

Date Issued: DEC 0 2017 Permit #: B17-000208

### **Building Permit**

Project Address: 155 BUFFELL HEAD RD Property Owner: BETTERLY, DONALD KEVIN

**PIN #:** Mailing Address:

995015743467 40650 HURLEY LN MCADOO, PA 18237

Contractor/Company Name: DeBoy Construction & Remodeling, Inc

Phone: (252) 480-9921

Email: outerbankscontractor@gmail.com

Contact Name: John DeBoy

303 Eagle Drive

Classification: General Contractor

NC State License #: Kill Devil Hills, NC 27948 Expiration Date:

**Description of Work:** 

Install new vanity and tiled shower

Address:

Use:

\$110.00

Single Family

Permit Amount:

Structure/Work Type:

Primary Structure: Pool/Hot Tub:

Deck:

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved:

Required Coverage: 0.0

Required Plantings: 0.0

**Project Cost Estimate:** 

**Building** \$10,000.00 Electrical \$0.00

Mechanical \$0.00

Plumbing \$0.00

Gas \$0.00 Other \$0.00

Total \$10,000.00

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Repair & maintenance only.
- No change to coverage or footprint.
- Typical trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

/2-/-/7 Date



Date Issued: 12/04/2017

Permit #: TR17-000243

### **Mechanical Trade Permit**

Project Address: 113 SCARBOROUGH LN

Property Owner: WOOD, JOHN PARRISH TTEE

PIN#: 985916934362

Mailing Address: 3863 FARRCROFT DR

FAIRFAX, VA 22030

| Permi | it | Tv | рe | S |  |
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Plumbing

Electrical

Mechanical

0---

### **Contractor:**

Company Name: North Beach Services Heating and Cooling

Phone: (252) 491-2878

Contact Name: Rebecca Sudduth

PO Box 181

Address:

Kitty Hawk, NC 27949

NC State License #:

Description of Work:

Replacement of HVAC system with Trane 14 seer 1.5 ton heat pump and matching air handler

Project Cost Estimate: 5,400.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signatur



Date Issued: 2015
Permit #:
B17-000206

### **Building Permit**

Project Address: 125 FAWN CT

Property Owner: WILLIAMSON, STEVEN R

PIN#:

Mailing Address:

986917001771

1931 FARNBOROUGH DR MIDLOTHIAN, VA 23112

Contractor/Company Name: Olin Finch & Co.

Phone: 252-202-9879

52-202-9879

Email: marcemurray@gmail.com

Contact Name: Address:

lame: Marc Murray

116 Sandy Ridge Road Duck, NC 27949 Classification: General Contractor

NC State License #: 52567

**Expiration Date:** 

Description of Work: Addition per submitted plans. Adding three bedrooms. Aprox 1100 square feet of new heated space, and 600 square feet of decks.

Use:

Single Family

Structure/Work Type:

Primary Structure: 2.Addition

Pool/Hot Tub:

Deck: Addition

Permit Amount: \$1,017.15

Demo:

Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 1.111

Unheated: 600

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved: 1730

Required Coverage: 1812.15

Required Plantings: 82.15

**Project Cost Estimate:** 

Building \$266,500.00

Electrical \$9.000.00 Mechanical \$8,400.00 Plumbing \$12,000.00 Gas \$0.00 Other \$0.00 Total \$295,900.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of

7 am and 6 pm, Monday through Saturday is prohibited.
- No land disturbing activity within 5 feet of property line.

- Stabilize all disturbed areas prior to CO.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,812 s.f.

- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.

- All principal and accessory structures must meet MBL setbacks.

- Height certificate required prior to CO.

- Provide Final As-Built Survey with Updated Coverage Breakdown.

- Original subdivision plat and County tax records show this property as 15,000 square feet. Approval of 14 occupants is permitted based on the size of the property being 15,000 square feet.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

12/5/2017 Date



Date Issued: 12/05/2017

Permit #: B17-000212

## **Building/Floodplain Development Permit**

Project Address: 122 ACORN OAK AVE Property Owner: WATSON, JAMES H

PIN #: 995007583611 Mailing Address: 109 E LOCUST LN

KENNETT SQUARE, PA 19348

Contractor:

Company Name: Honey-Do Services

Phone: (252) 573-9416

Email: gardmichael0@gmail.com

Contact Name: Mike Gard

Address: 107 Fearing Place

Manteo, NC 27954

Classification: Unlicensed Contractor NC State License #:

NC State License # Expiration Date:

**Description of Work:** 

Replace west side stairway and hand rail; riser included.

Use:

100.00

Structure/Work Type:

Single Family

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

**Permit Amount:** 

Deck: Repair

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-10

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

\$0.00

Project Cost Estimate:

Building

Electrical

Mechanical

Plumbing

Gas Other

Total

\$1,500.00

\$0.00

\$0.00

\$0.00

\$0.00

\$1,500.00

#### **Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Repair & maintenance only

- No change to coverage or footprint.

- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued: 12/06/2017

Permit #: B17-000209

### **Building/Floodplain Development Permit**

Project Address: 1461 DUCK RD

Property Owner: CWI SANDERLING HOTEL, LP

PIN #: 995110255523

Mailing Address: 600 FIFTH AVE FLOOR 9TH

ATTN: MICHAEL C CINEFRA NEW YORK, NY 10020

Contractor:

Company Name: Sanderling Resort

Phone: (252) 449-6666

Email: jchenoweth@thesanderling.com

Contact Name: John Chenowith

Address: 1461 Duck Road

Duck, NC 27949

Classification: Citizen NC State License #:

Expiration Date:

Description of Work:

Demo existing decking surface and railings; build new deck per plans and resurface and fabricate new railings for

walkway to gazebo.

Use:

Structure/Work Type: Primary Structure:

Pool/Hot Tub:

Deck: Addition

Permit Amount: 1,740.10

Commercial

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated: 1,190

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-8

Structure Value:

Storage Below BFE:

\$0.00

Vegetation Management (Sq.Ft.):

N/A: 🗹

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

\$0.00

Project Cost Estimate:

Building \$22,000,00

Electrical \$0.00

Mechanical \$0.00 Plumbing

\$0.00

Gas Other

Total \$22,000.00

#### **Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- As-built Survey required prior to CO;
- Stabilize all disturbed areas prior to CO.
- Conditions associated with Site Plan approval SP-2016-003 and CAMA Minor Permit D-2016-357 apply.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



**Date Issued:** 12/06/2017

Permit #: TR17-000244

### **Mechanical Trade Permit**

Project Address: 147 South SPINNAKER CT

Property Owner: SHIPS WATCH ASSOCIATION

PIN #: 985908984716

Mailing Address: 1251 DUCK RD

KITTY HAWK, NC 27949

**Permit Types:** 

Plumbing

Electrical

Mechanical

0--

Contractor:

Company Name: North Beach Services Heating and Cooling

Phone: (252) 491-2878

Contact Name: Rebecca Sudduth

PO Box 181

Kitty Hawk, NC 27949

Address:

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Description of Work:

NC State License #:

Installation of new Mitsublshl wall mounted unit connecting to the existing heat pump

Project Cost Estimate: 2,604.00

Permit Amount: 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature



**Date Issued:** 12/06/2017

Permit #: TR17-000245

### **Mechanical Trade Permit**

Project Address: 1358 DUCK RD Property Owner: LEEDY, SCOTT K PIN #: 995015543803

Mailing Address: 3104 WALNUT ST

HARRISBURG, PA 17109

**Permit Types:** 

Plumbing

Electrical

✓ Mechanical

Car

Contractor:

Company Name: Surfside

NC State License #: 20077

Phone: (252) 261-4949

Contact Name: Cliff Leonard

P.O. Box 3057

Address:

Kill Devil Hills, NC 27948

Description of Work:

Change out 5 ton heat pump and air handler

Project Cost Estimate: 9,600.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant-Stonature



Date Issued:

### Building/Floodplain Development Permit

Project Address: 1386 A DUCK RD Property Owner: RICHMAN, HOWARD R

PIN #: 995010459858 Mailing Address: 15312 BAILEY S LN

SILVER SPRING, MD 20906

Contractor:

Company Name: Albemarle Contractors, Inc.

Phone: (252) 261-1080

Email: aciobx@centurylink.net

Contact Name: Joe McGraw

Address: P.O. Box 146

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 53847 Expiration Date: 12/31/2011

**Description of Work:** 

Replace all siding, windows, and doors. Remove decking per plans and construct new office and laundry room additions.

Use:

Structure/Work Type:

Single Family

Primary Structure: 2.Addition

Pool/Hot Tub:

**Permit Amount:** 

235.00

Deck: Demo: Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 146

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-7

Structure Value: \$235,900.00

Storage Below BFE: M.

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 2124.0

Area Preserved: not provided

Required Plantings: 2124.0

**Project Cost Estimate:** 

Building

Electrical

Mechanical

Plumbing

Gas

Other

Total

\$103,107.00

\$4,890,00

\$7.825.00

\$4,000.00

\$0.00

\$17,210.00

\$137,032.00

**Permit Conditions:** - Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 2,124 s.f. (Substantial improvement).

- All new glass will need to meet wind-borne debris provisions of NC Residential Building Code.
- No change to coverage or footprint.
- Typical trade inspections required.
- Projected project costs exceed 50% of the tax assessed value of the existing structure which will require the structure to comply with the current flood zone standards; applicant may supply an independent appraisal for further consideration of the flood determination requirements.

- If lower level or crawl space areas that are unconditioned have plumbing, the water lines will need to be insulated.

- All utilities (electrical, HVAC, including insulation etc) will be required to be elevated at or above BFE plus 1 foot. Add flood vents to any enclosures with walls and floors below BFE.
- Elevation Certificate Required prior to CO.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

policant Signature



DEC - 7 2017

Permit #:
B17-000211

### **Building Permit**

Project Address: 133 MARLIN DR

Property Owner: CONSTANTINO, VINCENT C

PIN #:

985912965131

Mailing Address:

6720 PASSAGEWAY PL

BURKE, VA 22015

Contractor/Company Name: Albemarle Contractors, Inc.

Phone: (252) 261-1080

Email: aciobx@centurylink.net

Contact Name: Address:

Joe McGraw P.O. Box 146

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 53847 Expiration Date: 12/31/2011

**Description of Work:** 

North and ground floor addition; renovation of kitchen and two bathrooms.

Use:

\$928.75

Single Family

Structure/Work Type:

Primary Structure: **2.Addition** Pool/Hot Tub:

**Permit Amount:** 

Deck:

Deck: Demo: Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 1,101

Unheated: 366

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved: 0

Required Coverage: 1894.5

Required Plantings: 1894.5

**Project Cost Estimate:** 

Building \$223,034.00 Electrical \$10,570.00

Mechanical \$10,000.00 Plumbing \$15,800.00 **Gas** \$750.00 Other \$19,500.00 Total \$279,654.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area or 1894.50 square feet.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Typical trade inspections required.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued: B17-000214

### **Building Permit**

Project Address: 112 WAMPUM DR Property Owner: MULLOY, ROBERT

**PIN #:** Mailing Address:

985912857947 112 WAMPUM DR KITTY HAWK, NC 27949

Contractor/Company Name: Ken Green & Associates

Phone: (252) 491-8127 Email: mdehus@kg-a.com **Contact Name:** Address:

Mike Dehus P.O. Box372

Harbinger, NC 27941

Classification: NC State License #: **Expiration Date:** 

Description of Work: Install seven windows in screen porch openings; frame in North wall screen opening; side vault screen porch ceiling

Use: Single Family Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

**Permit Amount:** \$125.00

Deck: Demo: Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated: 180

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🗹

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Area Preserved:

Required Coverage: 0.0

Required Plantings: 0.0

**Project Cost Estimate:** 

Building

Electrical

Mechanicai

Total

\$11,380.00

\$0.00

\$0.00

Plumbing \$0.00

Gas \$0.00 Other \$0.00

\$11,380.00

### **Permit Conditions:**

- Call for final inspection.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Addendum to permit B17-0112.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued: 12/07/2017

Permit #: B17-000219

### **Building Permit**

Project Address: 104 WAMPUM DR Property Owner: DU BUY, YVONNE H PIN #:

985912852965

Mailing Address:

11608 MADDOX CT

GAITHERSBURG, MD 20878

Contractor/Company Name: J and T Construction

Phone: (252) 489-3950

Email: jtconstruction1@gmail.com

Contact Name: Address:

Joaquin Salazar

PO Box 1316

Kill Devil Hills, NC 27948

Classification: General Contractor

NC State License #: Expiration Date:

**Description of Work:** 

replace decking boards and joint stringers

Use:

Single Family

Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount: \$100.00 Deck: Repair

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 4

Area Preserved:

Required Coverage: 0.0

Required Plantings: 0.0

**Project Cost Estimate:** 

Building

Electrical \$0.00 Mechanical \$0.00 Plumbing \$0.00 Gas \$0.00

Other \$0.00 Total

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

No change to coverage or footprint.Repair & maintenance only

- Call for final inspection

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued: Permit #: B17-000220

#### **Building Permit**

Project Address: 111 SCARBOROUGH LN Property Owner: MARSHALL, JOHN F JR EUX

**PIN #:** Mailing Address: 985916933372

111 SCARBOROUGH LN

**DUCK, NC 27949** 

Contractor/Company Name: Gulfstream Pools

Phone: 252-255-1192

Address: Email: deanna@gulfstreampoolsandspas.com

**Contact Name:** 

Dien Davis

P.O. Box 2318

Kitty Hawk, NC 27949

Classification: Pool Contractors NC State License #: 60217

Expiration Date: 12/31/2011

Description of Work: Installation of fiberglass pool and concrete deck.

Use:

\$300.00

Single Family

**Permit Amount:** 

Structure/Work Type:

**Primary Structure:** 

Pool/Hot Tub: Pool Only

Deck: New

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🗹

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved: unknown

Required Coverage: 3726.15

Required Plantings: 3726.15

Project Cost Estimate:

**Building** \$0.00

Electrical \$0.00

Mechanical \$0.00

Plumbing \$0.00

Gas \$0.00

Other \$36,884.00

Total \$36,884.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.

- No areas of fill, including graded and leveled areas, may exceed 3 in depth.

- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.

- Stabilize all disturbed areas prior to CO.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 3,726 s.f.

- Pool fence height limited to six (6) feet above adjacent grade.

- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



Date Issued: 12/11/2017

Permit #: TR17-000246

## **Mechanical Trade Permit**

Project Address: 134 SCARBOROUGH LN

Property Owner: SEAPINES ESCAPE, LLC

PIN #: 985916939568

Mailing Address: 3 FOXTAIL LANE

CHADDS FORD, PA 19317

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

Plumbing

Electrical

✓ Mechanical

## **Contractor:**

Company Name: North Beach Services Heating and Cooling

Phone: (252) 491-2878

NC State License #:

Contact Name: Rebecca Sudduth

PO Box 181

Address:

Kitty Hawk, NC 27949

**Description of Work:** 

Replacement of lower level HVAC system with Trane 14 Seer 2 ton heat pump and matching air handler. Replacement of lower level HVAC system with Trane 14 Seer 5 ton heat pump and matching air handler.

Project Cost Estimate: 13,804.00

Permit Amount: 220.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.



Date Issued:

B17-000217

#### **Building Permit**

Project Address: 120 West BIAS DR Property Owner: LEPAGE, JENNIFER J

PIN #: Mailing Address: 986917001465 PO BOX 21793

CHARLESTON, SC 29413

Contractor/Company Name: MA Hooper Construction

Phone: (252) 207-5400

Email: merritt6000@gmail.com

Contact Name: Address:

Merritt Hooper

P.O. Box 1532 Kitty Hawk, NC 27949 Classification: General Contractor

NC State License #: 42077 Expiration Date: 12/31/2016

**Description of Work:** 

Add an office to second floor; replace decking.

Use:

Single Family

Structure/Work Type:

Primary Structure: 3.Remodel

Pool/Hot Tub:

**Permit Amount:** \$160.00

Deck: Repair

Demo:

Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 100

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved:

Required Coverage: 0.0

Required Plantings: 0.0

**Project Cost Estimate:** 

**Building** 

**Electrical** 

Plumbing

Gas

Other \$0.00

\$20,000.00

\$0.00

Mechanical \$0.00

\$0.00

\$0.00

**Total** \$20,000.00

### **Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only.
- No change to coverage or footprint.
- Typical trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

20/2 h 12/13/13/



Date Issued: 1 2 Permit #: B17-000218

#### **Building Permit**

Project Address: 128 OLD SQUAW DR Property Owner: CHOHANY, MICHAEL P EUX

**PIN #:** Mailing Address: 995011664119 129 BERKLEY LN

WILLIAMSBURG, VA 23185

Contractor/Company Name: Excel Contracting, LLC

Phone: (252) 207-8701

Email: jadams@excelcontractingllc.com

**Contact Name:** Address:

Jennifer Adams

234 Wax Myrtle Trail Kitty Hawk, NC 27949 Classification: General Contractor NC State License #: 65503 Expiration Date: 12/31/2012

Description of Work:

new 5 bedroom, sleeping 12 SFD with pool and hot tub

Use:

Single Family

Structure/Work Type:

Primary Structure: 1.New Construction Pool/Hot Tub: Pool + Portable Hot Tub

**Permit Amount:** \$4,118.30

Deck: Demo:

Accessory Building: Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 3,979

Unheated: 2,277

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House: 24

Pool: 20.67

Driveway: 23.80

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Area Preserved: 0

Required Coverage: 1522.5

Required Plantings: 1522.5

**Project Cost Estimate:** 

Building \$688,241.00

Electrical \$21,960.00 Mechanical \$24,400.00

Plumbing \$33,355.00

Gas \$8.962.00

Other \$49,000.00

Total \$825,918.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.

- No areas of fill, including graded and leveled areas, may exceed 3 in depth.

- All fill slopes must be installed so that the toe of the slope matches the existing grade no closer than five feet to any lot line.

- No land disturbing activity within 5 feet of property line.

- Stabilize all disturbed areas prior to CO.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,523 s.f.

- Concrete driveway limited to 20 in width.

- Pool fence height limited to six (6) feet above adjacent grade.

- Provide Final As-Built Survey with Updated Coverage Breakdown.

- Final Height Certificate required prior to CO.

- Lot of Nonconforming record pursuant to Section 156.071 allowing 40% lot coverage and reduced rear and side yard setbacks.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



Date Issued:

Permit #: B17-000222

### **Building/Floodplain Development Permit**

Project Address: 134 North SNOW GEESE DR

Property Owner: BARBARA GELSTON REVOCABLE TRUST

PIN #: 995016736812 Mailing Address: 70 MOHAWK TRL STAMFORD, CT 06903

Contractor:

Company Name: Carpenter Ant Construction

Phone: (252) 202-2687

Email: corndogant@hotmail.com

Contact Name: Anthony Bartolotta

Address: 100 Honey Suckle Lane Point Harbor, NC 27964

Classification: Unlicensed Contractor

NC State License #: **Expiration Date:** 

**Description of Work:** 

Replacement of 53 linear feet of the westernmost portion of dune walkway.

Use: Other Structure/Work Type:

Pool/Hot Tub:

Deck: Repair

**Permit Amount:** 

\$100.00

Primary Structure:

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE-12

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Required Coverage: n/a

Area Preserved: n/a

Required Plantings: n/a

**Project Cost Estimate:** 

Building

**Electrical** 

**Mechanical** 

Plumbing

Gas

Other **Total** 

\$0.00

\$0.00

\$0.00

\$0.00

\$0:00

\$0.00 \$0.00

#### **Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only.
- No change to coverage or footprint.
- Call for final inspection.
- Pursuant to NCAC 7K.0209 structures may be repaired in a similar manner, size and location as the original structure. No expansions or additions are permissible. The repairs are limited to 50% of the physical value of the existing structure.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.





Date Issued:

DEC 13

Permit #: B17-000215

## **Building/Floodplain Development Permit**

Project Address: 122 SUNFLOWER CT Property Owner: EDWARDS, RICHARD R

PIN #: 986917119051 Mailing Address: 5 ISLAND VIEW RD

NEWPORT NEWS, VA 23602

Contractor:

Company Name: Brad Loy Builder, LTD

Phone: (252) 207-8022

Email: bradloy@bradloybuilder.com

Contact Name: Brad Loy

Address: 5124 Virginia Dare Trail

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 53000 Expiration Date: 12/31/2011

**Description of Work:** 

Convert part of second level den into full bathroom; build 8' by 22' on grade deck under existing footprint; enclose 5' by

13' area under existing footprint for storage

Use:

Single Family

\$185.00

Permit Amount:

Structure/Work Type:

Primary Structure: 3.Remodel

Pool/Hot Tub:

Deck: New

Demo:

Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Remodel Heated: 49

Remodel Unheated: 241

Proposed Finished Grade (ft.):

N/A: 🗹

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-9

Structure Value:

Storage Below BFE:

undetermined

Vegetation Management (Sq.Ft.):

N/A: 🗹

Required Coverage: n/a

Area Preserved: n/a

Required Plantings: n/a

**Project Cost Estimate:** 

Building

**Electrical** 

Mechanical

\$0.00

Plumbing

Gas

\$0.00

\$44,000.00

\$0.00

\$0.00

\$0.00

Other

\$44,000.00

**Total** 

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- No change to coverage or footprint.

