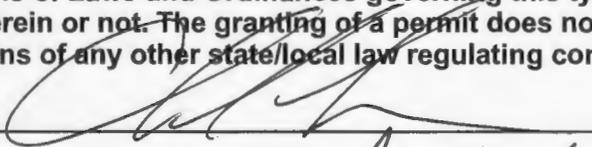
**REQUIRED INSPECTIONS**

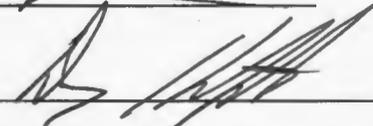
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 5/3/23



# Town of Kill Devil Hills

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

PAID

MAY - 8 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-112**

**PROJECT NAME:** Layser HVAC  
**SITE ADDRESS:** 305 HELGA ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/08/2023

**EXPIRES:** 11/04/2023

**APPLICANT:** LAYSER, JOSEPH D  
174 POINT HERON DR  
NEWPORT NEWS, VA 23606-1415

**OWNER:** LAYSER, JOSEPH D  
174 POINT HERON DR  
NEWPORT NEWS, VA 23606-1415

**H3, CLASS 1:**

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

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

**PARCEL:**

**PIN:** 988513048302

**Parcel Number:** 000116000

**Address:** 305 HELGA ST E KILL DEVIL HILLS

**Addition:** ORVILLE BEACH BLK 8

**Zoning:**  
**Block:** 8 **Lot(s):** 14

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 4 Ton HVAC system

**MC2023-112**

**PROJECT NAME:** Laysr HVAC

**SITE ADDRESS:** 305 HELGA ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/08/2023

**EXPIRES:** 11/04/2023

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12232.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

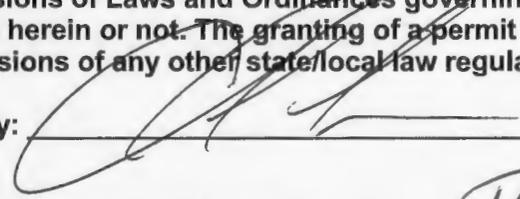
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent:  Date: 5-8-23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-109**

**PROJECT NAME:** WILSON HVAC  
**SITE ADDRESS:** 438 WILKINSON ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/04/2023

**EXPIRES:** 10/31/2023

**APPLICANT:** WILSON, JAMIE  
PO BOX 178  
FOLLY BEACH, SC 29439

**OWNER:** WILSON, JAMIE  
PO BOX 178  
FOLLY BEACH, SC 29439

**PARCEL:**

**PIN:** 987520920211

**Parcel Number:** 000684000

**Address:** 438 WILKINSON ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 59 **Lot(s):** 38-40

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

### DETAILS

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8779.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling



**PAID**  
5/5/23 DC  
online

**MC2023-109**

**PROJECT NAME:** WILSON HVAC

**SITE ADDRESS:** 438 WILKINSON ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/04/2023

**EXPIRES:** 10/31/2023

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: BRAN LANCASTER Date: 05 / 04 / 2023



# Town of Kill Devil Hills

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

PAJD

MAY - 8 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### MC2023-111

**PROJECT NAME:** Bazinet HVAC  
**SITE ADDRESS:** 320 CAMERON ST KILL DEVIL HILLS

### MECHANICAL

**ISSUED:** 05/08/2023

**EXPIRES:** 11/04/2023

**APPLICANT:** Bazinet, Jeffrey  
55 M Street NE  
WASHINGTON, DC 20002

**OWNER:** Bazinet, Jeffrey  
55 M Street NE  
WASHINGTON, DC 20002

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

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

#### PARCEL:

**PIN:** 987516845684

**Parcel Number:** 000138000

**Address:** 320 CAMERON ST KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**  
**Block:** 0 **Lot(s):** 22

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2.5 Ton HVAC system

**MC2023-111**

**PROJECT NAME:** Bazinet HVAC

**SITE ADDRESS:** 320 CAMERON ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/08/2023

**EXPIRES:** 11/04/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7829.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

5.8.23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-110</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> HVAC CHANGEOUT	<b>ISSUED:</b> 05/05/2023
<b>SITE ADDRESS:</b> 300 ARCH ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 11/01/2023

<b>APPLICANT:</b> FORBES, KYLE & CASEY 101 DUCK WOODS DR kitty hawk, nc 27949	<b>OWNER:</b> FORBES, KYLE & CASEY 101 DUCK WOODS DR kitty hawk, nc 27949
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<b>MECHANICAL, H-2, H-3:</b>	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	<b>License:</b> 34340 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 987516943208	<b>Parcel Number:</b> 000221000
<b>Address:</b> 300 ARCH ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> ORVILLE BEACH WEST	<b>Block:</b> 0 <b>Lot(s):</b> 120
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

