BUILDING DEDMITS TO	R THE MONTH OF AUGUST 2024		1	1				Т					
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For the Town of Kill D Permit # BJ PERMIT #	Name	Location	A,R,N	Туре		Value	Flood Zone		Fee	C, R, G	Date Issued	Sub. Improve Y/N	Description
BJ2024-136	Mark Yacobi	907 Swan St.	R	BJ	\$	58,512.00	X	\$	396.90	R	8/1/2024	N	Interior remodel/kitchen cabinets/walls/windows/plumbing/electrical
BJ2024-140	Regina Young	200 Gunas Dr.	A	BJ		3,500.00		\$	300.00	R	8/5/2024		Install fence/replace sub panel/wire new hot tub
BJ2024-142	Cory Neborsky	905 Eighth Ave.	A	BJ	\$	15,000.00		\$		R	8/12/2024	N	Add living space and deck
BJ2024-141	Joseph Hurdle	318 W. Arch St.	A	BJ	\$	383,000.00		\$		R	8/13/2024	Y	Add bedroom/2 bathrooms
BJ2024-145	Zane Gillespie	551 Parkwood Dr.	A	81	\$	58,000.00		\$	536.40	R	8/19/2024	N	Add pool and pool house
Bj2024-148	Matthew Hall	624 W. Ocean Acres Dr.	R	BJ	\$	6,300.00		\$	150.00	R	8/26/2024	N	Construct deck and anding with stairs/replace entry door
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BJ2024-134	Water Oak Residential LLC	501 Zen Lane	N	BJ	\$	425,000.00	x	Ś	1,644.75	R	8/8/2024	Y	Proposed 3 bedroom single family dwelling
BJ2024-134 BJ2024-137	Shannon Mckinstrie	401 Apache St.	N	BJ	\$	410,000.00				R	8/8/2024	Y	Proposed 4 bedroom single family dwelling
BJ2024-138	Sandy Bottom Homes	2034 Newport News St.	N	BJ		285,000.00				R	8/13/2024	Ý	Proposed 3 bedroom single family dwelling
BJ2024-139	Lenz Homes Inc.	107 Carolyn Dr.	N	BJ	\$	450,000.00		Ś	2,585.75	R	8/13/2024	Y	Proposed 4 bedroom single family dwelling
BJ2024-133	Elmer Gomez	1514 Ketch Ln.	N	BJ	\$	350,000.00	X	\$	2,393.55	R	8/22/2024	Y	Proposed 5 bedroom single family dwelling
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BP PERMIT #					T	T		1			1		
BP PERIVIT # BP2024-152		2120.0	A	ВР	\$	19,085.00	AE	\$	150.00	R	8/2/2024	N	Vinyl bulkhead along sound side
BP2024-152 BP2024-153	Sandra Burgee	3138 Bay Dr. 3140 Bay Dr.	A		\$	16,500.00	AE		150.00	R	8/2/2024	N	Bulkhead replacement
	James Byrum		A	BP	ې \$	16,970.00	AE		150.00	R	8/2/2024	N	Bulkhead replacement
BP2024-154	Sallie Kerr	3144 Bay Dr.	A	BP	\$	13,350.00	AE		150.00	R	8/2/2024	N	Bulkhead replacement
BP2024-155	Elizabeth Davis Thomas O'Keefe	3146 Bay Dr.	A	BP	\$	20,425.00		\$	150.00	R	8/2/2024	N	Bulkhead replacement
BP2024-156		3148 Bay Dr.	R	BP	\$	12,425.00	AO	\$	150.00	R	8/2/2024	N	Replace posts/landing/stairs/decking/handrails
BP2024-160	Lawrence Reiter	2806 N. Va. Dare Trl.	R	BP	3 \$	5,500.00	X	\$	150.00		8/7/2024	N	Replace stairs/joists/decking on front deck
BP2024-162	Oscar Sorto	309 Indian Dr.		BP	\$	6,400.00	AE	13	150.00	<u>R</u>	8/8/2024	N	Add to retaining wall
BP2024-159	George Stinnett	1418 W. First St.	A		\$ \$	3,400.00	X X	10	150.00		8/15/2024	N	Replace front steps
BP2024-161	Jeff Fisher	619 W. Landing Dr.	R		\$ \$	10,800.00	AE	\$ \$	150.00		8/20/2024	N	New platfrom on existing pier
BP2024-163	Catherine Radzikowski	3302 Bay Dr.	R	BP	\$	13,000.00	X	\$	150,00	R	8/19/2024	N	Replace deck/stairs/railings and add landing
BP2024-167	Robert Fogarty	302 Truxton St.	R			500.00	X	\$	150.00		8/19/2024	N	Replace rear steps
BP2024-168	Stephen Szymanski	214 W. Palmetto St.	R		\$ \$		X	\$	333.00	R	8/20/2024	N	Replace front deck
BP2024-166	Joseph Mason	1813 Apache St.	R	BP		30,000.00	X	\$	150,00	R	8/20/2024	N	Replace 2 deck pilings
BP2024-165	Charles Sharber	3113 Bay Dr.	R	BP	\$	24,900.00	X	> \$	150.00	R	8/23/2024	 N	Replace deck/stairs/railings
BP2024-171	Charles Perkinson	221 W. Eden St.	R	BP	\$	an monanti an	X	\$	150.00	 R	8/23/2024	N	Replace siding on rear wall and 2' roof overhang
BP2024-173	Sand Life LLC	3316 N. Va. Dare Trl.	R	BP	\$	5,000.00		13	150.00	<u>к</u> 8	8/23/2024	<u>N</u>	Replace steps
BP2024-174	Earl Cahoon	1916 Georgia Ln.	R	BP	}	1,000.00	X	- -}-	150.00		8/23/2024	N N	Replace deck/railings/stairs/landing
BP2024-172	Terry Tatum	3151 Bay Dr.	R	8P	\$	16,400.00	X X		150.00	<u>R</u> R	8/26/2024	N	Remove and reconfigure deck/stairs and landing
BP2024-176	Stephen Davis	101 Porthole Ct.	R	BP	\$	14,850.00					8/26/2024	N	Replace pool fence
BP2024-177	Silver Shoe Ranch, LLC	301 N. Memorial Blvd.	<u>R</u>	BP	\$	15,830.77	X	15	100.00	R	8/29/2024	N	Replace back deck/stairs/add roof over rear deck/replace two windows/door
BP2024-175	David Rollins	1504 Small Pl.	R	BP	\$	40,000.00	X	\$	150.00	<u>R</u>		N	Replace front and back stairs/decks and front porch
BP2024-178	Arthur Walker	105 Greenville St.	R	BP	\$	20,000.00	X	\$	300.00	R	8/28/2024	N	Replace siding/sheathing/insulation/studs/ framing from water damage
BP2024-164	Leonard Romaniello	3124 Bay Dr.	R	BP	\$	18,000.00	X	\$	150.00	R	8/29/2024		Convert portion of garage to storage
BP2024-180	Kim Nguyen	2031 Franklin St.	R	BP	\$	1,650.00	X	\$	150.00	R	8/30/2024	N	Convert portion of garage to storage
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BP2024-169	Kam-Mak Properties LLC	509 Mustian St.	R	BP	\$	6.000.00	x	Ś	150.00	C	8/20/2024	N	Replace stairs per commercial code requirements
Dr 2024-105	Non-Pride Froperices LLC					0,000.00		- Ť	100100	<u> </u>			
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ZP PERMIT#													
ZP2024-061	Shawn Pendleton	805 Eighth Ave.	A	ZP	\$	4,000.00	X	\$	100.00	R	8/9/2024	N	Fence
ZP2024-062	Julie Jarvis	807 W. Airstrip Rd.	A	ZP	\$	5,000.00	Х	\$	100.00	R	8/13/2024	N	Fence
ZP2024-063	Julie Jarvis	805 W. Airstrip Rd.	A	ZP	\$	5,000.00	X	\$	100.00	R	8/13/2024	N	Fence
ZP2024-064	Brendon Broder	104 E. Goddard Ave.	A	ZP	\$	6,000.00	X	\$	100.00	R	8/15/2024	N	Fence
ZP2024-065	Catherine Merritt	515 McCabe Ct.	A	ZP	\$	849.00	X	\$	100.00	R	8/20/2024	Ν	Fence
ZP2024-066	Joshua Evans	1811 Upper Dune Rd.	A	ZP	\$	9,515.00	Х	\$	100.00	R	8/21/2024	N	Fence
ZP2024-067	Amy Weber	109 Greenville St.	A	ZP	\$	1,621.77	Х	\$	100.00	R	8/27/2024	N	Fence
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MC PERMIT #					A			150,00		8/6/2024	N	HVAC
MC2024-239	Carolyn Perkins	113 E. Oregon Ave.	<u>R</u>	MC		X	\$ \$	150.00	R	8/6/2024	N N	HVAC
MC2024-241	David Back	1413 S. Memorial Blvd.	R	MC MC	\$ 19,897.00 \$ 14,401.00		\$ \$	150.00	R	8/0/2024	N	HVAC
MC2024-242	Susan Ruiz-Evans	601 W. Fourth St.	R					150.00	 	8/7/2024	N	HVAC
MC2024-243	Dawn Miller	519 McCabe Ct.	R		\$ 11,441.00		\$			8/7/2024 8/8/2024	N	HVAC
MC2024-244	Dick Schneider	202 E, Wilkinson St.	R	MC	\$ 7,450.00		\$	150.00		8/9/2024	N N	HVAC
MC2024-245	Zach Kenny	114 E. Wright Ave.	R	MC	\$ 14,382.00	X	\$	150.00	R			HVAC
MC2024-246	Oh Well LLC	1105 N. Va. Dare Trl.	R	MC	\$ 8,800.00		\$	150.00	R	8/12/2024	<u>N</u>	HVAC
MC2024-247	Bermuda Bay Homeowners Assoc.	1101 Cambridge Rd.	R	MC	\$ 9,000.00	X	\$	150.00	R	8/12/2024	<u>N</u>	
MC2024-250	Edward Redford	335 W. Eden St.	R		\$ 6,138.00	X		150.00	R	8/13/2024		Replace duct work under house
MC2024-185	Thiery Fevrier	2015 Norfolk St.	R		\$ 16,375.00		\$	150.00	R	8/16/2024	<u>N</u>	HVAC HVAC
MC2024-249	Rachel Powell	1710 Bay Dr.	R		\$ 9,100.00		\$	150.00	R	8/16/2024		
MC2024-251	Sidney Campen	1925 N. Va. Dare Trl.	R	MC				150.00	R	8/19/2024	<u>N</u>	HVAC
MC2024-252	Gerald Stalls	416 W. Chowan St.	R	MC		X	\$	150.00	R	8/21/2024	N	HVAC
MC2024-243	Vernon Rose	2019 Edenton St.	R		\$ 7,535.00	X	\$	150.00	R	8/21/2024	N	HVAC
MC2024-254	Warren Martin	1233 Wrightsville Blvd.	R	MC		X	\$	150.00	R	8/21/2024	<u>N</u>	HVAC
MC2024-257	Salem Fadel	310 W. Helga St.	R	MC			\$	150.00	R	8/27/2024	N	HVAC
MC2024-258	Richard Kimball	100 W. Avalon Dr.	R		\$ 4,000.00	X	\$	150.00	<u>R</u>	8/27/2024	<u>N</u>	Install mini split system
MC2024-259	Nathan Newberg	209 Burns Dr.	R		\$ 10,690.00	X	\$	150.00	R	8/27/2024		HVAC
MC2024-255	Shelia Read	112 E. Goddard Ave.	R		\$ 9,492.00	х	\$	150.00	R	8/28/2024		HVAC
MC2024-260	Melissa Mccue	1522 Bailey's Bay Rd. #12	R	MC	\$ 10,503.00	Х	\$	150.00	R	8/28/2024	N	HVAC
MC2024-261	Charles Hudgins	1505 Dogwood Ln.	· 8	MC	\$ 8,475.00	х	\$	150.00	R	8/28/2024	N	HVAC
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ELPERMIT#												
EL2023-074	Town of Kill Devil Hills	102 Town Hall Dr.	R	EL	\$ 7,759.00	Х	\$	-	G	8/6/2024	N	New lighting fixtures
EL2024-074	Town of Kill Devil Hills	ROW 302 S. Croatan Hwy.	R		\$ 7,000.00	X	\$	150.00	С	8/8/2024	N	Replace antenna and radio on existing Dominion utility pole
EL2024-075	Town of Kill Devil Hills	ROW 303 E. Helga St.	B		\$ 7,000.00	x	\$	150.00	C	8/8/2024		Replace antenna and radio on existing Dominion utility pole
EL2024-077	5001 Va. Beach Blvd. Assoc.	1202 Seventh Ave.	B		\$ 2,200.00	х	\$	150.00	R	8/13/2024		Replace main electrical panel
EL2024-078	Daniel Hawkins	1103 Suffoik St.	B	EL	\$ 500.00	x	\$	150,00	B	8/28/2024		De-energize unpermitted ground floor addition
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OP PERMIT #		2057 N. Ma. Dave Tel	N	OP			VE	¢	50.00	R	8/6/2024	Y	Occupancy
OP2024-072	Family Purchase Kill Devil Hills LLC	2057 N. Va. Dare Trl.	N	0P 0P			X	\$	50.00	<u>к</u> R	8/6/2024 8/15/2024	<u>т</u> ү	Occupancy
OP2024-073	Water Oak Residential, LLC	526 Anika Way	N		-				50.00		8/15/2024	т Ү	Occupancy
OP2024-074	Matthew Melvin	512 Copley Dr.	N	OP			X	\$		R	8/19/2024		
OP2024-075	Lane Investment Properties LLC	203 W. Ocean Acres Dr.	N	OP	· ·		<u>X</u>	\$	50.00	R	8/23/2024	<u>Y</u>	Оссиралсу
OP2024-076	Phillip Harrington Enterprises LLC	1006 Alexander Ln.	N	OP			X	\$	50.00	<u>R</u>	8/23/2024	Y	Occupancy
OP2024-077	Water Oak Residential, LLC	508 Anika Way	N	OP			X	\$	50.00	R	8/26/2024 8/30/2024	Y	Occupancy
OP2024-079	Kim Nguyen	2031 Franklin St.	N	OP	_		X	\$	50.00	R	8/30/2024	Y	Occupancy
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PL PERMIT #													
PL2024-005	Tracey Powell	112 Cove ct.	R	PL	\$	3,083.00	Х	\$	150.00	R	8/9/2024	N	Replace water line service
PL2024-006	Ann Scott	108 W. Avalon Dr.	R	PL	\$	1,673.31	Х	\$	150.00	R	8/12/2024	N	Replace water line service
PL2024-007	Andrew Baugus	2022 N. Croatan Hwy.	R	PL	\$	5,300.00	Х	\$	150.00	R	8/14/2024	N	Replace water service line with shut off
PL2024-008	Andrew Baugus	2022 N. Croatan Hwy.	R	PL	\$	1,400.00	X	\$	150.00	8	8/20/2024	N	Change out water heater and install new disconnect
PL2024-009	WDT Properties LLC	206 Suffolk St.	R	PL	\$	1,868.13	Х	\$	150.00	R	8/21/2024	N	Replace water service line
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SG PERMIT #					-			+					
SG2024-016	White Cap Car Wash	2000 N. Croatan Hwy.	N	SG	\$	20,000.00	Х	\$	300.00	С	8/9/2024	N	Free-standing sign and signs on the building
SG2024-016 SG2024-018	Golasa Holdings LLC	1900 S. Croatan Hwy.	N		\$	2,080.05	X	\$	200.00	C	8/23/2024	N	Sign on the building and add sign to free-standing sign
SG2024-018 SG2024-017	Golasa Holdings LLC. Michael Day	900 S. Croatan Hwy.	N	SG	> \$	2,080.05	X	\$	500.00	с С	8/28/2024	N	Signs on the building and free-standing sign
3/32024-017			N	50	+	00.000,01	<u>^</u>		00,000	U.	0/20/2024	IN	SPELIA OLI CHE DOROHINE GUO LI CE-STGUINE SIEN
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EG PERMIT#	ä				<u> </u>							
EG2024-010	Dumitru Sorocean	603 Holly St.	N	EG	\$ 10,000.00			100.00	R	8/13/2024	N	Clear lot for new single family dwelling and pool
EG2024-011	Coastline Investments	1816 Sea Swept Rd.	R	EG	\$ 7,000.00	X	\$	100.00	R	8/19/2024	Y	Clear lot for new single family dwelling
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OM PERMIT#								100.00		0/40/2024	Y	D and any
DM2024-006	Paul Gurzo	1829 N. Va. Dare Trl.	R	DM	\$ 15,000.00	VE	[†] \$ ≥00200]	100.00	R	8/19/2024	Y	Demo house
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DW PERMIT#												
DW2024-010	Harris Styons, LLC	2700 N. Croatan Hwy.	A	DW	\$2,100.00	Х	្នុំ ដោយ	50.00	C	8/28/2024	N	Add concrete parking area
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OTAL					\$ 3,142,942.03		\$ 23,	698 00				

EVIL ATT	
Birthplace of Aviation Aviation	

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

Planning and Inspection Department

PAID WITH CASH AUG - 9 2024

> TOWN OF KILL DEVIL HILLS

ZP2024-061

PROJECT NAME: Pendleton Fence SITE ADDRESS: 805 EIGHTH AVE KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/09/2024

EXPIRES: 02/05/2025

APPLICANT:	Pendleton, Shawn 805 Eighth Ave Kill Devil Hills, NC 2 252-256-1775	7948		OWNER:	Pendleton, Sl 805 Eighth Ar Kill Devil Hills 252-256-1775	ve 5, NC 27948
CONTRACTOR		SAME AS O UNKNOWN UNKNOWN				License: Same as Owner Expires: 12/31/2024
PARCEL:						
PIN:	98831166775	9		Parcel Number:	030497	000
Address:	805 EIGHTH	AVE KILL DEVIL	HILLS			
				Zon	ing:	
Addition:	KILL DEVIL H	ILLS RLTY COR	P ADD	Bloc	k: 44	Lot(s): 8
Legal Desc	cription:					
FEES:		Paid	Due			
Accessory Resi	dential (MIN)	\$100.00	\$0.00			
	Totals :	\$100.00	\$0.00			

PROJECT DESCRIPTION: Construct 6' fence in rear yard

ZP2024-061 PROJECT NAME: Pendleton Fence SITE ADDRESS: 805 EIGHTH AVE KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/09/2024

EXPIRES: 02/05/2025

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8
PURPOSE	Residential Accessory
CONSTRUCTION COST	4000.00
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Stringline

Dormit

Final

CONDITIONS

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

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

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

Issued By:	
Contractor or Authorized Agent: han beytes	Date: 8-9-24



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

Planning and Inspection Department

MC2024-245 PROJECT NAME: Kenny HVAC SITE ADDRESS: 114 WRIGHT AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/08/2024

EXPIRES: 02/04/2025

APPLICANT:	Kenny, Zach 108 Corona Ln Apt A SAN CLEMENTE, C/		0		Kenny, Zach 108 Corona SAN CLEME		
ELECTRICAL - LIMITED:		R A HOY PO Box 265 Kitty Hawk, 252-261-20	NC 27949	n a custa alterar la construir cador do	S with state of the descendent	License: 22222 Expires: 01/06	
MECHANICAL	H2 AND H3:	R A HOY PO Box 265 Kitty Hawk, 252-261-20	NC 27949			License: 35329 Expires: 12/31	
PARCEL:							
PIN:	988420706932	2		Parcel Number:	00388	6000	
Address:	114 WRIGHT	AVE E KILL DEV	/IL HILLS				
				Zoning	g:		
Addition:	KITTY HAWK	SHORES - REV	SED	Block:	38	Lot(s):	5
Legal Des	cription:						
FEES:		Paid	Due				
Mechanical Pe	rmit Fee	\$150.00	\$0.00				
THE ANALY WITH A REAL AND ALL A	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system

M m E/g/21 an/ini

MC2024-245 PROJECT NAME: Kenny HVAC SITE ADDRESS: 114 WRIGHT AVE E KILL DEVIL HILLS

MECHANICAL ISSUED: 08/08/2024

EXPIRES: 02/04/2025

DETAILS

Value
Residential Repair/Remodel
14382.00
V
Х
Ν
One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

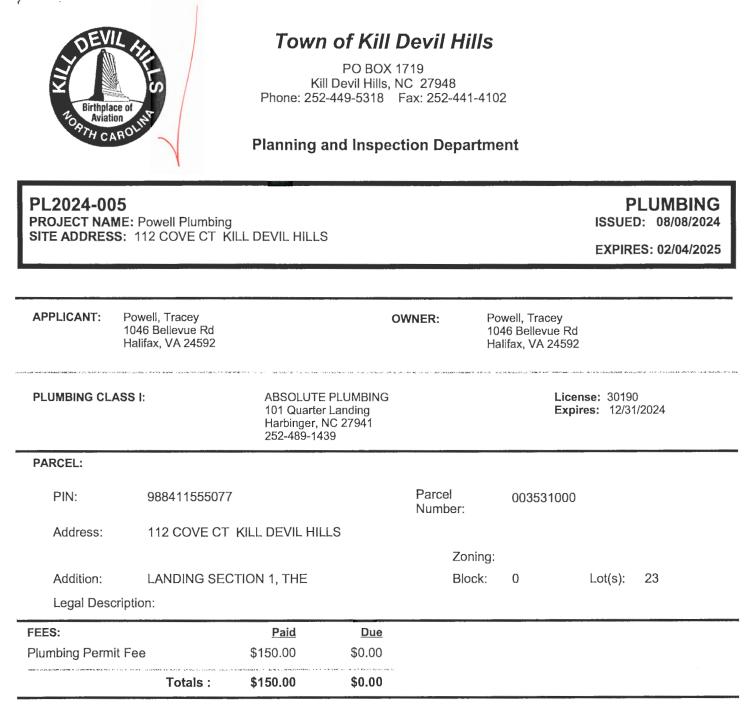
CONDITIONS

* 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: _____

Date: 08 / 09 / 2024



PROJECT DESCRIPTION: Replace water service line



PLUMBING ISSUED: 08/08/2024

EXPIRES: 02/04/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3083.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In

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 Bv:	Charles	Thuman	
------------	---------	--------	--

Contractor or Authorized Agent: Kenter Cone

Date: 08 / 09 / 2024



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

Planning and Inspection Department

SG2024-016

PROJECT NAME: White Cap Car Wash SITE ADDRESS: 2000 CROATAN HWY N KILL DEVIL HILLS SIGN ISSUED: 08/08/2024

EXPIRES: 02/04/2025

APPLICANT:	Lang Signs 520C Industrial Way CUMMING, GA 3004 941-812-5544	0	C	WNER:	WORSLEY, CARI P O BOX 188 NAGS HEAD, NC		
SIGN CONTRAC	CTOR:	Lang Signs 520C Indus CUMMING, 941-812-55	trial Way GA 30040			nse: 8832 ires: 08/31	1/2025
PARCEL:							
PIN:	988406296212	2		Parcel Number:	001296000		
Address:	2000 CROATA	N HWY N KILL	DEVIL HILLS				
				Zonir	ng:		
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Block	к: О	Lot(s):	528-529
Legal Desc	pription:						
FEES:		Paid	Due				
Sign Permit Fee	9	\$300.00	\$0.00				
	Totals :	\$300.00	\$0.00				

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



SG2024-016 PROJECT NAME: White Cap Car Wash SITE ADDRESS: 2000 CROATAN HWY N KILL DEVIL HILLS

SIGN ISSUED: 08/08/2024

EXPIRES: 02/04/2025

DETAILS

Permit	
Name	Value
# OF SIGNS	3
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	40.00
SIGN - WALL PERMITTED (SQFT)	55.20
SIGN- WALL PROPOSED (SQ FT)	55.20
ZONING DISTRICT	С
PURPOSE	Commercial Accessory
CONSTRUCTION COST	20000.00
FLOOD ZONE	Х

REQUIRED INSPECTIONS

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.