- Typical trade inspections required.

- Add flood vents and use flood resistant materials for ground floor enclosure OR provide elevation certificate confirming ground floor is above elevation of 9.2.

- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Cocal laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified berein or not.

oplicant Signature

13-7017 Date



Date Issued:

DEC 1 3 2017

Permit #: B17-000225

## **Building/Floodplain Development Permit**

Project Address: 100 OYSTER CATCHER LN

**Property Owner: PAUL FERRY** 

PIN#: 995006493600

Mailing Address: P.O. BOX 8084

**DUCK, NC 27949** 

Contractor:

Company Name: KICZ Maintenance

Phone: (252) 619-2599

Email: kiczmaintenance@yahoo.com

Contact Name: J. Wesley Liverman, Jr.

Address: P.O. Box 875

Grandy, NC 27939

Classification: Unlicensed Contractor

NC State License #: Expiration Date:

**Description of Work:** 

Remove and replace rotten siding and trim from around the house

Use:

Structure/Work Type:

Single Family Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount:

100.00

Deck:

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

\_\_\_\_

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🐷

Heated:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-9

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building

**Electrical** 

Mechanical

Plumbing

Gas

Other

Total

. Toject oost Estimate.

\$4.500.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$4,500.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.

- No change to coverage or footprint.

- Repair & maintenance only.
- Call for final inspection

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or pet.

12/13/17

Applicant Signature



Date Issued: Permit #: B17-000216

**Building Permit** 

Project Address: 121 WAMPUM DR

Property Owner: OSTRUM, ROBERT F TTEE

**PIN #:** 

Mailing Address:

985912950804

1424 GRAY BLUFF TRL

CHAPEL HILL, NC 27517

Contractor/Company Name: Ken Green & Associates

Phone: (252) 491-8127 Email: mdehus@kg-a.com **Contact Name:** Address:

Mike Dehus P.O. Box372

Harbinger, NC 27941

Classification: NC State License #: **Expiration Date:** 

Description of

Single Family

**Permit Amount:** 

Expanding existing living room and bedroom; installing new decking on all decks; new top level deck and a ground level deck for pool;

in-ground pool addition Work:

Use:

\$755.70

Structure/Work Type:

Primary Structure: 3.Remodel Pool/Hot Tub: Pool Only

Deck: New

Demo:

Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 230

Unheated: 632

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved: not provided

Required Coverage: 1279.05

Required Plantings: 1279.05

Project Cost Estimate:

Building \$139,665.00 **Electrical** \$7,800.00 Mechanical \$1,000.00

Plumbing \$0.00

Gas \$800.00

Other \$0.00

**Total** \$149,265.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,279 s.f.
- Pool fence height limited to six (6) feet above adjacent grade.
- All principal and accessory structures must meet MBL setbacks.
- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not



Date Issued: Permit #: B17-000226

### **Building Permit**

Project Address: 142 SCHOONER RIDGE DR Property Owner: HERMES, JIHAD GEORGE

PIN #: Mailing Address: 985912956345

12204 SUGAR CREEK COURT

HERNDON, VA 20170

Contractor/Company Name: Gulfstream Pools

Phone: (252) 255-1192

Email: deanna@gulfstreampoolsandspas.com

**Contact Name:** 

Address:

Dien Davis P.O. Box 2318

Kitty Hawk, NC 27949

Classification: Pool Contractors NC State License #: 60217 Expiration Date: 12/31/2011

Description of Work: Installation of fiberglass pool, concrete deck, and wooden privacy fence (addendum to existing permitted work under B17-0194).

Use:

Single Family

**Permit Amount:** \$300.00

Structure/Work Type:

Primary Structure:

Pool/Hot Tub: Pool Only

Deck: New Demo: N/A Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 🛂

Area Preserved: unknown

Required Coverage: 2249.85

Required Plantings: 2249.85

**Project Cost Estimate:** 

**Building** \$0.00

**Electrical** \$0.00

Mechanical \$0.00

Plumbing \$0.00

Gas \$0.00

Other \$27,565.00

**Total** \$27,565.00

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.
- No areas of fill, including graded and leveled areas, may exceed 3 in depth.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 2,250 s.f.
- Pool fence height limited to six (6) feet above adjacent grade.
- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



**Date Issued:** 12/14/2017

Permit #: TR17-000247

## **Mechanical Trade Permit**

Project Address: 117 A206 SEA COLONY DR

Property Owner: POMEROY, RICHARD C

PIN #: 98590897572213

Mailing Address: 4471 DEAN MARTIN DRIVE UNIT 2700

LAS VEGAS, NV 89103

| Pe |    | 24  | T       |              |    |  |
|----|----|-----|---------|--------------|----|--|
| PD | rm | IT. | 11 \ // | $\mathbf{n}$ | 06 |  |
|    |    |     |         |              |    |  |

Plumbing

Electrical

Mechanical

Gas

a 12/20/17

### Contractor:

Company Name: Master Heating & Cooling, Inc.

Phone: (252) 255-0095

Contact Name: Susan or Elaine Master Heating & Cooling, Inc.

P.O. Box 707

Address:

NC State License #: 18066

Kitty Hawk, NC 27949

**Description of Work:** 

Heat Pump change out: (1) 1.5 ton 14 seer, R410A Air Temp Heat Pump system

Project Cost Estimate: 5,250.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature



Date Issued:

DEC 1 4 2017

Permit #: LD17-000047

### Land Disturbance Permit

| Project | Address: | 124 | POTESKEET | DR |
|---------|----------|-----|-----------|----|

Property Owner: CLARK, LOIS S

PIN#: 985916945610

Mailing Address: 701 A FORT HAYES CT

PETERSBURG, VA 23805

Contractor:

Company Name: TNT Services, Inc.

Phone: (252) 261-3073

Email: tntrle@gmail.com

Contact Name: Roy Etheridge

Address: P.O. Box 296

Powells Point, NC 27966

Classification: Landscaper

NC State License #: 994735

**Expiration Date:** 

Description of Work:

Relocate drainfield to accomodate future pool.

Permit Amount:

\$200.00

Land Disturbing Activity:

Parking

Driveway

**New Septic** 

Stormwater Conveyance

Grading/Filling

Landscaping/Minor Grading

Irrigation

Septic Repair

Stormwter Retention

Vegetation Removal

Proposed Finished Grade (ft.):

N/A: 🗹

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Required Coverage: n/a

Area Preserved: n/a

Required Plantings: stabilization

**Estimated Project Cost:** 

\$2,000.00

#### **Permit Conditions:**

- Work completed without permit subject to double permit fees.

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No land disturbing activity within 5 feet of property line.

- Stabilize all disturbed areas prior to CO.

- Call for inspection once stabilization has been completed.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.

TNT Services INC 12/7/17
Applicant Signature Date

Karan I Lihender

By Dione Morgan





Date Issued: DEC 1 8 2018 Permit #: B17-000221

#### **Building Permit**

Project Address: 124 POTESKEET DR Property Owner: CLARK, LOIS S

**PIN #:** Mailing Address: 985916945610

701 A FORT HAYES CT PETERSBURG, VA 23805

Contractor/Company Name: Southern Scapes Pools & Landscape

Phone: (252) 491-5303

**Description of Work:** 

Email: admin@southernscapesllc.com

Contact Name: Address:

Tom May 7441 Caratoke Highway Jarvisburg, NC 27947

Classification: Pool Contractors NC State License #: 64251

**Expiration Date:** 

Installation of 12x25 in-ground fiberglass swimming pool, concrete pool deck, and pool surround.

Use: Other Structure/Work Type:

Primary Structure:

Pool/Hot Tub: Pool Only Deck: Addition

**Permit Amount:** \$300.00

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🕜

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 💉

Area Preserved:

Required Coverage: 1500.0

Required Plantings: 1500.0

**Project Cost Estimate:** 

Building \$0.00

**Electrical** \$1,400.00 Mechanical \$0.00

**Plumbing** \$0.00

Gas \$0.00

Other \$34,530.00

Total \$35,930.00

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.

- No areas of fill, including graded and leveled areas, may exceed 3 in depth.

- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.

- Stabilize all disturbed areas prior to CO.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1500 s.f.
- Pool fence height limited to six (6) feet above adjacent grade.
- All principal and accessory structures must meet MBL setbacks.
- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

| Applicant Signature | Date |
|---------------------|------|



Date Issued:

B17-000227

#### **Building Permit**

Project Address: 123 SPRIGTAIL DR Property Owner: MANN, JOHN

PIN#: Mailing Address: 995011653643 145 KREADY AVE

MILLERSVILLE, PA 17551

Contractor/Company Name: Emanuelson & Dad, Inc.

Phone: 252-261-2212

Email: emanuelson@embargmail.com

Contact Name: Jon Midgett

Address:

4717 N. Croatan Highway

Kitty Hawk, NC 27949

Classification: Unlicensed Contractor

NC State License #: **Expiration Date:** 

**Description of Work:** 

Replace 6 interior pilings and 1 exterior piling

Use:

Single Family

Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

**Permit Amount:** \$100.00

Deck: Demo: Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🛂

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved:

Required Coverage: 1500.0

Required Plantings: 1500.0

**Project Cost Estimate:** 

Building \$7,347.00 Electrical \$0.00

Mechanical \$0.00

**Plumbing** \$0.00

Gas \$0.00

Other \$0.00

**Total** \$7,347.00

### Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Call for pre-install piling inspection.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued: DEC 1 9 2017 Permit #: TR17-000248

### **Mechanical Trade Permit**

Project Address: 116 BLUE HERON LN

Property Owner: PIASCIK, STEVE MARK

PIN #: 995118413623

Mailing Address: 3721 OLD GUN RD W

MIDLOTHIAN, VA 23113

**Permit Types:** 

Plumbing

Electrical

✓ Mechanical

Gas

**Contractor:** 

Company Name: Delta T

Phone: (252) 256-2436

Contact Name: Edwin Miller

162 Yaupon Trail

Address:

NC State License #: 23299 Class III

Kitty Hawk, NC 27949

Description of Work:

replace the lower level heat pump with a 2.5 ton 14 seer american standard indoor and outdoor

Project Cost Estimate: 4,600.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature



**Date Issued:** 12/20/2017

Permit #: TR17-000249

### **Mechanical Trade Permit**

Project Address: 98 CANVAS BACK DR Property Owner: GRESHAM, JAMES C PIN #: 995011554281

Mailing Address: P O BOX 8266

KITTY HAWK, NC 27949

| <b>Permi</b> | t Types: |
|--------------|----------|
|--------------|----------|

Plumbing

Electrical

Mechanical

Con

### Contractor:

Company Name: Outer Banks Heating & Cooling

Phone: (252) 441-1740

Contact Name: Brian McDonald

P.O. Box 1415

Address:

NC State License #: 12643

Nags Head, NC 27959

**Description of Work:** 

Replace Hvac with14 seer 3 ton Carrier air handler and heat pump

Project Cost Estimate: 7,802.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Cr. Merez 12.20-17



Date Issued: DEC 2 2 2017 Permit #: TR17-000250

### **Mechanical Trade Permit**

Project Address: 139 SEA HAWK CT

Property Owner: HUTSON, THOMAS H

PIN #: 986917213314

Mailing Address: 2205 TUFTON RIDGE RD

REISTERSTOWN, MD 21136

| _            |   |    |     |          |   |   |   |   |
|--------------|---|----|-----|----------|---|---|---|---|
| п            | _ | rm | :4  | T        |   | _ | - | _ |
| $\mathbf{r}$ |   | rm | IT. | - 11 1/4 | n | 0 | C |   |
|              |   |    |     |          |   |   |   |   |

Plumbing

Electrical

Mechanical

### **Contractor:**

Company Name: R.A. Hoy Heating & A/C

Phone: (252) 261-2008

Contact Name: Douglas Wakeley

P.O. Box 179

Address:

NC State License #: 13056

Kitty Hawk, NC 27949

Description of Work:

C/O 2 TON & 2.5 TON TRANE SYSTEMS MID LEVEL & GROUND LEVEL WITH 2 XL624 TSTATS

Project Cost Estimate: 11,699.00

Permit Amount: 220.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector)-immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

12-22-17 Date



Date Issued: 12/21/2017

Permit #: B17-000213

### **Building/Floodplain Development Permit**

Project Address: 111 SPECKLE TROUT DR Property Owner: VIETMEYER, ANNE G TRUSTEE

PIN #: 986909070171 Mailing Address: 5921 RIVER DR

LORTON, VA 22079

| Co |  |  |
|----|--|--|
|    |  |  |
|    |  |  |

Company Name: Robert J. Gomez, General Contractor

Phone: (252) 202-3401

Email: rgomezjr3110@gmail.com

Contact Name: Bob Gomez Address: 3110 Bay Drive

Kill Devil Hills, NC 27948

Classification: General Contractor

NC State License #: 43276 Expiration Date: 03/09/2012

**Description of Work:** 

New six bedroom SFD with pool and hot tub

Use:

Single Family

Structure/Work Type:

Primary Structure: 1.New Construction

Pool/Hot Tub: Pool + Portable Hot Tub

Permit Amount:

4.106.85

Deck: New Demo:

Accessory Heated:

Proposed Area Schedule (Sq.Ft.):

Heated: 4,192

Unheated: 1,563

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE-12

Structure Value:

Storage Below BFE:

Accessory Building:

Bukhead (L.F.):

House Moving:

Pier (L.F.):

Vegetation Management (Sq.Ft.):

N/A:

Required

Coverage: 2143.0499999999997

Area

Required

Plantings: 2143.0499999999997

**Project Cost Estimate:** 

Building \$592,000.00 **Electrical** 

**Mechanical** 

**Plumbing** 

Preserved: 0

Gas

Other

\$25,000.00

\$35,000.00

\$40,000.00

\$8.000.00

\$0.00 \$700,000.00

Total

### **Permit Conditions:**

- Elevation Certificate Required
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit. - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of
- 7 am and 6 pm, Monday through Saturday is prohibited. - Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.
- Pool fence height limited to six (6) feet above adjacent grade.
- Stabilize all disturbed areas prior to CO.
- No land disturbing activity within 5 feet of property line.
- Height certificate required prior to CO.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.
- Conditions associated with CAMA Minor Permit D-2017-381 apply.
- Elevation Certificates required under-construction at rough in and finished construction prior to pre-final.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

plicant Signature

12/21/17



Date Issued: 12/21/2017

Permit #: B17-000237

### **Building/Floodplain Development Permit**

Project Address: 1190 DUCK RD Property Owner: MCFITZ, LLC

PIN #: 985916842040 Mailing Address: PO Box 8174

KITTY HAWK, NC 27949

Contractor:

Company Name: JBH Roofing

Phone: (252) 449-9310
Email: ibhroofing@embargmail.com

Contact Name: Jason Hill

Address: 106 Creekside Lane

Kill Devil Hills, NC 27948

Classification: Unlicensed Contractor

NC State License #: Expiration Date:

**Description of Work:** 

remove and replace roof

Use: Commercial Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount: 100.00

Deck: Demo:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Accessory Building:

Other:

Floodplain Development:

Flood Zone: AE-7

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

**Project Cost Estimate:** 

Building

\$0.00

Electrical

Mechanical

Plumbing

Gas

Other Total

roject Cost Estimate

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00 \$0.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No change to coverage or footprint.
- Repair & maintenance only
- Call for final inspection

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued:

B17-000230

### **Building/Floodplain Development Permit**

Project Address: 118 North BAUM TRL Property Owner: KERN, KEVIN M EUX

PIN #: 995109178377 Mailing Address: 3812 MILITARY RD ARLINGTON, VA 22207

Contractor:

Company Name: Mancuso Development, Inc.

Phone: 252-453-8921 x

Email: jay@mancusodevelopment.com

Contact Name: James Mehford

Address: 608 Cottage Lane

Corolla, NC 27927

Classification: General Contractor

NC State License #: 26166 Expiration Date: 12/31/2011

Description of Work:

Addition of cabana/ tiki bar

Use: Other

827.40

Structure/Work Type:

Primary Structure:

Pool/Hot Tub:

**Permit Amount:** 

Demo:

Deck:

Accessory Building: 🗹

Bukhead (L.F.): Pier (L.F.): House Moving:

Heated:

Unheated: 2.364

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

Proposed Area Schedule (Sq.Ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE-12

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

**Project Cost Estimate:** 

**Building** 

Electrical

Mechanical

**Plumbing** 

Gas

Other

**Total** 

\$15,000.00

\$1,000.00

\$0.00

\$0.00

\$0.00

\$0.00

\$16,000.00

**Permit Conditions:** - Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit. - Previous permit conditions pursuant to B17-0108 and B17-0187 remain applicable.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



Date Issued:

DEC 2 2 2017 Permit #:

### **Building/Floodplain Development Permit**

Project Address: 175 TERESA CT

Property Owner: WELLINGHOFF, DARRYL

PIN#: 986913035910

Mailing Address: 134 THE GREEN

WILLIAMSBURG, VA 23185

Contractor:

Company Name: Carolina Coast Construction

Phone: (252) 256-0020

Email: randy@carolinacoastconstruction.com

Contact Name: Randy Hargis

Address: 53 Skyline Drive

Southern Shores, NC 27949

Classification: Unlicensed Contractor

NC State License #: **Expiration Date:** 

**Description of Work:** 

replace deck on third floor; new steps and handrails

Use:

110.00

Single Family

**Permit Amount:** 

Structure/Work Type:

Primary Structure:

Pool/Hot Tub:

Deck: Repair

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated: 100

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-9

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

**Project Cost Estimate:** 

**Building** 

Electrical

Mechanical

Plumbing

Gas

Other

Total

\$10,000.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$10,000.00

### **Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



Date Issued: 12/22/2017

Permit #: B17-000234

### **Building Permit**

Project Address: 129 FOUR SEASONS LN Property Owner: DALEY, CHARLES JAMES

PIN #: Mailing Address: 986913021798 50 DOWNEY WAY

HILLSBOROUGH, CA 94010

Contractor/Company Name: Sea Grove Homes

Phone: (252) 261-0187 Email: garyacos@gmail.com Contact Name: Address:

Gary Cosgrove P.O. Box 943 Kitty Hawk, NC 27949

Classification: General Contractor NC State License #: 31525 Expiration Date: 12/31/2011

**Description of Work:** 

remodel kitchen and 8 bathrooms; interior handrail and flooring

Use: Single Family Structure/Work Type:

Primary Structure: 3.Remodel

Pool/Hot Tub:

Permit Amount: \$100.00 Deck: Demo: Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🔽

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved:

Required Coverage: 0.0

Required Plantings: 0.0

**Project Cost Estimate:** 

**Building** \$341,319.00

**Electrical** \$13,681.00

Mechanical \$0.00 Plumbing \$18,500.00 **Gas** \$6,700.00 Other \$0.00

Total \$380,200.00

### Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No change to coverage or footprint.
- Typical trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



**Date Issued:** 12/22/2017

Permit #: TR17-000251

## **Mechanical Trade Permit**

| Project Address: 117 B213 SE   | A COLONY DR  | PIN #:   | 98590897572237  |  |  |  |  |
|--|--|--|---|--|--|--|--|
| Property Owner: POWELL, VI   | CTORIA J   | Mailing Address:                                     | 6890 HUGHES RD<br>SANDSTON, VA 23150  | £  |  |  |  |
| Permit Types:  | -  |  |   |  |  |  |  |
|  |  |  |   |  |  |  |  |
| Plumbing Electrical  | Mechanical Gas   |  |   | 3  |  |  |  |
| Contractor:  |  |  |   |  |  |  |  |
| Company Name: All Seasons I  | Heating & Cooling  |  | Contact Name: Joe S   | Simpson  |  |  |  |
| Phone: 252-491-9232  |  |  | P.O.  | Box 244  |  |  |  |
|  |  |  | Address:  |  |  |  |  |
| NC State License #: H3Class1: 19091                                  |  |  | Point Harbor, NC 27964  |  |  |  |  |
| Description of Work:   | Replacement of one 1.5 ton sp<br>pump paired with an air handi | olit system heat pump<br>er.                         | and air handler with one BRYANT   | 1.5 ton 14 SEER split system heat  |  |  |  |
| Project Cost Estimate: 6,145.0                                       | 00   |  | Permit Amount: 160.00   |  |  |  |  |
| all applicable state and local law<br>he NC General Statutes and the | s and regulations pertaining to the                            | e work for which this pe<br>gn or am no longer affil | rmit is issued, and that I possess all<br>ated with this project, I will notify the | wledge. I certify that I will comply with<br>I trade contractor licenses required by<br>a local authority (Town of Duck Building |  |  |  |
| Applicant Signature  | Date   | _  |   |  |  |  |  |



**Date Issued:** 12/28/2017

Permit #: TR17-000253

### **Electrical Trade Permit**

Project Address: 116 BUNTING LN

Property Owner: FARMER, JAMES E

PIN #: 995118404955

Mailing Address: 11 PARTRIDGE LN

CHERRY HILL, NJ 08003

## **Permit Types:**

Plumbing

Electrical

Mechanical Gas

### Contractor:

Company Name: Above Code Electric

Phone: (252) 375-3232

Contact Name: Lionel Richard

PO Box 688

Address:

NC State License #: U31933

Kitty Hawk, NC 27949

Description of Work:

replace rusted meter socket with new Dominion Energy furnished aluminum type

Project Cost Estimate: 600.00

Permit Amount: 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.



your permit.