 **PAID**  
5/8/23  
on-line

**MC2023-110**

**PROJECT NAME:** HVAC CHANGEOUT  
**SITE ADDRESS:** 300 ARCH ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/05/2023

**EXPIRES:** 11/01/2023

**DETAILS**

**Permit**

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

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** dkub **Date:** 05 / 06 / 2023



**Town of Kill Devil Hills**

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

**PAID**

MAY 11 2023

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**MC2023-113**

**PROJECT NAME:** HVAC CHANGEOUT  
**SITE ADDRESS:** 713 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/08/2023

**EXPIRES:** 11/04/2023

**APPLICANT:** SANZO, ARTHUR  
713 WEST FIRST ST  
Kill Devil Hills, NC 27948

**OWNER:** SANZO, ARTHUR  
713 WEST FIRST ST  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988413145089

**Parcel Number:** 027546085

**Address:** 713 FIRST ST W KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 85

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT



**PAID**  
5/11/23 DW  
CR#4494

**MC2023-113**

**PROJECT NAME:** HVAC CHANGEOUT  
**SITE ADDRESS:** 713 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/08/2023

**EXPIRES:** 11/04/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	14000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** Julia Scheer **Date:** 05 / 09 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-116</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 05/12/2023</b>
<b>SITE ADDRESS: 1023A- VA DARE TRL N KILL DEVIL HILLS</b>	<b>EXPIRES: 11/08/2023</b>

**APPLICANT:** TEMPLE, MARY LOU KIMBALL  
3354 KINGSBURY CIRCLE  
ROANOKE, VA 24014  
540-797-1368

**OWNER:** TEMPLE, MARY LOU KIMBALL  
3354 KINGSBURY CIRCLE  
ROANOKE, VA 24014  
540-797-1368

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

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

**PARCEL:**

**PIN:** 988415639633

**Parcel Number:** 008076000

**Address:** 1023A- VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 1

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**PAID**

**MAY 15 2023**

**TOWN OF  
KILL DEVIL HILLS**

**MC2023-116**

**PROJECT NAME:**

**SITE ADDRESS:** 1023A- VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/12/2023

**EXPIRES:** 11/08/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10078.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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

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

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

5/15/23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-118**

**PROJECT NAME:** Kenny HVAC  
**SITE ADDRESS:** 114 WRIGHT AVE E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/15/2023

**EXPIRES:** 11/11/2023

**APPLICANT:** Kenny, Zach  
108 Corona Ln Apt A  
SAN CLEMENTE, CA 92672

**OWNER:** Kenny, Zach  
108 Corona Ln Apt A  
SAN CLEMENTE, CA 92672

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

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

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

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

**PARCEL:**

**PIN:** 988420706932

**Parcel Number:** 003886000

**Address:** 114 WRIGHT AVE E KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 38 **Lot(s):** 5

**Legal Description:**

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

**PROJECT DESCRIPTION:** Install two zone ductless mini split system.



**PAID**  
5/16/23  
on-line

**MC2023-118**

**PROJECT NAME:** Kenny HVAC

**SITE ADDRESS:** 114 WRIGHT AVE E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/15/2023

**EXPIRES:** 11/11/2023

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10580.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Charles Thuman

Contractor or Authorized Agent: BREAN LANCASTER Date: 05 / 15 / 2023



# Town of Kill Devil Hills

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

**PAID**

**MAY 17 2023**

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-122**

**PROJECT NAME:** Seidman HVAC  
**SITE ADDRESS:** 2033 BAY DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/17/2023

**EXPIRES:** 11/13/2023

**APPLICANT:** RONALD SEIDMAN  
2033 Bay Dr.  
KILL DEVIL HILLS, NC 27948

**OWNER:** RONALD SEIDMAN  
2033 Bay Dr.  
KILL DEVIL HILLS, NC 27948

**H3, CLASS 1:** One Hour Heating and Air Conditioning  
701 Fresh Pond West  
Kill Devil Hills, NC 27948  
441-1740  
**License:** 12643  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 987408987503 **Parcel Number:** 001997000  
**Address:** 2033 BAY DR KILL DEVIL HILLS  
**Addition:** AVALON BEACH ANNEX 2 & 3 **Zoning:**  
**Block:** 0 **Lot(s):** 1023  
**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 1.5 & 3 Ton HVAC systems