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

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

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

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

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

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

* Zoning Final Inspection is required.

SG2024-016

PROJECT NAME: White Cap Car Wash SITE ADDRESS: 2000 CROATAN HWY N KILL DEVIL HILLS SIGN ISSUED: 08/08/2024

EXPIRES: 02/04/2025

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.

Charles Thuman Issued By:

Contractor or Authorized Agent:

Trichi Realist

Date: 08 / 09 / 2024



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

Planning and Inspection Department

REPLACEMEN	NAME: VERIZON WIRELESS EQUIPMENT					ELECTRICAL ISSUED: 08/06/2024 EXPIRES: 02/02/2025		
APPLICANT:	Jack Averna on beha 120 Eastshore DR GLEN ALLEN, VA 23 571-337-0635		ess O	WNER:	P O BOX 102 Tow	DF KILL DEVIL HILLS K 1719 m Hall Drive VIL HILLS, NC 27948		
ELECTRICAL -	UNLIMITED:	Carrick Cor 1450 Kineti Lake Park, (561) 844-5	FL 33403	na of a la scan delan delan del	44 * 2 * 14 * 2 * 2 * 2 * 2 * 2 * 2 * 2 * 2 * 2 *	License: U.16199 Expires: 03/31/2025		
PARCEL:								
PIN:	ROW-5741			Parcel Number:				
Address:	302 South Cro	atan Highway K	ill Devil Hills					
				Zor	ning:			
Addition:				Blo	ck:	Lot(s):		
Legal Des	cription: ROW, 302	S CROATAN H	WY					
FEES:		Paid	Due					
Electrical Perm	it Fee	\$150.00	\$0.00					
n, exemple addition from from called a from the second second second second second second second second second	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: Replace antenna and radio on existing Dominion utility pole.

M el el 24 anline

EXPIRES: 02/02/2025

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	С	
PURPOSE	Commercial Repair/Remodel	
CONSTRUCTION COST	7000.00	
CONSTRUCTION TYPE	111	
FLOOD ZONE	Х	
OCCUPANCY TYPE	Business	

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Jack Averna

Date: 08 / 08 / 2024



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

Planning and Inspection Department

EL2023-074

PROJECT NAME: TOWN HALL BOARD ROOM ELECTRICAL SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill

4

ELECTRICAL ISSUED: 08/01/2023

EXPIRES: 01/28/2024

APPLICANT:	TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948		o	O		TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948		
ELECTRICAL,	UNLIMITED:	PO Box 27	lls, NC 27948	3		License: 1940 Expires: 10/0	-	
PARCEL:								
PIN:	9876543210			Parcel Number:	23			
Address:	102 Town Hall [Dr Kill Devil Hill						
				Zonii	ng: G&I			
Addition:				Block	k: blk	Lot(s):	lot	
Legal Desc	cription: This is the l	egal descriptior	n test					
FEES:		Paid	Due					
Electrical Permi	it Fee	\$0.00	\$0.00					
	Totals :	\$0.00	\$0.00					

PROJECT DESCRIPTION: NEW LIGHTING FIXTURES



EL2023-074

PROJECT NAME: TOWN HALL BOARD ROOM ELECTRICAL SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill

, ì

ELECTRICAL ISSUED: 08/01/2023

EXPIRES: 01/28/2024

DETAILS

Permit	
Name	Value
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7759.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Contractor or Authorized Agent: ______ Parisons

_____ Date: 08 / 02 / 2023



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

Planning and Inspection Department

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AUG - 8 2024

TOWN OF KILL DEVIL HILLS

BJ2024-134 PROJECT NAME: SAGA New House SITE ADDRESS: 501 Zen Lane Kill Devil Hils

BUILDING JOINT ISSUED: 08/08/2024

EXPIRES: 07/31/2025

GENERAL - UN	PO Box 90 Kill Devil Hills, NC 2 252-441-9003 LIMITED:	SAGA CON	ISTRUCTION atan Hwy, Su	252	Devil Hills, NC 27948 441-9003 License: 62306 Expires: 12/31/2024	A.
		PO Box 90	lls, NC 27948		LADITES. 12/01/202	*
PARCEL:						
PIN:	98841432083	5		Parcel Number:		
Address:	501 Zen Lane	e Kill Devil Hils				
				Zoning:		
Addition:				Block:	Lot(s):	
Legal Desc	ription: Lot 43, W	√ater Oak Resider	ntial			
FEES:		Paid	Due	BUILDING AREA:		
Covered Porch	Residential	\$141.00	\$0.00	Resdiential Unheat	ed (.40) 460 Sq. F	-t
T-Pole		\$50.00	\$0.00	Residential Heated	Space 1693 sq. F	it.
Res. Building Pe	ermit Fee	\$1,453.75	\$0.00	(.75)		T
an an an sail faal nannese aan aan nann nan	Totals :	\$1,644.75	\$0.00	Covered Porches/E # of Temporary Pol		I

PROJECT DESCRIPTION: new 3 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAID Water Tap #: 120133

BJ2024-134 PROJECT NAME: SAGA New House SITE ADDRESS: 501 Zen Lane Kill Devil Hils

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BUILDING JOINT

EXPIRES: 07/31/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.50
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	425000.00
LOT COVERAGE	38.90
LIVING SPACE (SQFT)	1693
COVERED PORCHES/DECKS (SQFT)	188
GARAGE (SQFT)	460
TOTAL SQUARE FOOTAGE	2341
SURVEYOR NAME AND NUMBER	Mike Robinson
ENGINEER AND LICENSE NUMBER	MIKE OSTEEN 032628
CULVERT	Ν
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2024-134 PROJECT NAME: SAGA New House SITE ADDRESS: 501 Zen Lane Kill Devil Hils BUILDING JOINT ISSUED: 08/08/2024

EXPIRES: 07/31/2025

REQUIRED INSPECTIONS

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

CONDITIONS

* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
* Foundation survey will be required prior to rough-in inspection.
* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
* 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.



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

Planning and Inspection Department

BP2024-14 PROJECT NAI SITE ADDRES				BUILDING SSUED: 07/31/2024 XPIRES: 01/27/2025			
APPLICANT:	N E Marine Inc. PO Box 42 kitty hawk, nc 27949 252-261-3682			OWNER:	144 W. M	nd Cindy Stir orris Hill Roa ON, VA 244 532	d
GENERAL:		N E Marine PO Box 42 kitty hawk, 252-261-36	nc 27949			License: Expires:	123456 04/30/2025
PARCEL:							
PIN:	988417118292	2		Parcel Number:			
Address:	1418 West Fire	st Street Kill Dev	vil Hills				
				Zon	ing:		
Addition:				Blo	ck:	Lo	ot(s):
Legal Desc	cription: Lot 3, Pine	e Grove Subdivis	sion				
FEES:		Paid	Due			······································	
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
илин равотан 1999-жылдын балар түүнөн түү	Totals :	\$150.00	\$0.00	unar - 9			

PROJECT DESCRIPTION: Add to retaining wall



EXPIRES: 01/27/2025

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	6400.00
SURVEYOR NAME AND NUMBER	Timmons
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Zoning Final

D ------ 14

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.

EXPIRES: 01/27/2025

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.

Julie Elmony

Issued By: Charles Thuman

Contractor or Authorized Agent:

Date: 08 / 08 / 2024



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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

MC2024-244 PROJECT NAME: Schneider HVAC SITE ADDRESS: 202 WILKINSON ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 08/08/2024

EXPIRES: 02/04/2025

	SCHNEIDER, DICK O PO Box 2530 Kitty Hawk, NC 27949 703-887-3961		OWNER:			SCHNEIDER, DICK O PO Box 2530 Kitty Hawk, NC 27949 703-887-3961			
ELECTRICAL, PI	P.O. Box 13	: ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642			License: Expires:		-		
MECHANICAL, H	I-2, H-3:	P.O. Box 13	HEATING AND 32 IIs, NC 27948	COOLING		License: Expires:		-	
PARCEL:									
PIN:	988513130347			Parcel Number:	0029	984023			
Address:	202 WILKINSO	N ST E KILL D	EVIL HILLS						
				Zoni	ng:				
Addition:	VIRGINIA DARI	E SHORES		Bloc	k: 10	Lo	ot(s):	23A	
Legal Descri	iption:								
FEES:		Paid	Due		· · · · · · · · · · · · · · · · · · ·				
Mechanical Perm	nit Fee	\$150.00	\$0.00						
алтын алын айын төй чөлдөлөр улуг улуг төйкүлүй чөлөн	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: C/O 2 Ton HVAC system (mid floor)

M 2/9/21

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MC2024-244 PROJECT NAME: Schneider HVAC SITE ADDRESS: 202 WILKINSON ST E KILL DEVIL HILLS

MECHANICAL ISSUED: 08/08/2024

EXPIRES: 02/04/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7450.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
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:

_____ Date: 08 / 08 / 2024



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

Planning and Inspection Department

EL2024-075 PROJECT NAME: VERIZON WIRELESS EQUIPMENT REPLACEMENT SITE ADDRESS: ROW 303 East Helga Street Kill Devil Hills						ELECTRICAL ISSUED: 08/06/2024			
SITE ADDRES	S: ROW 303 East H	EXPIRES: 02/02/2025							
	· · · ·								
APPLICANT:	Jack Averna on beha 120 Eastshore DR GLEN ALLEN, VA 23 571-337-0635		ess O	WNER:	P O BO) 102 Tow	DF KILL DEVIL HILLS X 1719 /n Hall Drive VIL HILLS, NC 27948			
ELECTRICAL -	UNLIMITED:	Carrick Cor 1450 Kineti Lake Park, (561) 844-5	FL 33403	na dan ing karangkan	er in Jacob Kanan de Standard en	License: U.16199 Expires: 03/31/2025			
PARCEL:									
PIN:	ROW-7350			Parcel Number:					
Address:	ROW 303 East	Helga Street K	ill Devil Hills						
				Zon	ing:				
Addition:				Bloc	k:	Lot(s):			
Legal Desc	cription: ROW 303	East Helga Stre	et						
FEES:		Paid	Due						
Electrical Permi	it Fee	\$150.00	\$0.00						
an eye even den eksen	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: Replace antenna and radio on existing Dominion utility pole.



EXPIRES: 02/02/2025

DETAILS Permit Name Value С ZONING DISTRICT PURPOSE Commercial Repair/Remodel 7000.00 CONSTRUCTION COST CONSTRUCTION TYPE ш FLOOD ZONE Х OCCUPANCY TYPE **Business**

REQUIRED INSPECTIONS

Final

CONDITIONS

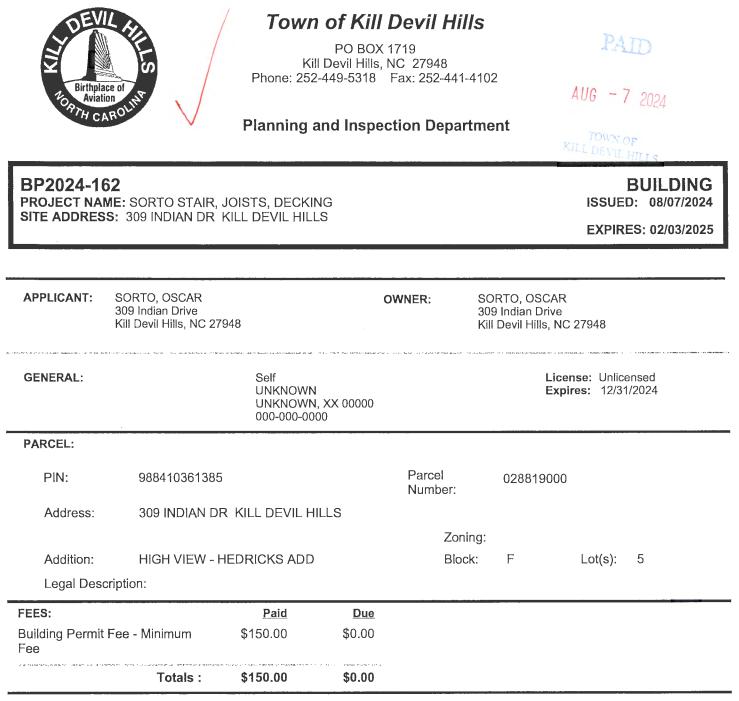
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued Bv:

Contractor or Authorized Agent: Jack Averna

Date: 08 / 08 / 2024



PROJECT DESCRIPTION: REPLACE EXTERIOR STAIR, REPLACE JOISTS, AND, DECKING, ON FRONT DECK

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	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 s All provisions of Laws and Ordinances governing this type of work will be con specified herein or not. The granting of a permit does not presume to give au	mplied with whether thority to violate or cancel
the provisions of any other state local law regulating construction or the perfected	ormance of construction.
Issued By: Columbu Addition	
ADAN	
Contractor or Authorized Agent:	Date: 08/07/24

Printed by : Jordan Blythe on: 08/07/2024 02:47 PM



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

Planning and Inspection Department

MC2024-242

PROJECT NAME: Evans HVAC SITE ADDRESS: 601 FOURTH ST W KILL DEVIL HILLS MECHANICAL ISSUED: 08/06/2024

EXPIRES: 02/02/2025

APPLICANT:	PO BOX 2116	RUIZ -EVANS, SUSAN PO BOX 2116 KILL DEVIL HILLS, NC 27948-2116			RUIZ -EVANS, SUSAN PO BOX 2116 KILL DEVIL HILLS, NC 27948-2116				
ELECTRICAL - LIMITED:		R A HOY PO Box 26 Kitty Hawk, 252-261-20	NC 27949	License: 22222-L Expires: 01/06/2025					
MECHANICAL	H2 AND H3:	R A HOY PO Box 265 Kitty Hawk, 252-261-20	NC 27949			License Expires			
PARCEL:									
PIN:	988405178772	2		Parcel Number:	0022	17017			
Address:	601 FOURTH	ST W KILL DEV	IL HILLS						
				Zor	ning:				
Addition:	WRIGHT'S SH	ORES SEC 2		Blo	ck: 0	L	.ot(s):	17	
Legal Des	cription:								
FEES:		Paid	Due						
Mechanical Pe	rmit Fee	\$150.00	\$0.00						
	an an search for a shiften as a search search the first of a start of a search of the search of the search of the	and a second	New ACONOMIC ACCOUNTS AND ADDRESS AND ADDRESS ADDRESS ADDRESS ADDRESS ADDR						

PROJECT DESCRIPTION: C/O 3 Ton HVAC system



MC2024-242

PROJECT NAME: Evans HVAC SITE ADDRESS: 601 FOURTH ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 08/06/2024

EXPIRES: 02/02/2025

		DETAIL	S		
Permit					
Name	Value				
PURPOSE	Residential Repair/Remodel				
CONSTRUCTION COST	14401.00				
CONSTRUCTION TYPE	V				
FLOOD ZONE	х				
NATURAL GAS SIGNOFF	Ν				
OCCUPANCY TYPE	One & Two Family Dwelling				

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Brian Lancaster

Date: 08 / 07 / 2024



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

Planning and Inspection Department

MC2024-243 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 519 MCCABE CT KILL DEVIL HILLS

MECHANICAL ISSUED: 08/07/2024

EXPIRES: 02/03/2025

APPLICANT:	APPLICANT: MILLER, DAWN SHEAHAN 519 MCCABE PL KILL DEVIL HILLS, NC 27948			OWNER:	519 MCCA	DAWN SHEAHAN NBE PL L HILLS, NC 27948	}
MECHANICAL H2 AND H3:		Kitty Hawk,	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008			License: 35329 Expires: 12/31	
PARCEL:							
PIN:	988414340327			Parcel Number:	0103	86000	
Address:	519 MCCABE	CT KILL DEVIL	HILLS				
				Zon	ing:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Bloo	ok: 0	Lot(s):	142
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
A MANAGAMAN TURA DI MUMUMUMU AD AN	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC CHANGEOUT



MC2024-243 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 519 MCCABE CT KILL DEVIL HILLS

MECHANICAI ISSUED: 08/07/2024

EXPIRES: 02/03/2025

DETAILS

Value
Residential Repair/Remodel
11441.00
V
Х
Ν
One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

D ----- 14

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent: Brian Lancaster

_____ Date: 08 / 07 / 2024



PROJECT NAME: T&B Homes New 4 Bedroom SFD

SITE ADDRESS: 2057 North Virginia Dare Trail Kill Devil Hills

OP2024-072

Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG - 6 2024

TOWN OF KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/06/2024

EXPIRES:

PARENT PERMIT #: BJ2023-233

APPLICANT:	T and B Homes, Inc. 1706 Virgina Ave. Kill Devil Hills, NC 279 252-207-9837	948	OWNER	775 Su VIRGIN	Purchase Kill Devil Hills, LLC Iffolk Lane NIA BEACH, VA 23452 7-5202	
BUILDING UNL	IMITED:	T and B Ho 1706 Virgin Kill Devil Hi 252-207-98	a Ave. Ils, NC 27948		License: 80069 Expires: 12/31/2024	
BUILDING UNLIMITED:		1706 Virgin Kill Devil Hi	T and B Homes, Inc. 1706 Virgina Ave. Kill Devil Hills, NC 27948 252-207-9837		License: 80069 Expires: 12/31/2024	
PARCEL:						
PIN:	988518311028		Par Nu	rcel mber:		
Address:	2057 North Virg	jinia Dare Trail	Kill Devil Hills			
				Zoning:		
Addition:				Block:	Lot(s):	
Legal Desc	ription: Lot 1, Mile	s Clark Subdivis	ion			
FEES:		Paid	Due			
Certificate of Oo Residential (mir		\$50.00	\$0.00			
Residential Tras	sh Can	\$213.50	\$0.00			
ya wakazan Tenerbinatika (e. le ng, le ne angeri sinae ni Banjari 48.	Totals :	\$263.50	\$0.00			

PROJECT DESCRIPTION: new 4 bedroom single family dwelling, with pool and dune deck and walkover

OP2024-072

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PROJECT NAME: T&B Homes New 4 Bedroom SFD SITE ADDRESS: 2057 North Virginia Dare Trail Kill Devil Hills OCCUPANCY ISSUED: 08/06/2024

EXPIRES:

	DETAILS			
Permit				
Name	Value			
# OF TRASH CANS	2			
PURPOSE	Residential New			
ZONING DISTRICT	OIR			
FLOOD ZONE	VE			
BASE FLOOD ELEVATION	12			
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: 08



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

Planning and Inspection Department

MC2024-241

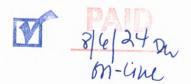
PROJECT NAME: HVAC CHANGEOUT (2 systems) SITE ADDRESS: 1413 Memorial Blvd. S. Kill Devil Hills MECHANICAL

ISSUED: 08/05/2024

EXPIRES: 02/01/2025

APPLICANT:	BACK, DAVID 3756 HEVERLY DR GLEN ALLEN, VA 23 804-527-7928	059		OWNER:	BACK, DAV 3756 HEVE GLEN ALLE 804-527-792	RLY DR N, VA 23059	
MECHANICAL	H2 AND H3:	R A HOY PO Box 269 Kitty Hawk, 252-261-20	NC 27949			License: 35329 Expires: 12/31/2024	
PARCEL:							
PIN:	989309056837			Parcel Number:	00471	4002	
Address:	1413 Memoria	Blvd. S. Kill De	vil Hills				
				Zon	ing:		
Addition:	Kill Devil Beac	h Subdivision		Bloc	ck: E	Lot(s): 14	
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Permit Fee		\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC CHANGEOUT (2 systems)



MC2024-241

PROJECT NAME: HVAC CHANGEOUT (2 systems) SITE ADDRESS: 1413 Memorial Blvd. S. Kill Devil Hills

MECHANICA ISSUED: 08/05/2024

EXPIRES: 02/01/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	19897.00
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. Marty Shaw

Issued By:

Contractor or Authorized Agent: ______Brian Lancaster

Date: 08 / 06 / 2024



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

Planning and Inspection Department

MC2024-239

PROJECT NAME: Perkins HVAC SITE ADDRESS: 113 OREGON AVE E KILL DEVIL HILLS MECHANICAL ISSUED: 08/02/2024

EXPIRES: 01/29/2025

APPLICANT:	PERKINS, CAROLYN 24 HICKORY LANE BRIDGTON, NJ 08302 856-453-8266		OWNER:			PERKINS, CAROLYN M 24 HICKORY LANE BRIDGTON, NJ 08302 856-453-8266			
ELECTRICAL - LIMITED:		151 Savanı JARVISBU	Coastal Mechanical and Electric Services 151 Savannah Ave JARVISBURG, NC 27947 252-453-2765			License: 29815-L Expires: 01/21/2025			
MECHANICAL	H-3, CLASS 1:	151 Savani JARVISBU	Coastal Mechanical and Electric Services 151 Savannah Ave JARVISBURG, NC 27947 252-453-2765			License: 26968 Expires: 12/31/2024			
PARCEL:									
PIN:	988420800044			Parcel Number:	0154	81000			
Address:	113 OREGON A	VE E KILL DE	VIL HILLS						
				Zonin	g:				
Addition:	KITTY HAWK S	HORES - REV	ISED	Block	: 34	Lot(s):	19		
Legal Des	cription:								
FEES:		Paid	Due						
Mechanical Pe	rmit Fee	\$150.00	\$0.00						

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

Stafzan m-line

MC2024-239 PROJECT NAME: Perkins HVAC

SITE ADDRESS: 113 OREGON AVE E KILL DEVIL HILLS

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MECHANICAI ISSUED: 08/02/2024

EXPIRES: 01/29/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
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:

John pugh

Date: 08 / 02 / 2024

Roger H c	Lee of LAND	Ki Phone: 252	PO BOX ⁷ ill Devil Hills, 1 2-449-5318		102	AUG	- 5 2024
	IO ME: YOUNG FENCE S: 200 GUNAS DR			-		ISSU	DING JOINT ED: 08/05/2024 RES: 02/01/2025
APPLICANT:	YOUNG, REGINA 8120 BLANDSFORD MANASSAS, VA 201 703-217-4741		C		YOUNG, RE 8120 BLAND MANASSAS, 703-217-474	SFORD DR VA 20111	
ELECTRICAL -	UNLIMITED:	KREISER E 3847 IVY L kitty hawk, 252-564-23	nc 27949			License: 316 Expires: 02/	
PARCEL:							
PIN:	989313041335	5		Parcel Number:	008410	0000	
Address:	200 GUNAS D	R KILL DEVIL H	ILLS	Zoning	g:		
Addition:	OCEAN ACRE	S TRACT 3 SEC	C 1	Block:		Lot(s):	2
Legal Desc	cription:						
FEES:		Paid	Due				
Pool/Hot Tub Fence		\$200.00 \$100.00	\$0.00 \$0.00				
	an the statistic water with a statistic of the statistic strength and	φ100.00	ψυ.υυ				

PROJECT DESCRIPTION: INSTALL FENCE, REPLACE SUB PANEL, AND WIRE NEW HOT TUB

BJ2024-140

PROJECT NAME: YOUNG FENCE, HOT TUB, AND SUB PANEL SITE ADDRESS: 200 GUNAS DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/05/2024

EXPIRES: 02/01/2025

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
BASE FLOOD ELEVATION	11.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3500.00
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Zoning Final

Stringline

CONDITIONS

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

BJ2024-140

PROJECT NAME: YOUNG FENCE, HOT TUB, AND SUB PANEL SITE ADDRESS: 200 GUNAS DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/05/2024

EXPIRES: 02/01/2025

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: LC One Date: 6-5-24 Contractor or Authorized Agent:

Birthplace of Aviation	
- CAL	

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

Planning and Inspection Department

PAID

AUG - 2 2024

TOWN OF KILL DEVIL HILLS

BP2024-160 **PROJECT NAME:** Janet Reiter

SITE ADDRESS: 2806 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 08/02/2024

EXPIRES: 01/29/2025

APPLICANT:	Sea Country Homes OBX, LLC 1508 Captains Ln. Kill Devil Hills, NC 27948 252-207-8338		c	WNER:	REITER, LAWRENCE D 8641 MCHENRY ST VIENNA, VA 22180				
GENERAL BUIL	DING INTERMEDIAT	1508 Capta	ills, NC 27948	LLC		License: 7032 Expires: 12/3			
PARCEL:									
PIN:	988513126955	5		Parcel Number:	000385	5000			
Address:	2806 VA DAR	ETRLN KILL D	EVIL HILLS						
				Zoni	ng:				
Addition:	VIRGINIA DAR	RE SHORES		Bloc	k: 7	Lot(s):	1		
Legal Descr	ription:								
FEES:		Paid	Due						
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: Replace posts, landing, stairs, decking, handrails within same footprint

BP2024-160

PROJECT NAME: Janet Reiter SITE ADDRESS: 2806 VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 08/02/2024

EXPIRES: 01/29/2025

DETAILS Permit Name Value CAMA PERMIT N CAMA EXEMPTION N ZONING DISTRICT C PURPOSE Residential Repair/Remodel FLOOD ZONE AO **FINAL ELEVATION** N CERTIFICATE CONSTRUCTION COST 12425.00 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.

* Must be replaced within existing footprint.

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; Date: 9/2/24 **Contractor or Authorized Agent:**

Y DEVIL AI	
Birthplace of Aviation Aviation	V

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

Planning and Inspection Department

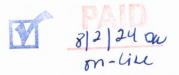
BP2024-156 PROJECT NAME: O'Keefe Bulkhead SITE ADDRESS: 3148 BAY DR KILL DEVIL HILLS

BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

APPLICANT:	BARRETT & HABER PO BOX 448 nags head, nc 27959 252-261-2212		n & Dad C	1	'KEEFE, THOM 1636 Audubon ARKHAM, VA 2	Trl	
RESIDENTIAL	- LIMITED:	BARRETT (PO BOX nags head, 252-261-22	448 nc 27959	Emanuelson & Da		ense: 8723 lires: 12/3	-
PARCEL:							
PIN:	987516821959)		Parcel Number:	000310000)	
Address:	3148 BAY DR	KILL DEVIL HIL	LS				
				Zoning:			
Addition:	ORVILLE BEA	CH WEST		Block:	0	Lot(s):	231
Legal Des	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace existing bulkhead with vinyl bulkhead



BP2024-156

PROJECT NAME: O'Keefe Bulkhead SITE ADDRESS: 3148 BAY DR KILL DEVIL HILLS

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BUILDING

ISSUED: 07/29/2024

EXPIRES: 01/25/2025

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	20425.00
OCCUPANCY TYPE	One & Two Family Dwelling
	REQUIRED INSPECTIONS
Zoning Final	Final
	CONDITIONS
or work is suspended for a perior Construction must meet all as	l void if work or construction authorized is not commenced within 6 months or if construction od of 12 months at any time after work has started. spect of Chapter 153 Zoning including lot coverage and setbacks. o adjacent owner's existing bulkheads.
All provisions of Laws and specified herein or not. The provisions of any other	e read and examined this application and know the same to be true and correct. d Ordinances governing this type of work will be complied with whether ne granting of a permit does not presume to give authority to violate or cancel er state/local law regulating construction or the performance of construction.
Issued By:	haw
Contractor or Authorized	Agent: O7 / 30 / 2024

Printed by : Marty Shaw on: 07/29/2024 01:25 PM

BP2024-156

PROJECT NAME: O'Keefe Bulkhead SITE ADDRESS: 3148 BAY DR KILL DEVIL HILLS

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e.

BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025



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

Planning and Inspection Department

BP2024-155 PROJECT NAME: Davis Bulkhead SITE ADDRESS: 3146 BAY DR KILL DEVIL HILLS

BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

APPLICANT:	BARRETT & HABER, PO BOX 448 nags head, nc 27959 252-261-2212	LLC Emanuelsor	n & Dad O		Davis, Eliz 3146 Bay Kill Devil H		
RESIDENTIAL -	LIMITED:	BARRETT PO BOX nags head, 252-261-22	448 nc 27959	Emanuelson & D	Dad	License: 87233 Expires: 12/31	
PARCEL:							
PIN:	987516821973			Parcel Number:	0010	63000	
Address:	3146 BAY DR	KILL DEVIL HIL	LS				
				Zonin	g:		
Addition:	MOOR SHORE	S		Block	: 0	Lot(s):	126
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace bulkhead with vinyl bulkhead



BP2024-155 PROJECT NAME: Davis Bulkhead SITE ADDRESS: 3146 BAY DR KILL DEVIL HILLS

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BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	13350.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

CONDITIONS

This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r 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.
Bulkhead shall not connect to adjacent owner's bulkheads.

BP2024-155 PROJECT NAME: Davis Bulkhead SITE ADDRESS: 3146 BAY DR KILL DEVIL HILLS BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

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

Issued By: ___

Contractor or Authorized Agent:

Lorelei Barrett for Emanuelson and Dad

Date: 07 / 30 / 2024



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

Planning and Inspection Department

BP2024-154 PROJECT NAME: Kerr Bulkhead SITE ADDRESS: 3144 BAY DR KILL DEVIL HILLS

BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

APPLICANT:	BARRETT & HABER PO BOX 448	, LLC Emanuelsor	n & Dad C	OWNER:	KERR, S			
	nags head, nc 27959 252-261-2212					Hills, NC 2794	18	
RESIDENTIAL	- LIMITED:	BARRETT PO BOX nags head, 252-261-22	448 nc 27959	Emanuelson &	Dad	License: Expires:		+
PARCEL:								
PIN:	987516821887	0		Parcel Number:	009	125000		
Address:	3144 BAY DR	KILL DEVIL HIL	LS					
				Zoni	ing:			
Addition:	MOOR SHOR	ES		Bloc	k: 0	Lo	t(s):	127
Legal Des	cription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
Alafa dalamata ang ang ang ang ang ang ang ang ang an	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: replace bulkhead with vinyl bulkhead



BP2024-154 PROJECT NAME: Kerr Bulkhead SITE ADDRESS: 3144 BAY DR KILL DEVIL HILLS

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BUILDING

1330ED. 01/29/2024

EXPIRES: 01/25/2025

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	16970.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

CONDITIONS

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

* Bulkhead cannot attach to adjacent property owner's bulkheads.

BP2024-154 PROJECT NAME: Kerr Bulkhead SITE ADDRESS: 3144 BAY DR KILL DEVIL HILLS BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

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

Issued By: _____

Contractor or Authorized Agent:

Lordei Barrett for Emanoulson and Dad

_____ **Date:** 07 / 30 / 2024



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

Planning and Inspection Department

BP2024-153 PROJECT NAME: Byrum Bulkhead SITE ADDRESS: 3140 BAY DR KILL DEVIL HILLS

BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

APPLICANT:	BARRETT & HABER PO BOX 448 nags head, nc 27959 252-261-2212	LLC Emanuelsor	n&Dad C	OWNER:	JAMES B 106 Egret Yorktown, 757-869-4	Crt. Va 23692		
RESIDENTIAL -	LIMITED:	BARRETT PO BOX nags head, 252-261-22	448 nc 27959	Emanuelson &	Dad	License: Expires:		
PARCEL:								
PIN:	987516822727			Parcel Number:	0010	65000		
Address:	3140 BAY DR	KILL DEVIL HIL	LS					
				Zonii	ng:			
Addition:	MOOR SHORE	S		Block	c: 0	Lot	:(s):	129
Legal Desc	ription:							
FEES:	and and a second second	Paid	Due			gan di Bandah Sugaka di Kasilan Kasilan Kasilan		
Building Permit	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: vinyl bulkhead replacement



BP2024-153 PROJECT NAME: Byrum Bulkhead SITE ADDRESS: 3140 BAY DR KILL DEVIL HILLS

.

BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

· · · · · · · · · · · · · · · · · · ·	DETAILS
Permit	
Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	16500.00
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.

* Bulkhead shall not connect to adjacent property owner's bulkheads.

.

BP2024-153 PROJECT NAME: Byrum Bulkhead SITE ADDRESS: 3140 BAY DR KILL DEVIL HILLS BUILDING ISSUED: 07/29/2024

EXPIRES: 01/25/2025

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

Issued By:

Contractor or Authorized Agent:

Lordei Barrett for Emanorelson and And

Date: 07 / 30 / 2024



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

Planning and Inspection Department

BP2024-152 PROJECT NAME: Burgee Bulkhead SITE ADDRESS: 3138 BAY DR KILL DEVIL HILLS

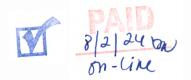
BUILDING ISSUED: 07/29/2024

1330LD. 0112312024

EXPIRES: 01/25/2025

APPLICANT:	BARRETT & HABER PO BOX 448 nags head, nc 27959 252-261-2212		& Dad C	OWNER:	Burgee, S 3138 Bay Kill Devil I	andra Drive Hills, NC 27948	
RESIDENTIAL	- LIMITED:		448 nc 27959	Emanuelson & [Dad	License: 8723 Expires: 12/3	
PARCEL:							
PIN:	987516822741			Parcel Number:	0010	066000	
Address:	3138 BAY DR	KILL DEVIL HIL	LS				
				Zonin	g:		
Addition:	MOOR SHOR	ES		Block	: 0	Lot(s):	130
Legal Desc	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
and the despension of the series of one of the testime of the series of	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: vinyl bulkhead along sound side



BP2024-152

PROJECT NAME: Burgee Bulkhead SITE ADDRESS: 3138 BAY DR KILL DEVIL HILLS

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EXPIRES: 01/25/2025

DETAILS Permit Name Value Y CAMA PERMIT CAMA EXEMPTION Ν ZONING DISTRICT RL PURPOSE **Residential Accessory** FRONT YARD SETBACK 30 SIDE YARD SETBACK 10 REAR YARD SETBACK CAMA FLOOD ZONE AE BASE FLOOD ELEVATION 8 FINAL ELEVATION Ν CERTIFICATE CONSTRUCTION COST 19085.00 OCCUPANCY TYPE One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

CONDITIONS

*	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
or	work is suspended for a period of 12 months at any time after work has started.
*	Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
	i utanya iya ka iya iya iya ka iya ka iya iya iya iya ka ka ka iya iya iya ka ka iya iya ka iya iya iya iya ka
*	Bulkhead shall not connect to adjacent property owner's bulkheads.

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EXPIRES: 01/25/2025

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

Issued By:

Contractor or Authorized Agent:

Lordei Barrett for Emanuelson and Dad

Date: 07 / 30 / 2024

Birthplac Bosth CA	ROLINA	Ki Phone: 252	PO BOX II Devil Hills, 2-449-5318	Devil Hil (1719 NC 27948 Fax: 252-441-	4102	PAID AUG - 1 2024
	6 IE: YACOBI REMOI S: 907 SWAN ST K		S			BUILDING JOINT ISSUED: 07/29/2024 EXPIRES: 01/25/2025
APPLICANT:	YACOBI, MARK 907 SWAN STREET Kill Devil Hills, NC 27	948		OWNER:	YACOBI, M 907 SWAN Kill Devil Hil	
CONTRACTOR:		2701 North 517 Elm Co	Croatan Hwy ourt Ils, NC 27948		274.0 10.007 - 900 / 700 / 100 - 100 - 100	License: 47372 Expires: 12/31/2024
PARCEL:						
PIN:	988312777111			Parcel Number:	00444	6000
Address:	907 SWAN ST	KILL DEVIL HIL	LS			
				Zoni	ng:	
Addition:	KILL DEVIL HI	LLS REALTY CO	ORP	Bloc	k: 27	Lot(s): 7
Legal Desc	ription:					
FEES:		Paid	Due	BUILDING ARE	EA:	
Renovation/Rem	nodel/Relocate	\$396.90	\$0.00	Remodel/Ren	ovation	882 SQFT
	Totals :	\$396.90	\$0.00			

PROJECT DESCRIPTION: INTERIOR REMODEL INCLUDING, KITCHEN CABINETS, WALL COVERINGS, WINDOWS, INSULATIONS, PLUMBING/ELECTRICAL AS NEEDED

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BJ2024-136 PROJECT NAME: YACOBI REMODEL SITE ADDRESS: 907 SWAN ST KILL DEVIL HILLS

F

BUILDING JOINT

ISSUED: 07/29/2024

EXPIRES: 01/25/2025

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	Х	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	58512.00	
CULVERT	Ν	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

* Smoke detectors compliant with R314 shall be installed.

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

BJ2024-136 PROJECT NAME: YACOBI REMODEL SITE ADDRESS: 907 SWAN ST KILL DEVIL HILLS BUILDING JOINT ISSUED: 07/29/2024

EXPIRES: 01/25/2025

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: Date: 8 Contractor or Authorized Agent:

Birthplace Aviation	THE SOLUTION	Kil Phone: 252	PO BOX 7 I Devil Hills, N -449-5318		-4102	TOW	AID 9 2024 N OF VIL HILLS
BP2024-168 PROJECT NAM SITE ADDRESS		ST W KILL DEV	'IL HILLS				BUILDING ED: 08/16/2024 RES: 02/12/2025
	Szymanski, Stephen 214 W Palmetto Stre Kill Devil Hills, NC 27		c	WNER:	Szymanski 214 W Palı Kill Devil H	i, Stephen metto Street ills, NC 27948	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	, XX 00000	алынынын отос тарын талыс" талын	νου το για αφοριστο το από το μετατροποιού το στο στο το τ	License: Unli Expires: 12/3	
PARCEL:							
PIN:	988517112098	4		Parcel Number:	0004	65000	
Address:	214 PALMETT	O ST W KILL DI	EVIL HILLS				
				Zon	ing:		
Addition:	VIRGINIA DAF	RE SHORES		Bloc	ck: 26	Lot(s):	23-28
Legal Descri	iption:						
FEES: Building Permit F Fee	ee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00				
a "Subjection" a ser sociate dell'art des data de la companya de productional de la companya de la companya de	Totals :	\$150.00	\$0.00				

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PROJECT DESCRIPTION: Replace rear steps

.

BP2024-168 PROJECT NAME: Rear steps SITE ADDRESS: 214 PALMETTO ST W KILL DEVIL HILLS

BUILDING ISSUED: 08/16/2024

EXPIRES: 02/12/2025

DETAILS Permit Value Name CAMA PERMIT Ν CAMA EXEMPTION Ν ZONING DISTRICT RL FLOOD ZONE Х FINAL ELEVATION Ν CERTIFICATE CONSTRUCTION COST 500.00 CONSTRUCTION TYPE V 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:

ymanh Date: 8/19

Contractor or Authorized Agent:



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

Planning and Inspection Department

MC2024-251 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 1925 VA DARE TRL N KILL DEVIL HILLS

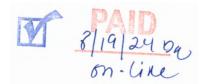
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MECHANICAL ISSUED: 08/19/2024

EXPIRES: 02/15/2025

APPLICANT:	CAMPEN, SIDNEY 6605 SCARLET LN FEDERALSBURG, M 410-714-2359	1D 21632	C	WNER:	CAMPEN, SI 6605 SCARL FEDERALSB 410-714-2359	ET LN URG, MD 2163	2	- 101 CC37 63
MECHANICAL	H2 AND H3:	R A HOY PO Box 26 Kitty Hawk, 252-261-20	NC 27949			License: 35329 Expires: 12/31		
PARCEL:								
PIN:	988406399597	,		Parcel Number:	002809	000		
Address:	1925 VA DARE	E TRL N KILL D	EVIL HILLS					
				Zonii	ng:			
Addition:	Croatan Shore	s Amended		Block	c: E	Lot(s):	6&7	
Legal Desc	cription:							
FEES:		Paid	Due					
Mechanical Per	mit Fee	\$150.00	\$0.00					
a la fair a dhacan ann an an ann ann ann ann ann ann a	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC CHANGEOUT



MC2024-251 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 1925 VA DARE TRL N KILL DEVIL HILLS

.

MECHANICAL ISSUED: 08/19/2024

EXPIRES: 02/15/2025

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	9693.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	12	
NATURAL GAS SIGNOFF	Ν	
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. Marty Shaw

Issued By:

Contractor or Authorized Agent: ______Brian Lancaster

_____ Date: 08 / 19 / 2024



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

Planning and Inspection Department

PL2024-008

PROJECT NAME: Baugus Plumbing SITE ADDRESS: 2022 CROATAN HWY N KILL DEVIL HILLS PLUMBING ISSUED: 08/16/2024

EXPIRES: 02/12/2025

APPLICANT:	Baugus, Andrew 13000 Rivers Bend F CHESTER, VA 2383 804-586-1445		O	WNER:	Baugus, Andr 13000 Rivers CHESTER, V 804-586-1445	Bend Rd A 23836			
PLUMBING CL	ASS I:	101 Quarte Harbinger, I	ABSOLUTE PLUMBING 101 Quarter Landing Harbinger, NC 27941 252-489-1439			License: 30190 Expires: 12/31/2024			
PARCEL:									
PIN:	988405293731	I		Parcel Number:	001306	000			
Address:	2022 CROATA	N HWY N KILL	DEVIL HILLS						
				Zoni	ng:				
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Bloc	k: 0	Lot(s): 54	40		
Legal Des	cription:								
FEES:		Paid	Due						
Plumbing Perm	nit Fee	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: C/O water heater and install new disconnect.

8/20/24 04 on-line

PL2024-008

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PROJECT NAME: Baugus Plumbing **SITE ADDRESS:** 2022 CROATAN HWY N KILL DEVIL HILLS

PLUMBING ISSUED: 08/16/2024

EXPIRES: 02/12/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman		
Contractor or Authorized Agent:	Kanon Cong	Date: 08 / 16 / 2024

DEV		Tow	n of Kill i	Devil	Hills		PA	JD
Birthpla	co ce ol		PO BOX ⁻ ill Devil Hills, f 2-449-5318	NC 27948		2	AUG 1	9 2024
YORTH CH	ROLINY	Planning	and Inspec	tion De	partme	ent	TOW? KILL DEV	I OF IL HILLS
	06 ME: Gurzo Demo S: 1829 VA DARE TR	LN KILL DE'	VIL HILLS				ISSU	E MOLITI ED: 08/19/ RES: 02/15/
APPLICANT:	MANCUSO DEVELOP P.O. Box 147 610 Currituck Club Hou Corolla, NC 27927 252-305-4663		C	WNER:	11	urzo, Paul 737 Saddio akton, VA 2	e Crescent Cir 22124	
GENERAL:		P.O. Box 1	uck Club House C 27927		Society (1999)		License: 261 Expires: 01/	
PARCEL:								
PIN:	988406484704			Parcel Numb		002794	1000	
Address:	1829 VA DARE	rrln kille	DEVIL HILLS					
Addition: Legal Des	Croatan Shores /	Amended			Zoning: Block:	D	Lot(s):	5 & PT 6
FEES:		Paid	Due					
Demolition		\$100.00	\$0.00					
an ann an ann ann ann an ann ann ann an	Totals :	\$100.00	\$0.00					
PROJECT DES	CRIPTION: demo exis	ting house, dr	iveway to rem	ain as coi	nstructio	n entranc	e	
			DETAIL	5				
Permit								
Name	Valu	9						
ZONING DIST								
FLOOD ZONE								
CONSTRUCT	ION COST 1500							

DM2024-006 PROJECT NAME: Gurzo Demo SITE ADDRESS: 1829 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION ISSUED: 08/19/2024

EXPIRES: 02/15/2025

Date: 8/19/

REQUIRED INSPECTIONS

Final

CONDITIONS

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

* Driveway can remain to be used as construction entrance.