Project Address: 1248 DUCK RD

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

PIN #: 985911761927

Date Issued: DEC 2 9 2017

Permit #: LD17-000049

# Land Disturbance/Floodplain Development Permit

| Property Owner: PHANTOM ENTE   | Mailing Address: P O BOX 308<br>YOUNGSTOWN, PA 15696      |                        |           |                                 |               |   |
|--|---|------------------------|-----------|---------------------------------|---------------|---|
| Contractor:  |   |                        |           |                                 |               |   |
| Company Name: Don Humphries  |   | Contact Name:          |           | ,                               |               | tion: Landscaper  |
| Phone: (252) 207-8280  |   | Address:               |           |                                 | NC State I    |   |
| Email: dhumphriesobx@gmail.com   |   |                        | Powells   | Point, NC 27966                 | Expiration    | Date:   |
| Description of Work: repair  | r drainfield and put ir                                   | n new control pane     | l and ne  | w manhole covers                |               |   |
| Permit Amount: 25.00<br>Land Disturbing Activity:  |   | ·                      |           |                                 |               |   |
| Parking  | Driveway  | New Sept               | ic        | Stormwater Conveyance           | e             | Grading/Filling   |
| Landscaping/Minor Grading  | Irrigation  | Septic Rep             | oair      | Stormwter Retention             |               | Vegetation Removal                                      |
| Proposed Finished Grade (ft.):   | N/A:  | Driv                   | veway:    | Parking                         | g:            | Other:  |
| Floodplain Development:  | Flood Zone: A   | one: AE-7 BFE:         |           | E: 7                            |               |   |
| Vegetation Management (Sq.Ft.):  | N/A:  | Required Cover         | age: 0.0  | Area Preserved                  | 1:            | Required Plantings:                                     |
| Estimated Project Cost: 77   | 00  |                        |           |                                 |               |   |
| Permit Conditions:   |   |                        |           |                                 |               |   |
| <ul> <li>Any change or changes in the p</li> <li>No land disturbing activity within</li> <li>Stabilize all disturbed areas prio</li> <li>No vegetation removal proposed</li> <li>Call for inspection once stabiliza</li> </ul> | i 5 feet of property lir<br>ir to CO.<br>d or authorized. | it, construction or la | and use   | activities will require a re-ev | aluation and  | d modification of this permit.                          |
| All provisions of laws and ordinances association with this permit must mee  | t the applicable land                                     | disturbing provision   | ons of th | e Town of Duck Zoning Ordi      | or not. All I | and disturbing activities in on 156.128. The granting o |

this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is

- 12-29-1)
Date



Date Issued: DEC 29 Permit #: B17-000228

### **Building Permit**

| Project Address: 125 COOK DR       |
|------------------------------------|
| Property Owner: MIZE, CARLOS E EUX |

PIN #: Mailing Address:

985912961769 400 OAK POINT DR YORKTOWN, VA 23692

| Phone: (757) 673-0808 Email: art3anandy66@gmail.com   |  | Contact Name:<br>Address:    | 1512 Technolog        | ord Krebs<br>2 Technology Drive, Suite 103<br>sapeake, VA 23320     |                      | Classification: General Contractor<br>NC State License #: 69280<br>Expiration Date: 01/01/2018 |                             |  |
|---|--|------------------------------|-----------------------|---|----------------------|--|-----------------------------|--|
| Description of Work:  | Relocate drainfield  | and install inground         | d pool, surround a    | and barrier.  |                      |  |                             |  |
| Use:<br>Other<br>Permit Amount:<br>\$300.00   | Structure/Work Primary Structure<br>Pool/Hot Tub: Pool<br>Deck:<br>Demo: | ):                           |                       | Accessory Build<br>Bukhead (L.F.):<br>Pier (L.F.):<br>House Moving: |                      |  |                             |  |
| Proposed Area Schedule (Sq.Ft.):  | Heated:  | Unheated:                    | Accessory Hea         | ited:   | Accessor             | y Unheated   | d:                          |  |
| Proposed Finished Grade (ft.):  | N/A:   | House:                       | Pool:                 | Driveway:   | Parki                | ng:  | Other:                      |  |
| Vegetation Management (Sq.Ft.):   | N/A: Ar  | rea Preserved: not p         | provide <b>d</b> Requ | uired Coverage: 132   | 29.15 R              | equired Pla  | ntings: 1329.15             |  |
| Project Cost Estimate:  | <b>Building</b><br>\$37,423.00   | <b>Electrical</b> \$2,200.00 | Mechanical<br>\$0.00  | Plumbing<br>\$0.00  | <b>Gas</b><br>\$0.00 | Other<br>\$0.00  | <b>Total</b><br>\$39,623.00 |  |
| Permit Conditions:  |  |                              |                       |   | 4                    |  |                             |  |
| management of the state of the |  |                              |                       |   |                      |  |                             |  |

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited. - Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.

- No land disturbing activity within 5 feet of property line.

- No areas of fill, including graded and leveled areas, may exceed 3 in depth.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.

Stabilize all disturbed areas prior to CO.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,329 s.f.
- Pool fence height limited to six (6) feet above adjacent grade.
- Lot of non-conforming record allows for maximum 40% coverage.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- Pavers have been added to the site without town approval. The sections of these pavers within the required front and side setbacks must be removed. A walkway 4 feet in width can remain.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

12-29-17

Applicant Signature



#### Department of Community Development PO Box 8369, 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

Date Issued:

B17-000229

#### **Building Permit**

Project Address: 118 POTESKEET DR Property Owner: FLOWERS, DAVID C

PIN #: Mailing Address: 985916942596

PO BOX 20009

BALTIMORE, MD 21284

Contractor/Company Name: Beach Construction Group, LLC

Phone: (252) 441-8224

Email: info@beachpainting.com

Contact Name: Matt Brauer

Address:

Classification: General Contractor

1496 Colington Road NC State License #: 77114 Kill Devil Hills, NC 27948 Expiration Date: 12/31/2017

Description of Remove existing outdoor shower in carport and replace with enclosed bathroom per attached drawing dated 12/12/17; new slab on grade; utilities to tie into existing house utilities

Work:

Use: Single Family Structure/Work Type:

Primary Structure: 2.Addition

Pool/Hot Tub:

**Permit Amount:** \$135.00

Deck: Demo: Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Area Preserved:

Required Coverage: 0.0

Required Plantings: 0.0

**Project Cost Estimate:** 

**Building** \$17,100.00 **Electrical** \$2,000.00 Mechanical \$400.00

Plumbing \$3,000.00

Gas \$0.00

Other \$3,000.00

Total \$25,500.00

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- No change to coverage or footprint.

- Typical inspections required.

- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein-onnot.

licant Signature



#### Department of Community Development PO Box 8369, 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

Date Issued: 9 2017 Permit #: B17-000231

#### **Building Permit**

Project Address: 124 SCARBOROUGH LN Property Owner: GREEN, LAWRENCE L TTEE

985916936566

Mailing Address:

2 GARDEN ATRIUM WAY POQUOSON, VA 23662

Contractor/Company Name: Albemarle Contractors, Inc.

Phone: (252) 261-1080

Email: aciobx@centurylink.net

**Contact Name:** Address:

Joe McGraw P.O. Box 146

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 53847 Expiration Date: 12/31/2011

Description of Work:

Enlarge ground floor bedroom and add bathroom; renovate two existing bathrooms on mid level; add parking

Use:

\$259.75

Single Family

**Permit Amount:** 

Structure/Work Type:

Primary Structure: 3.Remodel

Pool/Hot Tub:

Deck:

Demo:

Accessory Building: 100

Bukhead (L.F.): Pier (L.F.):

House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 265

Unheated:

Remodel Heated: 105

Remodel Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved: unknown

Required Coverage: 2028.3

Required Plantings: 2028.3

**Project Cost Estimate:** 

Building

Electrical

Mechanical

Plumbing

Gas

Other

\$130,247.00

\$5,875.00

\$7,600.00

\$9,350.00

\$0.00

\$0.00

Total \$153,072.00

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.

- No change to coverage or footprint.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 2,028 s.f.

- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



#### Department of Community Development PO Box 8369, 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

Date Issued: OEC 2 9 2017 -ermit #: B17-000236

#### **Building Permit**

Project Address: 106 DUNE RD Property Owner: SCOTT, ROBERT A **PIN #:** 

985912776264

Mailing Address:

1574 LONGFELLOW PL

BETHLEHEM, PA 18017

Contractor/Company Name: Snearer Construction

Phone: (252) 261-2228

Email: paul@paulsnearerhomes.com

**Contact Name:** Address:

Paul Snearer P.O. Box 2875

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 25865 Expiration Date: 12/31/2010

Description of Work:

Relocate septic; Enclose screen porch to expand dining area; resurface upper deck; build new two story deck.

Use:

\$336.15

Single Family

Permit Amount:

Structure/Work Type:

Primary Structure: 2.Addition

Pool/Hot Tub:

Deck:

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated: 148

Unheated: 348

Renovate Heated:

Renovate Unheated: 221

Proposed Finished Grade (ft.):

N/A: 🗹

House:

Pool:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Area Preserved: unknown

Required Coverage: n/a

Required Plantings: n/a

**Project Cost Estimate:** 

Building \$65,100.00

Electrical \$3,100.00

Mechanical \$800.00

Plumbing \$0.00

Gas \$0.00 Other \$0.00

**Total** \$69,000,00

**Permit Conditions:** 

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- No land disturbing activity within 5 feet of property line.

- Stabilize all disturbed areas prior to CO.

- Typical trade inspections required.

- The ground level deck constructed in the rear setback was not permitted or permissible and will need to be removed prior to CO.

- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

Date



Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

Date Issued:

Permit #: B17-000242

#### **Building/Floodplain Development Permit**

Project Address: 112 BLUE HERON LN Property Owner: JOHNSTONE, JANICE P

PIN #: 995118412789

Mailing Address: 5 LOWER TUCKAHOE RD W

RICHMOND, VA 23233

Contractor:

Company Name: Gibbs Daughters NC, LLC

Phone: (252) 202-5991 Email: clgibbsjr@yahoo.com Contact Name: Clarence Gibbs

Address: PO Box 2387

Manteo, NC 27954

Classification: General Contractor

NC State License #: 76990 Expiration Date: 01/01/2018

Description of Work:

Demo siding and install new siding; painting; install new windows and sliders on North and East side of home; repair rot

Use:

Single Family

Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount: 110.00

Deck: Demo: Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A·

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE-12

Structure Value:

Storage Below BFE:

Vegetation Management (Sq.Ft.):

N/A: 🗹

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

**Project Cost Estimate:** 

Building

Electrical

Mechanical

Plumbing

Gas

\$41,400.00

\$0.00

\$0.00

\$0.00

\$0.00

Other \$0.00

Total \$41,400.00

#### **Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit. - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of

7 am and 6 pm, Monday through Saturday is prohibited.

- Repair & maintenance only

- No change to coverage or footprint.

- All new glass will need to meet wind-borne debris provisions of NC Residential Building Code.

- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.

- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2279

Owner Name: Williams, Derrick J - Williams, Amy L

Owner

2675 Oak Valley Dr

Owner Phone: 5713401119

Address:

Vienna

VA

22181

Parcel PIN: Address:

989211652374

3418 S Va Dare Trl S

Subdivision: **GEOTSTRONACH**  Zoning:

Imported Default District

Lot/Block/Sec: LOT: 289 BLK: SEC:

Contractor Name: KDH Construction Management

Contractor Phone: 252 573 9553

Contractor 406 W Arch St

Address: Kill Devil Hills

NC

27948

Description: Top cap and railings on top deck - 3 posts

Construction Value: 1200.00

Foundation Type:

Construction Type: Repair

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit:

see file

Septic Permit: CAMA Permit:

na na

PW Permit#

na

FEMA Flood Zone:

BFE:

ae 10

Flood Permit:

2017.2280

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present, call for final inspection

Total Fees Paid/Due:

75.00

Invoice #:

2017-01243

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/01/2017

Responsible Party

Date

PO Box 99 Nags Head, NC 27959





27959

### **Building Permit**

BR2017-2189

Owner Name: Cole, Frank B Jr - Cole, Melody Owner PO Box 1205

Owner Phone: Address: Kitty Hawk NC 27949

Parcel PIN: 989112866077 Imported Default District Zoning:

Address: 4333 S Hesperides Dr S

Subdivision: OLD NAGS HEAD COVE SEC E Lot/Block/Sec: LOT: 63 BLK: SEC: E

Contractor Name: Albemarle Contracting Services (ACS) Contractor PO Box 1771

Address: Nags Head Contractor Phone: 252-441-3176 NC

Construct new single family dwelling on piling foundation, 3 bedroom, 2.2 bathrooms (no pool) Description:

Construction Type: New Construction Construction Value: 330000.00

Heated Space: 2060 Unheated Space: 1236 Foundation Type:

# of Bedrooms: 3 # of Baths: 2.2

Zoning Permit: 2017.0331 FEMA Flood Zone: X

Septic Permit: Lot Elevation:

CAMA Permit: N/A BFE: PW Permit# 2017.2191

Total Fees Paid/Due: 2408.58

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

Invoice #: 2017-01252

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 12/04/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; Additional engineering may be required; Material check inspection required; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home before power can be released. Review TONH inspection procedure handout. Call for all required inspection

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-1794

Owner Name: Brent L Rutley

Owner

15240 Frederick Rd

Owner Phone: 3012527216

Address:

Woodbine

MD

21797

Parcel PIN:

989211556192

Zoning:

R3 (High Density Residential District)

Address:

3417 S Linda Ln S

Subdivision:

**OLD NAGS HEAD PLACE** 

Lot/Block/Sec: LOT: 20 BLK: SEC:

Contractor

Contractor Phone:

Contractor Name: Property Owner

Address: Nags Head

NC

Description: Fencing as a pool barrier, 60' hight with posts every 8 ft, material to be vinyl, slat opening to be less than

1 3/4", door alarms to be put on all 1st floor doors with pool access, existing pool barrier to be removed

after new fence construction is completed

Construction Value: 5000.00

Construction Type: Remodel

Heated Space: 0

Unheated Space: 0

Foundation Type:

# of Bedrooms: 0

# of Baths: 0

Zoning Permit:

2017.0256

FEMA Flood Zone:

AE

Septic Permit:

BFE:

10

CAMA Permit: PW Permit#

na

Flood Permit:

2017.1795

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

address #s on the home if none are present. Review appendix G we have provided. Call for final

Total Fees Paid/Due:

105.00

Invoice #:

2017-01247

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/04/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2274

Owner Name: The Daugherity Cottage LLC

Owner

112 Flintlock Ln

Owner Phone: 804 337 0560

Address:

Colonial Heights

VA

23834

Parcel PIN:

989211564676

Zoning:

Imported Default District

Address:

3207 S Memorial Ave S

Subdivision:

NAGS HEAD SHORES AMENDED SEC 3

Lot/Block/Sec: LOT: 17 BLK: 1 SEC: 3 Contractor Name: Albemarle Contracting Services (ACS)

Contractor PO Box 1771

Address: Nags Head

NC

27959

Description: Replace siding and install trex decking

Contractor Phone: 252-441-3176

Construction Value: 25000.00

Foundation Type:

Construction Type: Repair

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

see file

na

FEMA Flood Zone: BFE:

ae 10

CAMA Permit: PW Permit#

na na

Flood Permit:

2017.2276

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Install Trex per evaluation report. Remove all unsafe conditions. Call for final inspection.

Total Fees Paid/Due:

195.00

Invoice #:

2017-01249

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/04/2017

Responsible Party

Date

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax. (252) 4414290



## **Building Permit**

BR2017-2036

Owner Name: Phyllis Goodwin Neal

Owner

4117 Tarkle Ridge Dr

Owner Phone: 252 202 6898

Address:

Kitty Hawk

NC

27949

Parcel PIN:

Subdivision:

989205291898

Contractor Name: Smith Contracting NC, LLC

Zoning:

Imported Default District

Address:

2509 S Bridge Ln S

NAGS HEAD ACRES SECTION 4

Lot/Block/Sec: LOT: 77 BLK: SEC:

Contractor PO Box 471

Address: Kitty Hawk

NC

27949

Description: Construct new single family dwelling, 4 bedroom 3 bathrooms on block/crawl foundation 11/17/17

Changing from block to piling foundation

Construction Value: 341000.00

Construction Type: New Construction

Foundation Type:

Contractor Phone: 252 202 6602

Heated Space: 2354

Unheated Space: 1224

# of Bedrooms: 4

# of Baths: 3.0

Zoning Permit:

2017.0311

Septic Permit:

27060

**CAMA Permit:** PW Permit#

N/A

2017.2037

FEMA Flood Zone: BFE:

Flood Permit:

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home. Review TONH inspection procedure handout. Certificate of Occupancy cant be issued until zoning and public works sign off. Review zoning and public works permit conditions. Call for all required inspections

Total Fees Paid/Due:

2552.58

Invoice #:

2017-01255

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

12/05/2017

Responsible Party

Date

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



#### **Building Permit**

RE2017-2226

Owner Name: GRUBERG, JOSEPHM-GRUBERG,

NAGS HEAD SHORES AMENDED SEC 4

Owner

6405 Burke Woods Ct

MARILYNJETUX

Owner Phone: 703-725-9817

Address:

BURKE

VA

22015

Parcel PIN:

989314225513

Zoning:

Imported Default District

Address: Subdivision: 2216 S Va Dare Trl S

Contractor Name: Morris Construction Company LLC

Contractor PO Box 1189

Contractor Phone: 571 213 8653

Address: Kitty Hawk

NC

27949

**Description:** Expand master bedroom, add master bath & closet, add covered side entry roof, replace front decking

boards & rails

Construction Value: 57000.00

Construction Type: Remodel

FEMA Flood Zone:

Heated Space: 0

Lot/Block/Sec: LOT: 9 BLK: 6 SEC: 4

Unheated Space: 0

Foundation Type:

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

2017.0339

27282

BFE:

AE 10

CAMA Permit: PW Permit#

na NA

Flood Permit:

2017.2227

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Smokes and Co2 detectors to code throughout home. Receipts for project are required. Call for all required inspections. Call for final inspection

Total Fees Paid/Due:

295.00

Invoice #:

2017-01259

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/05/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2218

Owner Phone:

Owner Name: Luckenbaugh, David M-Luckenbaugh.

Diana M

354 Timber Blvd

Address:

Zoning:

Owner

Lebanon

PA

17042

Parcel PIN: Address:

989112775155

Subdivision:

4128 W Duppies Ct W

SOUTHRIDGE SEC 3

Lot/Block/Sec: LOT: 13 BLK: SEC: 3

Imported Default District

Contractor Name: Seth Johnson Construction, LLC

Contractor Phone: 252 441 3215

Contractor PO Box 1433

Address: NAGSHEAD

NC

27959

Description:

Add new living room to south side of existing structure 325.5 sq ft, add front deck & stairs to

grade

Construction Value: 64722.00

Construction Type: Addition

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

Foundation Type:

2017.0342

**CAMA Permit:** 

PW Permit#

na na

27281

FEMA Flood Zone:

Lot Elevation:

BFE:

9

AE

Total Fees Paid/Due: 325.00

Invoice #: 2017-01266

- All work shall conform to the plans and specifications provided with the application.

Building Inspector

12/06/2017

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; Receipts of all expenditures are required prior to the issuance of a C/O; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CHARGE OF CONTROL OF THE CONTROL

<sup>-</sup> All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

<sup>-</sup> Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2200

Owner Name: Curtis, Richard Dale TIC - Curtis, Sandra V Owner

10305 S Colony Dr

Owner Phone: 252 449 4193

Address: Nags Head NC

27959

Parcel PIN:

071815627510

Zoning:

Imported Default District

Address:

10305 S Colony South Dr S

Subdivision:

BODIEISLAND

Contractor Name: T and CB Construction

Lot/Block/Sec: LOT: 32 BLK: SEC:

Contractor Phone: 252 473 5871

Contractor 802 N George Howe St Address: Manteo

27954

Description: Remove & replace outside stairs, decking, rails, windows and siding, Window & door size will remain the

same in size & number, install deck band & ledger on front deck

Construction Value: 25000.00

Construction Type: Repair

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: see file

FEMA Flood Zone:

AE

Septic Permit: CAMA Permit:

27128

BFE:

10

PW Permit#

na na

Flood Permit:

2017.2201

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; Receipts of all expenditures are required prior to the issuance of a C/O; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF

TE OF Thome if none are present. Roof is not an approved part of this permit. Review deck, window and door condition COMPLIANCE: handouts we have provided. Call for all required inspections. Call for final inspections

Total Fees Paid/Due:

195.00

Invoice #:

2017-01262

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/06/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



27925

27928

NC

#### **Building Permit**

BR2017-2196

Owner Name: Phelps Brothers Ventures, LLC Owner 214 Albemarle Shores Ext.