**MC2023-122**

**PROJECT NAME:** Seidman HVAC

**SITE ADDRESS:** 2033 BAY DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/17/2023

**EXPIRES:** 11/13/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	14000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 5-17-23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-117**

**PROJECT NAME:** Carden HVAC  
**SITE ADDRESS:** 804 CEDAR DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/15/2023

**EXPIRES:** 11/11/2023

**APPLICANT:** CARDEN, STUART W  
804 CEDAR DR  
KILL DEVIL HILLS, NC 27948

**OWNER:** CARDEN, STUART W  
804 CEDAR DR  
KILL DEVIL HILLS, NC 27948

**MECHANICAL H2 AND H3:** CT MECHANICAL, LLC  
117 BAREFOOT LN  
GRANDY, NC 27939  
252-453-9452

**License:** 19848  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988413133177

**Parcel Number:** 012352000

**Address:** 804 CEDAR DR KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 142

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 3.5 Ton HVAC system



**PAID**  
5/16/23  
on-line

**MC2023-117**

**PROJECT NAME:** Carden HVAC

**SITE ADDRESS:** 804 CEDAR DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/15/2023

**EXPIRES:** 11/11/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** Michael Payne **Date:** 05 / 15 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-119**

**PROJECT NAME:** Zuber HVAC  
**SITE ADDRESS:** 1516 VILLAGE LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/15/2023

**EXPIRES:** 11/11/2023

**APPLICANT:** Zuber, Gary  
1516 Village Lane  
Kill Devil Hills, NC 27948

**OWNER:** Zuber, Gary  
1516 Village Lane  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988414245742

**Parcel Number:** 003347000

**Address:** 1516 VILLAGE LN KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 1

**Zoning:**  
**Block:** 0 **Lot(s):** 65

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2.5 Ton HVAC system

**PAID**  
5/16/23  
on-line

**MC2023-119**

**PROJECT NAME:** Zuber HVAC  
**SITE ADDRESS:** 1516 VILLAGE LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/15/2023

**EXPIRES:** 11/11/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7460.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Charles Thuman

Contractor or Authorized Agent: Steve Suet Date: 05 / 15 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-121</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 05/17/2023</b>
<b>SITE ADDRESS:</b> 1006 SUFFOLK ST KILL DEVIL HILLS	<b>EXPIRES: 11/13/2023</b>

<b>APPLICANT:</b> ASKEW, STEVE 129 WHITE OAK ROAD EURE, NC 27935	<b>OWNER:</b> ASKEW, STEVE 129 WHITE OAK ROAD EURE, NC 27935
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<b>H-3:</b>	GEORGE & CO. 105 Beau Pkwy Elizabeth City, NC 27909 335-2596	<b>License:</b> 31510 <b>Expires:</b> 12/31/2023
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**PARCEL:**

<b>PIN:</b> 987408998284	<b>Parcel Number:</b> 001970000
<b>Address:</b> 1006 SUFFOLK ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 969
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** Install new mini split system

 **PAID**  
5/17/23  
on-line

**MC2023-121**

**PROJECT NAME:**

**SITE ADDRESS:** 1006 SUFFOLK ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/17/2023

**EXPIRES:** 11/13/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4250.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 05 / 17 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-124</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Gibson HVAC	<b>ISSUED:</b> 05/18/2023
<b>SITE ADDRESS:</b> 3312 BAY DR KILL DEVIL HILLS	<b>EXPIRES:</b> 11/14/2023

**APPLICANT:** GIBSON, CHARLES ROGER  
425 MILLSTONE RD  
CHESAPEAKE, VA 23320

**OWNER:** GIBSON, CHARLES ROGER  
425 MILLSTONE RD  
CHESAPEAKE, VA 23320

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

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

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

**PARCEL:**

**PIN:** 987516747072

**Parcel Number:** 000326000

**Address:** 3312 BAY DR KILL DEVIL HILLS

**Zoning:**

**Addition:** ORVILLE BEACH WEST

**Block:** 0 **Lot(s):** 248

**Legal Description:**

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

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

*PAID*  
*5/24/23*  
*online payment*

**MC2023-124**

**PROJECT NAME:** Gibson HVAC

**SITE ADDRESS:** 3312 BAY DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/18/2023

**EXPIRES:** 11/14/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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**Issued By:** Charles Thuman

**Contractor or Authorized Agent:** *J. Sub* **Date:** 05 / 18 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-123**

**PROJECT NAME:** Rheubottom HVAC  
**SITE ADDRESS:** 1728 BAY DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/17/2023