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:

Y DEVIL	ALL I	Tow	PO BOX 1		ls	PAID
Birthplace	S.		ill Devil Hills, N 2-449-5318		4102	AUG 1 9 2024
ROATH CAP		Planning	and Inspec	tion Depar	tment	TOWN OF KILL DEVIL HILLS
	1 E: Coastline Investri : 1816 Sea Swept I		lls	E	EXCAV	ATION AND GRADIN ISSUED: 08/16/20 EXPIRES: 02/12/20
	Coastline Investments 281 Kilmarlic Club		0	WNER:	281 Kilma	Investments arlic Club
	Powels Point, NC 279 252-305-8077	/66			Powels Po 252-305-8	oint, NC 27966 3077
GENERAL, UNLI	MITED:	281 Kilmarl Powels Poi	IE REALTY & C lic Club int, NC 27966	ONSTRUCTIO	N LLC	License: 62368 Expires: 12/31/2024
		305-8077				
PARCEL:		305-8077				
PARCEL: PIN:	988409068817			Parcel Number:	0023	378000
	988409068817 1816 Sea Swep		Hills		0023	378000
PIN: Address:	1816 Sea Swep	ot Rd Kill Devil	Hills	Number: Zoni	ng:	
PIN: Address: Addition:	1816 Sea Swep SEA HOLLY RI	ot Rd Kill Devil	Hills	Number:	ng:	378000 Lot(s): 7
PIN: Address:	1816 Sea Swep SEA HOLLY RI	ot Rd Kill Devil	Hills	Number: Zoni	ng:	
PIN: Address: Addition: Legal Descri	1816 Sea Swep SEA HOLLY RI	ot Rd Kill Devil DGE <u>Paid</u>	Due	Number: Zoni	ng:	
PIN: Address: Addition:	1816 Sea Swep SEA HOLLY RI	ot Rd Kill Devil		Number: Zoni	ng:	

PROJECT DESCRIPTION: Clear lot for new single family dwelling and build septic pad

1

EXCAVATION AND GRADING ISSUED: 08/16/2024

1330ED. 00/10/2024

PROJECT NAME: Coastline Investments SITE ADDRESS: 1816 Sea Swept Rd Kill Devil Hills

EXPIRES: 02/12/2025

DETAILS

Permit	
Name	Value
ESTIMATED CONSTRUCTION COST	7000.00
ZONING DISTRICT	RL
CAMA PERMIT	Ν
FLOOD ZONE	Х
SURVEYOR NAME AND NUMBER	Eastern Geomatics

REQUIRED INSPECTIONS

Final

EG2024-011

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:	A	
Contractor or	Authorized Agent: 5,0/X	Date: <u>8-19-24</u>

Rogrid CA	ROLING	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		4102	AUG	PAID 192024 DWN OF DEVIL HILLS
	4 E: Melvin Addition S: 512 COPLEY DR	KILL DEVIL H	ILLS				CUPANCY D: 08/16/2024 EXPIRES:
APPLICANT:	COASTAL NC HOLDI PO BOX 1446 kitty hawk, nc 27949 252-573-9547	NGS, LLC		OWNER:	Melvin, Matthe PO BOX 1083 Kill Devil Hills,		
BUILDING LIMIT	ED:	COASTAL PO BOX 14 kitty hawk, 252-573-95	nc 27949	S, LLC		icense: 7930 xpires: 12/3*	
PARCEL:							
PIN:	988316823868			Parcel Number:	0050330	000	
Address:	512 COPLEY D	R KILL DEVIL	HILLS				
				Zoni	ng:		
	OCEAN ACRES	STRACT 3 SEC	22	Bloc	k: I	Lot(s):	12
Addition:	ription:						
Addition: Legal Desci	ipuon.						
Legal Desci		Paid	Due				
	cupancy Fee-	<u>Paid</u> \$50.00	<u>Due</u> \$0.00				

bedrooms

1.5

Downsid

OP2024-074 PROJECT NAME: Melvin Addition SITE ADDRESS: 512 COPLEY DR KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/16/2024

EXPIRES:

DETAILS

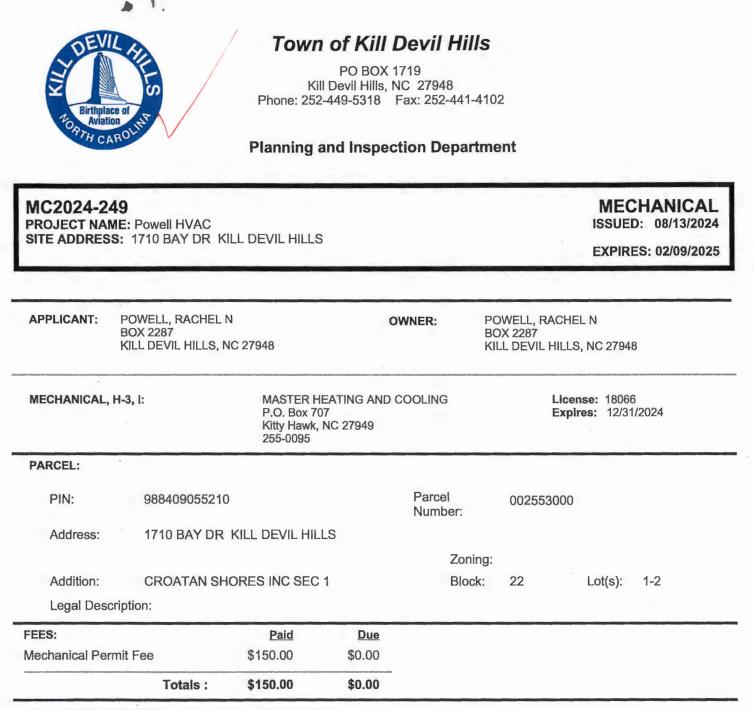
Permit	
Name	Value
PURPOSE	Residential Addition
ZONING DISTRICT	RL
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	One & Two Family D welling

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: $\frac{\mathcal{E}/19/2Y}{Date:}$



PROJECT DESCRIPTION: C/O 3.5 Ton HVAC system



MC2024-249

14

PROJECT NAME: Powell HVAC SITE ADDRESS: 1710 BAY DR KILL DEVIL HILLS

EXPIRES: 02/09/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9100.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	5
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: _____ A MacLean

Printed by : CTHUMAN on: 08/13/2024 12:22 PM

_____ **Date:** ____/ 16 / 2024



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

MC2024-185

PROJECT NAME: Fevrier HVAC SITE ADDRESS: 2015 NORFOLK ST KILL DEVIL HILLS MECHANICAL ISSUED: 06/17/2024

EXPIRES: 12/14/2024

APPLICANT:	Fevrier, Thiery 1921 Frizzell Dr Virginia Beach, Va 23 757-469-7990	3455	C	WNER:	Fevrier, Thier 1921 Frizzell Virginia Beac 757-469-7990	Dr h, Va 23455	
MECHANICAL,	H-3, I:	MASTER H P.O. Box 70 Kitty Hawk, 255-0095		COOLING		License: 18066 Expires: 12/31/	
PARCEL:							
PIN:	988405290476	3		Parcel Number:	001214	000	
Address:	2015 NORFOL	K ST KILL DEV	IL HILLS				
				Zoni	ng:		
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Bloc	:k: 0	Lot(s):	760
Legal Des	cription:						
FEES:		Paid	Due				
Mechanical Pe	rmit Fee	\$150.00	\$0.00				
ana araba habadi kadi yakabida katikati katikati katika na manandan warana katika na manana	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: C/O 2 Ton & 2.5 ton HVAC systems



MC2024-185

. .

PROJECT NAME: Fevrier HVAC SITE ADDRESS: 2015 NORFOLK ST KILL DEVIL HILLS

MECHANICAL ISSUED: 06/17/2024

EXPIRES: 12/14/2024

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	16375.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: ____ Charles Thuman

Contractor or Authorized Agent: ______ A MacLean

Date: 08 / 13 / 2024



Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG 1 5 2024

TOWN OF KILL DEVIL HILLS

OP2024-073

PROJECT NAME: Water Oak New 3 Bedroom SFD SITE ADDRESS: 526 ANIKA WAY KILL DEVIL HILLS

PARENT PERMIT #: BJ2024-032

OCCUPANCY

EXPIRES:

ISSUED: 08/14/2024

APPLICANT:	SAGA CONSTRUCTION INC. 1314 S Croatan Hwy, Suite 301 Kill Devil Hills, NC 27948 252-441-9003		O	PO Kill		ak Residential, LLC 90 Hills, NC 27948 -9003
GENERAL - UN	ILIMITED:	1314 S Cro PO Box 90	ISTRUCTION atan Hwy, Suite IIs, NC 27948 03	e 301		License: 62306 Expires: 12/31/2024
PARCEL:						
PIN:	988414226961	I.		Parcel Number:		
Address:	526 ANIKA W	AY KILL DEVIL I	HILLS			
				Zoni	ing:	
Addition:				Bloc	k:	Lot(s):
Legal Desc	cription: Lot 29, Wa	ater Oak				
FEES:		Paid	Due			
Certificate of Oo Residential (min		\$50.00	\$0.00			
Residential Tra	sh Can	\$106.75	\$0.00			
	Totals :	\$156.75	\$0.00			

*

PROJECT DESCRIPTION: new 3 bedroom single family dwelling with concrete pad in rear yard

PAID

AUG 1 5 2024

TOWN OF KILL DEVIL HILLS

OP2024-073

· •

PROJECT NAME: Water Oak New 3 Bedroom SFD SITE ADDRESS: 526 ANIKA WAY KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/14/2024

EXPIRES:

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

CONDITIONS

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.	ł.
Issued By:	
Contractor or Authorized Agent: Gacen Muck Date: 8.15.24_	
ball of Authorized Agent balls	

Birthplace o Aviation	HILLS L	K Phone: 25	PO BO Ill Devil Hills 2-449-5318	I Devil H x 1719 5, NC 27948 Fax: 252-44 ection Depa	1-4102			PAID AUG 15 2024 TOWN OF KILL DEVIL HILLS
BP2024-161 PROJECT NAME SITE ADDRESS:		R W KILL DEVI	L HILLS					BUILDING D: 08/06/2024 ES: 02/02/2025
1 K	urfside Constructio 15 ST CLAIR RD ill Devil Hills, NC 2 52-548-9253			OWNER:	Kill De	, Jeff Landing wil Hills, N 77-2578	Drive C 27948	
UNLICENSED BUI	LDER:	Surfside Co 115 ST CL Kill Devil H 252-548-92	AIR RD ills, NC 2794	В			ense: Unlic bires: 01/2	
PARCEL:								
PIN:	988413129923	3		Parcel Number:	0	03617000)	
Address:	619 LANDING	DR W KILL DE	VIL HILLS					
				Zor	ning:			
Addition:	LANDING SEC	CTION 3, THE		Blo	ock: 0		Lot(s):	101
Legal Description	tion:							
FEES:		Paid	Due					
Building Permit Fee Fee	e - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: Replace front stairs within footprint

-

£.

BP2024-161 PROJECT NAME: Jeff Fisher SITE ADDRESS: 619 LANDING DR W KILL DEVIL HILLS

BUILDING ISSUED: 08/06/2024

EXPIRES: 02/02/2025

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FLOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	3400.00	
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 commerced 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:	1	- 1		
Contractor or Authorized Agent:	VC.		Date:	8.15.2024

2 DEVI	HILLS	к	PO BO> ill Devil Hills 2-449-5318	(1719 , NC 27948		2		PAID
Birthplac Aviatio PTH CA								AUG 1 5 2024
TCA		Planning	and Inspe	ection De	partme	ent		TOWN OF
	4 IE: Brendon Broder 5: 104 GODDARD		VIL HILLS				ISSU	NG PERMIT ED: 08/13/2024 RES: 02/09/2025
APPLICANT:	Broder, Brendon 104 East Goddard A Kill Devil Hills, NC 27 520-204-6664			OWNER:	10 Kil	oder, Brendo 4 East Godo I Devil Hills, 0-204-6664	lard Avenue	
CONTRACTOR:		SAME AS UNKNOWN UNKNOWN					icense: Sar xpires: 12/	ne as Owner 31/2024
PARCEL:								
PIN:	988308891359	9		Parcel Numbe		0037930	00	
Address:	104 GODDAR	DAVEE KILL	DEVIL HILLS		Zoning			
Addition:	KITTY HAWK	SHORES - REV	ISED		Zoning: Block:	32	Lot(s):	9
Legal Descr	ription:							
FEES:		Paíd	Due					
Fence		\$100.00	\$0.00					

PROJECT DESCRIPTION: Fence

- 1

ZP2024-064 PROJECT NAME: Brendon Broder SITE ADDRESS: 104 GODDARD AVE E KILL DEVIL HILLS

γ

ZONING PERMIT ISSUED: 08/13/2024

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	С
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	х
PURPOSE	Residential Accessory
CONSTRUCTION COST	6000.00
SURVEYOR NAME AND NUMBER	JH Miller
CULVERT	N
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Stringline	Zoning Final
Final	

CONDITIONS

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

* Call for a stringline inspection before installing the fence.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.				
Issued By:				
Rh-R-				
Contractor or Authorized Agent:	Date: 8/15/24			
	1.7			



PROJECT DESCRIPTION: Replace water service line with shut off



PL2024-007

PROJECT NAME: Baugus Plumbing SITE ADDRESS: 2022 CROATAN HWY N KILL DEVIL HILLS

١

PLUMBING ISSUED: 08/13/2024

EXPIRES: 02/09/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Pormit

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: 08 / 14 / 2024

Birthplace Aviation	of the state of th	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		4102		
ZP2024-063 PROJECT NAMI SITE ADDRESS		DW KILL DEV	IL HILLS			ISSUE	NG PERMIT ED: 08/13/2024 RES: 02/09/2025
	Mindful Maintenance 108 Red Haven St JARVISBURG, NC 2			OWNER:	Jarvis, Julie P O Box 784 Kill Devil Hill 252-722-403	s, NC 27948	
UNLICENSED - R	EMODELING:	Mindful Ma 108 Red Ha JARVISBU		7		License: 1234 Expires:	45
PARCEL:							
PIN:	988311751428	1		Parcel Number:	004596	5000	
Address:	805 AIRSTRIP	RD W KILL DE	VIL HILLS				
				Zonir	-		-
Addition:		LLS REALTY CO	ORP	Block	:: 52	Lot(s):	6
Legal Descri	ption:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

PROJECT DESCRIPTION: fence along front of existing trailer, cannot connect to adjacent lots

PAID

AUG 1 3 2024

TO NN OF KILL DEVIL HILLS ...

ZP2024-063 PROJECT NAME: Jarvis Fence SITE ADDRESS: 805 AIRSTRIP RD W KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/13/2024

EXPIRES: 02/09/2025

DETAILS

Permit	
Name	Value
ZONING DISTRICT	LI-2
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
PURPOSE	Residential Accessory
CONSTRUCTION COST	5000.00
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* 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 focal law regulating construction or the performance of construction.
Issued By:
Contractor or Authorized Agent: Date: 8-13-24

Birthplace ZORTH CA		Ki Phone: 252	PO BOX III Devil Hills, 2-449-5318		4102	,	PAID AUG 1 3 2024 TOWN OF KILL DEVIL HILLS
	60 IE: Radford HVAC S: 335 EDEN ST ST	T W KILL DEVIL	. HILLS			IS	MECHANICAL SUED: 08/13/2024 (PIRES: 02/09/2025
APPLICANT:	Edward Radford 108 Page St FRANKLIN, VA 2385	j1	(OWNER:	Edward Ra 108 Page S FRANKLIN		
H3, CLASS 1:		701 Fresh F	leating and Air Pond West Ils, NC 27948	Conditioning		License: Expires:	
PARCEL:							
PARCEL: PIN:	988517005725	5		Parcel Number:	0006	13000	
		5 ST W KILL DEV	/IL HILLS		0006	13000	
PIN:			/IL HILLS			13000	
PIN:		ST W KILL DEV	/IL HILLS	Number:	ng:	13000 Lot(s): 3-4
PIN: Address:	335 EDEN ST VIRGINIA DAF	ST W KILL DEV	/IL HILLS	Number: Zonii	ng:		s): 3-4
PIN: Address: Addition:	335 EDEN ST VIRGINIA DAF	ST W KILL DEV	/IL HILLS Due	Number: Zonii	ng:		s): 3-4
PIN: Address: Addition: Legal Descr	335 EDEN ST VIRGINIA DAF	ST W KILL DEV		Number: Zonii	ng:		s): 3-4

PROJECT DESCRIPTION: Replace duct work under house.

MC2024-250

S

PROJECT NAME: Radford HVAC SITE ADDRESS: 335 EDEN ST ST W KILL DEVIL HILLS MECHANICAL ISSUED: 08/13/2024

EXPIRES: 02/09/2025

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6138.00	
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 exa All provisions of Laws and Ordinances specified herein or not. The granting o	governing this type of wo	
the provisions of any other state/local	aw regulating construction	n or the performance of construction.
Issued By:		
	A 1	
	Van	Date: 8-17-24
Contractor or Authorized Agent:		Date: 0 (-C)



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

EL2024-077 PROJECT NAME: SITE ADDRESS: 1202 SEVENTH AVE KILL DEVIL HILLS

ELECTRICAL ISSUED: 08/13/2024

EXPIRES: 02/09/2025

APPLICANT:	5001 VA Beach Bould 1236 Knights Bridge I Virginia Beach, Va 23 757-343-5915	Lane	C	WNER:	5001 VA Beac 1236 Knights Virginia Beach 757-343-5915	n, Va 23455	
ELECTRICAL-IN	NTERMEDIATE:			, LLC		License: 30465 Expires: 03/25/2025	
PARCEL:							
PIN:	988312756369			Parcel Number:	0045690	000	
Address:	1202 SEVENT	HAVE KILL DEV	VIL HILLS				
				Zoni	ng:		
Addition:	KILL DEVIL HI	LLS REALTY CO	RP	Bloc	k: 48	Lot(s): 2	
Legal Desc	ription:						
FEES:		Paid	Due				
Electrical Permi	t Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace main electrical panel



1

DETAILS

Permit	
Name	Value
ZONING DISTRICT	LI-2
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
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.

		Charles	Thuman
lssued	By:		

Contractor or Authorized Agent: _____

Date: 08 / 13 / 2024

N DEVI N DEVI N DEVI N DEVI N DEVI N DEVI N DEVI N DEVI N DEVI N DEVI N DEVI N	ROLINF	Kill Phone: 252	of Kill De PO BOX 1719 Devil Hills, NC 449-5318 Fax	9 27948	PAID Allo 1133 28024 t KILL DEVIL HILLS
	0 IE: Dumitru Sorocean S: 603 Holly Street Ki	II Devil Hills		EXCA	AVATION AND GRADING ISSUED: 08/12/2024 EXPIRES: 02/08/2025
APPLICANT:	Fine Finish Construction 1603 Sand Dollar Circle kitty hawk, nc 27949 252-202-0635		OWN	612 G ROLE	cean, Dumitru Granite Creek Road ESVILLE, NC 27571 105-3524
CONTRACTOR:		Fine Finish C 1603 Sand E kitty hawk, n 252-202-063	c 27949	Design	License: 79316 Expires:
PARCEL:					
PIN:	988312854071			Parcel Number:	
Address:	603 Holly Street	Kill Devil Hills			
				Zoning:	
Addition:				Block:	Lot(s):
Legal Desci	iption: Lot 2, Block	BB, Kill Devil B	each Extended	Subdivision	
FEES:		Paid	Due		
Land Disturbing		\$100.00	\$0.00		
	Totals :	\$100.00	\$0.00		

PROJECT DESCRIPTION: Clear lot for new single family dwelling and pool

8

-10

EG2024-010

PROJECT NAME: Dumitru Sorocean SITE ADDRESS: 603 Holly Street Kill Devil Hills

EXCAVATION AND GRADING ISSUED: 08/12/2024

EXPIRES: 02/08/2025

DETAILS

Permit	
Name	Value
ESTIMATED CONSTRUCTION COST	10000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	Х
SURVEYOR NAME AND NUMBER	JH Miller

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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.
the the in
Issued By:
Contractor or Authorized Agent: Date: & 13/2024
Contractor or Authorized Agent: Date: _ 8_113/2029



Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG 1 3 2024

TOWN OF KILL DEVIL HILLS

BUILDING JOINT

BJ2024-141 PROJECT NAME: Hurdle Addition SITE ADDRESS: 318 ARCH ST W KILL DEVIL HILLS

ISSUED: 08/13/2024

EXPIRES: 02/09/2025

APPLICANT:	Awesome Remodel 409 W. LAKE DR Kill Devil Hills, NC 2 252-305-0636	0		OWNER: Hurdle, Joeseph PO BOX 203 Kill Devil Hills, NC 27948			
40 Ki		409 W. LAK Kill Devil Hi	Awesome Remodeling 409 W. LAKE DR Kill Devil Hills, NC 27948 252-305-0636			L icense: 100184 E xpires: 12/31/2024	
PARCEL:							
PIN:	98751684705	57		Parcel Number:	00021200	00	
Address:	318 ARCH ST		HILLS				
				Zoni	ing:		
Addition:	ORVILLE BE	ACH WEST		Bloc	k: 0	Lot(s): 111	
Legal Des	cription:						
FEES:		Paid	Due	BUILDING AR	EA:		
Res. Building P	ermit Fee	\$675.00	\$0.00	Residential He	eated Space	900 sq. Ft.	
Renovation/Ren	model/Relocate	\$418.50	\$0.00	(.75)			
Covered Porch	Residential	\$149.25	\$0.00	Covered Porc	hes/Decks	199 SQFT	
	Totals :	\$1,242.75	\$0.00	Remodel/Ren	ovation	930 SQFT	

PROJECT DESCRIPTION: add 1 bed 2 bath addition to existing house, 4 total bedrooms

BJ2024-141 PROJECT NAME: Hurdle Addition SITE ADDRESS: 318 ARCH ST W KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/13/2024

EXPIRES: 02/09/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S5-27404
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	383000.00
LOT COVERAGE	39.40
LIVING SPACE (SQFT)	900
COVERED PORCHES/DECKS (SQFT)	199
TOTAL SQUARE FOOTAGE	1099
SURVEYOR NAME AND NUMBER	Doug Styons
ENGINEER AND LICENSE NUMBER	Mikw O'Steen 03628
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2024-141 PROJECT NAME: Hurdle Addition SITE ADDRESS: 318 ARCH ST W KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/13/2024

EXPIRES: 02/09/2025

REQUIRED INSPECTIONS

In-Slab Plumbing

Slab/Foundation/Piling

Framing

Rough In

Insulation

Final

Zoning Final

CONDITIONS

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

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

* Driveway and parking areas cannot exceed 40 feet in total width.