Owner Phone: 2527967390 Address: Columbia NC

Parcel PIN: 989318309002 Zoning: C2 (General Commercial District)

Address: 2608 S Va Daro Tri

Address: 2608 S Va Dare Trl

Subdivision: NAGS HEAD SHORES AMENDED SEC 2 Lot/Block/Sec: LOT 8 BLK: 5 SEC: 2

Contractor Name: Aria Construction & Development, Inc. Contractor PO Box 321

Contractor Phone: 252 796 7737

Address: Creswell

Description: Construct new 3 story single family dwelling on pilings, 5 bedrroms, 5.1 bedrooms, w/ pool, hot

tub & elevator

Construction Value: 575000 00 Construction Type: New Construction

Foundation Type: Heated Space: 3164 Unheated Space: 772

# of Bedrooms: 0 # of Baths: 0

Zoning Permit: 2017.0338 FEMA Flood Zone: AE

Septic Permit: 27267 Lot Elevation:

CAMA Permit: na BFE: 10

PW Permit# 2017.2198

Total Fees Paid/Due: 3094.58 / Invoice #: 2017-01275

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 12/08/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; Additional engineering may be required; Material check inspection required; See conditions of Public Works, Zoning and Building Permits; Work must meet previously submitted and approved plans; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE; Review TONH inspection procedure handout.

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



20003

DC.

### **Building Permit**

RE2017-2257

Owner Name: Kornegay, Amanda Owner 701 Street SE Apt 1134

Owner Phone: Address: Washington

Parcel PIN: 989317103870 Zoning: R2 (Medium Density Residential District)

Address: 211 W Carolinian Cir

Subdivision: CAROLINIAN COLONY Lot/Block/Sec: LOT: 37 BLK: SEC:

Contractor Name: Ermal Sinanaj Contractor 205 W Morning Dove St

Contractor Phone: 252 475 4047 Address: Nags Head NC 27959

Description: Remodel laundry room to add additional cabinets, counter tip, small sink, microwave,

refridgerator with stackable laundry washer & dryer and cooktop 2 burner, add additional outlets

for fridge & countertop

Construction Type: Remodel

Construction Value: 17875.00 Heated Space: 1867 Unheated Space: 352

Foundation Type: # of Bedrooms: 4 # of Baths: 3.0

Zoning Permit: 2017.0347 FEMA Flood Zone: ×

Septic Permit: na Lot Elevation:

CAMA Permit: na BFE:

PW Permit# na

Total Fees Paid/Due: 165.00 / Invoice #: 2017-01272

- All work shall conform to the plans and specifications provided with the application.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 12/08/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

<sup>-</sup> All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

<sup>-</sup> Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



80111

29577

SC

# of Baths: 0

## **Building Permit**

DC2017-2264

Owner Phone:

Owner Name: CCO Transfers LLC Owner 6399 S Sandfiddlers Green Cir.

Greenwood Village CO Parcel PIN:

Address:

989318310700 C2 (General Commercial District) Zoning: Address: 2400 S Va Dare Trl S

Subdivision: NAGS HEAD SHORES REVISED BLKE

Lot/Block/Sec: LOT: 1

Contractor Name: Tungsten, LLC Contractor 4728 Jenn Dr. Contractor Phone: 843 839 1650 Address: Myrtle Beach

Demolition of partial building (damaged by Hurricane Matthew) in preparation of replacing Description:

building

Construction Type: Demolition Construction Value: 120000.00

Heated Space: 0 Unheated Space: 0 Foundation Type:

# of Bedrooms: 0 Zoning Permit:

FEMA Flood Zone: ae Septic Permit: Lot Elevation:

CAMA Permit: 10 BFE: PW Permit#

Total Fees Paid/Due: 4725.00 1 Invoice #: 2017-01279

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 12/11/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; See CONDITIONS on Zoning Permit; Additional engineering may be required; See conditions of Public Works, Zoning and Building Permits; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; Water credits and facility fees are availabe on this lot for a period of 5 years from the issuance of the CO; Review Demo Inspection Procedures to avoid fines; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE; final abatment report on asbestos

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

BR2017-0576

Owner Name: OBHOA, LLC

Owner

124 Shore Dr

Owner Phone: 252 491 8765

Address:

Jarvisburg

NC

27947

Parcel PIN:

080015730225

Zoning:

Imported Default District

Address:

Subdivision:

7217 S Croatan Hwy

WHALEBONE BEACHES SEC A

Lot/Block/Sec: LOT: 33 BLK: 10 SEC: A

Contractor Name: Woodson, Gary Michael

Contractor 124 Shore Dr Address: Jarvisburg

NC

27947

Contractor Phone: 252 491 8765

Description:

Construct new single family dwelling on piling foundation, 5 bedrooms, 4.1 baths with elevator

and in-ground swimming pool; includes removal of existing shed on property 12/7/17 Adding fill to property per submitted stormwater plans Construction Type: New Construction

Foundation Type:

Heated Space: 2952

Unheated Space: 0

# of Bedrooms: 5

# of Baths: 4.1

Zoning Permit:

**CAMA Permit:** 

PW Permit#

ZN2017.0102

Septic Permit: 26615

Construction Value: 240000.00

N/A

FEMA Flood Zone: ae

Lot Elevation: BFE:

10

Total Fees Paid/Due: 3210.58

PW2017.0578

Invoice #: 2017-01281

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

1

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

12/12/2017

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

under construction and finish construction elevation certificates will be required

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

CA2017-2173

Owner Name: Woodson, James

Owner

104 Adler Branch In

Owner Phone: 2523054450

Address:

Manteo

NC

Parcel PIN:

08001563442402

Zoning:

C2 (General Commercial District)

Address: Subdivision: 110 W Gray Eagle St W

LANDINGS AT SUGAR CREEK

Lot/Block/Sec: THE

Contractor Name: Smith Contracting NC, LLC

Contractor PO Box 471 Address: Kitty Hawk

NC

27949

27959

Contractor Phone: 252 202 6602 Description:

Combine units 102 & 103 into dental office

Construction Value: 280000.00

Construction Type: Remodel

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit:

Septic Permit:

27242

CAMA Permit:

PW Permit# n/a FEMA Flood Zone:

Lot Elevation:

BFE:

10

ae

Total Fees Paid/Due: 770.00

Invoice #: 2017-01280

- All work shall conform to the plans and specifications provided with the application.

Building Inspector

12/12/2017

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Please call the Town of Nags Head Fire Department at 252-441-5909 for inspections; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF CERTIFICATE OF CERTIFICATE OF CERTIFICATE OF CERTIFICATION OF CE

<sup>-</sup> All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

<sup>-</sup> Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



### **Building Permit**

BR2017-2235

Owner Name: JBJ Properties LLC Owner 14915 Alpine Bay Loop

Owner Phone: Address: Gainesville VA 20155 Parcel PIN:

989206495552 CR (Commercial Residential District) Zoning: Address: 2713 S Va Dare Trl S

Subdivision: NAGS HEAD SHORES AMENDED SEC 2 Lot/Block/Sec: LOT: 6 BLK: 1 SEC: 2

Contractor Name: Saunders General Contractor, Inc., Contractor PO Box 1922 Contractor Phone: R.M.

Address: Kill Devil Hills NC 27948 Construct new single family dwelling on pilings, 9 bedroom, 7.2 bathrooms with a pool and dune Description:

deck

Total Fees Paid/Due: 3497.50

Construction Type: New Construction Construction Value: 995000.00

Heated Space: 4971 Unheated Space: 0 Foundation Type:

# of Bedrooms: 9 # of Baths: 7.2

Zoning Permit: ZN2017.0345 FEMA Flood Zone: VE

Septic Permit: 27152 Lot Elevation: CAMA Permit: 17-045 11

BFE: PW Permit# PW2017.2241

Invoice #: 2017-01285

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

1

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 12/13/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; Work must meet previously submitted and approved plans; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

bottom of new girder to meet or exceed BFE+1 foot

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



#### **Building Permit**

RE2017-2296

Owner Name: Mills, R. James Ttee - Hershey, Kathleen F Owner

435 W Bridge Ln

Owner Phone: 2524804629

Address:

Nags Head

NC 27959

Parcel PIN:

989205192225

Zoning:

R2 (Medium Density Residential District)

Address:

435 W Bridge Ln W

Lot/Block/Sec: LOT: 51 BLK: SEC: 7

Subdivision:

NAGS HEAD ACRES SECTION 7

Contractor 2 Ginguite Trl

Contractor Name: Intreppid Construction, Inc. T/A Contractor Phone: 252 207 1122

Address: Kitty Hawk

NC

27949-3850

Description: Bathroom remodel: remove fiberglass tub & replace with walk-in shower; relocate toilet; new vanities;

add electrical outlets & switches, new overhead lighting, heated floor; replace windows

Construction Value: 20175.00

Construction Type: Remodel Heated Space: 0

Unheated Space: 0

Foundation Type:

# of Bedrooms: 0

# of Baths: 0

X

Zoning Permit: see file

na

FEMA Flood Zone:

Septic Permit:

BFE:

CAMA Permit:

Flood Permit:

PW Permit#

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

address #s on home if none are present. Smoke and Co2 detectors to code if not to code now. Call for site visit prior to starting construction. Engineering could be requested. Call for final inspection

Total Fees Paid/Due:

205.00

Invoice #:

2017-01282

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/13/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



### **Building Permit**

RE2017-2305

Owner Name: Sellers, James R - Sellers, Susan J

Owner

10 Halifax Ct

Owner Phone:

Address:

Rockville

MD

20850

Parcel PIN:

080006374857

Zoning:

Imported Default District

Address:

220 W Bays Edge W

Subdivision:

BAYMEADOWPARCELA

Lot/Block/Sec: LOT: 27 BLK: SEC:

Contractor Name: Coastal Roofing and Siding, Inc.

Contractor 2401 Colington Rd

Address: KILL DEVIL HILLS

27948

Contractor Phone: 252 480 0515 Description: Remove and replace cedar shake roof

Construction Value: 22950.00

Construction Type: Repair

NC

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

see file na

FEMA Flood Zone: BFE:

ae 9

CAMA Permit:

na na

Flood Permit:

2017.2306

#### Conditions:

PW Permit#

CALL FOR ALL REQUIRED INSPECTIONS; Material check inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

address #s on home if none are present. Call for material check. Call for all for required inspections

Total Fees Paid/Due:

195.00

Invoice #:

2017-01287

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

12/13/2017

Responsible Party

Date

PO Box 99 Nags Head, NC 27959





## **Building Permit**

RE2017-2292

Owner Name: G & J Associates, LLC Owner PO Box 319

Owner Phone: 804 370 9879 Address: Mechanicaville VA 23116

Parcel PIN: 071819711945 Zoning: Imported Default District

Address: 10332 S Colony South Dr S

Subdivision: BODIEISLAND Lot/Block/Sec: LOT: 18 BLK: SEC:

Contractor Name: Pain Construction Company Contractor 407 Raceview Ct

Contractor Phone: 252 256 1055 Address: Nags Head NC 27959

Description: Replace cedar shakes on SE sides; replace east steps from lower to upper deck; pour concrete under

house; construct new tiki bar and construct 4 x 8 outside shower per diagram

Construction Value: 20000.00 Construction Type: Repair

Foundation Type:

Heated Space: 0 Unheated Space: 0

# of Bedrooms: 0 # of Baths: 0

Zoning Permit: 2017.0350 FEMA Flood Zone: ae

Septic Permit: na BFE: 10

CAMA Permit: na Flood Permit: 2017.2293

PW Permit# na

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Tradework shall not start until permits are pulled. All material below RFE of 11 feet shall be pressure treated. Tiki area not approved to be enclosed. Do not enclose tiki area. Call for inspection of rot repairs before covering. Call for all required inspections

Total Fees Paid/Due: 165.00 Invoice#: 2017-01300

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 12/14/2017 Responsible Party Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2341

Owner Name: Slonaker, William Slonaker, Breanda

Owner

13335 Fishell Rd

Owner Phone: 7178738023

Address:

Felton

Lot/Block/Sec: LOT: 29 BLK: 9 SEC:

PA

17322

Parcel PIN:

080020726187

Imported Default District

Address:

Zoning:

Subdivision:

8014 S Old Oregon Inlet Rd S BODIE ISLAND BCH AMD MAP BLK 9

Contractor Name: Bryan R. Weisbecker General

Contractor PO Box 55

Address: Kitty Hawk

NC

27949

Contractor Phone: Contractor, LLC 252 441 5001

Description: Repair/replace eisting upper deck, decking and guards

Construction Value: 12048.00

Construction Type: Repair

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

see file na

FEMA Flood Zone: BFE:

AE 10

CAMA Permit: PW Permit#

na na

Flood Permit:

2017.2342

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Rails to meet todays code. Call for final inspection

Total Fees Paid/Due:

165.00

Invoice #:

2017-01294

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/14/2017

Responsible Party

Date

Total Fees Paid/Due: 3198.08

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



27948

## **Building Permit**

BR2017-0036

Owner Name: 2406 SOL LLC Owner P O Box 90 Ln

Owner Phone: 252 333 8464 Address: Kill Devil Hills NC

Parcel PIN: 989318312733 Zoning: CR (Commercial Residential District)

Address: 2406 S Oneto Ln
Subdivision: NACS HEAD SHOPES DEVELOPED A 1877

Subdivision: NAGS HEAD SHORES REV BLK B/BB Lot/Block/Sec: LOT: 3 BLK: BB SEC:

Contractor Name: SAGA Construction, Inc. Contractor PO Box 90

Contractor Phone: 252 441 9003 Address: KILL DEVIL HILLS NC 27948

Description: Construct new Single Family Dwelling on pilings, 6 bedrooms 6.2 baths, with pool deck and pool

Construction Types New Country I

Construction Value: 450000.00

Construction Type: New Construction

Heated Space: 3309

Unheated Space: 896

Foundation Type: # of Bedrooms: 6 # of Baths: 6.2

Zoning Permit: 2017.0021 FEMA Flood Zone: VE

Septic Permit: 26248 Lot Elevation:

CAMA Permit: N/A BFE: 11

PW Permit# 2017.0038

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

Invoice #: 2017-01302

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 12/15/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; Work must meet previously submitted and approved plans; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

18 inch minimum free of obstruction below lowest horizontal structural member.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 4414290



#### **Building Permit**

RE2017-2307

Owner Name: Patricia A Fleming

Owner

4203 W Southridge Rd

Owner Phone:

Subdivision:

Address:

Nags Head

NC

27959

Parcel PIN:

989108876767

Contractor Name: Bill Hume Builder, LLC

Zoning:

Imported Default District

Address:

4203 W Southridge Rd W

SOUTHRIDGE SEC 1

Lot/Block/Sec: LOT: 46 BLK: SEC: 1

Contractor 505 Quail Ln

NC

27948

Contractor Phone: 252 489 8126

Address: Kill Devil Hills

Description: Convert existing bedroom into a study/den and a 366 SF bedroom and bathroom addition with a 251 SF

storage room below; house to remain 3 bedrooms

Construction Value: 83452.00

Foundation Type:

Construction Type: Addition

FEMA Flood Zone:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: 2017.0351 Septic Permit:

26956

na

CAMA Permit: na BFE:

Flood Permit:

PW Permit#

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Before final inspection can be scheduled final health department aprroval shall be received. Smokes and co2 detectors to code through out home. Please note comments on plans. Trade work shall not start until thier permits are issued. Call for all required inspections

Total Fees Paid/Due:

385.00

Invoice #:

2017-01309

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/18/2017

Responsible Party

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



#### **Building Permit**

RE2017-2319

Owner Name: ELLINGTON, DRICHARD-ELLINGTON,

Owner

145 Mill Ridge Way

ELIZABETHMETUX Owner Phone:

Address: AMHERST

VA

24521

Parcel PIN:

080016820655

Zoning:

CR (Commercial Residential District)

Address:

8007 S Old Oregon Inlet Rd S

Lot/Block/Sec: LOT: 6 BLK: 1 SEC:

Subdivision:

**BODIE ISLAND BEACH** 

Contractor Name: William Keith Gibson

Contractor P0 Box 2622

27949

Contractor Phone: 252 207 2700

Address: Kitty Hawk

NC

Description:

Attach elevator shaft (with mechanical room) to west facing front of house

Construction Value: 25000.00

Construction Type: Addition

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

Foundation Type:

2017.0353

27273

CAMA Permit: PW Permit#

17-049 na

FEMA Flood Zone:

Lot Elevation:

BFF:

11

ve

Total Fees Paid/Due: 195.00

Invoice #: 2017-01312

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/18/2017

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

<sup>-</sup> All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



#### **Building Permit**

RE2017-2303

Owner Name: KUNIHIRO, RONALDA-KUNIHIRO, M

SUEETUX

Owner Phone:

071810468832

Address:

Parcel PIN:

113 W Westside Ct W

Subdivision: **CHAWANOOK WEST** 

Contractor Phone: 252 473 1083

Contractor Name: Atlantic Elevators, Going Up Elevators

Owner

14016 Breeders Cup Dr

Address:

Zoning:

GAINSVILLE

R2 (Medium Density Residential District)

VA

Lot/Block/Sec: LOT: 11 BLK: SEC:

Contractor PO Box 1521

Address: Manteo

NC

27954

20155

Description: Install vertical/platform lift on 66" X 66", pour concrete pad 5" thick and associated walkway from parking

area to lift

Construction Value: 19000.00

Zoning Permit: 2017.0352

Foundation Type:

Construction Type: Remodel

Heated Space: 0

# of Bedrooms: 0

# of Baths: 0

Unheated Space: 0

FEMA Flood Zone: BFE:

ae 10

Flood Permit:

2017.2304

CAMA Permit: PW Permit#

Septic Permit:

na na

27359

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Call for footing inspection. All electrical shall be water tite and elevated at or above the RFE of 11 feet. See attached elevation certificate. Call for any trench inspections. Call for final inspection

Total Fees Paid/Due:

165.00

Invoice #:

2017-01310

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/18/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



23322

27966

VA

# of Baths: 0

## **Building Permit**

RE2017-2321

Owner Phone:

Owner Name: ASHER, JOHN WIII Owner 413 Gailes Point Ln

Address: Chesapeake Parcel PIN:

989220820325 Imported Default District Zoning: Address: 3805 S Va Dare Trl S

Subdivision: **GEOTSTRONACH** Lot/Block/Sec: LOT: PT 116

Contractor Name: Ken Manoli dba Paradise Services Contractor 139 Pinewood Acre Ln

Contractor Phone: 252 202 2245 Address: Powells Point NC

Description: Add bathroom and remodel existing bathroom

Construction Type: Remodel Construction Value: 15000.00

Heated Space: 0 Unheated Space: 0 Foundation Type:

# of Bedrooms: 0 Zoning Permit: see file FEMA Flood Zone: ve

Septic Permit: Lot Elevation:

CAMA Permit: na 11 BFE: PW Permit# na

Total Fees Paid/Due: 165.00 1 Invoice #: 2017-01317

- All work shall conform to the plans and specifications provided with the application.

Building Inspector 12/20/2017 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; Receipts of all expenditures are required prior to the issuance of a C/O; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATEOF

COVINS HOLE home if none are present. Smoke and co2 detectors to code throughout home. Proof that bath floor is rated for 40

<sup>-</sup> All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

<sup>-</sup> Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2326

Owner Name: Losego, Raymond J - Molisky, Kathryn

Owner

1740 Ellsworth Ave

Owner Phone: 412 334 2469

Address:

Carnegie

PA

15106

Parcel PIN:

071815642467

Zoning:

R2 (Medium Density Residential District)

Address: Subdivision:

10045 S Old Oregon Inlet Rd S

OCEAN COLONY SOUTH

Lot/Block/Sec: LOT: 96A BLK: SEC:

Contractor Name: A Frame Contracting, Inc.