**EXPIRES:** 11/13/2023

**APPLICANT:** Rheubottom, Jeffery  
300 Live Oak Ct  
Kill Devil Hills, NC 27948  
252-489-9438

**OWNER:** Rheubottom, Jeffery  
300 Live Oak Ct  
Kill Devil Hills, NC 27948  
252-489-9438

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

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

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

**License:** 34278  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 98840905359801

**Parcel Number:** 002548001

**Address:** 1728 BAY DR KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SHORES INC SEC 1

**Block:** 21 **Lot(s):** UT 1728A

**Legal Description:**

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

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

**PAID**  
*Mc 3/13/23*  
*online payment*

**MC2023-123**

PROJECT NAME: Rheubottom HVAC

SITE ADDRESS: 1728 BAY DR KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 05/17/2023

EXPIRES: 11/13/2023

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Charles ThumanContractor or Authorized Agent: Joseph W. Mabry Date: 05 / 17 / 2023



# Town of Kill Devil Hills

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

**PAID**

MAY 23 2023

## Planning and Inspection Department

<b>MC2023-128</b> PROJECT NAME: DORN HVAC SITE ADDRESS: 605 INDIAN DR KILL DEVIL HILLS	TOWN OF KILL DEVIL HILLS
	<b>MECHANICAL</b>
	ISSUED: 05/23/2023
	EXPIRES: 11/19/2023

**APPLICANT:** Dorn, Myra  
813 Jewel Ave.  
PORTSMOUTH, VA 23701  
252-488-1392

**OWNER:** Dorn, Myra  
813 Jewel Ave.  
PORTSMOUTH, VA 23701  
252-488-1392

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

**License:** 24744-SP-PH  
**Expires:** 04/23/2024

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

**License:** 33023  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988410255908

**Parcel Number:** 002725018

**Address:** 605 INDIAN DR KILL DEVIL HILLS

**Zoning:**

**Addition:** HIGH VIEW - HEDRICKS ADD

**Block:** F **Lot(s):** 18

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

*"X" Flood Zone*

**MC2023-128**

**PROJECT NAME:** DORN HVAC  
**SITE ADDRESS:** 605 INDIAN DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/23/2023

**EXPIRES:** 11/19/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8764.00
CONSTRUCTION TYPE	V
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

5/23/23



# Town of Kill Devil Hills

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

PAID

MAY 24 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-127**

**PROJECT NAME:**

**SITE ADDRESS:** 406 CAMERON ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/22/2023

**EXPIRES:** 11/18/2023

**APPLICANT:** BELVIN III, EARNEST  
PO BOX 2226  
kitty hawk, nc 27949

**OWNER:** BELVIN III, EARNEST  
PO BOX 2226  
kitty hawk, nc 27949

**H3, CLASS 1:**

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

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

**PARCEL:**

**PIN:** 987516843504

**Parcel Number:** 000143000

**Address:** 406 CAMERON ST KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**  
**Block:** 0      **Lot(s):** 27

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**MC2023-127**

**PROJECT NAME:**

**SITE ADDRESS:** 406 CAMERON ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/22/2023

**EXPIRES:** 11/18/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7297.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 5-24-23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**MC2023-129**

**PROJECT NAME:** HVAC CHANGEOUT  
**SITE ADDRESS:** 801 CARDINAL ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/24/2023

**EXPIRES:** 11/20/2023

**APPLICANT:** EVANS, STEVEN CRAIG  
PO BOX 1322  
KILL DEVIL HILLS, NC 27948

**OWNER:** EVANS, STEVEN CRAIG  
PO BOX 1322  
KILL DEVIL HILLS, NC 27948

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

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

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

**PARCEL:**

**PIN:** 988308776936

**Parcel Number:** 004399010

**Address:** 801 CARDINAL ST KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 20 **Lot(s):** 10

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**PAID**  
5/24/23  
on-line

**MC2023-129**

**PROJECT NAME:** HVAC CHANGEOUT  
**SITE ADDRESS:** 801 CARDINAL ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/24/2023

**EXPIRES:** 11/20/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	14000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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**Issued By:** Marty Shaw

**Contractor or Authorized Agent:** dSub **Date:** 05 / 24 / 2023



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>MC2023-130</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> HVAC CHANGEOUT	<b>ISSUED:</b> 05/24/2023
<b>SITE ADDRESS:</b> 407 NIXONTON ST KILL DEVIL HILLS	<b>EXPIRES:</b> 11/20/2023