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

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

Issued By: Date: 8-13-24 **Contractor or Authorized Agent:**



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2024-062

5

PROJECT NAME: Jarvis Fence SITE ADDRESS: 807 AIRSTRIP RD W KILL DEVIL HILLS ZONING PERMIT

ISSUED: 08/13/2024

EXPIRES: 02/09/2025

APPLICANT:	Mindful Maintenance 108 Red Haven St JARVISBURG, NC 279	947	O	WNER:	Jarvis, Julie P O Box 78 Kill Devil H 252-722-40	343 ills, NC 27948		
UNLICENSED -	REMODELING:	Mindful Ma 108 Red H JARVISBU				License: 1234 Expires:	5	
PARCEL:								
PIN:	988311750472			Parcel Number:	00459	97000		
Address:	807 AIRSTRIP F	RD W KILL DE	VIL HILLS					
				Zon	ing:			
Addition:	KILL DEVIL HIL	LS REALTY CO	ORP	Bloc	ck: 52	Lot(s):	7	
Legal Desc	cription:							
FEES:		Paid	Due					
Fence		\$100.00	\$0.00					
	Totals :	\$100.00	\$0.00					_

PROJECT DESCRIPTION: fence ialong front of house, not connecting to adjacent lot

PAID

AUG 1 3 2024

TO NN OF KILL DEVIL HILLS

ZP2024-062

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PROJECT NAME: Jarvis Fence SITE ADDRESS: 807 AIRSTRIP RD W KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/13/2024

EXPIRES: 02/09/2025

DETAILS

Permit	
Name	Value
ZONING DISTRICT	LI-2
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
PURPOSE	Residential Accessory
CONSTRUCTION COST	5000.00
SURVEYOR NAME AND NUMBER	Kirk Foreman
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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the provisions of any perior state populating construction of the performance of construction.
Issued By:
Contractor or Authorized Acoustic The THE-24
Contractor or Authorized Agent:

Birthplace of Aviation			Town of Kill Devil Hills PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102			PAID AUG 1 3 2024 TOWN OF		
BJ2024-13 PROJECT NAM SITE ADDRES	8 ME: Sandy Bottom S: 2034 NEWPOR	Homes RT NEWS ST KILI	L DEVIL HIL	LS		ISSUE	NG JOINT D: 08/13/2024 ES: 02/09/2025	
APPLICANT:	Sandy Bottom Hom 400 DaVinci Lane kitty hawk, nc 2794 757-448-8162			OWNER:	Sandy Bottom 400 DaVinci L kitty hawk, nc 757-448-8162	ane 27949		
GENERAL BUIL	DING-LIMITED:	SANDY BC 400 DaVino kitty hawk, 757-448-81	nc 27949	ES		.icense: 67524 Expires: 12/31		
PARCEL:						- do		
PIN:	98840519478	80		Parcel Number:	0009440	000		
Address:	2034 NEWPO	ORT NEWS ST K	ILL DEVIL F	IILLS				
				Zonin	g:			
Addition:	AVALON BE	ACH ANNEX 2 &	3	Block	0	Lot(s):	1231	
Legal Desc	ription:							
FEES:	and the second sec	Paid	Due	BUILDING ARE	A:			
Land Disturbing		\$100.00	\$0.00	# of Temporary	Poles	1	EA	
Open Deck Fee		\$150.00	\$0.00	Residential Hea		1804 :		
T-Pole		\$50.00	\$0.00	(.75)				
Res. Building Pe		\$1,405.40	\$0.00	Open Decks			EA	
Covered Porch I	Residential	\$174.00	\$0.00	Covered Porch Resdiential Unit			SQFT Sq. Ft	

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAID Water Tap #: 1 2637

BJ2024-138 PROJECT NAME: Sandy Bottom Homes SITE ADDRESS: 2034 NEWPORT NEWS ST KILL DEVIL HILLS

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BUILDING JOINT ISSUED: 08/13/2024

EXPIRES: 02/09/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	S8-27258
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	285000.00
LOT COVERAGE	39.90
LIVING SPACE (SQFT)	1804
COVERED PORCHES/DECKS (SQFT)	232
ACCESSORY STRUCTURE (SQFT)	131
OPEN DECK (SQFT)	64
TOTAL SQUARE FOOTAGE	2231
SURVEYOR NAME AND NUMBER	Seaboard
ENGINEER AND LICENSE NUMBER	Mikw O'Steen 03628
CULVERT	Ν
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Insulation

Zoning Final

Final

In-Slab Plumbing Slab/Foundation/Piling Framing 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.

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Foundation survey will be required prior to rough-in inspection.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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

- * 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.

I hereby certify that I have read and examined this application and know All provisions of Laws and Ordinances governing this type of work will b specified herein or not. The granting of a permit does not presume to give	be complied with whether ve authority to violate or cancel
the provisions of any other state/local law regulating construction or the	performance of construction.
The provisions of any other systemotic law regulating construction of the	performance of conclusion
Issued By:	
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	C
	Date: 8-13-24
Contractor or Authorized Agent:	
	Bator



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

FAD

AUG 1 3 2024

ROEL DRAG LOTTO

BJ2024-139 PROJECT NAME: Lenz Homes 4 Bedroom House SITE ADDRESS: 107 CAROLYN DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/12/2024

EXPIRES: 02/08/2025

APPLICANT:	Lenz Homes Inc. PO BOX 74 Point Harbor, NC 2 252-202-2637	7964		OWNER: Lenz Properties Llc 20564 Captains Walk SMITHFIELD, VA 23430		
GENERAL BUILDING - LIMITED:		Lenz Hom PO BOX 7 Point Harb 252-202-2	4 oor, NC 27964		ense: 80731 bires:	
PARCEL:						
PIN:	98931304853	33		Parcel Number:	004908007	7
Address:	107 CAROLY	N DR KILL DEV	IL HILLS			
				Zonin	g:	
Addition:				Block	0	Lot(s): 7
Legal Desc	cription:					
FEES:		Paid	Due	BUILDING ARE	A:	
Land Disturbing		\$100.00	\$0.00	Covered Porch	es/Decks	234 SQFT
T-Pole		\$50.00	\$0.00	Open Decks		1 EA
Covered Porch Residential		\$175.50	\$0.00			2547 sq. Ft.
Open Deck Fee		\$150.00	. \$0.00	(.75)		
Res. Building Po	ermit Fee	\$1,910.25	\$0.00	# of Temporary	Poles	1 EA
Pool/Hot Tub		\$200.00	\$0.00			
	Totals :	\$2,585.75	\$0.00			

PROJECT DESCRIPTION: new 4 bedroom house with pool

Town of Kill Devil Hills Water Charges PAID Water Tap #: ててらいろく

BJ2024-139

PROJECT NAME: Lenz Homes 4 Bedroom House SITE ADDRESS: 107 CAROLYN DR KILL DEVIL HILLS

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BUILDING JOINT ISSUED: 08/12/2024

EXPIRES: 02/08/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	S8-27194
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.53
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	450000.00
LOT COVERAGE	44.08
LIVING SPACE (SQFT)	2547
COVERED PORCHES/DECKS (SQFT)	234
OPEN DECK (SQFT)	135
SURVEYOR NAME AND NUMBER	Mike Robinson
ENGINEER AND LICENSE NUMBER	BARRETT CROOK 027540
CULVERT	Ν
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2024-139 PROJECT NAME: Lenz Homes 4 Bedroom House SITE ADDRESS: 107 CAROLYN DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/12/2024

EXPIRES: 02/08/2025

REQUIRED INSPECTIONS

Insulation
Final
Zoning Final
Pool Bonding

CONDITIONS

* Foundation survey will be required prior to rough-in inspection.

* 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.

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

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

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

* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

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

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

* Zoning Final Inspection is required.

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 Bv Date: 8 Contractor or Authorized Agent:

N. DEVIL	к	Town of Kill Devil Hills PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102				PAID		
Birthplace Aviation							AUG	1 2 2024
HCAR		Planning	and Insp	ection Dep	artme	ent		WN OF EVIL HILLS
BJ2024-142 PROJECT NAME SITE ADDRESS:			IILLS				BUILD	ING JOINT D: 08/09/2024
							EXPIR	ES: 02/05/2025
s H	CORY NEBORSKY 205 EIGHTH AVE Kill Devil Hills, NC 27 252-599-2166	7948		OWNER:	90 Kill	PRY NEBORSK 5 EIGHTH AVE Devil Hills, NC 2-599-2166		
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	N, XX 00000				nse: Unlic res: 12/3	
PARCEL:								
PIN:	988311669379)		Parcel Number	:	004547000		
Address:	905 EIGHTH A	VE KILL DEVIL	HILLS					
				Z	oning:			
Addition:	KILL DEVIL HI	LLS REALTY C	ORP	В	lock:	45	Lot(s):	8
Legal Descrip	otion:							
FEES:		Paid	Due					
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00					

PROJECT DESCRIPTION: add 15x12 addition of living space, and deck to existing house, remains 2 bedrooms

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BJ2024-142

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PROJECT NAME: Neborsky Addition SITE ADDRESS: 905 EIGHTH AVE KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/09/2024

EXPIRES: 02/05/2025

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
HEALTH DEPARTMENT PERMIT #	S13-27351		
# PARKING SPACES/BEDROOM	2		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Residential Addition		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	15000.00		
LOT COVERAGE	23.00		
LIVING SPACE (SQFT)	192		
TOTAL SQUARE FOOTAGE	192		
SURVEYOR NAME AND NUMBER	Marty Barnette		
CULVERT	N		
DRIVEWAY INVERT 2	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

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

Insulation Final Zoning Final

CONDITIONS

BJ2024-142 PROJECT NAME: Neborsky Addition SITE ADDRESS: 905 EIGHTH AVE KILL DEVIL HILLS

EXPIRES: 02/05/2025

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

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

Issued By Date: 8-12-2024 **Contractor or Authorized Agent:**



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2024-246

PROJECT NAME: OH WELL LLC. HVAC SITE ADDRESS: 1105 VA DARE TRL N KILL DEVIL HILLS MECHANICAL ISSUED: 08/09/2024

EXPIRES: 02/05/2025

APPLICANT:	OH WELL LLC P.O. BOX 1 TOANO, VA 23168		0	WNER:	OH WELL LLC P.O. BOX 1 TOANO, VA 23	168	
MECHANICAL	H-3, CLASS 1:	DELTA T PO Box 575 Kitty Hawk, 256-2436				cense: 3532 pires: 12/3	
PARCEL:							
PIN:	988415639994	1		Parcel Number:	00915600	0	
Address:	1105 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zonin	g:		
Addition:	KITTY HAWK	SHORES - REVI	SED	Block	: 2A	Lot(s):	3 & PT 4
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
erve filme an een som en erke	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC C/O



MC2024-246

PROJECT NAME: OH WELL LLC. HVAC SITE ADDRESS: 1105 VA DARE TRL N KILL DEVIL HILLS

FXPIRES: 02/05/2025

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
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 Bv:	Charles	Thuman	

Contractor or Authorized Agent:

2 Some

Date: 08 / 09 / 2024



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

MC2024-247

PROJECT NAME: BERMUDA BAY HVAC SITE ADDRESS: 1101 Cambridge Rd Kill Devil Hills MECHANICAL ISSUED: 08/09/2024

EXPIRES: 02/05/2025

APPLICANT:	Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722		OWNER:	PO Bo	da Bay Homeowners Association x 1807 Head, NC 27959 /22
MECHANICAL	H-3, CLASS 1:	DELTA T PO Box 575 Kitty Hawk, 256-2436			License: 35327 Expires: 12/31/2024
PARCEL:					
PIN:	988306387222		Par	cel nber:	
Address:	1101 Cambridg	ge Rd Kill Devil I	Hills		
				Zoning:	
Addition:				Block:	Lot(s):
Legal Des	cription: Lot 300 Re	ecreation, Sunse	t Bay		
FEES:	ten di inje etter	Paid	Due		
Mechanical Per	mit Fee	\$150.00	\$0.00		
a an	Totals :	\$150.00	\$0.00		

PROJECT DESCRIPTION: HVAC C/O



MC2024-247

PROJECT NAME: BERMUDA BAY HVAC SITE ADDRESS: 1101 Cambridge Rd Kill Devil Hills MECHANICAL ISSUED: 08/09/2024

EXPIRES: 02/05/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent:

Date: 08 / 09 / 2024



Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG 1 2 2024

TOWN OF KILL DEVIL HILLS

PL2024-006 PROJECT NAME: Ward Plumbing SITE ADDRESS: 108 AVALON DR W KILL DEVIL HILLS

PLUMBING ISSUED: 08/09/2024

EXPIRES: 02/05/2025

APPLICANT:	Scott, Ann 108 W Avalon Dr Kill Devil Hills, NC 27 252-339-5996	948	0	WNER:	Scott, Ann 108 W Avalor Kill Devil Hills 252-339-599	s, NC 27948	
PLUMBING:		4885 The V	LUMBING, INC. Voods Road , NC 27949 992		License: 19207 Expires: 12/31/2024		
PARCEL:							
PIN:	988517106563	3		Parcel Number:	001730	000	
Address:	108 AVALON	DR W KILL DE	/IL HILLS				
				Zoni	ng:		
Addition:	AVALON BEA	СН		Bloc	k: 0	Lot(s): 89	
Legal Des	cription:						
EES:		Paid	Due				
Plumbing Perm	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace water service line

PL2024-006 PROJECT NAME: Ward Plumbing SITE ADDRESS: 108 AVALON DR W KILL DEVIL HILLS

PLUMBING ISSUED: 08/09/2024

EXPIRES: 02/05/2025

DETAILS	
Value	
Residential Repair/Remodel	
1673.31	
V	
х	
One & Two Family Dwelling	
	Value Residential Repair/Remodel 1673.31 V X One & Two Family

REQUIRED INSPECTIONS

Rough In

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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: 8-9-24

Printed by : CTHUMAN on: 08/09/2024 03:10 PM

A.DEV			PO BOX		ls	P	AD
Birthpla Aviati	ce of T			, NC 27948 Fax: 252-441-	4102	AUG -	- 9 2024
MTH CF	ROL	Planning a	and Inspe	ection Depart	tment	TOW KILL DEV	N OF TL HILLS
	7 ME: Ryan and Shar S: 401 APACHE S		LLS			ISSUE	NG JOINT D: 08/09/2024
APPLICANT:	CAROLINA BEACH UNKNOWN UNKNOWN, XX 000			OWNER:	Mckinstrie, S 1604 Edgerd CARY, NC 2	ock Cove Ct	
UNLIMITED BU	ILDING:	CAROLINA 252 Woodla kitty hawk, r 256-1521		LDERS		License: 27951 Expires: 12/31	
PARCEL:		252 Woodla kitty hawk, r	and Dr	LDERS			
	98841035036	252 Woodla kitty hawk, r 256-1521	and Dr	LDERS Parcel Number:	003210	Expires: 12/31	
PARCEL:	98841035036	252 Woodla kitty hawk, r 256-1521	and Dr nc 27949	Parcel	003210	Expires: 12/31	
PARCEL: PIN:	98841035036	252 Woodla kitty hawk, r 256-1521	and Dr nc 27949	Parcel		Expires: 12/31	
PARCEL: PIN:	98841035036 401 APACHE	252 Woodla kitty hawk, r 256-1521	and Dr nc 27949 HILLS	Parcel Number:	ng:	Expires: 12/31	
PARCEL: PIN: Address:	98841035036 401 APACHE FIRST FLIGH	252 Woodla kitty hawk, r 256-1521	and Dr nc 27949 HILLS	Parcel Number: Zonin	ng:	Expires: 12/31	/2024
PARCEL: PIN: Address: Addition: Legal Desc	98841035036 401 APACHE FIRST FLIGH	252 Woodla kitty hawk, r 256-1521	and Dr nc 27949 HILLS	Parcel Number: Zonin	ng: k: 0	Expires: 12/31	/2024
PARCEL: PIN: Address: Addition: Legal Desc FEES:	98841035036 401 APACHE FIRST FLIGH cription:	252 Woodla kitty hawk, r 256-1521 S2 ST KILL DEVIL I IT VILLAGE SEC <u>Paid</u> \$1,285.50	and Dr nc 27949 HILLS 2 <u>Due</u> \$0.00	Parcel Number: Zonin Block	ng: k: 0 E A :	Expires: 12/31	213
PARCEL: PIN: Address: Addition: Legal Desc FEES: Res. Building Pa Open Deck Fee	98841035036 401 APACHE FIRST FLIGH cription:	252 Woodla kitty hawk, r 256-1521 S2 ST KILL DEVIL I IT VILLAGE SEC <u>Paid</u> \$1,285.50 \$150.00	and Dr nc 27949 HILLS 2 <u>Due</u> \$0.00 \$0.00	Parcel Number: Zonin Block BUILDING ARE Residential He (.75)	ng: k: 0 E A :	Expires: 12/31 00000 Lot(s): 1714 s	/2024 213 sq. Ft.
PARCEL: PIN: Address: Addition:	98841035036 401 APACHE FIRST FLIGH cription:	252 Woodla kitty hawk, r 256-1521 S2 ST KILL DEVIL I IT VILLAGE SEC <u>Paid</u> \$1,285.50	and Dr nc 27949 HILLS 2 <u>Due</u> \$0.00	Parcel Number: Zonin Block	ng: k: 0 EA: eated Space	Expires: 12/31 0000 Lot(s): 1714 s 1 E	/2024 213 sq. Ft.

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAID Water Tap #: 26135

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BJ2024-137

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PROJECT NAME: Ryan and Shannon McKinstrie SITE ADDRESS: 401 APACHE ST KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/09/2024

EXPIRES: 02/05/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S8-26535
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	410000.00
LOT COVERAGE	29.00
LIVING SPACE (SQFT)	1714
OPEN DECK (SQFT)	249
TOTAL SQUARE FOOTAGE	1963
SURVEYOR NAME AND NUMBER	Styons
ENGINEER AND LICENSE NUMBER	Ray Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

Printed by : CTHUMAN on: 08/09/2024 09:08 AM

REQUIRED INSPECTIONS

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

CONDITIONS

- * Foundation survey will be required prior to rough-in inspection.
- * 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.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * 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.

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:	2	
Contractor or Authorized Agent:	Edward anch	Date: 1 2024

Birthplac Hospith CA		Kil Phone: 252	PO BOX I Devil Hills, 2-449-5318		4102		
BP2024-16 PROJECT NAM SITE ADDRESS	4 IE: Water damage re S: 3124 BAY DR KI	epairs LL DEVIL HILLS	3			ISSUEI	BUILDING D: 08/16/2024 ES: 02/12/2025
APPLICANT:	ROMANIELLO, LEON 58 East Jonathan Ct KENNETT SQUARE,			OWNER:	58 East Jonat	D, LEONARD & han Ct QUARE, PA 193	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	I, XX 00000			License: Unlice Expires: 12/31	
PARCEL:							
PIN:	987520822380			Parcel Number:	0010710	000	
Address:	3124 BAY DR	KILL DEVIL HIL	LS				
				Zoni	ng:		
Addition:	MOOR SHORE	ES		Bloc	k: 0	Lot(s):	136
Legal Desc	ription:						
FEES: Building Permit Fee	Fee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00				
an a marananin'i Na Antoine ao 1999 ao 500 ambana ambana	Totals :	\$150.00	\$0.00	aa			

PROJECT DESCRIPTION: Repair/replace damaged siding/sheathing/insulation/studs and associated framing as needed for water darnage repairs.

A etal 21 Milie

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EXPIRES: 02/12/2025

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	18000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Framing

Insulation

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

_____ Date: 08 / 20 / 2024

Y DEVIL	till IS	Ki	Town of Kill Devil Hills PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102		102	PAT		
Aviation	Birthplace of Annual					AUG 3 0 2024 TOWN OF KILL DEVIL HILLS		
BP2024-180 PROJECT NAME SITE ADDRESS:	: NGUYEN STOR		HILLS			ISSUEI	BUILDING D: 08/30/2024 ES: 02/26/2025	
7 H	lguyen, Kim Hoang 18 Sermons Blvd. IAVELOCK, NC 285 52-725-4788	532			Nguyen, Kim Hoa 718 Sermons Blv HAVELOCK, NC 252-725-4788	d.		
BUILDING LIMITEI	D:	Roberts, Ch 310 Eagle I Kill Devil Hil 252-480-32	Drive Ils, NC 27948	ann a' 19-19, anns anns anns an Aons		ense: 8383 lires:		
PARCEL:								
PIN:	988405192425	ō		Parcel Number:	001438000)		
Address:	2031 FRANKL	IN ST KILL DEV	IL HILLS					
				Zoning	g:			
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Block:	0	Lot(s):	1304	
Addition: Legal Descrip		CH ANNEX 2 & 3	3	Block:	0	Lot(s):	1304	
Legal Descrip FEES:	tion:	CH ANNEX 2 & 3 Paid	Due	Block:	0	Lot(s):	1304	
	tion:			Block:	0	Lot(s):	1304	

PARKING

Printed by : Jordan Blythe on: 08/30/2024 02:00 PM

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BP2024-180 PROJECT NAME: NGUYEN STORAGE ROOM SITE ADDRESS: 2031 FRANKLIN ST KILL DEVIL HILLS

BUILDING ISSUED: 08/30/2024

EXPIRES: 02/26/2025

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	1650.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By: Contractor or Authorized Agent: Charle W, Kelled Date: & -30-2 ft



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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

PAID

AUG 3 0 2024

TOWN OF KILL DEVIL HILLS

EXPIRES:

OCCUPANCY

ISSUED: 08/30/2024

OP2024-079 PROJECT NAME: Kim Hoang Nguyen SITE ADDRESS: 2031 FRANKLIN ST KILL DEVIL HILLS

PARENT PERMIT #: BJ2024-094

APPLICANT:	Roberts, Charles 310 Eagle Drive Kill Devil Hills, NC 27 252-480-3209	948	7183 HAV			guyen, Kim Hoang 18 Sermons Blvd. AVELOCK, NC 28532 52-725-4788		
BUILDING LIMITED:		Roberts, Ch 310 Eagle I Kill Devil Hi 252-480-32	Drive Ils, NC 27948		Licer Expir			
BUILDING LIM	TED:	Roberts, Cł 310 Eagle I Kill Devil Hi 252-480-32	Drive IIs, NC 27948	License: 8383 Expires: 8				
PARCEL:								
PIN:	988405192425	i		Parcel Number:	001438000			
Address:	2031 FRANKL	IN ST KILL DEV	/IL HILLS					
				Zoning	g:			
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Block:	0	Lot(s):	1304	
Legal Des	cription:							
FEES:		Paid	Due					
Certificate of O Residential (mi		\$50.00	\$0.00					
anden and he wellen and the second	Totals :	\$50.00	\$0.00					

DETAILS

CONDITIONS

OP2024-079 PROJECT NAME: Kim Hoang Nguyen SITE ADDRESS: 2031 FRANKLIN ST KILL DEVIL HILLS

1

OCCUPANCY ISSUED: 08/30/2024

EXPIRES:

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 focal law regulating construction or the performance of construction.