Contractor 405 Arch St

Contractor Phone: 252 207 2420

Address: Kill Devil Hills

NC

27948

Description: Replace stairs and rails to upper lookout deck - keep in same footprint

Construction Value: 3500.00

Construction Type: Repair

Unheated Space: 0

Foundation Type:

Heated Space: 0 # of Bedrooms: 0

Flood Permit:

# of Baths: 0

Zoning Permit: Septic Permit:

see file

FEMA Flood Zone:

11

**CAMA Permit:** 

na na BFE:

2017.2327

PW Permit#

na

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Review stair handout we have provided. Call for final inspection

Total Fees Paid/Due:

105.00

Invoice #:

2017-01315

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/20/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



### **Building Permit**

BR2017-2313

Owner Name: CAGE, ALLEN O JR - CAGE, JOLAINE

Owner

4800 Walney Knoll Ct

Owner Phone: 703 517 7928

Address: CHANTILLY

VA

20151

Parcel PIN:

989216736441

Zoning:

CR (Commercial Residential District)

Address:

3635 S Va Dare Trl S

Subdivision:

**GEOTSTRONACH** 

Lot/Block/Sec: LOT: 34 & 139 BLK: SEC:

Contractor Name: Christi Construction, Inc.

Contractor PO Box 1511 Address: Kitty Hawk

NC

27949

Description:

Construct new single family dwelling on piling foundation, 7 bedrooms, 7.2 bathrooms with pool,

walkway and dune deck

Construction Type: New Construction

Construction Value: 800000.00

Total Fees Paid/Due: 3356.00

Contractor Phone: 252 261 7400

Heated Space: 4995

Unheated Space: 1250

Foundation Type:

# of Bedrooms: 7

Lot Elevation:

FEMA Flood Zone:

# of Baths: 7.2

Zoning Permit: 2017.0354 Septic Permit: CAMA Permit:

27249

17-048

BFE:

11

ve

PW Permit#

2017.2315

Invoice #: 2017-01324

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

12/21/2017

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

#### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Heat gain/loss calcs required prior to inspection; Additional engineering may be required; Material check inspection required; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

-18 inch minimum free of obstruction below lowest horizontal structural member.

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



### **Building Permit**

RE2017-2267

Owner Name: PUFF MUFF'S SAND CASTLE, LLC

Owner

PO Box 480

Owner Phone: 540 869 1800

Contractor Phone: 252 207 2910

Address:

STEPHENS CITY

VA

22655

Parcel PIN:

071811573416

Zoning:

Imported Default District

Address:

109 E Surfside Dr

Subdivision:

CHAWANOOKCAY

Lot/Block/Sec: LOT: 30-R BLK: SEC:

Contractor Name: Radford, Jeff

Contractor 517 W Archdale St Address: Kill Devil Hills

NC

27948

Description: Remove wall, replace with lattice installed between pilings in a 3.5 X 3.5 pattern; work being done to

satisfy zoning violation

Construction Value: 500.00

Construction Type: Repair

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

see file

n/a

n/a

FEMA Flood Zone: BFE:

ve 11

**CAMA Permit:** ex# 17-65 PW Permit#

Flood Permit:

FL2017.2268

Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; See CONDITIONS on Zoning Permit; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

see notes on drawing

spacing between lattice needs to be increased to meet 50% rule

Total Fees Paid/Due:

75.00

Invoice #:

2017-01318

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

12/21/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## **Building Permit**

RE2017-2405

Owner Name: Frances E Haines

Contractor Name: Property Owner

Owner

P.O. Box 372

Owner Phone: 9203429992

Address:

Nags Head

NC

27959

Parcel PIN:

071815628643

Imported Default District

Address:

Zoning:

Subdivision:

10302 S Colony South Dr S BODIEISLAND

Lot/Block/Sec: LOT: 28 BLK: SEC:

Contractor

Address: Nags Head

NC

Contractor Phone:

Description: Replace deck boards & railing of upper level South faceing deck

Construction Value: 7000.00

Construction Type: Repair

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: Septic Permit:

see file n/a

FEMA Flood Zone: BFE:

ae 10

**CAMA Permit:** 

see file n/a

Flood Permit:

FL2017.2406

#### Conditions:

PW Permit#

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

all deck boards and rails to meet current code minimum 2/ 3/8 through bolts per 4x4 connection see supplied handout

Total Fees Paid/Due:

135.00

Invoice #:

2017-01322

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

12/21/2017

Responsible Party

Date

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



#### **Building Permit**

RE2017-2352

Owner Name: FONSECA, JULIO-FONSECA, SUSAN

Owner

341 Cedar Ln

Owner Phone: 7577370285

Address:

CHESAPEAKE

23322

Parcel PIN:

989211650339

Zonina:

R3 (High Density Residential District)

Address: Subdivision:

3413 S Memorial Ave S

**GEOTSTRONACH** 

Lot/Block/Sec: LOT: 400 BLK: SEC:

Contractor Name: Beach Construction Group, LLC

Contractor 1496 Colington Rd

Contractor Phone: 252 441 8224

Address: Kill Devil Hills

NC

27948

Description: Remove & replace rotten framing & siding @ 3rd floor back of house, remove & replace 5 impact & 2

non-impact windows

Construction Value: 13000.00

Construction Type: Repair

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit:

Foundation Type:

see file

Septic Permit: CAMA Permit:

na

na na FEMA Flood Zone:

BFF:

ae 10

Flood Permit:

2017.

#### Conditions:

PW Permit#

CALL FOR ALL REQUIRED INSPECTIONS; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Call for inspection of any rot repairs. Review window and door handout. Call for final inspection

Total Fees Paid/Due:

165.00

Invoice #:

2017-01327

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**Building Inspector** 

12/29/2017

Responsible Party

Date



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9917

Location: 77 Landfall Loop

Parcel: 022388000 PIN: 986712852015

**District: 20- SOUTHERN SHORES** 

Subdivision: CHICAHAUK LotBlkSect: LOT: 215 BLK: SEC: KITTRICK, KATHLEEN A TIC WILTON-JONES, MURRAY S TIC

6605 WALDO CT

**ALEXANDRIA VA 22315** 

PHONE #: 703-606-6003

CELL #:

**BUSINESS NAME: Outer Banks Cottage Renovations** 

**CONTRACTOR'S NAME: Thomas Stalheber** 

**ADDRESS: PO Box 719** 

CITY, STATE, ZIP: Kitty Hawk, NC 27949

OFFICE#:

CELL#: 252-207-7269

FAX#:

EMAIL: tom@obxcottagerenovations.com

NC G.C. LICENSED CONTRACTOR: \_\_\_\_YES \_\_X\_NO

NC G.C. LICENSE NUMBER:

LIMITATION: CLASSIFICATION: QUALIFIER:

LIEN AGENT:

n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel = kitchen, associated electrical, plumbing and gas work and replace flooring and fireplace – NO increase in footprint or square footage of dwelling

#### SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated

| TYPE OF CONSTRUCTION: Remodel   | TYPE OF FOUNDATION: | PERMIT TYPE: Residential             |
|---------------------------------|---------------------|--------------------------------------|
|                                 | HEAT:               | RESIDENCE/2nd HOME/RENTAL: 2nd Home  |
| TOTAL HEATED/LIVING AREAS (SF): | A/C:                | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):    | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                |
|                                 | EXTERIOR WALLS:     | ZONING PERMIT #: n/a                 |
| NUMBER OF STORIES:              | FIREPLACE: gas      | DATE ISSUED:                         |
| BEDROOMS:                       | ROOF:               |                                      |
| SEPTIC CAPACITY # OF PERSONS:   | INSULATION:         | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                 | ELEVATOR (SF):      | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:           | DECKS (SF):         | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:        | PORCHES (SF):       | DATE ISSUED:                         |
| FLOOD ZONE: Shaded X            | WINDOWS MAKE:       |                                      |
| BASE FLOOD ELEVATION: PLUS 2FT= | TYPE:               |                                      |

responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifles that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TAL CONSTRUCTION COST                              | \$27,700 |                            |          |          |
|--|----------|----------------------------|----------|----------|
| ATED/LIVING AREA (sf)                              |          | X .60/sf (single family )  | =        | \$       |
| w square footage)                                  |          | X .75/sf (all others)      | =        |          |
| N-HEATED AREA (sf)                                 |          | X .30/sf (single family)   | =        | \$       |
| w square footage)                                  |          | X .35/sf (all others)      | =        |          |
| MODEL/REPAIR/ALTERATION additional square footage) | \$27,700 | X \$10 per \$1,000 of cost | =        | \$277.00 |
|  |          | Pool                       | = \$125  | \$       |
|  |          | Zoning Permit Fee          | = \$50   | \$       |
|  |          | Plan Review Fee = \$150    | or \$100 | \$       |
|  |          | Minimum Permit Fee         | = \$100  | \$       |
|  |          | Homeowner's Recovery       | Fund\$10 | \$       |
| CIL  |          | TOTAL FEE                  |          | \$277.00 |

Applicant - Owner/Contractor

(Please print and sign name)

11-29-17

Date Issued

Building/Code/Zoning Official

Date Approved



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9913

Location: 8 Eleventh Avenue

Parcel: 021288000 PIN: 986806380745

District: 20- SOUTHERN SHORES Subdivision: SEA CREST VILLAGE LotBlkSect: LOT: 27 BLK: 57 SEC: IRWIN-MCCAUGHEY, ELIZABETH 8 ELEVENTH AVE

KITTY HAWK NC 27949

PHONE #: 609-558-8062

CELL #:

**BUSINESS NAME: Ecco Remodeling, Inc.** 

**CONTRACTOR'S NAME:** 

ADDRESS: 1429 Crossways Blvd

CITY, STATE, ZIP: Chesapeake, VA 23320

OFFICE#: 757-424-0022

CELL#: FAX#: EMAIL: NC G.C. LICENSED CONTRACTOR: \_\_YES \_X\_NO

NC G.C. LICENSE NUMBER:

LIMITATION: CLASSIFICATION: QUALIFIER:

**LIEN AGENT:** 

n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Enclose porch with glass walls – area to remain non-heated only

SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated

| TYPE OF CONSTRUCTION: Addition - Enclose | TYPE OF FOUNDATION: | PERMIT TYPE: Residential             |
|--|---------------------|--------------------------------------|
| porch                                    | HEAT:               | RESIDENCE/2nd HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF):          | A/C:                | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF): 280         | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                |
|  | EXTERIOR WALLS:     | ZONING PERMIT #: n/a                 |
| NUMBER OF STORIES:                       | FIREPLACE:          | DATE ISSUED:                         |
| BEDROOMS:                                | ROOF:               |                                      |
| SEPTIC CAPACITY # OF PERSONS:            | INSULATION:         | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                          | ELEVATOR (SF):      | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:                    | DECKS (SF):         | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:                 | PORCHES (SF):       | DATE ISSUED:                         |
| FLOOD ZONE: AE                           | WINDOWS MAKE:       |                                      |
| BASE FLOOD ELEVATION: 9ft PLUS 2FT= 11ft | TYPE:               |                                      |

responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TOTAL CONSTRUCTION COST                                  | \$19,750 |   |          |
|--|----------|---|----------|
| HEATED/LIVING AREA (sf) (new square footage)             |          | X .60/sf (single family) =<br>X .75/sf (all others) = | \$       |
| NON-HEATED AREA (sf) (new square footage)                | 280      | X .30/sf (single family) =<br>X .35/sf (all others) = | \$       |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$       | X \$10 per \$1,000 of cost =                          | \$       |
|  |          | Pool = \$125  | \$       |
|  |          | Zoning Permit Fee = \$50                              | \$       |
|  |          | Plan Review Fee = \$150 or \$100                      | \$       |
|  |          | Minimum Permit Fee = \$100                            | \$       |
|  |          | Homeowner's Recovery Fund\$10                         | \$       |
| 1 - 01   |          | TOTAL FEE   | \$100.00 |

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

12-1-201

11-28-17

Date Approved

Building/Code/Zoning Official



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

## RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT** BUILDING PERMIT #9923

Location: 1 Third Avenue

Parcel: 021060000 PIN: 986810458266

**District: 20- SOUTHERN SHORES** Subdivision: SEA CREST VILLAGE LotBlkSect: LOT: 4 BLK: 47 SEC:

**BOTTOMLEY, BRUCE D EUX BOTTOMLEY, SHARON A EUX 30 LOST DISTRICT DR NEW CANAAN CT 06840** 

PHONE #: 203-918-3121

CELL #:

**BUSINESS NAME: Joseph Edward Rhodes, Jr** 

**CONTRACTOR'S NAME: Joe Rhodes** 

ADDRESS: 235 Roanoke Dr.

CITY, STATE, ZIP: Kill Devil Hills, NC 27948

OFFICE#:

CELL#: 252-261-7020

FAX#:

EMAIL: joeobx7@gmail.com

NC G.C. LICENSED CONTRACTOR: \_\_X\_YES \_\_\_NO

NC G.C. LICENSE NUMBER: 23949

LIMITATION: Intermediate **CLASSIFICATION: Building** 

QUALIFIER: Joseph Edward Rhodes, Jr.

LIEN AGENT: n/a

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Repair existing house pilings -

sister pilings

SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated

| TYPE OF CONSTRUCTION: Repair            | TYPE OF FOUNDATION: piling | PERMIT TYPE: Residential             |
|---|----------------------------|--------------------------------------|
|   | HEAT:                      | RESIDENCE/2nd HOME/RENTAL: 2nd Home  |
| TOTAL HEATED/LIVING AREAS (SF):         | A/C:                       | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):            | INTERIOR WALLS:            | ZONING DISTRICT: RS-1                |
|   | EXTERIOR WALLS:            | ZONING PERMIT #: n/a                 |
| NUMBER OF STORIES:                      | FIREPLACE:                 | DATE ISSUED:                         |
| BEDROOMS:                               | ROOF:                      |                                      |
| SEPTIC CAPACITY # OF PERSONS:           | INSULATION:                | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                         | ELEVATOR (SF):             | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:                   | DECKS (SF):                | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:                | PORCHES (SF):              | DATE ISSUED:                         |
| FLOOD ZONE: VE                          | WINDOWS MAKE:              |                                      |
| BASE FLOOD ELEVATION: 12FT PLUS 2FT= 14 | FT TYPE:                   |                                      |

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State **Building Code and all other applicable** State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulațions and laws.

| TOTAL CONSTRUCTION COST                                  | \$5,600 |  |          |
|--|---------|--|----------|
| HEATED/LIVING AREA (sf) (new square footage)             |         | X .60/sf (single family ) =<br>X .75/sf (all others) = | \$       |
| NON-HEATED AREA (sf) (new square footage)                |         | X .30/sf (single family) =<br>X .35/sf (all others) =  | \$       |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$5,600 | X \$10 per \$1,000 of cost =                           | \$       |
|  |         | Pool = \$125   | \$       |
|  |         | Zoning Permit Fee = \$50                               | \$       |
|  |         | Plan Review Fee = \$150 or \$100                       | \$       |
|  |         | Minimum Permit Fee = \$100                             | \$100.00 |
|  |         | Homeowner's Recovery Fund\$10                          | \$10.00  |
| 1  |         | TOTAL FEE  | \$110.00 |

| Applicant - | Owner/ | Contractor   |
|-------------|--------|--|
|             |        | The second secon |

(Please print and sign name)

Date Issued

**Building/Code/Zoning Officia** 

**Date Approved** 



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9924

**Location: 4 Purple Martin Lane** 

Parcel: 021664000 PIN: 986815545016

**District: 20- SOUTHERN SHORES** 

Subdivision: SO/SH AMENDED BLKS 34-37 SEC 3

LotBlkSect: LOT: B BLK: 37 SEC: 3

KIRKHAVEN LLC 2300 BRYAN PARK AVE RICHMOND VA 23228

PHONE #: 804-357-1137

CELL#:

**BUSINESS NAME:** 

**CONTRACTOR'S NAME: David Martin** 

ADDRESS: 105 Trout Ct

CITY, STATE, ZIP: Grandy, NC 27939

OFFICE#:

CELL#: 252-207-1745

FAX#: EMAIL:

| NC | G.C. | LICENSED | CONTRACTO | R:YES | X_NC |
|----|------|----------|-----------|-------|------|
|    |      |          |           |       |      |

NC G.C. LICENSE NUMBER:

LIMITATION: CLASSIFICATION: QUALIFIER:

LIEN AGENT:

n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Repair deck boards, step treads, risers and deck railings

SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated

| TYPE OF CONSTRUCTION: Repair              | TYPE OF FOUNDATION: | PERMIT TYPE: Residential             |
|---|---------------------|--------------------------------------|
|   | HEAT:               | RESIDENCE/2nd HOME/RENTAL: Rental    |
| TOTAL HEATED/LIVING AREAS (SF):           | A/C:                | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):              | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                |
|   | EXTERIOR WALLS:     | ZONING PERMIT #: n/a                 |
| NUMBER OF STORIES:                        | FIREPLACE:          | DATE ISSUED:                         |
| BEDROOMS:                                 | ROOF:               |                                      |
| SEPTIC CAPACITY # OF PERSONS:             | INSULATION:         | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                           | ELEVATOR (SF):      | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:                     | DECKS (SF):         | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:                  | PORCHES (SF):       | DATE ISSUED:                         |
| FLOOD ZONE: VE                            | WINDOWS MAKE:       |                                      |
| BASE FLOOD ELEVATION: 12FT PLUS 2FT= 14FT | TYPE:               |                                      |

responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TOTAL CONSTRUCTION COST                                  | \$26,748 |  |          |
|--|----------|--|----------|
| HEATED/LIVING AREA (sf)<br>(new square footage)          |          | X .60/sf (single family ) =<br>X .75/sf (all others) = | \$       |
| NON-HEATED AREA (sf) (new square footage)                |          | X .30/sf (single family) =<br>X .35/sf (all others) =  | \$       |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$26,748 | X \$10 per \$1,000 of cost =                           | \$267.48 |
|  |          | Pool = \$125   | \$       |
|  |          | Zoning Permit Fee = \$50                               | \$       |
|  |          | Plan Review Fee = \$150 or \$100                       | \$       |
|  |          | Minimum Permit Fee = \$100                             | \$       |
|  |          | Homeowner's Recovery Fund\$10                          | \$       |
|  |          | TOTAL FEE  | \$267.48 |

| 11.60  | 741      | 200  | Corner -   |
|--------|----------|------|------------|
| Applic | ant - Ow | ner/ | Contractor |
| D.     | -1-      | 1    |            |
| וו ר   | VV       |      | 1.         |

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

## **TOWN OF SOUTHERN SHORES**

5375 N Virginia Dare Trl Southern Shores NC 27949 (252) 261-2394 tel (252) 255-0876 fax www.southernshores-nc.gov



## SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 12-6-17

PROJECT ADDRESS 16 5 - Dogwood 700:1

Owner Dare Co. School System Kitt Hunt W.C.
Mailing Address 3020 South Wishiswile Ave 2799
City, State, Zip 1935 Had W.C. 27959
Phone 252-980-8888

Permit Number 9935 Fee \$\_h\_G\_ waived

| ELECTRICAL = Licensee Name                             | NC License/Classification       |
|--|---------------------------------|
| Company Name   |                                 |
| Address  | Phone                           |
| City State & zɪp                                       | Estimated Project Cost          |
| Description of Work:                                   |                                 |
| PLUMBING = Licensee Name                               | NC License/Classification       |
| Company Name   |                                 |
| Address  |                                 |
| City State & zīp                                       |                                 |
| GAS = Licensee Name                                    | NC License/Classification       |
| Company Name   |                                 |
| Address  |                                 |
| Description of Work:                                   | Estimated Project Cost          |
| MECHANICAL = Licensee Name Tom Bozard                  | NC License/Classification       |
| Company Name ZBZ + ASSOCIATES  Address 557 Control Dr. | Phone 757-463-5331 /251-33      |
| City State & zip VA. Brack VA. 23454                   | Estimated Project Cost #300,000 |
| Description of Work: Change out Existers               | 200 ton chiller with news 200   |
| Ton Chillet  |                                 |
| IRE SPRINKLER = Licensee Name                          | NC License/Classification       |
| Company Name   |                                 |
| Address  | Phone                           |
| City State & zıp                                       | Estimated Project Cost          |

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee

Date

Signature of Permit Official D

12-6-17

#### **TOWN OF SOUTHERN SHORES**

5375 N Virginia Dare Trl Southern Shores NC 27949 (252) 261-2394 tel (252) 255-0876 fax www.southernshores-nc.gov



## SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 12/04/2017

PROJECT ADDRESS 183 CHIAHAUK TRL

Owner JAY & CAROL BRUCE

Mailing Address 183 CHICAHAUK TRL

City, State, Zip SOUTHERN SHORES, NC 27949

Phone 252-261-6068 CELL 252-256-1399

| Permit Number   |   |
|---|---|
| EXISTING Building Permit Number NO FEE (if wo               | ork is associated with a Building Permit) |
| ELECTRICAL = Licensee Name_TIMOTHIE GRIFFITHS               | NC License/Classification26180-U          |
| Company Name GRIFFITHS ELECTRICAL CONTRACTOR                |   |
| Address_P.O. BOX 82   | Phone 252-599-7891                        |
| City State & zip_HARBINGER. NC 27941                        | Estimated Project Cost                    |
| Description of Work: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX   | LINE VOLTAGE ELECTRICAL WIRING            |
| PLUMBING = Licensee Name                                    | NC License/Classification                 |
| Company Name  |   |
| Address   | Phone                                     |
| City State & zip  | Estimated Project Cost                    |
| Description of Work:  |   |
| GAS = Licensee Name   | NC License/Classification                 |
| Company Name  |   |
| Address   | Phone                                     |
| City State & zip  | Estimated Project Cost                    |
| Description of Work:  |   |
| MECHANICAL = Licensee Name STEVE SMITH                      | NC License/Classification 30070 H31       |
| Company Name_ AIR-O-SMITH, INC.                             |   |
| Address 330 DOGWOOD TRAIL                                   | Phone <u>252-261-5238</u>                 |
| City State & zip SOUTHERN SHORES NC 27949                   | Estimated Project Cost                    |
| Description of Work: REPLACE (1) 2-TON 18 SEER SYSTEM and ( | · ·                                       |
| FIRE SPRINKLER = Licensee Name                              | NC License/Classification                 |
| Company Name  |   |
| Address   | Phone                                     |
| City State & zip  | Estimated Project Cost                    |
| Description of Work:  | · — — — —                                 |