**APPLICANT:** RICHARD SOUTHERS  
407 Nixonton St.  
KDH, NC 27848

**OWNER:** RICHARD SOUTHERS  
407 Nixonton St.  
KDH, NC 27848

**MECHANICAL H2 AND H3:**

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

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

**PARCEL:**

**PIN:** 987520921463

**Parcel Number:** 029719000

**Address:** 407 NIXONTON ST KILL DEVIL HILLS

**Zoning:**

**Addition:** MOOR SHORES

**Block:** 0 **Lot(s):** 50

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**PAID**  
5/24/23  
on-line

**MC2023-130**

**PROJECT NAME:** HVAC CHANGEOUT

**SITE ADDRESS:** 407 NIXONTON ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/24/2023

**EXPIRES:** 11/20/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12289.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: BREAN LANCASTER Date: 05 / 24 / 2023



# Town of Kill Devil Hills

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

PAID

MAY 25 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-132**

**PROJECT NAME:** HVAC CHANGEOUT  
**SITE ADDRESS:** 208 AVALON DR W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/25/2023

**EXPIRES:** 11/21/2023

**APPLICANT:** RIC & TRACY ROMESBURG AND ELLIS  
526 Bount Pt. Rd.  
NEWPORT NEWS, VA 23606

**OWNER:** RIC & TRACY ROMESBURG AND ELLIS  
526 Bount Pt. Rd.  
NEWPORT NEWS, VA 23606

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

**License:** 20564  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988517104451

**Parcel Number:** 001755000

**Address:** 208 AVALON DR W KILL DEVIL HILLS

**Addition:** AVALON BEACH

**Zoning:**  
**Block:** 0      **Lot(s):** 124

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGEOUT

**MC2023-132**

**PROJECT NAME: HVAC CHANGEOUT**

**SITE ADDRESS: 208 AVALON DR W KILL DEVIL HILLS**

**MECHANICAL**

**ISSUED: 05/25/2023**

**EXPIRES: 11/21/2023**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

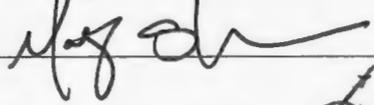
**REQUIRED INSPECTIONS**

Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 5-25-23



# Town of Kill Devil Hills

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

PAID

MAY 25 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-131**

PROJECT NAME: RM3 HVAC  
SITE ADDRESS: 3110 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 05/24/2023

EXPIRES: 11/20/2023

APPLICANT: Rm3 Properties, LLC  
P O BOX 220  
BOYDTON, VA 23917

OWNER: Rm3 Properties, LLC  
P O BOX 220  
BOYDTON, VA 23917

H3, CLASS 1:

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

License: 12643  
Expires: 12/31/2023

PARCEL:

PIN: 988513132814

Parcel Number: 000857000

Address: 3110 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 Lot(s): 4

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

**MC2023-131**

**PROJECT NAME: RM3 HVAC**

**SITE ADDRESS: 3110 VA DARE TRL N KILL DEVIL HILLS**

**MECHANICAL**

**ISSUED: 05/24/2023**

**EXPIRES: 11/20/2023**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9031.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

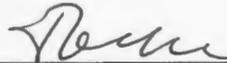
Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 5-28-23



# Town of Kill Devil Hills

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

PAID

MAY 31 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-134**

**PROJECT NAME:** Lowry HVAC  
**SITE ADDRESS:** 206 AVALON DR W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/30/2023

**EXPIRES:** 11/26/2023

**APPLICANT:** Lowry, Robert  
79 Cunningham Ct.  
PALMYRA, VA 22963

**OWNER:** Lowry, Robert  
79 Cunningham Ct.  
PALMYRA, VA22963

**H3, CLASS 1:** One Hour Heating and Air Conditioning  
701 Fresh Pond West  
Kill Devil Hills, NC 27948  
441-1740  
**License:** 12643  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988517104493 **Parcel Number:** 001754000  
**Address:** 206 AVALON DR W KILL DEVIL HILLS  
**Addition:** AVALON BEACH **Zoning:**  
**Block:** 0 **Lot(s):** 123  
**Legal Description:**

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

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

**MC2023-134**

**PROJECT NAME:** Lowry HVAC

**SITE ADDRESS:** 206 AVALON DR W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/30/2023

**EXPIRES:** 11/26/2023

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6790.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

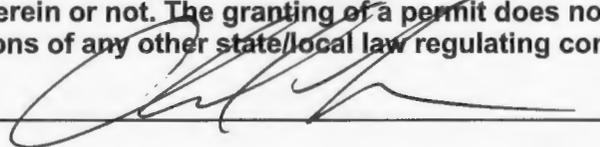
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 5-31-23