>Issued By: Contractor or Authorized Agent: cheals L. Malual Date: 8-30-24

Birthplac Port Aviation		Phone: 252				AUG 28 202 TOWN OF KILL DEVIL HILLS	
	′5 ∕IE: Rollins Deck S: 1504 SMALL PL ∤	KILL DEVIL HIL	LS			BUIL ISSUED: 08/ EXPIRES: 02/	
APPLICANT:	David Rollins 1504 Small Crt. Kill Devil HillsI, NC 279 252-564-4203	948		OWNER:	David Rollins 1504 Small C Kill Devil Hills 252-564-4203	l, NC 27948	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	I, XX 00000			License: Unlicensed Expires: 12/31/2024	
PARCEL:							
PIN:	988414246427			Parcel Number:	003351	001	
Address:	1504 SMALL PL	KILL DEVIL H	HLLS				
				Zor	ning:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Blo	ck: 0	Lot(s): 71	
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
PERSONAL AND A STREET	Totals :	\$150.00	\$0.00				

Town of Kill Devil Hills

PROJECT DESCRIPTION: replace existing back deck, replacing stairs and stringers, add roof over existing rear deck to meet setbacks, replacing 2 windows and sliding door

PAID

BP2024-175 PROJECT NAME: Rollins Deck SITE ADDRESS: 1504 SMALL PL KILL DEVIL HILLS

BUILDING

ISSUED: 08/28/2024

EXPIRES: 02/24/2025

DETAILS
Value
Ν
Ν
RL
Residential Repair/Remodel
30
10
20% Depth >30
Х
Ν
40000.00
16.00
V
Jamie Furr
One & Two Family Dwelling

DETAILS

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.

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

* Deck, stairs, guard rails and hand rails shall be to current code requirements. (Provided at time of permitting.) (Additional notations added in red on approved drawings.

BP2024-175 PROJECT NAME: Rollins Deck SITE ADDRESS: 1504 SMALL PL KILL DEVIL HILLS

BUILDING ISSUED: 08/28/2024

EXPIRES: 02/24/2025

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: Date: 8-28-29 Contractor or Authorized Agent:



PROJECT DESCRIPTION: rebuild existing front and back stairs, decks, and front porch

BP2024-178

3

PROJECT NAME: Walker Deck and Stairs SITE ADDRESS: 105 GREENVILLE ST KILL DEVIL HILLS BUILDING ISSUED: 08/28/2024

EXPIRES: 02/24/2025

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	20000.00
LOT COVERAGE	42.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	WL Norris
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.

BP2024-178

PROJECT NAME: Walker Deck and Stairs SITE ADDRESS: 105 GREENVILLE ST KILL DEVIL HILLS BUILDING ISSUED: 08/28/2024

EXPIRES: 02/24/2025

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: alka Contractor or Authorized Agent:

Date: 8-28-2024



Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG 28 2024

TOWN OF KILL DEVIL HILLS

MC2024-255 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 112 GODDARD AVE E KILL DEVIL HILLS

MECHANICAL ISSUED: 08/23/2024

EXPIRES: 02/19/2025

APPLICANT:	NORTH BEACH SE P.O. Box 181 Kitty Hawk, NC 2794 252-491-2878	0	WNER:	READ, SHEILA 130 BARCLAY RD Newport News, VA 23606			
MECHANICAL:		NORTH BE P.O. Box 18 Kitty Hawk, 252-491-28	NC 27949	S	-	License: 33023 Expires: 12/31/2024	
PARCEL:							
PIN:	98830889343	Э		Parcel Number:	0037920	000	
Address:	112 GODDAR	DAVEE KILLD	EVIL HILLS				
				Zonir	ng:		
Addition:	KITTY HAWK	SHORES - REVI	SED	Block	c: 32	Lot(s): 5	
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
An e reformant de Maria I. Maria I. I La reserva Londo I. A. K. (1999)	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC CHANGEOUT

MC2024-255 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 112 GODDARD AVE E KILL DEVIL HILLS

ı ,

MECHANICAL ISSUED: 08/23/2024

EXPIRES: 02/19/2025

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	9492.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	Х	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

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.

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 Qrdinances governing this type of work will be complied with whether
specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
Issued By:
0 At At Discourse
Contractor or Authorized Agent: The Authorized Agent: Date: 0 28 12 9

Y DEV	L HILLS	Ki	PO BOX II Devil Hills,			PAID
TORTH CA				ction Depart		AUG 28 2024
						TOWN OF KILL DEVIL HILLS
	ME: MCCUE HVAC					MECHANICAL ISSUED: 08/28/2024
SITE ADDRES	S: 1522 Bailey's Bay	Rd #12 Kill De	ivil Hills			EXPIRES: 02/24/2025
APPLICANT:	Mccue, Melissa 4331 Keaton Lane Williamsburg, Va 2318	38		DWNER:	Mccue, Me 4331 Keat Williamsbu	
H3, CLASS 1:		701 Fresh I	Heating and Air Pond West Ils, NC 27948	Conditioning	, , e o de canalaste e la varia de canalaste e la varia de la constante de la constante de la constante de la s	License: 12643 Expires: 12/31/2024
PARCEL:	in the second					
PIN:	9883063739351	12		Parcel Number:		
Address:	1522 Bailey's B	ay Rd #12 Kill ∣	Devil Hills			
Addition:				Zoni Bloc	-	Lot(s):
Legal Desc	cription: Residential	condo				
FEES: Mechanical Per	mit Fee	<u>Paid</u> \$150.00	<u>Due</u> \$0.00			
ABAY, MAY . WANTAN'S AVAILABLE AND A STREET AND A STREET OF A STREET OF A STREET AND A STREET AN	Totals :	\$150.00	A 1-A - London - A - Market Market Market Market Market			

PROJECT DESCRIPTION: HVAC C/O

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MC2024-260

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1

PROJECT NAME: MCCUE HVAC SITE ADDRESS: 1522 Bailey's Bay Rd #12 Kill Devil Hills MECHANICAL ISSUED: 08/28/2024

EXPIRES: 02/24/2025

		DETAILS				
Permit						
Name	Value					
PURPOSE	Residential Repair/Remodel					
CONSTRUCTION COST	10503.00					
CONSTRUCTION TYPE	V					
FLOOD ZONE	Х					
NATURAL GAS SIGNOFF	N					
OCCUPANCY TYPE	One & Two Family Dwelling					

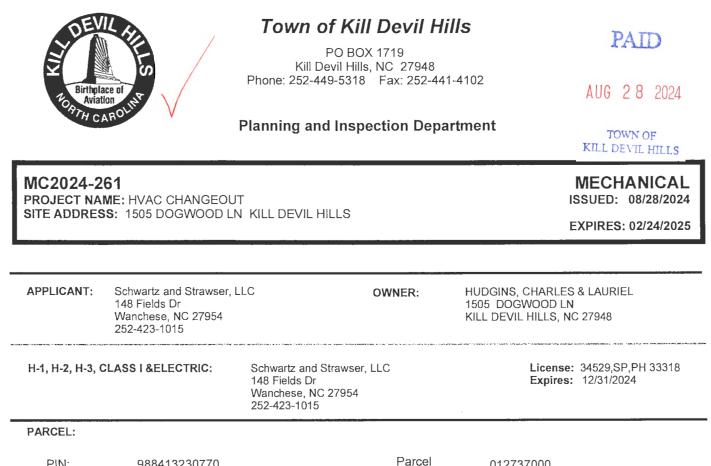
REQUIRED INSPECTIONS

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.
the provisions of any other state focal law regulating construction of the performance of construction.
Issued By:
De Que
Contractor or Authorized Agent: Date: 8 - 924
······



PIN:	988413230770)		Parcel Number:	012737000			
Address:	1505 DOGWO	OD LN KILL DE	VIL HILLS					
				Zoning:				
Addition:	FIRST FLIGH	FIRST FLIGHT VLG PH A SEC 3			0	Lot(s):	53	
Legal Deso	cription:							
FEES:		Paid	Due					
Mechanical Per	mit Fee	\$150.00	\$0.00					
and a second	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC CHANGEOUT

MC2024-261

PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 1505 DOGWOOD LN KILL DEVIL HILLS

.

MECHANICAL ISSUED: 08/28/2024

EXPIRES: 02/24/2025

		DETAILS		
Permit				
Name	Value			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	8475.00			
CONSTRUCTION TYPE	V			
FLOOD ZONE	Х			
NATURAL GAS SIGNOFF	Ν			
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	e performance of construction.				
Issued By:					
Contractor or Authorized Agent:	Date: 8-28-24				



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

EL2024-078 PROJECT NAME: HAWKINS DE-ENERGIZE SITE ADDRESS: 1103 SUFFOLK ST KILL DEVIL HILLS

ELECTRICAL ISSUED: 08/28/2024

EXPIRES: 02/24/2025

APPLICANT:	HAWKINS, DANIEL 4212 HAWKSLEY DF CHESAPEAKE, VA 2 757-438-9500	•	01	WNER:	HAWKINS, 4212 HAW CHESAPEA 757-438-95	(SLEY DR AKE, VA 23321	
ELECTRICAL -	LIMITED:	KDH Electri 301 Wallace Kill Devil Hi 256-1759	-			License: 10420-L Expires: 04/30/20	25
PARCEL:							
PIN:	987408998023			Parcel Number:	00197	6000	
Address:	1103 SUFFOL	K ST KILL DEVI	IL HILLS				
				Zonir	ng:		
Addition:	AVALON BEAG	CH ANNEX 2 & 3	3	Block	c: 0	Lot(s): 9	76
Legal Desc	ription:						
FEES:		Paid	Due				
Electrical Permit	t Fee	\$150.00	\$0.00				
p (nation). Decision of the second	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: DE-ENERGIZE UNPERMITTED GROUND FLOOR ADDITION

PAID

AUG 28 2024

TOWN OF KILL DEVIL HILLS

EL2024-078 **PROJECT NAME: HAWKINS DE-ENERGIZE** SITE ADDRESS: 1103 SUFFOLK ST KILL DEVIL HILLS

ELECTRICAL ISSUED: 08/28/2024

EXPIRES: 02/24/2025

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	500.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	Х	
BASE FLOOD ELEVATION	8.00	
OCCUPANCY TYPE	One & Two Family Dwelling	

Final

REQUIRED INSPECTIONS

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: Date: J-J-J-

Contractor or Authorized Agent:



Town of Kill Devil Hills

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

Planning and Inspection Department

DW2024-010

PROJECT NAME: Styons Surveying Concrete Parking Area SITE ADDRESS: 2700 CROATAN HWY N KILL DEVIL HILLS DRIVEWAY ISSUED: 08/27/2024

135UED: 08/2/12024

EXPIRES: 02/23/2025

APPLICANT:	HARRIS STYONS, LL Harris Styons, LLC 2700 N Croatan Hwy KILL DEVIL HILLS, NO			OWNER:	HARRIS STY Harris Styons 2700 N Croat KILL DEVIL H	, LLC	8
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	, XX 00000			-icense: Unlic Expires: 12/3	
PARCEL:							
PIN:	988517029079			Parcel Number:	0030020	000	
Address:	2700 CROATAN	HWY N KILL	DEVIL HILLS	S			
				Zoni	ing:		
Addition:	VIRGINIA DARI	E SHORES		Bloc	:k: 19	Lot(s):	38-40 PT 37 & 2 LOT
Legal Desc	cription:						
FEES:		Paid	Due				
Driveway Permi	t Fee	\$50.00	\$0.00				
	Totals :	\$50.00	\$0.00				

PROJECT DESCRIPTION: add 25'x13' concrete parking area adjacent to office building

PAID

AUG 28 2024

TOWN OF KILL DEVIL HILLS

DW2024-010

PROJECT NAME: Styons Surveying Concrete Parking Area **SITE ADDRESS:** 2700 CROATAN HWY N KILL DEVIL HILLS

EXPIRES: 02/23/2025

DETAILS Permit Value Name CAMA PERMIT Ν CAMA EXEMPTION Ν ZONING DISTRICT С PURPOSE Commercial Accessory FRONT YARD SETBACK 30 SIDE YARD SETBACK 10 FLOOD ZONE Х **FINAL ELEVATION** Ν CERTIFICATE CONSTRUCTION COST 2100.00 45.20 LOT COVERAGE SURVEYOR NAME AND Doug Styons NUMBER

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.

- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Concrete pavement shall be flush with existing ramp.

I nereby certify that I have read and examined thi All provisions of Laws and Ordinances governing specified herein or not. The granting of a permit	g this ty does not	be of work will be co presume to give a	omplied uthority	with whether to violate or cancel
the provisions of any other state/local law regula	ting con	struction or the per	Tormanc	e of construction.
Issued By:				
Contractor or Authorized Agent	H.	Atyes.	Date: _	8-28-24

NDEVI Birthplac Zogrth CA	ROLINP	K Phone: 25	PO BO ill Devil Hills 2-449-5318	I Devil Hi X 1719 5, NC 27948 Fax: 252-441	-4102		PAID ; 2 8 2024
	7 IE: 900 KDH LLC 3: 900 Croatan HW	Y S. KILL DEVI	L HILLS			ISSUE	TOWN OF L DEVIL SIGN 2D: 08/16/2024 2ES: 02/12/2025
APPLICANT:	CARDINAL SIGNS 2629 Dean Drive VIRGINIA BEACH, V. 757-486-7658	A 23452		OWNER:	Day, Michael 132 Freedom Powels Point,		
CONTRACTOR:		CARDINAL 2629 Dean VIRGINIA 757-486-76	Drive BEACH, VA 2	3452		License: LEG Expires: 12/3	ACY UNKNOWN 1/2024
PARCEL:							
PIN:	988308883029			Parcel Number:	0043490	003	
Address:	900 Croatan H	WY S. KILL DE	VIL HILLS				
				Zon	ing:		
Addition:	KILL DEVIL HI	LS REALTY CO	ORP	Bloc	: 10	Lot(s):	9, 10 & PT 1
Legal Desci	iption:						
FEES:		Paid	Due				
Sign Permit Fee		\$500.00	\$0.00				
	Totals :	\$500.00	\$0.00				

PROJECT DESCRIPTION: Signs on the building and free-standing sign

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*

SG2024-017 PROJECT NAME: 900 KDH LLC SITE ADDRESS: 900 Croatan HWY S. KILL DEVIL HILLS

SIGN ISSUED: 08/16/2024

EXPIRES: 02/12/2025

	DETAILS
Permit	
Name	Value
# OF SIGNS	5
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	64.00
SIGN - WALL PERMITTED (SQFT)	210.00
SIGN- WALL PROPOSED (SC FT)	99.06
ZONING DISTRICT	С
PURPOSE	Commercial Accessory
CONSTRUCTION COST	15000.00
FLOOD ZONE	х

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

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

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

* Zoning Final Inspection is required.

SG2024-017 PROJECT NAME: 900 KDH LLC SITE ADDRESS: 900 Croatan HWY S. KILL DEVIL HILLS

SIGN ISSUED: 08/16/2024 EXPIRES: 02/12/2025

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: $C = \frac{(-f_{-2})^{f_{-2}}}{f_{-2}}$



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

MC2024-259 PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 209 BURNS DR KILL DEVIL HILLS

MECHANICAL ISSUED: 08/27/2024

EXPIRES: 02/23/2025

APPLICANT:	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008			OWNER:	NEWBERG, NATHAN & MARJORIE 209 BURNS DR KILL DEVIL HILLS, NC 27948		
MECHANICAL H2 AND H3:		R A HOY PO Box 26 Kitty Hawk, 252-261-20	NC 27949		License: 35329 Expires: 12/31/2024		
PARCEL:							
PIN:	98831694755	7		Parcel Number:	00839200	00	
Address:	209 BURNS D	R KILL DEVIL H	HILLS				
				Zonir	ng:		
Addition:	OCEAN ACRE	OCEAN ACRES TRACT 3 SEC 1		Block	к: В	Lot(s):	9
Legal Des	cription:						
FEES:		Paid	Due				
lechanical Permit Fee		\$150.00	\$0.00				
and the rest of the constraints and the second s	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC CHANGEOUT

online permit

MC2024-259

PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 209 BURNS DR KILL DEVIL HILLS MECHANICAL ISSUED: 08/27/2024

EXPIRES: 02/23/2025

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	10690.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	Х	
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.
Marty Shaw
Issued By:

Contractor or Authorized Agent: Brian Lancaster

Date: 08 / 27 / 2024

Birthplace of Aviation
ATH CAROL

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

Planning and Inspection Department

MC2024-258

PROJECT NAME: Kimball HVAC SITE ADDRESS: 100 AVALON DR W KILL DEVIL HILLS MECHANICAL ISSUED: 08/26/2024

EXPIRES: 02/22/2025

APPLICANT:	RICHARD KIMBALL 3902 Deep Run Dr. Chesapeake, VA 23321			OWNER: RICHARD KIMBALL 3902 Deep Run Dr. Chesapeake, VA 23321			
MECHANICAL,	H-3, I:	8788 Cara	DLERS OBX atoke Hwy , NC 27941 1945			License: 23577 Expires: 12/31/2024	
PARCEL:							
PIN:	988517108643	3		Parcel Number:	001727	2000	
Address:	100 AVALON	DR W KILL DE	VIL HILLS		•		
				Zonin	g:		
Addition:	AVALON BEA	СН		Block	: 0	Lot(s): 85	
Legal Des	cription:						
FEES:		Paid	Due				
Mechanical Per	rmit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Install mini split system

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MC2024-258 PROJECT NAME: Kimball HVAC SITE ADDRESS: 100 AVALON DR W KILL DEVIL HILLS

MECHANICAL ISSUED: 08/26/2024

EXPIRES: 02/22/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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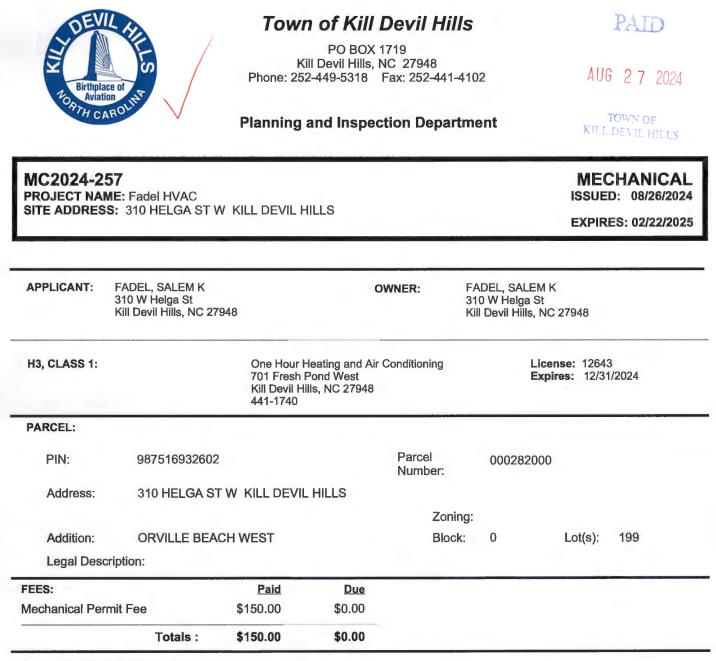
CONDITIONS

* 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.

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.
Linda Burgess
Issued By:

Contractor or Authorized Agent: _____Charles Thuman

____ Date: 08 / 27 / 2024



PROJECT DESCRIPTION: C/O 2 Ton HVAC system

MC2024-257 PROJECT NAME: Fadel HVAC SITE ADDRESS: 310 HELGA ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 08/26/2024

EXPIRES: 02/22/2025

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	8928.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	Х	
NATURAL GAS SIGNOFF	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

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.

I hereby certify that I have read and	examined this application and kno	ow the same to be true and correct.
All provisions of Laws and Ordinanc	es governing this type of work wi	ill 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 loc		
Issued By:		
	T- Pelo	
	BEENER	-1 £22211
Contractor or Authorized Agent:	0.27-24	Date:
	1	

SY DEVIL	FILL	Town of Kill Devil Hills PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102					PAID			
Birthplace Aviation	N. N.	Phone: 252	2-449-5318	Fax: 252-4	41-4102	2	AUG	2 7 2024		
ATH CAP		Planning and Inspection Department				ent	TOWN OF KILL DEVIL HILLS			
ZP2024-067 PROJECT NAM SITE ADDRESS	E: WEBER FENCE 109 GREENVILLE	ST KILL DEV	IL HILLS				ISSUE	G PERMIT D: 08/27/2024 ES: 02/23/2025		
	Amy Weber 1419 Chesapeake Ave MIDDLE RIVER, MD 2 410-627-8151		(OWNER:	141 MI	ny Weber 19 Chesapeak DDLE RIVER, D-627-8151	e Ave MD 21220			
UNLICENSED - F	REMODELING:	ALL WASH 1188 HARE kitty hawk, 252-267-21	BORVIEW DR nc 27949	a da ya usu wa u ka	a Cita e a verse regeleration		ense: XXXX ires:	XX		
PARCEL:										
PIN:	988518206026			Parcel Number	:	001863000				
Address:	109 GREENVILL	.E ST KILL DE	EVIL HILLS							
				Z	oning:					
Addition:	AVALON BEAC	ANNEX 1		В	lock:	0	Lot(s):	417		
Legal Descr	iption:									
FEES:		Paid	Due							
Fence		\$100.00	\$0.00							
	Totals :	\$100.00	\$0.00							

PROJECT DESCRIPTION: EXTEND FENCE 5 FOOT TO THE REAR PROPERTY LINE

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ZP2024-067 PROJECT NAME: WEBER FENCE SITE ADDRESS: 109 GREENVILLE ST KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/27/2024

EXPIRES: 02/23/2025

DETAILS

Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
PURPOSE	Residential Accessory
CONSTRUCTION COST	1621.77
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Final

Dormit

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Stringline

CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true	
All provisions of Laws and Ordinances governing this type of work will be complied with v	
specified herein or not. The granting of a permit does not presume to give authority to vio	
the provisions of any other state/local law regulating construction or the performance of o	onstruction.
() MALE	
Issued By:	,
	1
Contractor or Authorized Agent: Dulandarian Date:	7/2024
Contractor or Authonized Agent Date	/- /



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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

BP2024-177 PROJECT NAME: Silver Shoe Fence SITE ADDRESS: 301 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING ISSUED: 08/27/2024

EXPIRES: 02/23/2025

	Totals :	\$100.00	\$0.00					
ence		\$100.00	\$0.00					
EES:		Paid	Due					
Legal Desc	ription:							
				DIOC	R. 20	LU((3).	0	
Addition:	KITTY HAWK	SHORES - REV	ISED	Zoni Bloc		Lot(s):	8	
Address:	301 MEMORIA	L BLVD N KILL	DEVIL HILLS					
				Number:				
PARCEL: PIN:	988420717287			Parcel	003758	8000		
BUILDING LIMIT	TED:					License: 9926 Expires: 12/3	-	
CONTRACTOR:	HOLLAND FENCE C 131 COUNTRY CLU Edenton, NC 27932 252-862-6399							
	121 Tulip Tree Dr Camden, NC 27921 252-599-7762				121 Tulip Tree Dr Camden, NC 27921 252-599-7762			
APPLICANT:	Silver Shoe Ranch, L	LC	C	WNER:	Silver Shoe I	Ranch, LLC		

PROJECT DESCRIPTION: Replace existing pool fence.