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project

permitted herein

Signature of Licensee

Date

Signature of Permit Official

12-10-1

Jate



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9922

| .ocation: | 108 | Osprev | Lane |
|-----------|-----|--------|------|

Parcel: 022298000 PIN: 986709263866

**District: 20- SOUTHERN SHORES** 

Subdivision: SO/SH 114-117 126,127 200-202

LotBlkSect: LOT: 1 BLK: 126 SEC:

| 011 | ICEBII | CCC | A LA | BAE. |
|-----|--------|-----|------|------|

CONTRACTOR'S NAME: Property Owner

ADDRESS:

CITY, STATE, ZIP:

OFFICE#: CELL#: FAX#:

**EMAIL:** 

| RIDDLE, CORI N                   |  |  |  |  |
|----------------------------------|--|--|--|--|
| 1313 S CROATAN HWY               |  |  |  |  |
| <b>KILL DEVIL HILLS NC 27948</b> |  |  |  |  |

| PHONE #: |  |
|----------|--|
|----------|--|

CELL #: 252-207-1534

NC G.C. LICENSED CONTRACTOR: \_\_\_\_YES \_X\_\_NO

NC G.C. LICENSE NUMBER:

LIMITATION: CLASSIFICATION: QUALIFIER:

**LIEN AGENT:** 

n/a

DESCRIPTION OF WORK — (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel — interior (footprint, layout, # of bedrooms and septic capacity to remain unchanged), new electrical, plumbing, mechanical work and garage doors

SPECIAL CONDITIONS-All wood below base flood elevation is required to be treated - Nonconforming structure per FEMA-permit to include bringing into compliance

| TYPE OF CONSTRUCTION: Remodel           | TYPE OF FOUNDATION:     | PERMIT TYPE: Residential             |
|---|-------------------------|--------------------------------------|
|   | HEAT: Heat Pump         | RESIDENCE/2nd HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF):         | A/C: Heat Pump          | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):            | INTERIOR WALLS: Drywall | ZONING DISTRICT: RS-1                |
|   | EXTERIOR WALLS:         | ZONING PERMIT #: n/a                 |
| NUMBER OF STORIES:                      | FIREPLACE:              | DATE ISSUED:                         |
| BEDROOMS:                               | ROOF:                   |                                      |
| SEPTIC CAPACITY # OF PERSONS:           | INSULATION: Batt        | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                         | ELEVATOR (SF):          | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:                   | DECKS (SF):             | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:                | PORCHES (SF):           | DATE ISSUED:                         |
| FLOOD ZONE: AE                          | WINDOWS MAKE:           |                                      |
| BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT | TYPE:                   |                                      |

responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TOTAL CONSTRUCTION COST                                  | \$100,000 |                                  |            |
|--|-----------|----------------------------------|------------|
| HEATED/LIVING AREA (sf)                                  |           | X .60/sf (single family) =       | \$         |
| (new square footage)                                     |           | X .75/sf (all others) =          |            |
| NON-HEATED AREA (sf)                                     |           | X .30/sf (single family) =       | \$         |
| (new square footage)                                     |           | X .35/sf (all others) =          |            |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$100,000 | X \$10 per \$1,000 of cost =     | \$1,000.00 |
|  |           | Paol = \$125                     | \$         |
|  |           | Zoning Permit Fee = \$50         | \$         |
|  |           | Plan Review Fee = \$150 or \$100 | \$100.00   |
|  |           | Minimum Permit Fee = \$100       | \$         |
|  |           | Homeowner's Recovery Fund\$10    | \$         |
| 0 0  |           | TOTAL FEE                        | \$1,100.00 |

Applicant - Owner/Contractor

(Please print and sign name)

(SICI VI W. d.d.)

Date Issued

a-4-

Building/Code/Zoning Official

Date Approved

TOWN OF **SOUTHERN SHORES** 5375 N Virginia Dare Trl Southern Shores, NC 27949 (252) 261-2394 tel (252) 255-0876 fax www.southernshores-nc.gov

Description of Work.

Permit Number

Fee \$ 100 00

Address\_

City State & zip\_\_\_\_

Company Name

City State & zip\_\_\_\_

Description of Work:

Address\_

Description of Work:

3AS = Licensee Name\_\_\_\_\_

Address POBox 2209



# SUBCONTRACTOR SIGN OFF AND/OR PERMIT Date 12-6-17 PROJECT ADDRESS 3 Mocking bird In City, \$tate, Zip Williams EXISTING Building Permit Number \_\_\_\_\_\_ 'NO FEE \_\_\_\_\_ ELECTRICAL = Licensee Name GEORGE P VIAL NC License/Classification 23856-2 Company Name NOCTH CAROLINA AIR COND Address Po Box 2209 Phone \_ 261-3013 City State & zip Kithy Hawk NC 27949 Estimated Project Cost \_\_\_\_\_ PLUMBING = Licensee Name\_\_\_\_\_ NC License/Classification \_\_\_\_ Company Name\_\_\_\_\_ Phone Estimated Project Cost \_\_\_\_\_ NC License/Classification \_\_\_\_ Phone \_\_\_ Estimated Project Cost AECHANICAL = Licensee Name TOHA W. Pugh NC License/Classification 19037/4-1-1 H2 H3 Company Name NORTH CAROLINA AIR COND. Phone 261-3013 City State & zip Kith Hawk NC 27949 Estimated Project Cost 6790 Description of Work: Replacement 2 lunter

hereby certify that all information in this application is correct and all work will comply with the State Building Code and il other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the pproved plans and specification for the project permitted herein.

Signature of Licensee

Signature of Permit Official

## **TOWN OF SOUTHERN SHORES**

5375 N Virginia Dare Trl Southern Shores NC 27949 (252) 261-2394 tel (252) 255-0876 fax www.southernshores-nc.gov



## SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 12-11-17

PROJECT ADDRESS 178 Ocean Blud

Owner Ord Boto Day 5 - MINOTO

Owner <u>Que & Bathy Dawl 5</u> - 00
Mailing Address
City, State, Zip
Phone

Permit Number 9938
Fee \$ 100

| ELECTRICAL= Licensee Name_Ollin Boll | NC License/Classification 12292- |
|--------------------------------------|----------------------------------|
| Company Name Electure - A            |                                  |
| Address 10.1302 2/14                 | Phone <u>252-302-51/3</u>        |
| City State & zip Kitte Howk Mc 27944 | Estimated Project Cost 200.      |
| Description of Work: Replace (2)-    | muce Disconsit SWITCHOS          |
| Dominion Placet It                   | 317 -36 - 371                    |
| PLUMBING = Licensee Name             | NC License/Classification        |
| Company Name                         |                                  |
| Address                              | Phone                            |
| City State & zip                     | Estimated Project Cost           |
| Description of Work:                 |                                  |
| GAS = Licensee Name                  | NC License/Classification        |
| Company Name                         |                                  |
| Address                              | Phone                            |
| City State & zip                     | Estimated Project Cost           |
| Description of Work:                 |                                  |
| MECHANICAL = Licensee Name           | NC License/Classification        |
| Company Name                         |                                  |
| Address                              | Phone                            |
| City State & zip                     | Estimated Project Cost           |
| Description of Work:                 |                                  |
| IRE SPRINKLER = Licensee Name        | NC License/Classification        |
| Company Name                         |                                  |
| Address                              | Phone                            |
| City State & zip                     | Estimated Project Cost           |
| Description of Work:                 | P = =                            |

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee Date

Signature of Permit Official

Date |



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

## RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT** BUILDING PERMIT #9927

Location: 107 High Dune Loop

Parcel: 022429263 PIN: 986716835823

**District: 20- SOUTHERN SHORES** 

**Subdivision: CHICAHAUK** LotBlkSect: LOT: 263 BLK: SEC: KRAEMER, BETTE J BURKART SOL **107 HIGH DUNE LOOP SOUTHERN SHORES NC 27949** 

PHONE #: 252-261-2614

NC G.C. LICENSE NUMBER:

CELL#:

| - | 20.0 |  | ESS | <br> | <b>.</b> |
|---|------|--|-----|------|----------|
|   |      |  |     |      |          |
|   |      |  |     |      |          |

CONTRACTOR'S NAME: Property Owner

**ADDRESS:** CITY, STATE, ZIP: OFFICE#:

CELL#: FAX#: **EMAIL:** 

LIEN AGENT:

LIMITATION:

QUALIFIER:

CLASSIFICATION:

n/a

NC G.C. LICENSED CONTRACTOR: \_\_\_\_YES \_X\_NO

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): 11' x 7' extension of existing attached garage

### **SPECIAL CONDITIONS -**

| TYPE OF CONSTRUCTION: Addition  | TYPE OF FOUNDATION: | PERMIT TYPE: Residential             |
|---------------------------------|---------------------|--------------------------------------|
|                                 | HEAT:               | RESIDENCE/2nd HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF): | A/C:                | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF): 77 | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                |
|                                 | EXTERIOR WALLS:     | ZONING PERMIT #: 2017- 107           |
| NUMBER OF STORIES:              | FIREPLACE:          | DATE ISSUED: 12-11-17                |
| BEDROOMS:                       | ROOF:               |                                      |
| SEPTIC CAPACITY # OF PERSONS:   | INSULATION:         | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                 | ELEVATOR (SF):      | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:           | DECKS (SF):         | SEPTIC PERMIT #: 18139               |
| STORAGE ENCLOSURE: POOL:        | PORCHES (SF):       | DATE ISSUED: 12/8/2017               |
| FLOOD ZONE: Shaded X            | WINDOWS MAKE:       |                                      |
| BASE FLOOD ELEVATION: PLUS 2FT= | TYPE:               |                                      |

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State **Building Code and all other applicable** State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TOTAL CONSTRUCTION COST        | \$15,000                              |                            |          |          |
|--------------------------------|---------------------------------------|----------------------------|----------|----------|
| HEATED/LIVING AREA (sf)        |                                       | X .60/sf (single family )  | =        | Ś        |
| (new square footage)           |                                       | X .75/sf (all others)      | =        |          |
| NON-HEATED AREA (sf)           | 77                                    | X .30/sf (single family)   | =        | ŚO       |
| (new square footage)           |                                       | X .35/sf (all others)      | =        | * -      |
| REMODEL/REPAIR/ALTERATION      | \$                                    | X \$10 per \$1,000 of cost | =        | Ś        |
| (no additional square footage) |                                       |                            |          | •        |
|                                |                                       | Pool                       | = \$125  | \$       |
|                                |                                       | Zoning Permit Fee          | = \$50   | \$50.00  |
|                                |                                       | Plan Review Fee = \$150    | or \$100 | \$       |
|                                |                                       | Minimum Permit Fee         | = \$100  | \$100.00 |
|                                | · · · · · · · · · · · · · · · · · · · | Homeowner's Recovery I     | und\$10  | \$       |
|                                | -                                     | TOTAL FEE                  |          | \$150.00 |
| Brainer Spill                  | O. Burk                               | art Kraeme                 | r 13-11  | 1-17     |

| 120070176             | 700 -77  |                          |                     |
|-----------------------|----------|--------------------------|---------------------|
| Applicant - Owner/Co. | ntractor | (Please p                | rint and sign name) |
| DA                    | COUT     | $C \gamma \gamma \gamma$ |                     |
| Building/Code/Zoning  | Official | MIC.                     | <u> </u>            |
| <del></del>           |          | 777                      |                     |

Date Issued

**Date Approved** 



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9929

CAROLINA WWW.SO

Location: 158 Chicahauk Trl

Parcel: 022383518 PIN: 986711576452

**District: 20- SOUTHERN SHORES** 

Subdivision: CHICAHAUK LotBlkSect: LOT: 518 BLK: SEC: BUSS, STEPHEN L EUX BUSS, SANDRA M EUX 127 PRINCE ARTHUR DR YORKTOWN VA 23693

PHONE #: 252-715-2928

**NC G.C. LICENSE NUMBER:** 

CELL #: 757-642-5586

**BUSINESS NAME:** 

**CONTRACTOR'S NAME: Property Owner** 

ADDRESS:

CITY, STATE, ZIP:

OFFICE#: CELL#: FAX#:

**EMAIL:** 

! |

CLASSIFICATION: QUALIFIER:

LIEN AGENT:

LIMITATION:

n/a

NC G.C. LICENSED CONTRACTOR: \_\_\_\_YES \_\_X\_NO

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Kitchen remodel with associated electrical, plumbing, mechanical – no increase in footprint

SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated

| TYPE OF CONSTRUCTION: Remodel   | TYPE OF FOUNDATION: | PERMIT TYPE: Residential             |
|---------------------------------|---------------------|--------------------------------------|
|                                 | HEAT:               | RESIDENCE/2nd HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF): | A/C:                | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):    | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                |
|                                 | EXTERIOR WALLS:     | ZONING PERMIT #: n/a                 |
| NUMBER OF STORIES:              | FIREPLACE:          | DATE ISSUED:                         |
| BEDROOMS:                       | ROOF:               |                                      |
| SEPTIC CAPACITY # OF PERSONS:   | INSULATION:         | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                 | ELEVATOR (SF):      | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:           | DECKS (SF):         | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:        | PORCHES (SF):       | DATE ISSUED:                         |
| FLOOD ZONE: Shaded X            | WINDOWS MAKE:       |                                      |
| BASE FLOOD ELEVATION: PLUS 2FT= | TYPE:               |                                      |

responsible for the following: All work done shall comply with the State
Building Code and all other applicable
State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

|            |                                  | \$2,515 | TOTAL CONSTRUCTION COST                                     |
|------------|----------------------------------|---------|---|
|            | X .60/sf (single family ) =      |         | HEATED/LIVING AREA (sf)                                     |
|            | X .75/sf (all others) =          |         | (new square footage)  |
| 9          | X .30/sf (single family) =       |         | NON-HEATED AREA (sf)  |
| 1          | X .35/sf (all others) =          |         | (new square footage)  |
| \$0        | X \$10 per \$1,000 of cost =     | \$2,515 | REMODEL/REPAIR/ALTERATION<br>(no additional square footage) |
| \$         | Pool = \$125                     |         |   |
| \$         | Zoning Permit Fee = \$50         |         |   |
| \$         | Plan Review Fee = \$150 or \$100 |         |   |
| \$100.00   | Minimum Permit Fee = \$100       |         |   |
| \$         | Homeowner's Recovery Fund\$10    |         |   |
| \$100 00\$ | TOTAL FEE                        |         |   |

|             | -      |            |
|-------------|--------|------------|
| Applicant - | Owner/ | Contractor |

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

1/5

Date Approved



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Phone (252) 255-0876 - Fax www.southernshores-nc.gov

## RESIDENTIAL

# BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #: 9930

Parcel: 021199000 PIN: 986806377914 Location: 1 NINTH AVE

**District:** [20] SOUTHERN SHORES **Subdiv:** [S265] SEA CREST VILLAGE **Lot-Block-Sect:** LOT: 2 BLK: 54 SEC: Owner: REGAN, PATRICK D TTEE
Owner: REGAN, JOANNE M TTEE

Address: 1 NINTH AVE

KITTY HAWK NC 27949

| PHONE #: | <br>L | CELL #: |  |  |
|----------|-------|---------|--|--|
|          |       |         |  |  |
|          |       |         |  |  |

BUSINESS NAME: Macko Construction CONTRACTOR'S NAME: Brian Susco

ADDRESS: PO Box 3689

CITY, STATE, ZIP: Kill Devil Hills, NC 27948

OFFICE#: 252-480-6411 CELL#: 252-202-2028 FAX#: 252-449-6411

EMAIL: brian@mackoconstruction.com

NC G.C. LICENSED CONTRACTOR: \_\_X\_YES \_\_\_\_NO NC G.C. LICENSE NUMBER: 62049

LIMITATION: Unlimited
CLASSIFICATION: Building
QUALIFIER: Brian K Susco

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel – replace windows

#### **SPECIAL CONDITIONS -**

| TYPE OF CONSTRUCTION: Remodel             | TYPE OF FOUNDATION: | PERMIT TYPE: Residential             |
|---|---------------------|--------------------------------------|
| HEATED/LIVING AREAS (SF):                 | HEAT:               | RESIDENCE OR RENTAL:                 |
| NON-HEATED AREAS (SF):                    | A/C:                | PROPERTY USE: Single family dwelling |
| NUMBER OF STORIES:                        | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                |
| HABITABLE ROOMS:                          | EXTERIOR WALLS:     | ZONING PERMIT #: n/a                 |
| BEDROOMS:                                 | FIREPLACE:          | DATE ISSUED:                         |
| OCCUPANCY:                                | ROOF:               |                                      |
| BATHS: ½ BATHS:                           | INSULATION:         | CAMA PERMIT #: n/a                   |
| GARAGE: SHED: STORAGE ENCLOSURE:          | FLOORING:           | DATE ISSUED:                         |
| FLOOD ZONE: VE                            | ELEVATOR (SF):      | SEPTIC PERMIT #: n/a                 |
| BASE FLOOD ELEVATION: 12FT PLUS 2FT= 14Ft | WINDOWS: Andersen   | DATE ISSUED:                         |
|   | TYPE: Double Hung   | WATER TAP#:                          |
|   |                     |                                      |

\*\*\*The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| ESTIMATED CONSTRUCTION COST = | \$75,000 |  |          |
|-------------------------------|----------|--|----------|
| HEATED/LIVING AREA (sf) =     |          | X .60/sf (single family ) =<br>  X .75/sf (all others) = |          |
| NON-HEATED AREA (sf) =        |          | X .30/sf (single family) =<br>X .35/sf (all others) =    |          |
| REMODELING COST =             | \$75,000 | X \$10 per \$1,000 of cost =                             | \$750.00 |
|                               |          | Pool = \$125   |          |
|                               |          | Other = \$100  |          |
|                               |          | Plan Review Fee = \$150 or \$100                         |          |
|                               |          | Minimum Permit Fee =\$100                                |          |
|                               |          | Homeowner's Recovery Fund = \$10                         | \$10.00  |
|                               |          | TOTAL FEE  | \$760.00 |

| Man Krusco                             | Snigar C Jusco               | 12-14-17          |
|--|------------------------------|-------------------|
| Applicant - Owner/Contractor  BOULS OF | (Please print and sign name) | Date Issued 13-17 |
| Building/Code/Zoning Official          | 15                           | Date Approved     |



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9919

Location: 38 Juniper Trail

Parcel: 022786000 PIN: 986720726348 District: 20- SOUTHERN SHORES

**Subdivision: SO/SH SOUNDSIDE BLKS 170-175** 

LotBlkSect: LOT: 7 BLK: 171 SEC:

BUSINESS NAME: KJ Construction CONTRACTOR'S NAME: Keith Dobie

**ADDRESS: PO Box 242** 

CITY, STATE, ZIP: Kitty Hawk, NC 27949

OFFICE#:

CELL#: 252-207-6589

FAX#: EMAIL: HALEY, LARRY EUGENE EUX HALEY, JOAN NAPIER EUX

**38 JUNIPER TRL** 

**KITTY HAWK NC 27949** 

PHONE #: 252-256-0090

CELL#:

NC G.C. LICENSED CONTRACTOR: \_\_X\_YES \_\_\_NO

NC G.C. LICENSE NUMBER: 59936

LIMITATION: Unlimited
CLASSIFICATION: Building
QUALIFIER: Keith Dobie

LIEN AGENT: N/A

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a 11.5' x 22' attached carport with a roof only