## Town of Kill Devil Hills

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

PAID

MAY 31 2023

### Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2023-135**

**PROJECT NAME:** Clement HVAC  
**SITE ADDRESS:** 105 ST CLAIR ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/30/2023

**EXPIRES:** 11/26/2023

**APPLICANT:** CLEMENT, CECELIA H  
5405 BRANCHWOOD WAY  
VIRGINIA BEACH, VA23464-5363

**OWNER:** CLEMENT, CECELIA H  
5405 BRANCHWOOD WAY  
VIRGINIA BEACH, VA23464-5363

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

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

**PARCEL:**

**PIN:** 988308891408

**Parcel Number:** 003797000

**Address:** 105 ST CLAIR ST E KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 32 **Lot(s):** 14

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace AC with 2 Ton mini split system

**MC2023-135**

**PROJECT NAME:** Clement HVAC

**SITE ADDRESS:** 105 ST CLAIR ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 05/30/2023

**EXPIRES:** 11/26/2023

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7455.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

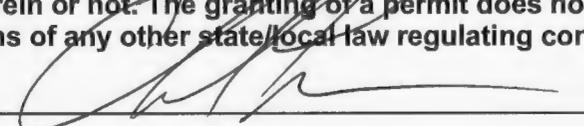
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 5-31-23



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**DM2023-004**

**PROJECT NAME:** Site Demolition  
**SITE ADDRESS:** 2506 VA DARE TRL N KILL DEVIL HILLS

**DEMOLITION**

**ISSUED: 05/23/2023**

**EXPIRES: 11/19/2023**

**APPLICANT:** SPENCER SMITH, NANCY GLOVER  
330 FAIRBANKS AVE  
CAMPBELL, CA 95008

**OWNER:** SPENCER SMITH, NANCY GLOVER  
330 FAIRBANKS AVE  
CAMPBELL, CA 95008

**GENERAL BUILDING:** Albemarle Contractors, Inc.  
P.O. Box 146  
Kitty Hawk, NC 27949  
252-261-1080

**License:** 53487  
**Expires:**

**PARCEL:**

**PIN:** 988517220255

**Parcel Number:** 000368000

**Address:** 2506 VA DARE TRL N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 4      **Lot(s):** 1 PT OF 2

**Legal Description:**

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

**PROJECT DESCRIPTION:** Demolish existing structure and driveway connecting to Virginia Dare Trl. Driveway on Walker St to remain.

### DETAILS

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FLOOD ZONE	X
CONSTRUCTION COST	21000.00

**PAID**

**MAY 24 2023**

TOWN OF  
KILL DEVIL HILLS

**DM2023-004**

**PROJECT NAME:** Site Demolition

**SITE ADDRESS:** 2506 VA DARE TRL N KILL DEVIL HILLS

**DEMOLITION**

**ISSUED:** 05/23/2023

**EXPIRES:** 11/19/2023

**REQUIRED INSPECTIONS**

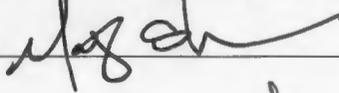
Final

**CONDITIONS**

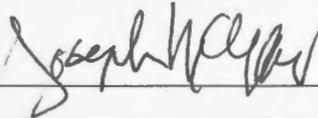
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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: \_\_\_\_\_

5-24-23



# Town of Kill Devil Hills

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

PAID

MAY 10 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS  
**OCCUPANCY**  
ISSUED: 05/10/2023  
EXPIRES:

### OP2023-032

**PROJECT NAME:** New Caliber Car Wash Conditional Occupancy Permit  
**SITE ADDRESS:** 2011 CROATAN HWY S KILL DEVIL HILLS

**APPLICANT:** P.G. Harris Construction Co.  
3204 Churchland Blvd  
CHESAPEAKE, VA 23321

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

**UNLIMITED BUILDING:** P.G. Harris Construction Co.  
3204 Churchland Blvd  
CHESAPEAKE, VA 23321

**License:** 66646  
**Expires:**

**UNLIMITED BUILDING:** P.G. Harris Construction Co.  
3204 Churchland Blvd  
CHESAPEAKE, VA 23321

**License:** 66646  
**Expires:**

### PARCEL:

**PIN:** 989313133228

**Parcel Number:** 008351000

**Address:** 2011 CROATAN HWY S KILL DEVIL HILLS

**Zoning:**

**Addition:** Fresh Pond Beaches

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Conditional Occupancy Permit: See conditions, construction of new drive thru car wash, parking lot, and associated site improvements