Mr el 20/24 ontre

BP2024-177 PROJECT NAME: Silver Shoe Fence SITE ADDRESS: 301 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING ISSUED: 08/27/2024

EXPIRES: 02/23/2025

DETAILS Permit Name Value CAMA PERMIT Ν CAMA EXEMPTION Ν ZONING DISTRICT RL PURPOSE Residential Repair/Remodel FLOOD ZONE Х FINAL ELEVATION Ν CERTIFICATE CONSTRUCTION COST 15830.77 V CONSTRUCTION TYPE OCCUPANCY TYPE One & Two Family Dwelling

REQUIRED INSPECTIONS

Stringline

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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.

* Pool barrier shall conform to Appendix V of the 2018 NCRBC.

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: _	Ju He He	Date: 08 / 27 / 2024



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

Planning and Inspection Department

TOWN OF KILL DEVIL HILLS

OP2024-077

PROJECT NAME: SAGA New 3 Bedroom SFD SITE ADDRESS: 508 ANIKA WAY KILL DEVIL HILLS

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PARENT PERMIT #: BJ2024-033

APPLICANT:	SAGA CONSTRUCTI 1314 S Croatan Hwy, Kill Devil Hills, NC 279 252-441-9003	Suite 301	01	WNER:	Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003			
GENERAL - UNLIMITED:		1314 S Cro PO Box 90	ISTRUCTION atan Hwy, Suite Ils, NC 27948 03	301	License: 62306 Expires: 12/31/2024			
PARCEL:								
PIN:	988414330112			Parcel Number:				
Address:	508 ANIKA WA	Y KILL DEVIL	HILLS					
				Zoni	ing:			
Addition:				Bloc	k: Lot(s):			
Legal Desc	cription: Lot 38, Wa	ter Oak						
FEES:		Paid	Due					
Certificate of O Residential (mi		\$50.00	\$0.00					
Residential Tra	sh Can	\$106.75	\$0.00					
1966, 011 TOL (1996) 47 - TANYA 1968, 535, 37, 475, 394	Totals :	\$156.75	\$0.00					

PROJECT DESCRIPTION: new 3 bedroom single family dwelling



AUG 26 2024

KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/23/2024

EXPIRES:

OP2024-077

PROJECT NAME: SAGA New 3 Bedroom SFD SITE ADDRESS: 508 ANIKA WAY KILL DEVIL HILLS

• •

OCCUPANCY ISSUED: 08/23/2024

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

CONDITIONS

I hereby certify that I have read and examined this application and know the	
All provisions of Laws and Ordinances governing this type of work will be c	omplied with whether
specified herein or not. The granting of a permit does not presume to give a	uthority to violate or cancel
the provisions of any other state/local law regulating construction or the per	rformance of construction.
Issued By:	
	-
Contractor or Authorized Agent: Ghacefor Mulek	_ Date: 8-26-24



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

Planning and Inspection Department

BP2024-176

PROJECT NAME: Davis Stair and Deck Replacement **SITE ADDRESS:** 101 PORTHOLE CT KILL DEVIL HILLS

BUILDING ISSUED: 08/26/2024

EXPIRES: 02/22/2025

APPLICANT:	DAVIS, STEPHEN 904 FERRYMAN QU/ CHESAPEAKE, VA 2 757-615-4001			OWNER:		MAN QUAY KE, VA 23323	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	1, XX 00000			License: Unlice Expires: 12/31	
PARCEL:							
PIN:	988415540499			Parcel Number:	00353	7000	
Address:	101 PORTHOL	E CT KILL DEV	/IL HILLS				
				Zoni	ing:		
Addition:	LANDING SEC	TION 1, THE		Bloc	:k: 0	Lot(s):	30
Legal Desc	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
NUMBER OF NUMBER OF STREET, ST	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: REMOVE DECK AND RECONFIGURE STAIR AND LANDING TO FRONT YARD

PAID

AUG 26 2024

TOWN OF KILL DEVIL HILLS

BP2024-176

PROJECT NAME: Davis Stair and Deck Replacement **SITE ADDRESS:** 101 PORTHOLE CT KILL DEVIL HILLS

BUILDING ISSUED: 08/26/2024

EXPIRES: 02/22/2025

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
STREET SIDE SETBACK	15	
FLOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	14850.00	
LOT COVERAGE	28.00	
CONSTRUCTION TYPE	V	
SURVEYOR NAME AND NUMBER	Bill Jones	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning	Final
Final	

Slab/Foundation/Piling

CONDITIONS

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

Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
Zoning Final Inspection is required.

BP2024-176

PROJECT NAME: Davis Stair and Deck Replacement **SITE ADDRESS:** 101 PORTHOLE CT KILL DEVIL HILLS BUILDING ISSUED: 08/26/2024

EXPIRES: 02/22/2025

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: 2

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DEV	LAN	Tow	n of Kil	l Devil Hil	ls		РАП
Birthpla Aviati				< 1719 , NC 27948 Fax: 252-441∘	4102	,	AUG 26
ATH CI		Planning	and Insp	ection Depar	tment	K	TOWN OF ILL DEVIL H
BP2024-17 PROJECT NAI	ME: Terry Tatum					ISSUE	BUILDII
SITE ADDRES	S: 3151 BAY DR KI	LL DEVIL HILL	S			EXPIR	RES: 02/19/2
APPLICANT:	EVANS HOMES LLC. 5121 WINDSOR PL kitty hawk, nc 27949 252-207-8127			OWNER:	TERRY TAT 3151 Bay Dr K D H, NC 2		
BUILDING LIM	TED:	EVANS H(5121 WIN kitty hawk, 252-207-8	nc 27949			License: 4904 Expires: 12/3	-
PARCEL:	·····*						
PIN:	987516833175			Parcel Number:	000308	000	
Address:	3151 BAY DR	KILL DEVIL HI	LLS				
۸ dditione .				Zoni	•		000
Addition: Legal Desc	ORVILLE BEAG			Bloc	k: 0	Lot(s):	229
-	-	Paid	Due				
FEES:	Fee - Minimum	\$150.00	\$0.00				
FEES: Building Permit Fee							

Construct new stairs and landing.

BP2024-172 PROJECT NAME: Terry Tatum SITE ADDRESS: 3151 BAY DR KILL DEVIL HILLS

BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	16400.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Sadler
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.
* 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.

BP2024-172 PROJECT NAME: Terry Tatum SITE ADDRESS: 3151 BAY DR KILL DEVIL HILLS

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BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

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:
Contractor of Authorized Agent. 900 - 10 Date. 000 - 17



PROJECT NAME: HALL DECK AND DOOR

SITE ADDRESS: 624 OCEAN ACRES DR W KILL DEVIL HILLS

BJ2024-148

Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG 26 2024

TOWN OF KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/26/2024

EXPIRES: 02/22/2025

APPLICANT:	HALL, MATTHEW 624 W OCEAN ACRES DR Kill Devil Hills, NC 27948 252-489-8676		(OWNER:	HALL, MATTHEW 624 W OCEAN ACRES DR Kill Devil Hills, NC 27948 252-489-8676				
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	N, XX 00000			License: Expires:			
PARCEL:									
PIN:	988319712961			Parcel Number:	0050	000880			
Address:	624 OCEAN A	CRES DR W KI	LL DEVIL HI	LS					
				Zoni	ng:				
Addition:				Bloc	k: 0	Lo	t(s):	31	
Legal Des	cription:								
FEES:		Paid	Due						
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: CONSTRUCT 24X17' FRONT DECK, 4'X8' LANDING OVER SETBACK WITH STAIR, REPLACE ENTRY DOOR WITH 6' SLIDER

BJ2024-148 PROJECT NAME: HALL DECK AND DOOR SITE ADDRESS: 624 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/26/2024

EXPIRES: 02/22/2025

Permit	DET
Name	Value
ZONING DISTRICT	RĹ
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	6300.00
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
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.
* 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.

DETAILS

BJ2024-148 PROJECT NAME: HALL DECK AND DOOR SITE ADDRESS: 624 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING JOINT ISSUED: 08/26/2024

EXPIRES: 02/22/2025

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: Date: Aug 26, 2024 Contractor or Authorized Agent:



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

Planning and Inspection Department

OP2024-076

PROJECT NAME: Phillip Harrington Enterprises, LLC **SITE ADDRESS:** 1006 ALEXANDER LN KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/22/2024

EXPIRES:

PARENT PERMIT #: BJ2023-290

APPLICANT:	RELIANT CONSTR 4275 Worthington Li kitty hawk, nc 27949 252-202-7007	ane	0	WNER:	PO Box 22	ington Enterprises 32 H CITY, NC 27909			
GENERAL, UNLIMITED:		4275 Worth kitty hawk,	RELIANT CONSTRUCTION LLC 4275 Worthington Lane kitty hawk, nc 27949 252-202-7007			License: 62339 Expires: 12/31/2024			
GENERAL, UNLIMITED:		4275 Worth kitty hawk,	RELIANT CONSTRUCTION LLC 4275 Worthington Lane kitty hawk, nc 27949 252-202-7007			License: 62339 Expires: 12/31/2024			
PARCEL:	· <u>·</u> ··································								
PIN:	98840907740	8		Parcel Number:	00229	94076			
Address:	1006 ALEXAN	NDER LN KILL D	EVIL HILLS						
				Zor	ling:				
Addition:	WRIGHT'S SI	HORES SEC 2		Blo	ck: 0	Lot(s):	76		
Legal Des	cription:								
FEES:		Paid	Due						
Certificate of O Residential (mi		\$50.00	\$0.00						
Residential Tra	sh Can	\$106.75	\$0.00						
ранаруда булаг бот талула таланта адалтара	Totals :	\$156.75	\$0.00						

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling



OP2024-076

PROJECT NAME: Phillip Harrington Enterprises, LLC **SITE ADDRESS:** 1006 ALEXANDER LN KILL DEVIL HILLS OCCUPANCY ISSUED: 08/22/2024

EXPIRES:

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

CONDITIONS



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

Planning and Inspection Department

OP2024-075

PROJECT NAME: Lane Investments Properties, LLC SITE ADDRESS: 203 OCEAN ACRES DR W KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/22/2024

PARENT PERMIT #: BJ2023-285

EXPIRES:

APPLICANT:	EAST COAST CONSTRU PO Box 329 KILL DEVIL HILLS, NC 2 252-202-1600		OWNER:	Lane Investment PO Box 329 Kill Devil Hills, NG 252-441-9442		LC	
BUILDING UNLIMITED: EAST COAST C PO Box 329 KILL DEVIL HILL 252-202-1600			TRUCTION GROUP IC 27948		License: 34495 Expires: 12/31/2024		
PC KII		EAST COAST CONS PO Box 329 KILL DEVIL HILLS, N 252-202-1600			ense: 34495 ires: 12/31	-	
PARCEL:							
PIN:	989313040421		Parcel Number:	008411000			
Address:	203 OCEAN ACR	ES DR W KILL DEVIL	HILLS				
			Zonir	ng:			
Addition:	OCEAN ACRES T	RACT 3 SEC 1	Block	c: C	Lot(s):	3	
Legal Desc	cription:						
EES:		Paid Du	16				

FEES:PaidDueCertificate of Occupancy Fee-
Residential (min)\$50.00\$0.00Residential Trash Can\$106.75\$0.00Totals :\$156.75\$0.00\$100

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Printed by : CTHUMAN on: 08/22/2024 09:20 AM

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AUG 2 3 - AUG 2 3 2024

P.B.

OP2024-075

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PROJECT NAME: Lane Investments Properties, LLC **SITE ADDRESS:** 203 OCEAN ACRES DR W KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/22/2024

EXPIRES:

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

CONDITIONS

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



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

Planning and Inspection Department

SG2024-018

PROJECT NAME: Ocean Adventurer's Play Cafe SITE ADDRESS: 1900 Croatan Hwy S. KILL DEVIL HILLS

SIGN ISSUED: 08/20/2024

EXPIRES: 02/16/2025

	APPLICANT:	Hughes, Misty PO Box 3212 kitty hawk, nc 27949 252-207-9108		ow	NER:	Golasa Ho PO Box 12 kitty hawk, 252-480-00	nc 27949		
	CONTRACTOR:	ADLIGHT SIGNS 600 West Boundry Street Kill Devil Hills, NC 27948 252-449-2800		COM	ITRACTOR:		Boundry Str lills, NC 279		
5 S	CONTRACTOR:		ADLIGHT SIGN 600 West Bound Kill Devil Hills, N 252-449-2800	dry Street			License: Expires:		ACY UNKNOWN 1/2030
	PARCEL:								
	PIN:	989313035962			Parcel Number:	0083	23042		
	Address:	1900 Croatan Hwy	S. KILL DEVIL	HILLS					
					Zonin	g:			
	Addition:	LAKE DRIVE DEVI	ELOPMENT		Block	: 0	Lo	ot(s):	44 46 48 50 PT 42
	Legal Descr	iption:							
	FEES:		Pald	Due					
	Sign Permit Fee	9	200.00	\$0.00					
		Totals :	200.00	\$0.00					

PROJECT DESCRIPTION: Sign on the building and add sign to existing free-standing sign

PAID

AUG 2 3 2024

TOWN OF KILL DEVIL HILLS

SG2024-018

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PROJECT NAME: Ocean Adventurer's Play Cafe SITE ADDRESS: 1900 Croatan Hwy S. KILL DEVIL HILLS SIGN ISSUED: 08/20/2024

EXPIRES: 02/16/2025

DETAILS

Permit	
Name	Value
# OF SIGNS	2
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	21.23
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	7.02
ZONING DISTRICT	С
PURPOSE	Commercial Accessory
CONSTRUCTION COST	2080.05
FLOOD ZONE	Х

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

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

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

* Zoning Final Inspection is required.

SG2024-018

PROJECT NAME: Ocean Adventurer's Play Cafe **SITE ADDRESS:** 1900 Croatan Hwy S. KILL DEVIL HILLS SIGN ISSUED: 08/20/2024

EXPIRES: 02/16/2025

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: Manuell Lind Date: 8-23-2024



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

Planning and Inspection Department

BP2024-174 PROJECT NAME: Charles E. Cahoon SITE ADDRESS: 1916 GEORGIA LN KILL DEVIL HILLS

BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

	Totals :	\$150.00	\$0.00					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
FEES:		Paid	Due					
Legal Desc	cription:							
Addition:	WRIGHT'S SH	ORES		Bloc	ck: 0	Lot(s):	112	
				Zon	ing:			
Address:	1916 GEORG	IA LN KILL DEV	IL HILLS					
PIN:	98840518105	6		Parcel Number:	00220	6000		
PARCEL:								
CONTRACTOR	:	SAME AS UNKNOWN UNKNOWN				License: Sam Expires: 12/3		
	LICANT: CAHOON, EARL B 1037 INDIAN CREEK ROAD CHESAPEAKE, VA 23322			OWNER:		N CREEK ROAD KE, VA 23322)	

PROJECT DESCRIPTION: Replace steps within existing footprint

PAID

AUG 2 3 2024

TOWN OF KILL DEVIL HILLS

BP2024-174 PROJECT NAME: Charles E. Cahoon

.*

SITE ADDRESS: 1916 GEORGIA LN KILL DEVIL HILLS

BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

DETAILS Permit Name Value CAMA PERMIT Ν CAMA EXEMPTION Ν ZONING DISTRICT RL PURPOSE Residential Repair/Remodel FLOOD ZONE Х FINAL ELEVATION N CERTIFICATE CONSTRUCTION COST 1000.00 CONSTRUCTION TYPE V One & Two Family OCCUPANCY TYPE Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By:	·
Contractor or Authorized Agent: Charlen & Co	Loon Date: 8-23-24



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

Planning and Inspection Department

BP2024-173 PROJECT NAME: SAND LIFE SIDING AND ROOD OVERHANG **SITE ADDRESS:** 3316 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

APPLICANT:	SAND LIFE LLC 318 CAMERON ST. Kill Devil Hills, NC 279 443-623-5982	948	. 1997 - 1997 - 1994 - 1975 - 1994 - 1997	OWNER:	318 Kill	ND LIFE LLC 3 CAMERON S Devil Hills, NC 3-623-5982		
UNLICENSED -	REMODELING:		WARD grass Circle , NC 27949				ise: XXXX es: 01/01	
PARCEL:								
PIN:	988509053291			Parcel Number:		000061000		
Address:	3316 VA DARE	TRL N KILL D	EVIL HILLS					
				Zo	ning:			
Addition:	ORVILLE BEAG	CH BLK 2		Blo	ock:	2	Lot(s):	3-4
Legal Desc	ription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
ud brenderen ander af de la surveille du parter e	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: REPLACE SIDING ON REAR WALL AND 2' ROOD OVERHANG

PAID

AUG 2 3 2024

TOWN OF KILL DEVIL HILLS

BP2024-173 PROJECT NAME: SAND LIFE SIDING AND ROOD OVERHANG SITE ADDRESS: 3316 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

	DETAILS
Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Ν
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

Framing

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.

* Roof overhang not to extend beyond the existing roof line.

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

BP2024-173 PROJECT NAME: SAND LIFE SIDING AND ROOD OVERHANG **SITE ADDRESS:** 3316 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 08/23/2024

EXPIRES: 02/19/2025

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:/

Birthplace of Aviation	
Aviation OLINP	\vee

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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

BP2024-171 PROJECT NAME: Caren Perkinson Harvey SITE ADDRESS: 221 EDEN ST ST W KILL DEVIL HILLS

BUILDING ISSUED: 08/22/2024

EXPIRES: 02/18/2025

APPLICANT:	Andrew Hines 2021 Bay Drive Kill Devil Hills, NC 27	7948	0	WNER:	PERKINSON, 1913 COLUMI VIRGINIA BEA	BIA ROAD	4
BUILDER:	and defendence of the second secon	Andrew HinesLicense:1234562021 Bay DriveExpires:05/25/2029Kill Devil Hills, NC 279485/25/2029					
PARCEL:			<u> </u>		<u> </u>		
PIN:	988517111140)		Parcel Number:	0004600	009	
Address:	221 EDEN ST	ST W KILL DE	/IL HILLS				
				Zoni	ng:		
Addition:	VIRGINIA DAF	RE SHORES		Bloc	k: 26	Lot(s):	9-10
Legal Desc	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
ne der off betyde i for onder en de bennen oordelaar konsente o	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace deck, stairs, railings, pilings within existing footprint

PAID

AUG 2 3 2024

TOWN OF KILL DEVIL HILLS

BP2024-171

PROJECT NAME: Caren Perkinson Harvey **SITE ADDRESS:** 221 EDEN ST ST W KILL DEVIL HILLS

5

BUILDING ISSUED: 08/22/2024

EXPIRES: 02/18/2025

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	24900.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

DETAILO

Zoning	Final
g	1 11 1001

Final

CONDITIONS

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Issued By:	
Contractor or Authorized Agent: _	ANDIN CAMP Date: 8-23-24



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

Planning and Inspection Department

PAID

AUG 22 2024

TOWN OF KILL DEVIL HILLS

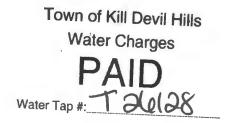
BJ2024-131 PROJECT NAME: Gomez 5 Bedroom House SITE ADDRESS: 1514 Ketch Ln Kill Devil Hills

BUILDING JOINT ISSUED: 08/22/2024

EXPIRES: 02/18/2025

	NT: GOMEZ, ELMER 5122 Mashie Ct nags head, nc 27959			OWNER: GOMEZ, ELMER 5122 Mashie Ct nags head, nc 27959			
GENERAL:					License: Unlicensed Expires: 12/31/2024		
PARCEL:							
PIN:	98441323088	8		Parcel Number:			
Address:	1514 Ketch L	n Kill Devil Hills					
				Zoni	ing:		
Addition:				Bloc	k:	Lot(s):	
Legal Desc	cription: Lot 64R,	First Flight Village,	Phase A,	Sec 3			
		Paid	Due	BUILDING AR	EA:		
FEES:	Land Disturbing		\$0.00	Covered Porches/Decks		145 SQFT	
	1			Resdiential Unheated (.40)			
		\$1,984.80	\$0.00	Resdiential U	nheated (.40)	357 Sq. Ft	
Land Disturbing		\$1,984.80 \$50.00	\$0.00 \$0.00			357 Sq. Ft 1 EA	
Land Disturbing Res. Building P	ermit Fee			# of Temporal			
Land Disturbing Res. Building P T-Pole	ermit Fee	\$50.00	\$0.00		ry Poles	1 EA	

PROJECT DESCRIPTION: new 5 bedroom single family dwelling



BJ2024-131

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PROJECT NAME: Gomez 5 Bedroom House **SITE ADDRESS:** 1514 Ketch Ln Kill Devil Hills BUILDING JOINT ISSUED: 08/22/2024

EXPIRES: 02/18/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	S8-25885
# PARKING SPACES/BEDROOM	5
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	7.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	350000.00
LOT COVERAGE	32.80
LIVING SPACE (SQFT)	2456
COVERED PORCHES/DECKS (SQFT)	145
GARAGE (SQFT)	357
OPEN DECK (SQFT)	85
TOTAL SQUARE FOOTAGE	3043
SURVEYOR NAME AND NUMBER	Carlos Gomez
ENGINEER AND LICENSE NUMBER	Carlos Gomez 14071
CULVERT	Ν
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

DETAILS

BJ2024-131 PROJECT NAME: Gomez 5 Bedroom House SITE ADDRESS: 1514 Ketch Ln Kill Devil Hills BUILDING JOINT ISSUED: 08/22/2024

EXPIRES: 02/18/2025

REQUIRED INSPECTIONS

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

CONDITIONS

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

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Foundation survey will be required prior to rough-in inspection.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

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

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

* 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.

* Owner required by law to occupy the building for twelve months after completion, during which time it may not be offered for rent, lease, or sale per G.S. 87-14(a)(1).

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.