SPECIAL CONDITIONS - not permitted to be enclosed - roofed only

| TYPE OF CONSTRUCTION: Addition  | TYPE OF FOUNDATION: Pilings | PERMIT TYPE: Residential             |
|---------------------------------|-----------------------------|--------------------------------------|
|                                 | HEAT:                       | RESIDENCE/2nd HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF): | A/C:                        | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):    | INTERIOR WALLS:             | ZONING DISTRICT: RS-1                |
|                                 | EXTERIOR WALLS:             | ZONING PERMIT #: 2017-106            |
| NUMBER OF STORIES:              | FIREPLACE:                  | DATE ISSUED: 12/4/2017               |
| BEDROOMS:                       | ROOF:                       |                                      |
| SEPTIC CAPACITY # OF PERSONS:   | INSULATION:                 | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS:                 | ELEVATOR (SF):              | DATE ISSUED:                         |
| GARAGE: STORAGE BLDG:           | DECKS (SF):                 | SEPTIC PERMIT #: n/a                 |
| STORAGE ENCLOSURE: POOL:        | PORCHES (SF):               | DATE ISSUED:                         |
| FLOOD ZONE: Shaded X            | WINDOWS MAKE:               |                                      |
| BASE FLOOD ELEVATION: PLUS 2FT= | TYPE:                       |                                      |

responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicable certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

|          |  | \$6,500 | TOTAL CONSTRUCTION COST                                  |
|----------|--|---------|--|
| \$       | X .60/sf (single family ) =<br>X .75/sf (all others) = |         | HEATED/LIVING AREA (sf) (new square footage)             |
| \$n/a    | X .30/sf (single family) =<br>X .35/sf (all others) =  | 253     | NON-HEATED AREA (sf)<br>(new square footage)             |
| \$       | X \$10 per \$1,000 of cost =                           | \$      | REMODEL/REPAIR/ALTERATION (no additional square footage) |
| \$       | Pool = \$125   |         |  |
| \$50.00  | Zoning Permit Fee = \$50                               |         | · · · · · · · · · · · · · · · · · · ·                    |
| \$       | Plan Review Fee = \$150 or \$100                       |         |  |
| \$100.00 | Minimum Permit Fee = \$100                             |         |  |
| \$10.00  | Homeowner's Recovery Fund\$10                          |         |  |
| \$160.00 | TOTAL FEE  | . 6     | 1 100  |

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

NK

**Date Approved** 



| SOUTHERN SHORES  | Date 12/18/2017                                     |
|--|---|
| 5375 N Virginia Dare Trl   | PROJECT ADDRESS 121 CROOKED BACK LOOP               |
| Southern Shores, NC 27949  | Owner LOIS GREEN                                    |
| (252) 261-2394 tel<br>(252) 255-0876 fax                                   | Mailing Address 121 CROOKED BACK LOOP               |
| www.southernshores-nc.gov  | City, State, Zip SOUTHERN SHORES NC 27949           |
|  | 050 004 4000  |
| Permit Number 9936   | Phone 252-201-1280                                  |
| Fee \$ \( \( \scale \)   |   |
| EXISTING Building Permit Number  | NO FEE  |
|  |   |
| CI POTTION AND SERVICE MANAGEMENT  |   |
| ELECTRICAL = Licensee Name_FREDERICK MA                                    |   |
| Company Name         R A HOY HEATING           Address         P O BOX 179 |   |
| City State & zip KITTY HAWK, NC 27949                                      |   |
|  | ECTION OF MECH EQUIP BELOW                          |
|  |   |
| PLUMBING = Licensee Name   | NC License/Classification                           |
| Company Name   |   |
| Address  |   |
| City State & zip   |   |
| Description of Work:   |   |
| GAS = Licensee Name  | NC License/Classification                           |
| Company Name   |   |
| Address  |   |
| City State & zip   | Estimated Project Cost                              |
| Description of Work:   |   |
| MECHANICAL = Licensee Name DOUGLAS WAR                                     | CELEY NC License/Classification 13056 / H 2 & 3 P-1 |
| Company Name R A HOY HEATING   |   |
|  | Phone(252) 261-2008                                 |
| Address P O BOX 179  |   |
| Address  | Estimated Project Cost 5748                         |

16 approved plans and specification for the project permitted herein.



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

## RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT** BUILDING PERMIT #9931

Location: 32 Juniper Trail

Parcel: 022789000 PIN: 986720820204

**District: 20- SOUTHERN SHORES** 

Subdivision: SO/SH SOUNDSIDE BLKS 170-175

LotBlkSect: LOT: 10 BLK: 171 SEC:

**BUSINESS NAME: Tylerbuilt Custom Builders, Inc.** 

CONTRACTOR'S NAME: Andy Tyler ADDRESS: 2906 S Pamilico Ave

CITY, STATE, ZIP: Nags Head, NC 27959

OFFICE#:

CELL#: 252-202-2080

FAX#:

EMAIL: tylerbuilthomes@gmail.com

**NAGORNY, STEVEN A EUX** NAGORNY, CAROLYN T EUX 1337 HILLCROFT LA **YORK PA 17403** 

PHONE #: 717-817-0238

CELL #:

NC G.C. LICENSED CONTRACTOR: \_\_X\_YES \_\_\_NO

NC G.C. LICENSE NUMBER: 46649

**LIMITATION: Limited** 

CLASSIFICATION: Residential **QUALIFIER: Andrew C Tyler** 

LIEN AGENT: n/a

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Demo existing screen porch and rebuild as 20' x 14'=280sf enclosed heated living area (kitchen expansion) & remodel kitchen (new cabinets and flooring)

SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated - FEMA nonconforming structure - <50% - SI/SD forms on file

| TYPE OF CONSTRUCTION: Addition/Remodel  | TYPE OF FOUNDATION: Piling  | PERMIT TYPE: Residential             |  |
|---|-----------------------------|--------------------------------------|--|
|   | HEAT: heat pump             | RESIDENCE/2nd HOME/RENTAL: 2nd home  |  |
| TOTAL HEATED/LIVING AREAS (SF): 168     | A/C: heat pump              | PROPERTY USE: Single Family Dwelling |  |
| TOTAL NON-HEATED AREAS (SF):            | INTERIOR WALLS: drywall     | ZONING DISTRICT: RS-1                |  |
| _                                       | EXTERIOR WALLS: cedar shake | ZONING PERMIT #: n/a                 |  |
| NUMBER OF STORIES:                      | FIREPLACE:                  | DATE ISSUED:                         |  |
| BEDROOMS:                               | ROOF: asphalt               |                                      |  |
| SEPTIC CAPACITY # OF PERSONS:           | INSULATION: batt            | CAMA PERMIT #: n/a                   |  |
| BATHS: ½ BATHS:                         | ELEVATOR (SF):              | DATE ISSUED:                         |  |
| GARAGE: STORAGE BLDG:                   | DECKS:                      | SEPTIC PERMIT #: 27392               |  |
| STORAGE ENCLOSURE: POOL:                | PORCHES:                    | DATE ISSUED: 12/13/2017              |  |
| FLOOD ZONE: AE                          | WINDOWS MAKE: Viwinco       |                                      |  |
| BASE FLOOD ELEVATION: 7ft PLUS 2FT= 9ft | TYPE: vinyl double hung     | \$                                   |  |

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State **Building Code and all other applicable** State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TOTAL CONSTRUCTION COST                                  | \$45,690 |  |          |
|--|----------|--|----------|
| HEATED/LIVING AREA (sf)<br>(new square footage)          | 280      | X .60/sf (single family ) =<br>X .75/sf (all others) = | \$168.00 |
| NON-HEATED AREA (sf) (new square footage)                |          | X .30/sf (single family) =<br>X .35/sf (all others) =  | \$       |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$14,920 | X \$10 per \$1,000 of cost =                           | \$149.20 |
| -  |          | Pool = \$125   | \$       |
|  |          | Zoning Permit Fee = \$50                               | \$       |
|  |          | Plan Review Fee = \$150 or \$100                       | \$       |
|  | 00       | Minimum Permit Fee = \$100                             | \$       |
|  |          | Homeowner's Recovery Fund\$10                          | \$10.00  |
|  | ~        | TOTAL FEE  | \$327.20 |

Building/Code/Zoning Official

MUNOREW (Please print and sign name)

Date Issued

Date Approved

5375 N Virginia Dare Trl Southern Shores NC 27949 (252) 261-2394 tel (252) 255-0876 fax



## SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

**TOWN OF SOUTHERN SHORES** PROJECT ADDRESS 40 Owner Mailing Address 40 Pintal www.southemshores-nc.gov Southarn Shores NC 27949 City, State, Zip Phone Permit Number Fee \$\_\_\_OO EXISTING Building Permit Number NO FEE (if work is associated with a Building Permit) Jimny ELECTRICAL= Licensee Name NC License/Classification Services Company Name\_ Phone 252-401 Address 2 City State & zip\_ Estimated Project Cost \_ \$ Description of Work: MACASSON PLUMBING = Licensee Name\_\_\_\_ NC License/Classification Company Name\_\_\_ Address Phone \_\_\_ City State & zip\_ Estimated Project Cost \_\_\_\_\_ Description of Work: GAS = Licensee Name\_\_\_\_\_ NC License/Classification \_\_\_\_\_ Company Name\_\_\_\_\_ Phone \_\_ Address\_ City State & zip\_ Estimated Project Cost \_\_\_\_\_ Description of Work: MECHANICAL = Licensee Name\_ NC License/Classification Company Name 11/12 252-491-Address City State & zip Estimated Project Cost 4742.00 Description of Work: reat ours FIRE SPRINKLER = Licensee Name NC License/Classification Company Name\_\_ Address\_ Phone \_ City State & zip\_ Estimated Project Cost \_\_\_\_ Description of Work:

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

# RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT BUILDING PERMIT #9932

Location: 189 High Dune Loop

Parcel: 029160000 PIN: 986716836048

**District: 20- SOUTHERN SHORES** 

Subdivision: CHICAHAUK LotBlkSect: LOT: 271 BLK: SEC: MOYNAHAN, ANDREW T EUX MOYNAHAN, MARY T EUX 189 HIGH DUNE LOOP SOUTHERN SHORES NC 27949

PHONE #: 252-261-1222

CELL#: 919-247-0835

**BUSINESS NAME:** 

**CONTRACTOR'S NAME: Property Owner** 

ADDRESS: CITY, STATE, ZIP: OFFICE#:

CELL#: FAX#: EMAIL: NC G.C. LICENSED CONTRACTOR: \_\_\_\_YES \_X\_\_NO NC G.C. LICENSE NUMBER:

LIMITATION: CLASSIFICATION: QUALIFIER:

LIEN AGENT:

n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Install a pool – pool deck – fence = total area 31'x52' and construction of a 20'x20' heated pool house (to include a cabana area, storage and ½ bathroom)

### **SPECIAL CONDITIONS -**

| TYPE OF CONSTRUCTION: Accessory Pool/Pool | TYPE OF FOUNDATION: Pile and Slab | PERMIT TYPE: Residential             |
|---|-----------------------------------|--------------------------------------|
| House                                     | HEAT: electric base board         | RESIDENCE/2nd HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF): 400       | A/C:                              | PROPERTY USE: Single Family Dwelling |
| TOTAL NON-HEATED AREAS (SF):              | INTERIOR WALLS: drywall, CDX      | ZONING DISTRICT: RS-1                |
|   | EXTERIOR WALLS: Cedar Shakes      | ZONING PERMIT #: 2017-108            |
| NUMBER OF STORIES:                        | FIREPLACE:                        | DATE ISSUED: 12/19/2017              |
| BEDROOMS:                                 | ROOF: asphalt                     |                                      |
| SEPTIC CAPACITY # OF PERSONS:             | INSULATION: batt                  | CAMA PERMIT #: n/a                   |
| BATHS: ½ BATHS: 1                         | ELEVATOR (SF):                    | DATE ISSUED:                         |
| POOL: 31x52 total area                    | DECKS (SF):                       | SEPTIC PERMIT #: 27396               |
| POOL HOUSE BLDG: 20x20 total area         | PORCHES (SF):                     | DATE ISSUED: 12/13/2017              |
| FLOOD ZONE: Shaded X                      | WINDOWS MAKE: Vimco               |                                      |
| BASE FLOOD ELEVATION: PLUS 2FT=           | TYPE: Double hung & Awning        |                                      |

responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

| TOTAL CONSTRUCTION COST                                  | \$125,000 |  |          |
|--|-----------|--|----------|
| HEATED/LIVING AREA (sf) (new square footage)             | 400       | X .60/sf (single family ) =<br>X .75/sf (all others) = | \$240.00 |
| NON-HEATED AREA (sf) (new square footage)                |           | X .30/sf (single family) =<br>X .35/sf (all others) =  | \$       |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$        | X \$10 per \$1,000 of cost =                           | \$       |
|  |           | Pool = \$125   | \$125.00 |
|  |           | Zoning Permit Fee = \$50                               | \$50.00  |
|  |           | Plan Review Fee = \$150 or \$100                       | \$       |
|  |           | Minimum Permit Fee = \$100                             | \$       |
|  |           | Homeowner's Recovery Fund\$10                          | \$       |
| /  |           | TOTAL FEE  | \$415.00 |

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

## **TOWN OF SOUTHERN SHORES**

5375 N Virginia Dare Trl Southern Shores NC 27949 (252) 261-2394 tel (252) 255-0876 fax



## SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

6

Date 12-28-17

PROJECT ADDRESS 132 Puchling Pron

Owner Clarify Gangcher

Mailing Address 132 Northern From

City, State, Zip Sinethern Should NC 27949

|   | ty, State, Zip Sing There 5 kg 100 07949      |
|---|---|
| Permit Number 9938 Fee \$ 100                                 |   |
| EXISTING Building Permit Number NO FEE (if wor                | k is associated with a Building Permit)       |
| Company Name RA Har   | NC License/Classification <u>aaaaa-L</u> /LTD |
| Address Pohnx 179   | Phone <u>252-261-2008</u>                     |
| City State & zip Littly Halash                                | Estimated Project Cost Incl. In Mech          |
| Description of Work: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \    | Mint one DO Erreis                            |
| PLUMBING = Licensee Name                                      | NC License/Classification                     |
| Company Name  |   |
| Address   | Phone   |
| City State & zip  | Estimated Project Cost                        |
| Description of Work:  |   |
| GAS = Licensee Name   | NC License/Classification                     |
| Company Name  |   |
| Address   | Phone   |
| City State & zip  | Estimated Project Cost                        |
| Description of Work:  |   |
| MECHANICAL = Licensee Name Daug Washeleas Company Name AA Hay | NC License/Classification 13056/Ha 43 P-1     |
| Address_ No Boen 149  | Phone 252-261-2008                            |
| City State & zip Willy Hack rc J 49 4                         | Estimated Project Cost 55,000                 |
| Description of Work:  | ( Distributed tropics dost                    |
|   |   |
| FIRE SPRINKLER = Licensee Name                                | NC License/Classification                     |
| Company Name  |   |
| Address   | Phone   |
| City State & zip  | Estimated Project Cost                        |
| Description of Work:  |   |

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of licensee Date

Signature of Permit Official

Date



## Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

#### PERMIT

Permit NO. **17491**Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 12/4/2017

Expires: 6/2/2018

Main Permit: Main Permit

Subdivision **Project Address** Zoning KITTY HAWK BEACH REV SEC A BR-1 4231 N Virginia Dare Trail PIN Lot Block 987615538510 20 10 **Constuction Type Building Code** Flood Zone **BLDG2012** Addition VE **Phone Owner Information** Address 747 MORRIS FORD RD KATHERINE B NORTHCOTT **COLERAIN NC 27924** Phone Applicant Information Address 252-207-7269 P O Box 719 **OBX Cottage Renovations** Kitty Hawk, NC 27949 **Construction Cost:** 17420.00 309.00 Unheated Sq. Feet **License Number** 0.00 Contractor(s) Phone **Contractor Type** Total Sq. Feet: **Outer Banks Cottage** 0000 252-207-7269 General Renovations

Building Comments:

Description of Work: Construct a new detached 15 x 20 deck at

rear east side

Permit Cost - \$145.00

#### **Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map #-3720987500J; Effective-09/20/2006; An As-Built survey required prior to final inspection. See Zoning Permit for any additional requirements.

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              | _ |       | Date |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

**PERMIT** 

Permit NO. 17509

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/5/2017

Expires: 6/3/2018

Main Permit: Main Permit

**Project Address** 

719 W Kitty Hawk Road

Lot

2-R

Flood Zone

AE

Owner Information C & T Contracting, Inc.

Applicant Information

C & T Contracting

Zoning

VR-1

Block

**Constuction Type** 

**New Single-Family Home** 

Address

1700 Bell Avenue

Kill Devil Hills NC 27948

**Address** 

1700 Bell Avenue

Kitty Hawk, NC 27949

Subdivision

NORA BAUM E W BAUM ETAL

REV

PIN

987506480328

**Building Code** 

**BLDG2012** 

Phone

Phone

252-255-1084

145000.00 **Construction Cost:** 528.00 Unheated Sq. Feet 1396.00 Total Sq. Feet:

**License Number Contractor Type** Phone Contractor(s) 45367 (252)255-1084 C & T Contracting 000-000-0000 00000 Electrical **TBD** 00000 000-000-0000 Mechanical TBD 000-000-0000 Plumbing 00000 TBD

**Description of Work: New Single** Family Residence 3 bedrooms 2

baths deck

Permit Cost \$1345.00

## **Planning Conditions:**

**Building Comments:** 

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map #-3720987500J; Effective-09/20/2006; An Under Construction Elevation Certificate due prior to rough-in. An As Built, Height Certificate and a Finished Construction Elevation Certificate due prior to pre-final inspection. See Zoning Permit for further requirments.

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              | _ |       | Date |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

**PERMIT** 

Permit NO. 17513 Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/5/2017

Expires: 6/3/2018

Main Permit: Main Permit

**Project Address** 

4433 Ridge Road

Lot

6A

Flood Zone

AE

**Owner Information** 

Noah & Corissa Snyder

**Applicant Information** 

Noah Snyder

Zoning

VR-1

Block

**Constuction Type** 

**Accessory Structure** 

Address

4433 Ridge Road

Kitty Hawk NC 27949

Address

4433 Ridge Road

Kitty Hawk, NC 27949

Subdivision

JOHN L BEACHAM DIV OF LOT

F&G

PIN

986618418644

**Building Code BLDG2012** 

**Phone** 

2252-261-8710

Phone

252-202-2917

**Construction Cost:** Unheated Sq. Feet

Description of Work: Add a 12 x

24 utility building with electric

6500.00 288.00

Total Sq. Feet:

0.00

Owner

TBD

Contractor(s)

0000-000-0000 000-000-0000

Phone

General Electrical

**Contractor Type** 

00000 00000

**License Number** 

**Building Comments:** 

Permit Cost \$180.00

**Building Official** 

**Planning Conditions:** 

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006; Finished Construction elevation Certificte required prior to final inspection. See Zoning Permit for additional requirements.