**OP2023-032**

**PROJECT NAME:** New Caliber Car Wash Conditional Occupancy  
Permit  
**SITE ADDRESS:** 2011 CROATAN HWY S KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 05/10/2023

**EXPIRES:**

**DETAILS**

**Permit**

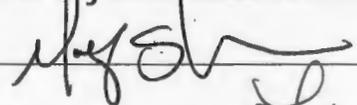
<b>Name</b>	<b>Value</b>
PURPOSE	Commercial New
ZONING DISTRICT	C
FLOOD ZONE	X
BASE FLOOD ELEVATION	8

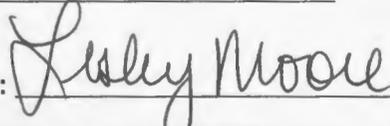
**CONDITIONS**

\* Conditional Occupancy Permit Conditions:

1. When lighting has been replaced, it shall be tested by the contractor and then the Town of Kill Devil Hills shall inspect prior to the lights being in operation.
2. If the lighting plan below does not satisfy the Town of Kill Devil Hills lighting ordinance requirements, additional changes will be required
3. If the lighting is not corrected in a timely manner no later than June 19, 2023 the conditional certificate of occupancy will be revoked
4. The business shall not be open after dark, nor early morning when it is not light outside.
5. All lights on site shall remain turned off until the lighting changes have been approved by Town staff. Minor building lights are allowed to remain on for security purposes and the lights can be turned on for testing purposes, but will need to inform Town staff when this will be done.
6. Any violation of the above conditions will result in revocation of the conditional occupancy permit.

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: 5/10/2023



# Town of Kill Devil Hills

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

**PAID**

**MAY 15 2023**

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**OP2023-033**

**PROJECT NAME:** Macko Construction New 4 Bedroom SFD  
**SITE ADDRESS:** 2102 NEW BERN ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 05/11/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-251

**APPLICANT:** MACKO OBX CONSTRUCTION, INC  
P.O. BOX 3689  
Kill Devil Hills, NC 27948  
252-480-6411

**OWNER:** Willowbrook Estates, LLC  
PO Box 1653  
Kill Devil Hills, NC 27948

**BUILDING UNLIMITED:** MACKO OBX CONSTRUCTION, INC  
P.O. BOX 3689  
Kill Devil Hills, NC 27948  
252-480-6411

**License:** 81540  
**Expires:** 12/31/2023

**BUILDING UNLIMITED:** MACKO OBX CONSTRUCTION, INC  
P.O. BOX 3689  
Kill Devil Hills, NC 27948  
252-480-6411

**License:** 81540  
**Expires:** 12/31/2023

**PARCEL:**

**PIN:** 988517214061

**Parcel Number:** 001683000

**Address:** 2102 NEW BERN ST KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 27

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$213.50	\$0.00
<b>Totals :</b>	<b>\$263.50</b>	<b>\$0.00</b>

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

**OP2023-033**

**PROJECT NAME:** Macko Construction New 4 Bedroom SFD  
**SITE ADDRESS:** 2102 NEW BERN ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 05/11/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	2
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

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

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

**Date:** 5/15/23



# Town of Kill Devil Hills

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

**PAID**  
**PAID WITH CASH**

**MAY 15 2023**

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

<b>OP2023-034</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Sandra Boone	<b>ISSUED:</b> 05/12/2023
<b>SITE ADDRESS:</b> 900 W Martin KILL DEVIL HILLS	<b>EXPIRES:</b>

PARENT PERMIT #: BJ2023-052

<b>APPLICANT:</b> CLAYTON HOMES 1109 Road Street Elizabeth City, NC 27909	<b>OWNER:</b> BOONE, SANDRA PO BOX 1832 Kill Devil Hills, NC 27948
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<b>CONTRACTOR:</b> CLAYTON HOMES 1109 Road Street Elizabeth City, NC 27909	<b>License:</b> LEGACY UNKNOWN <b>Expires:</b> 12/30/2023
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<b>CONTRACTOR:</b> CLAYTON HOMES 1109 Road Street Elizabeth City, NC 27909	<b>License:</b> LEGACY UNKNOWN <b>Expires:</b> 12/30/2023
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**PARCEL:**

<b>PIN:</b> 988311751006	<b>Parcel Number:</b> 004614000
<b>Address:</b> 900 W Martin KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 57 <b>Lot(s):</b> 1
<b>Legal Description:</b>	