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Date:

Issued By

Contractor or Authorized Agent:



Town of Kill Devil Hills

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

Planning and Inspection Department

PL2024-009 PROJECT NAME: WDT Plumbing SITE ADDRESS: 206 SUFFOLK ST KILL DEVIL HILLS

PLUMBING ISSUED: 08/21/2024

EXPIRES: 02/17/2025

APPLICANT:	WDT Properties LLC 116 Kettle Bottom Dr COLONIAL BEACH, 804-761-0663	· · · · · · · · · · · · · · · · · · ·		OWNER:	WDT Proper 116 Kettle B COLONIAL 804-761-066	ottom Dr BEACH, VA 22443	
PLUMBING:				2.		License: 19207 Expires: 12/31/2024	
PARCEL:							
PIN:	988517106211			Parcel Number:	001242	2000	
Address:	206 SUFFOLK	ST KILL DEVIL	HILLS				
				Zon	ing:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	ck: 0	Lot(s): 789	
Legal Desc	cription:						
FEES:		Paid	Due				
Plumbing Perm	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace water service line

PAID

AUG 21 2024

TOWN OF KILL DEVIL HILLS

PL2024-009 PROJECT NAME: WDT Plumbing SITE ADDRESS: 206 SUFFOLK ST KILL DEVIL HILLS

PLUMBING ISSUED: 08/21/2024

EXPIRES: 02/17/2025

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	1868.13	
CONSTRUCTION TYPE	V	
FLOOD ZONE	Х	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

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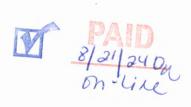
CONDITIONS

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Issued By:				
Contractor or Authorized Agent: Date: 8-21-24				

Distribution Town of Kill Devil Hills Birthplace of Aviation PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Phone: 252-449-5318 Fax; 252-441-4102 Planning and Inspection Department						
	56 ME: Joshua Evans SS: 1811 UPPER DU	ine RD Kill De	EVIL HILLS			ZONING PERMIT ISSUED: 08/20/2024 EXPIRES: 02/16/2025
APPLICANT:	OUTER BANKS DEC PO BOX 1734 KILL DEVIL HILLS, № 252-261-9888		o c	WNER:	Evans, Josh 1014 Hanov NORFOLK,	ver Ave
GENERAL, UN	LICENSED:	P.O. Box 11	lls, NC 27948	ID FENCE		License: n/a Expires: 12/31/2055
PARCEL:						
PIN:	988409163902	2		Parcel Number:	00238	4000
Address:	1811 UPPER	DUNE RD KILL	DEVIL HILLS			
				Zoni	ng:	
Addition:	SEA HOLLY F	RIDGE		Bloc	k: D	Lot(s): 4
Legal Des	cription:					
FEES:		Paid	Due			
Fence		\$100.00	\$0.00			
ABALISTING IN BALISTICS IN PARTICIPATION OF A DATA DATA DATA DATA DATA DATA DATA D	Totals :	\$100.00	\$0.00			

PROJECT DESCRIPTION: Fence



ZP2024-066

PROJECT NAME: Joshua Evans SITE ADDRESS: 1811 UPPER DUNE RD KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/20/2024

EXPIRES: 02/16/2025

Permit Name Value ZONING DISTRICT RL CAMA PERMIT Ν CAMA EXEMPTION Ν FLOOD ZONE Х PURPOSE Residential Accessory CONSTRUCTION COST 9515.00 CULVERT N **DRIVEWAY INVERT 2** Ν

REQUIRED INSPECTIONS

Stringline
Final

Zoning Final

CONDITIONS

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

* Call for a stringline inspection before installing the fence.

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

Issued By: Charles Thuman

Contractor or Authorized Agent:

DETAILS

od

_____ Date: 08 / 21 / 2024

2 DEV	L HILLS	Ki	PO BOX	NC 27948		PAID
NoRTH C	ce of S	Phone: 25	2-449-5318	Fax: 252-441-	4102	AUG 21 2024
ATH CI	ROL	Planning	and Inspe	ction Depar	tment	TOWN OF KILL DEVIL HILLS
	ME: Sharber Piling F					BUILDING ISSUED: 08/15/2024
SITE ADDRES	S: 3113 BAY DR K					EXPIRES: 02/11/2025
APPLICANT:	SHARBER, CHARLE 3113 BAY DRIVE KILL DEVIL HILLS, I			OWNER:	SHARBER, CHA 3113 BAY DRIVI KILL DEVIL HILL	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	, XX 00000			ense: Unlicensed pires: 12/31/2024
PARCEL:						
PIN:	987520825228	5		Parcel Number:	001014000)
Address:	3113 BAY DR	KILL DEVIL HIL	LS			
				Zoni	ng:	
Addition:	MOOR SHOR	ES		Bloc	k: 0	Lot(s): 66
Legal Desc	cription:					
F EES: Building Permit ⁻ ee	Fee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00			

PROJECT DESCRIPTION: replace 2 existing 6x6 deck pilings with 8x8, no change to footprint

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BP2024-165

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PROJECT NAME: Sharber Piling Replacement SITE ADDRESS: 3113 BAY DR KILL DEVIL HILLS BUILDING ISSUED: 08/15/2024

EXPIRES: 02/11/2025

Permit Name CAMA PERMIT CAMA EXEMPTION ZONING DISTRICT	Value N	
CAMA PERMIT	N	
CAMA EXEMPTION		
	5.1	
	N	
	RL	
PURPOSE	Residential Repair/Remodel	
RONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
STREET SIDE SETBACK	15	
LOOD ZONE	Х	
INAL ELEVATION	Ν	
CONSTRUCTION COST	4000.00	
SURVEYOR NAME AND	Wesley M Meekins	
DCCUPANCY TYPE	One & Two Family Dwelling	

Slab/Foundation/Piling Zoning Final Final

CONDITIONS

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

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

* Pilings require a min. of 8' embedment per Ch46.

BP2024-165 PROJECT NAME: Sharber Piling Replacement SITE ADDRESS: 3113 BAY DR KILL DEVIL HILLS

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BUILDING ISSUED: 08/15/2024

EXPIRES: 02/11/2025

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:	h	
Contractor or Authorized Agent:	Albarbi	Date: 8/21/24

V DEV	FILE		PO BOX		ls	PAID
Birthpla Aviati		Phone: 252		Fax: 252-441		AUG 2 1 2024
	V	Planning	and inspec	ction Depar	tment	TOWN OF
	ME: STALLS HVAC					MECHANICAL ISSUED: 08/19/2024
SITE ADDRES	S: 416 Chowan St W	/ Kill Devil Hills				EXPIRES: 02/15/2025
APPLICANT:	Stalls, Gerald 416 Chowan St. W Kill Devil Hills, NC 279	948		OWNER:	Stalls, Gerald 416 Chowan St. Kill Devil Hills, N	
H3, CLASS 1:	(n. 1. a.), en anvertanten et terranen al de la de	701 Fresh I	leating and Air Pond West ills, NC 27948	Conditioning		:ense: 12643 pires: 12/31/2024
PARCEL:						
PIN:	987520923172			Parcel Number:	00067802	7
Address:	416 Chowan St	W Kill Devil Hi	lls			
Addition:				Zon Bloc	-	Lot(s):
	cription: 416 Chowa	an St W				
FEES: Mechanical Per	mit Fee	<u>Paid</u> \$150.00	<u>Due</u> \$0.00		<u></u>	
ለ. የዚህ አያካል የ ሕዝቶ ለመሰረዋ ልጥጥ የ ለመጥ ለም እና የመምስ ነዋ "እና የእንድ እና ዋል የ ለ የእ	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: HVAC C/O

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EXPIRES: 02/15/2025

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10387.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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the provisions of any other state to	the provisions of any other state for all aw regulating construction or the performance of construction.					
Issued By:						
	The Al	A-7174				
Contractor or Authorized Agent:	VVC	Date: 0.0.19				

TOEVIL A	
Birthplace of Aviation	1

Town of Kill Devil Hills

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

Planning and Inspection Department

PAID

AUG 2 1 2024

TOWN OF KILL DEVIL HILLS

MC2024-253

PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 2019 EDENTON ST ST KILL DEVIL HILLS

1

MECHANICAL ISSUED: 08/20/2024

EXPIRES: 02/16/2025

APPLICANT:	One Hour Heating an 701 Fresh Pond Wes Kill Devil Hills, NC 27 441-1740	t	01		ROSE, VERNON 8 PO BOX 163 ARAPAHOE, NC 2		
H3, CLASS 1:		701 Fresh F	leating and Air C Pond West Ils, NC 27948	Conditioning		ise: 12643 res: 12/31	•
PARCEL:							
PIN:	988405080465	i		Parcel Number:	001279000		
Address:	2019 EDENTO	N ST ST KILLE	EVIL HILLS				
				Zoning	g:		
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Block:	0	Lot(s):	834
Legal Desc	ription:						
FEES:		Paid	Due				
Mechanical Perr	mit Fee	\$150.00	\$0.00				
AND O IS NOTING ANY AREA AND AND A AND ANY ANY A	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC CHANGEOUT

MC2024-253

PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 2019 EDENTON ST ST KILL DEVIL HILLS

MECHANICAL ISSUED: 08/20/2024

EXPIRES: 02/16/2025

Permit Name Value PURPOSE Residential Repair/Remodel 7535.00 CONSTRUCTION COST CONSTRUCTION TYPE V FLOOD ZONE Х NATURAL GAS SIGNOFF N OCCUPANCY TYPE One & Two Family Dwelling

REQUIRED INSPECTIONS

DETAILS

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: The Date: 8-21-24

Y DEV	L HILLS	Ki	PO BOX I Devil Hills, I			PAID
North C	ion N			tion Depar		AUG 2 1 2024 TOWN OF KILL DEVIL HILLS
	54 ME: HVAC CHANGE IS: 1233 WRIGHTS		L DEVIL HILI	_S		MECHANICAL ISSUED: 08/20/2024 EXPIRES: 02/16/2025
APPLICANT:	One Hour Heating ar 701 Fresh Pond Wes Kill Devil Hills, NC 27 441-1740	t	c	OWNER:	5677 Sna	rren & Monica ops Creek RD GLEN, VA 22850 836
H3, CLASS 1:		701 Fresh F	leating and Air Pond West Ils, NC 27948	Conditioning	ninge (som i finnen generalen finnen	License: 12643 Expires: 12/31/2024
PARCEL:	······································					
PIN:	988312968629)		Parcel Number:	0047	27000
Address:	1233 WRIGHT	SVILLE BLVD	KILL DEVIL H		•	
Addition:	KILL DEVIL B	EACH SEC 1 RE	VISED	Zon Bloc	-	Lot(s): 13
Legal Des	cription:					
FEES:		Paid	Due			
Mechanical Per	rmit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: HVAC CHANGEOUT

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MC2024-254

PROJECT NAME: HVAC CHANGEOUT SITE ADDRESS: 1233 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL ISSUED: 08/20/2024

EXPIRES: 02/16/2025

Permit Name Value PURPOSE Residential Repair/Remodel CONSTRUCTION COST 16208.00 CONSTRUCTION TYPE V FLOOD ZONE Х NATURAL GAS SIGNOFF Ν OCCUPANCY TYPE One & Two Family Dwelling

REQUIRED INSPECTIONS

DETAILS

Final

CONDITIONS

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VII

Issued By:

Contractor or Authorized Agent:

Page 2 of 2

Date: 8.21.24

Birthpla Rogrid Car	Ce of Contraction of the Contrac	Ki Phone: 252	PO BOX ill Devil Hills 2-449-5318		1102	PAID AUG 20 2024 TOWN OF KILL DEVIL HILLS
	36 ME: Mason Deck S: 1813 APACHE S	T KILL DEVIL F	HLLS			BUILDING ISSUED: 08/20/2024 EXPIRES: 02/16/2025
APPLICANT:	MASON, JOSEPH R P O BOX 733 KITTY HAWK, NC 27 252-256-2915	949		OWNER:	MASON, JOSE P O BOX 733 KITTY HAWK, 252-256-2915	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	1, XX 00000			cense: Unlicensed cpires: 12/31/2024
PARCEL:						
PIN:	988409175131			Parcel Number:	00241900	00
Address:	1813 APACHE	ST KILL DEVIL	HILLS			
				Zonir	g:	
Addition:	SEA HOLLY R	IDGE		Block	: Е	Lot(s): 5
Legal Desc	cription:					
FEES:		Paid	Due	BUILDING ARE	A:	
Open Deck Fee		\$150.00	\$0.00	Covered Porch	es/Decks	244 SQFT
Covered Porch	Totals :	\$183.00 \$333.00	\$0.00 \$0.00	Open Decks		1 EA

PROJECT DESCRIPTION: rebuild front deck, 8x30.5'

.

BP2024-166 PROJECT NAME: Mason Deck SITE ADDRESS: 1813 APACHE ST KILL DEVIL HILLS

EXPIRES: 02/16/2025

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	S13-27354
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	30000.00
LOT COVERAGE	33.54
SURVEYOR NAME AND NUMBER	Michael Sadler
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

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

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

As ball survey will be required prior to contineate or coordinate or compliance.

BP2024-166 PROJECT NAME: Mason Deck SITE ADDRESS: 1813 APACHE ST KILL DEVIL HILLS BUILDING ISSUED: 08/20/2024 EXPIRES: 02/16/2025

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:

Date: 08/20/2024 Contractor or Authorized Agent: Maper

Birthplace Togrith CAR	ar Internet	Ki Phone: 252	PO BOX II Devil Hills, 2-449-5318		4102		
BP2024-169 PROJECT NAM SITE ADDRESS	9 E: Stair replacements : 509 MUSTIAN S	nt T KILL DEVIL H	ILLS				BUILDING ED: 08/20/2024 RES: 02/16/2025
	KAM-MAK PROPER PO BOX 281 Kill Devil Hillsl, NC 2		(OWNER:	KAM-MAK PF PO BOX 281 Kill Devil Hills	ROPERTIES LI I, NC 27948	_C
BUILDING UNLIN	AITED:	P.O. BOX 3	lls, NC 27948	CTION, INC		License: 8154 Expires: 12/3	
PARCEL:							
PIN:	988308796131			Parcel Number:	029822	071	
Address:	509 MUSTIAN	ST KILL DEVIL	HILLS				
				Zonir	ng:		
Addition:	KITTY HAWK	SHORES - REVI	SED	Block	c: 67	Lot(s):	11&12
Legal Descr	iption:						
F EES: Building Permit F Fee	ee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00				
an a 2 5 5 5 6 9 1 - A 19 1 - H(2.3) (9	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace SE rear stair per commercial code requirements.



BP2024-169

Downit

PROJECT NAME: Stair replacement SITE ADDRESS: 509 MUSTIAN ST KILL DEVIL HILLS

BUILDING

ISSUED: 08/20/2024

EXPIRES: 02/16/2025

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	С
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By:

Date: 08 / 20 / 2024

EX.DEV	A HILLS	к	PO BO	I Devil Hil x 1719 s, NC 27948 Fax: 252-441-		PAID	
PORTH C	AROLIN	Planning	and Insp	ection Depar	tment	AUG 20 20	024
	65 ME: Merrritt Fence SS: 515 MCCABE CT	KILL DEVIL H	ILLS			ISSUE	S PERMIT ED: 08/20/2024 RES: 02/16/2025
APPLICANT:	Merritt, Catherine 515 McCabe Court Kill Devil Hills, NC 279	48		OWNER:	Merritt, Ca 515 McCa Kill Devil H		
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	N, XX 00000			License: Unlic Expires: 12/3	
PARCEL:							
PIN:	988414341269			Parcel Number:	0271	75000	
Address:	515 MCCABE C	T KILL DEVIL	HILLS				
				Zoni	ng:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Bloc	k: 0	Lot(s):	144
Legal Desc	cription:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

PROJECT DESCRIPTION: relocate existing fence to go along E property line

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ZP2024-065 PROJECT NAME: Merrritt Fence SITE ADDRESS: 515 MCCABE CT KILL DEVIL HILLS

ZONING PERMIT ISSUED: 08/20/2024

EXPIRES: 02/16/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	х
PURPOSE	Residential Accessory
CONSTRUCTION COST	849.00
SURVEYOR NAME AND NUMBER	Doug Styons
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Stringline

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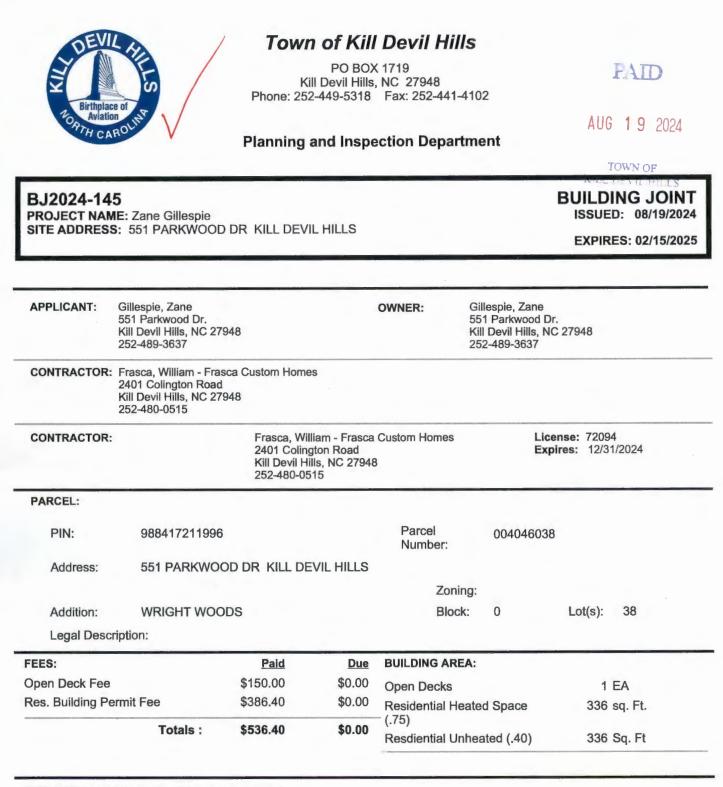
Final

CONDITIONS

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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: mu Date: 8-20-24 Contractor or Authorized Agent:



PROJECT DESCRIPTION: Add pool and pool house

BJ2024-145 PROJECT NAME: Zane Gillespie SITE ADDRESS: 551 PARKWOOD DR KILL DEVIL HILLS

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BUILDING JOINT ISSUED: 08/19/2024

EXPIRES: 02/15/2025

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	S13-27565
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	58000.00
LOT COVERAGE	39.33
LIVING SPACE (SQFT)	336
GARAGE (SQFT)	336
OPEN DECK (SQFT)	66
TOTAL SQUARE FOOTAGE	738
SURVEYOR NAME AND NUMBER	Coastal
ENGINEER AND LICENSE NUMBER	Carlos Gomez 14071
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

DETAILS

BJ2024-145 PROJECT NAME: Zane Gillespie SITE ADDRESS: 551 PARKWOOD DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/19/2024

EXPIRES: 02/15/2025

REQUIRED INSPECTIONS

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

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.

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

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

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

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

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.

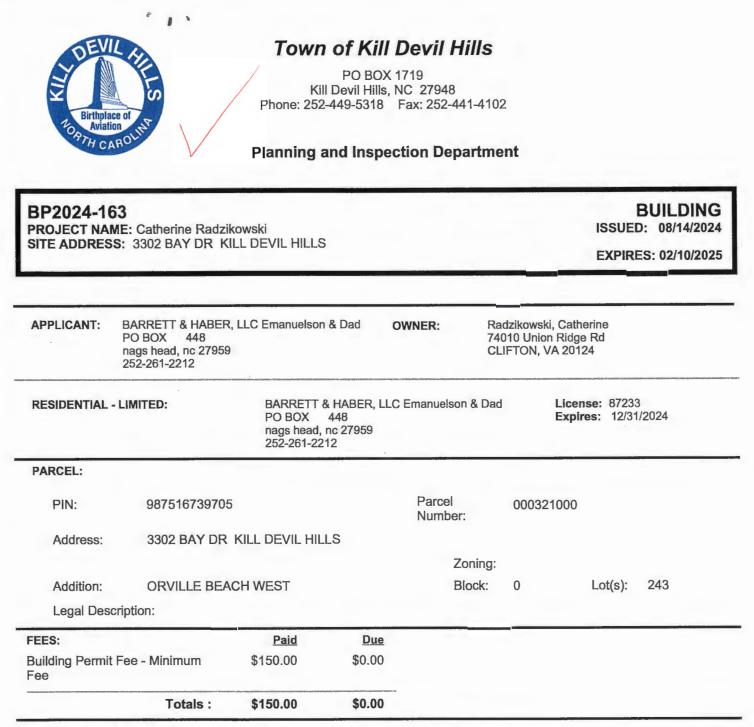
Must remove items on survey as shown. Must meet lot coverage requirements.

Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).

* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

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

Issued By Date: 8/19/24 Contractor or Authorized Agent:



PROJECT DESCRIPTION: New platform and lower platform with stairs on existing pier



BP2024-163

PROJECT NAME: Catherine Radzikowski SITE ADDRESS: 3302 BAY DR KILL DEVIL HILLS

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EXPIRES: 02/10/2025

DETAILS			
Permit			
Name	Value		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
ZONING DISTRICT	RL		
PURPOSE	Residential Accessory		
FLOOD ZONE	AE		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	10800.00		
CONSTRUCTION TYPE	V		
OCCUPANCY TYPE	One & Two Family Dwelling		
REQUIRED INSPECTIONS			

UIKED INSPECTION

Final

Slab/Foundation/Piling	
Zoning Final	

CONDITIONS

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Issuec By: _____

Lordei Barrett for Emanuelson and Dad Contractor or Authorized Agent: _____ Date: 08 / 14 / 2024

N DEV	LH	/	PO BOX		lls	P	AID
Birthpla NoRTH CR			ill Devil Hills, 2-449-5318	, NC 27948 Fax: 252-441	-4102	AUG	1 9 2024
THCF	ARO V	Planning	and Inspe	ection Depai	tment		WN OF EVIL HILLS
	57 ME: Fogarty Deck Re S: 302 TRUXTON S		HILLS				BUILDING D: 08/19/2024 RES: 02/15/2025
APPLICANT:	FOGARTY, ROBER 302 Truxton St Kill Devil Hills, NC 27		1	OWNER:	FOGARTY, F 302 Truxton S Kill Devil Hills	St	
GENERAL:		Self UNKNOWN UNKNOWN 000-000-00	N, XX 00000			License: Unlic Expires: 12/3	
PARCEL:					······································		
PIN:	987516936456	5		Parcel Number:	028720	165	
Address:	302 TRUXTON	ST KILL DEVI	L HILLS				
				Zon	ing:		
Addition:	MOOR SHOR	ES TWO		Bloc	:k: 0	Lot(s):	165
Legal Desc	cription:						
F EES: Building Permit Fee	Fee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00				

PROJECT DESCRIPTION: replace existing deck on east side, replace stairs adding landing, replace all railings

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BP2024-167

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PROJECT NAME: Fogarty Deck Rebuild SITE ADDRESS: 302 TRUXTON ST KILL DEVIL HILLS BUILDING ISSUED: 08/19/2024

EXPIRES: 02/15/2025

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
HEALTH DEPARTMENT PERMIT #	S13-27558	
FLOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	13000.00	
LOT COVERAGE	17.00	
CONSTRUCTION TYPE	V	
SURVEYOR NAME AND NUMBER	Ray Meekins	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning Final	
Lonnig i mai	

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.

BP2024-167 PROJECT NAME: Fogarty Deck Rebuild SITE ADDRESS: 302 TRUXTON ST KILL DEVIL HILLS

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BUILDING ISSUED: 08/19/2024

EXPIRES: 02/15/2025

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Issued By:	
Contractor or Authorized Agent: <u>R.Foquety</u>	Date: 8-19-24