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

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

**OP2023-034**

**PROJECT NAME:** Sandra Boone

**SITE ADDRESS:** 900 W Martin KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 05/12/2023

**EXPIRES:**

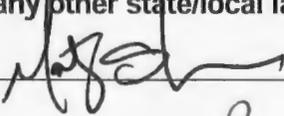
**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	LI-2
FLOOD ZONE	X
OCCUPANCY TYPE	Residential

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: Sandra Boone Date: 5/15/23



# Town of Kill Devil Hills

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

**PAID**

**MAY 17 2023**

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### OP2023-035

**PROJECT NAME:** Water Oak 3 Bedroom House  
**SITE ADDRESS:** 507 Zen Lane Kill Devil Hills

### OCCUPANCY

**ISSUED:** 05/17/2023

**EXPIRES:**

**PARENT PERMIT #:** BJ2022-278

**APPLICANT:** SAGA CONSTRUCTION  
UNKNOWN  
UNKNOWN, XX 00000  
252-441-9003

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

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

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

#### PARCEL:

**PIN:** 988414228777

**Parcel  
Number:**

**Address:** 507 Zen Lane Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 46, Water Oak

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

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

**OP2023-035**

**PROJECT NAME:** Water Oak 3 Bedroom House  
**SITE ADDRESS:** 507 Zen Lane Kill Devil Hills

**OCCUPANCY**

**ISSUED:** 05/17/2023

**EXPIRES:**

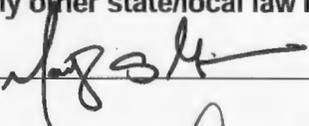
**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: Grace M. Munch

Date: 5.17.23



# Town of Kill Devil Hills

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

PAID

MAY 25 2023

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

### OP2023-036

PROJECT NAME: David and Kathy Parks  
SITE ADDRESS: 3304 VA DARE TRL N KILL DEVIL HILLS

### OCCUPANCY

ISSUED: 05/24/2023

EXPIRES:

PARENT PERMIT #: BJ2022-072

APPLICANT: RELIANT CONSTRUCTION LLC  
4275 Worthington Lane  
kitty hawk, nc 27949  
252-202-7007

OWNER: PARKS, DAVID  
1252 Florida Rd  
ELIZABETH CITY, NC 27909

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC  
4275 Worthington Lane  
kitty hawk, nc 27949  
252-202-7007

License: 62339  
Expires: 12/31/2023

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC  
4275 Worthington Lane  
kitty hawk, nc 27949  
252-202-7007

License: 62339  
Expires: 12/31/2023

### PARCEL:

PIN: 988513045938

Parcel Number: 000066000

Address: 3304 VA DARE TRL N KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 2

Zoning:  
Block: 2 Lot(s): 9

Legal Description:

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

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

**OP2023-036**

**PROJECT NAME:** David and Kathy Parks  
**SITE ADDRESS:** 3304 VA DARE TRL N KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 05/24/2023

**EXPIRES:**

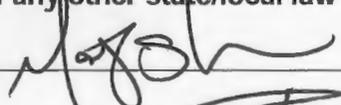
**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 5/25/23



# Town of Kill Devil Hills

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

PAID

MAY 26 2023

## Planning and Inspection Department

<b>OP2023-037</b>	<b>PAID WITH CASH</b>	TOWN OF KILL DEVIL HILLS
<b>PROJECT NAME:</b> Wang Addition <b>SITE ADDRESS:</b> 902 SIXTH AVE KILL DEVIL HILLS		<b>OCCUPANCY</b> <b>ISSUED:</b> 05/25/2023 <b>EXPIRES:</b>

PARENT PERMIT #: BJ2022-149

**APPLICANT:** Wang, Ke Yun  
106 Linkside Dr  
kitty hawk, nc 27949

**OWNER:** Wang, Ke Yun  
106 Linkside Dr  
kitty hawk, nc 27949

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

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

**PARCEL:**

**PIN:** 988311762873

**Parcel Number:** 004505002

**Address:** 902 SIXTH AVE KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 39 **Lot(s):** 2

**Legal Description:**

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

**PROJECT DESCRIPTION:** enclose under existing house for living space, add driveway, rebuild front stairs and landing

**OP2023-037**

**PROJECT NAME:** Wang Addition  
**SITE ADDRESS:** 902 SIXTH AVE KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 05/25/2023

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Addition
ZONING DISTRICT	RL
FLOOD ZONE	X
BASE FLOOD ELEVATION	8.0
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

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

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

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

5/26/23