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Date Owner / Applicant / Contractor / Agent Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552 PERMIT

Permit NO. 17515

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/7/2017

Expires: 6/5/2018

Main Permit: Main Permit

**Project Address** 

109 Byrd Street

Lot

2-3

Flood Zone

X

Owner Information

Sean Patrick & Cheryl L Johnston &

Christopher Kilinski

**Applicant Information** 

MK Contractors LLC

Zoning

BC-2

**Block** 

**Constuction Type** 

Repair/Replace

Address

727 Tamara Path

Newport News VA 23601

Address

P O Box 3014

Kill Devil Hills, NC 27949

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987717104329

**Building Code** 

**BLDG2012** 

Phone

917-204-4733

Phone

252-305-3224

Total Sq. Feet:

 Construction Cost:
 10000.00

 Unheated Sq. Feet
 0.00

Description of Work: Remove and replace 8 windows, vinyl lap

siding, exterior door trim, soffit, fascia and 1 exterior door

0.00

Contractor(s)

Phone

Contractor Type I

License Number

Matthew Carey Koplen 252-305-3224

75229

**Building Comments:** 

Permit Cost \$35.00 Note: If not replacing with impact windows, then pre-drilled plywood and screws will need to be on site at inspection

#### **Planning Conditions:**

Flood Zone-Shaded X; Map#-372098770J; Effective-09/20/2006; 50% value of residence=\$39,250; Estimated Cost=\$10,000; Approximately \$29,250 remaining for 1 year from final inspection for repairs/upgrades

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent

Building Official

Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 17516

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Expires: 6/5/2018

Main Permit: Main Permit

**Project Address** 

5020 N Virginia Dare Trail

Lot

6

Flood Zone

VE

**Owner Information** 

JOSEPH P WHITTLE, JR

**Applicant Information** 

Bryan Weisbecker

Contractor(s)

Zoning

BR-1

Block

22

**Constuction Type** 

Repair/Replace

Address

1122 JORDAN POINT RD

Issue Date: 12/7/2017

HOPEWELL VA 23860

Address

P O Box 55

Kitty Hawk, NC 27949

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987605292673

**Building Code** 

BLDG2012

**Phone** 

**Phone** 

252-441-5001

**Construction Cost:** 

4260.00

Unheated Sq. Feet

335.00 0.00

Bryan R. Weisbecker, General Contractor, LLC

(252)441-5001

Phone

General

**Contractor Type** 

45914

**License Number** 

**Description of** 

Total Sq. Feet:

Work: Reconstruct beach deck access ramp as per plan. (Beach easement is located on the property of 5021 N Virginia Dare

Trail)

**Building Comments:** 

Permit Cost \$80.00

## **Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent Date

**Building Official** 

Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

**PERMIT** 

Issue Date: 12/7/2017

Permit NO. 17517

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Expires: 6/5/2018

Main Permit: Main Permit

**Project Address** 

4420 N Virginia Dare Trail

6SPT5

Flood Zone

VE

**Owner Information** 

O'DONOVAN KITTY HAWK LLC

**Applicant Information** 

2 Guys Services

Zoning

BR-1

Block

28

**Constuction Type** 

Remodeling

**Address** 

35 S THIRD ST

PARK RIDGE NJ 7656

Address

605 W Archdale Street

Kill Devil Hills, NC 27948

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610456067

**Building Code** 

**BLDG2012** 

Phone

201-503-2287

Phone

252-261-0702

**Construction Cost:** 

95000.00

Unheated Sq. Feet

Total Sq. Feet:

0.00 476.00

| Contractor(s)   | Phone         | Contractor Type | License Number |  |
|-----------------|---------------|-----------------|----------------|--|
| 2 Guys Services | (252)261-0702 | General         | 75144          |  |
| TBD             | 000-000-0000  | Electrical      | 00000          |  |
| TBD             | 000-000-0000  | Mechanical      | 00000          |  |
| TBD             | 000-000-0000  | Plumbing        | 00000          |  |

**Description of** 

Work: Remodeling interior of house and adding a 14 x 34

master bedroom suite to rear of

existing house

**Building Comments:** 

Permit Cost \$866.00

**Planning Conditions:** 

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent Date Date **Building Official** 



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552 **PERMIT** 

Permit NO. 17519

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/11/2017

Expires: 6/9/2018

Main Permit: Main Permit

**Project Address** 

4504 Lindbergh Avenue

Lot 39

Flood Zone

AE

**Owner Information** 

John & Debra Pyle

**Applicant Information** 

Surfside Construction

Zoning

BR-1

**Block** 

37

**Constuction Type** 

Repair/Replace

**Address** 

203 Redbird Drive

Chester VA 23836

**Address** 

115 Saint Clair Road

Kill Devil Hills, NC 27948

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610451334

**Building Code** 

**BLDG2012** 

Phone

804-526-9408

Phone

252-548-9253

Construction Cost: 7400.00
Unheated Sq. Feet 0.00

Total Sq. Feet:

0.00

Contractor(s)

Phone

Contractor Type Li

License Number

252-548-9253 General 0000

Description of Work: Remove existing west side stairs,

landing and pilings. Install new 12 x 9.5 deck, with new pilings

and stairs

**Building Comments:** 

Surfside Construction

Permit Cost \$130.00

#### Planning Conditions:

Flood Zone-AE; Elevation-10'+1'=11'; Map #-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent

Date

**Building Official** 

Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

## **PERMIT**

Permit NO. 17522

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/12/2017

Expires: 6/10/2018

Main Permit: Main Permit

**Project Address** 

303 Grissom Street

Lot

1=R

Flood Zone

Owner Information

Paul D & Maria E O'Dell, Jr. & Paul D O'Dell

**Applicant Information** 

Stan White Realty & Construction

Zoning BR-1

Block

**Constuction Type** 

New Single-Family Home

**Address** 

14536 Fox Ford Lane Glen Allen VA 23059

Address

P O Box 1447

Nags Head, NC 27959

Subdivision

**FAIRWAY HEIGHTS** 

PIN

987605193183

**Building Code** 

**BLDG2012** 

Phone

Phone

252-441-1515

**Construction Cost:** 

Description of Work: New SFR 5 bedrooms 4 full baths and 3 half

baths, pool, deck and porches

790000.00

Unheated Sq. Feet Total Sq. Feet: 1837.00 4600.00

| Contractor(s)                          | Phone         | Contractor Type | License Number |
|--|---------------|-----------------|----------------|
| Stan White Realty & Construction, Inc. | (252)441-1515 | General         | 18946          |
| TBD                                    | 000-000-0000  | Electrical      | 00000          |
| TBD                                    | 000-000-0000  | Mechanical      | 00000          |
| TBD                                    | 000-000-0000  | Plumbing        | 00000          |
| TBD                                    | 000-000-0000  | Fuel Piping     | 00000          |

## **Building Comments:**

Permit Cost \$5167.00

## **Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006; An As-Built Survey, Height Certification and a Finished Construction Elevation Certificate needs to be submitted prior to pre-final inspection. See Zone Permit for additional requirements.

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              |   |       | Date |



Kitty Hawk, NC 27949 Phone: (252) 261-3552

## PERMIT

Permit NO. 17524

Permit Type: Commercial

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/18/2017

**License Number** 

00000

Expires: 6/16/2018

Main Permit: Main Permit

**Project Address** 

4724 Sea Scape Drive, Bldg P

Lot

Zoning

**BR-1** 

Block

Subdivision

SEA SCAPE BEACH & GOLF

VILLAS

PIN

98760926463705

**Building Code** 

**BLDG2012** 

Phone

Flood Zone

X

**Owner Information** 

SEA SCAPE BEACH null

**Applicant Information** 

Art Vandalay Industries, Inc.

**Constuction Type** 

Remodeling

Address

PO BOX 1257

KITTY HAWK NC 27949

Address

101 Shores Avenue

Point Harbor, NC 27964

Phone

252-599-2508

**Construction Cost:** Unheated Sq. Feet

Total Sq. Feet:

45000.00

0.00

0.00

Art Vandalay Industries

LLC dba Home

Remodelers

Contractor(s)

TBD TBD

General 70729 252-599-2508

Plumbing

**Contractor Type** 

0000-000-0000

00000 Electrical

> **Description of Work: Remodel** bathrooms with new vanity, shower stall, faucets, flooring, drywall, electrical switches and

fan for Bldg P (all 6 units)

**Building Comments:** 

Permit Cost \$780.00

**Planning Conditions:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

Phone

000-000-0000

| Owner / Applicant | / Contractor / Agent | Date |  |
|-------------------|----------------------|------|--|
| Building Official |                      | Date |  |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

### PERMIT

Permit NO. 17525

Permit Type: Commercial

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/18/2017

Expires: 6/16/2018

Main Permit: Main Permit

**Project Address** 

4724 Sea Scape Drive, Bldg Q

Lot

Zoning

BR-1

**Block** 

Subdivision

PIN

98760926463704

**Building Code** 

**BLDG2012** 

Phone

Flood Zone

**Owner Information** 

Address

Address

Remodeling

101 Shores Avenue

**Constuction Type** 

Point Harbor, NC 27964

**Phone** 

252-599-2508

**Applicant Information** 

Art Vandalay Industries, Inc.

Construction Cost:

45000.00

Unheated Sq. Feet Total Sq. Feet:

0.00 0.00

Art Vandalay Industries

LLC dba Home

Contractor(s)

Remodelers

**TBD** TBD 252-599-2508

000-000-0000

000-000-0000

General

Electrical

**Contractor Type** 

00000

70729

**License Number** 

00000 Plumbing

**Building Comments:** 

Description of Work: Remodel bathrooms with new vanity, shower stall, faucets, flooring, drywall, electrical switches and fan for Bldg Q (all 6 units)

Permit Cost \$780.00

**Planning Conditions:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

Phone

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Applicant / Contractor / Agent Owner /

Date

**Building Official** 

Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

## **PERMIT**

Permit NO. 17526

Permit Type: Commercial Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/18/2017

Expires: 6/16/2018

Main Permit: Main Permit

**Project Address** 

Flood Zone

4724 Sea Scape Drive, Bldg S

Lot

Zoning

**BR-1** Block

**Constuction Type** 

Remodeling

Address

Subdivision

PIN

98760926463706

**Building Code BLDG2012** 

Phone

**Applicant Information** 

**Owner Information** 

Art Vandalay Industries, Inc.

Address

101 Shores Avenue

Point Harbor, NC 27964

Phone

252-599-2508

**Construction Cost:** 

45000.00

**Unheated Sq. Feet** 

Total Sq. Feet:

0.00 0.00

Art Vandalay Industries

LLC dba Home

252-599-2508

General

**Contractor Type** 

70729

License Number

Remodelers TBD

Contractor(s)

000-000-0000 000-000-0000 **TBD** 

Electrical Plumbing 00000 00000

**Building Comments:** 

Description of Work: Remodel bathrooms with new vanity, shower stall, faucets, flooring, drywall, electrical switches and fan for Bldg S (all 6 units)

Permit Cost \$780.00

**Planning Conditions:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

Phone

| Owner   | 1   | Applicant | / Contractor | 1 | Agent | Date |
|---------|-----|-----------|--------------|---|-------|------|
| Buildin | g O | fficial   |              | _ |       | Date |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

**PERMIT** 

Permit NO. 17528

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/13/2017

Expires: 6/11/2018

Main Permit: Main Permit

**Project Address** 

4504 Lindbergh Avenue

Lot

39

Flood Zone

AE

Owner Information

John & Debra Pyle

**Applicant Information** 

John Pyle

Zoning

**BR-1** 

Block

37

**Constuction Type** 

Remodeling

**Address** 

203 Redbird Drive

Chester VA 23836

Address

203 Redbird Drive

Chester, VA 23836

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610451334

**Building Code** 

**BLDG2012** 

**Phone** 

804-526-9408

Phone

804-526-9408

**Construction Cost:** 

2200.00

0.00

Unheated Sq. Feet

Total Sq. Feet:

196.00

Contractor(s)

Owner

000-000-0000 Owner 000-000-0000

Phone

General Electrical

**Contractor Type** 

00000 00000

License Number

**Description of Work: Enclose** 

196 sq ft for ground floor

storage

Permit Cost \$125.00

## **Planning Conditions:**

**Building Comments:** 

Flood Zone-AE; Elevation-10'+1'=11'; Map #-3720987600J; Effective-09/20/2006. An As-Built Survey, Height Certificate and Finished Construction Elevation Certificate due prior to pre-final inspection. See Zoning Permit for any additional requirments.

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Date Owner / Applicant / Contractor / Agent Date **Building Official** 



Kitty Hawk, NC 27949 Phone: (252) 261-3552

## **PERMIT**

Permit NO. 17529

Permit Type: Commercial

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/13/2017

Expires: 6/11/2018

Main Permit: Main Permit

**Project Address** 

5200 N Croatan Highway

Lot

Leasehold

Flood Zone

**Owner Information** 

Sentara Albemarle Regional Medical Center

LLC

Applicant Information

**Roof Services JGM Corporation** 

Zoning

MS-1

**Block** 

**Constuction Type** 

Repair/Replace

**Address** 

6015 Poplar Hall Drive, Ste 214 Att:

Patti A Quick

Norfolk VA 23502

Address

**Contractor Type** 

3056 Holland Road

Virginia Beach, VA 23453

Subdivision

KITTY HAWK BEACH SEC C

PIN

987717007373

**Building Code** 

**BLDG2012** 

Phone

Phone

757-468-4443

**Construction Cost:** 

23887.50

Unheated Sq. Feet Total Sq. Feet:

0.00 0.00

Roof Services JGM

Corporation

Contractor(s)

757-468-4443

Phone

Other

72757

**License Number** 

**Description of Work: Remove** and replace existing roof.

Permit Cost \$165.00

**Planning Conditions:** 

**Building Comments:** 

Flood Zone-Shaded X; Map#-3720987700J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent

Date

**Building Official** 

Date



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949

Phone: (252) 261-3552

#### PERMIT

Permit NO. **17530** Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Open

Issue Date: 12/15/2017

Expires: 6/13/2018

Main Permit: Main Permit

**Project Address** 

4701 Clubhouse Estates Drive

Lot

9

Flood Zone

X

**Owner Information** 

Brian D & Megan M Rubino

**Applicant Information** 

Brian Rubino

Zoning

BR-1

**Block** 

**Constuction Type** 

Remodeling

Address

107 Pinnacle Court Kitty Hawk NC 27949

Address

107 Pinnacle Court Kitty Hawk, NC 27949 Subdivision

PINNACLE AT SEA SCAPE

PIN

987609156994

**Building Code** 

**BLDG2012** 

**Phone** 

252-599-6021

Phone

252-599-6021

+

**Construction Cost:** 

20000.00

Unheated Sq. Feet

Total Sq. Feet:

1000.00

| Contractor(s) | Phone        | Contractor Type | License Numbe |  |
|---------------|--------------|-----------------|---------------|--|
| Owner         | 000-000-0000 | General         | 00000         |  |
| TBD           | 000-000-0000 | Electrical      | 00000         |  |
| TBD           | 000-000-0000 | Mechanical      | 00000         |  |
| TBD           | 000-000-0000 | Plumbing        | 00000         |  |
|               |              |                 |               |  |

**Building Comments:** 

**Description of** 

Work: Conversion of an existing accessory to 1 bedroom SFR.

Permit Cost \$627.00

## **Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006; An As-Built Survery and Finished Elevation Certificate due prior to prefinal inspection. See Zoning Permit for additional requirements.

| Owner   | 1   | Applicant | / Contractor | 1 | Agent | Date |   |
|---------|-----|-----------|--------------|---|-------|------|---|
| Buildin | g O | fficial   |              |   |       | Date | - |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552 PERMIT

Permit NO. 17532

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/19/2017

Expires: 6/17/2018

Main Permit: Main Permit

**Project Address** 

203 E Eckner Street

Lot

18-19

Flood Zone

X

**Owner Information** 

SPLAZA LLC

**Applicant Information** 

Reliant Construction, LLC

Zoning

BC-1

**Block** 

26

**Constuction Type** 

Demo

Address

4275 Worthington Lane

Kitty Hawk NC 27949

**Address** 

4275 Worthington Lane

Kitty Hawk, NC 27949

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610366607

**Building Code** 

BLDG2012

Phone

Phone

252-202-7007

**Construction Cost:** 

18000.00

Unheated Sq. Feet

Total Sq. Feet:

0.00

Reliant Construction,

Contractor(s)

LLC

252-202-7007

Phone

General

**Contractor Type** 

62339

**License Number** 

**Description of Work: Demolish** 

existing house

**Building Comments:** 

Permit Cost \$135.00

**Planning Conditions:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent Date

Building Official Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 17533

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/19/2017

License Number

00000 00000

00000

Expires: 6/17/2018

Main Permit: Main Permit

**Project Address** 

4006 Welch Street

Lot

Flood Zone

X

**Owner Information** 

Artim Zendell

Applicant Information

Artim Zendeli

Contractor(s)

Owner

Owner

Owner

Zoning

BR-1

Block

**Constuction Type** 

Remodeling

Address

4006 Welch Street Kitty Hawk NC 27949

Address

**Contractor Type** 

General

Electrical

Mechanical

4006 Welch Street

Kitty Hawk, NC 27949

Subdivision

TED WOOD KITTY HAWK TERR

ADD

PIN

987619507555

**Building Code** 

**BLDG2012** 

**Phone** 

**Phone** 

252-207-3805

**Construction Cost:** Unheated Sq. Feet

Total Sq. Feet:

6500.00

0.00 264.00

**Building Comments:** 

Permit Cost 280.00

## **Planning Conditions:**

Flood Zone-Shaded X; Map# 3720987600J; Effective 09/20/2006

Phone

000-000-0000

000-000-0000

000-000-0000

**Description of Work: Convert** 264 sq ft of garage into heated space for a 4th bedroom

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Applicant / Contractor / Agent Owner / Date **Building Official** Date



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552 **PERMIT** 

Permit NO. 17534

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/19/2017

Expires: 6/17/2018

Main Permit: Main Permit

**Project Address** 

3964 N Virginia Dare Trail

Lot

Zoning

BR-1

**Block** 

Subdivision

**CORCORAN & ESPINOSA TRACT** 

PIN

987619700845

Building Code

**BLDG2012** 

Phone

Flood Zone

VE

Owner Information

FRANKLIN M JR LUNDIE

Applicant Information

Richard Scott Noble

**Constuction Type** 

Addition

Address

17900 BRANDERS BRIDGE RD

**COLONIAL HEIGHTS VA 23834** 

**Address** 

3121 Mary Hill Court

Kill Devil Hills, NC 27948

Phone

252-202-2453

**Construction Cost:** 

300000.00

Unheated Sq. Feet

Total Sq. Feet:

828.00 1756.00

| Contractor(s)       | Phone        | Contractor Type | License Number |
|---------------------|--------------|-----------------|----------------|
| Richard Scott Noble | 252-202-2453 | General         | 52132          |
| TBD                 | 000-000-0000 | Electrical      | 00000          |
| TBD                 | 000-000-0000 | Mechanical      | 00000          |
| TBD                 | 000-000-0000 | Plumbing        | 00000          |
| TBD                 | 000-000-0000 | Fuel Piping     | 00000          |

Description of Work: Addition & Remodel of existing home to change from 4 bedroom to 6 bedrooms - Substantial

Improvement

Building Comments:

Permit Fee \$3682.00

## **Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective Date-09/20/2006; V-Zone Certification required; As-Built Survey, Height Certification(main roof height & cupola roof height), Finished Construction Elevation Certificate with Certification of Breakaway Walls if applicable, and Elevator Certification due prior to pre-final inspection. See Zoning Permit for additional requirments.

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              | _ |       | Date |



Kitty Hawk, NC 27949 Phone: (252) 261-3552

#### **PERMIT**

Permit NO. 17538

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/21/2017

Expires: 6/19/2018

Main Permit: Main Permit

**Project Address** 

4627 Tamarack Drive

Lot

Flood Zone

X

Owner Information

JUSTINE E TTEE DYER

**Applicant Information** 

Lyn Small, Inc.

Zoning

BR-1

**Block** 

**Constuction Type** 

Bulkhead/Retaining Wall

Address

2048 GOLF DR

**CULPEPER VA 22701** 

Address

113 Ballast Rock Drive

Powells Point, NC 27966

Subdivision

KITTY HAWK WOODS-LINKSIDE

WDS

PIN

987609251699

Building Code BLDG2012

Phone

1 11

Phone

252-491-8562

Construction Cost: 17370.00
Unheated Sq. Feet 0.00

Contractor(s)

Phone

Contractor Type License

License Number

Total Sq. Feet:

0.00

Lyn Small, Inc

(252)491-8562

29760 S

Description of Work: Upper and

lower retaining walls

Permit Cost \$135.00

**Planning Conditions:** 

**Building Comments:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006;

| Owner    | / Ap      | plicant | / Contractor | 1 | Agent | Date |
|----------|-----------|---------|--------------|---|-------|------|
| Building | g Officia | al      |              |   |       | Date |



Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 17520 Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Open

Issue Date: 12/12/2017

Expires: 6/10/2018

Main Permit: Main Permit

**Project Address** 

3523 Bay Drive

Lot 3

Flood Zone

**Owner Information** 

Mahco Enterprises, LLC

**Applicant Information** 

Merritt Hooper Construction

Zoning

BR-1

Block

**Constuction Type** 

Temp Pole

Address

P O Box 1532

Kitty Hawk NC 27949

Address

P O Box 1532

Kitty Hawk, NC 27949

Subdivision

TOP O' THE DUNES

PIN

987516746935

**Building Code** 

ELEC2014

**Phone** 

**Phone** 

252-207-5400

**Construction Cost:** 

40.00

Unheated Sq. Feet

0.00

Contractor(s)

Phone

**Contractor Type** 

**License Number** 

Total Sq. Feet:

0.00

**TBD** 

000-000-0000

Electrical

00000

Permit Cost \$40.00

**Planning Conditions:** 

**Building Comments:** 

Flood Zone-Shaded X; Map #-3720987500J; Effective-09/20/2006

**Description of Work: Install** Temp Pole for future new SFR

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              | _ |       | Date |



Kitty Hawk, NC 27949 Phone: (252) 261-3552 **PERMIT** 

Permit NO. 17531

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Open

Issue Date: 12/18/2017

Expires: 6/16/2018

Main Permit: Main Permit

**Project Address** 

5212 Lunar Drive

Lot 27

Flood Zone

X

**Owner Information** 

John H Parrish & Pamela J Shoemaker

**Applicant Information** 

**Amerigas** 

Zoning

BR-1

Block

1

**Constuction Type** 

Addition

Address

5212 Lunar Drive

Kitty Hawk NC 27949

**Address** 

6553 Caratoke Highway

Grandy, NC 27939

Subdivision

SEA SCAPE SEC 1

PIN

987605093555

**Building Code** 

MECH2012

**Phone** 

315-350-8902

Phone

252-491-2685

Construction Cost:

1712.04

Unheated Sq. Feet

Total Sq. Feet:

0.00

Contractor(s)

Phone

252-491-2685

Contractor Type

Mechanical

14654

License Number

**Building Comments:** 

Amerigas Propane, LP

Permit Cost \$40.00

**Planning Conditions:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

Description of Work: Run gas

line for generator

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              |   |       | Date |



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949

Phone: (252) 261-3552

PERMIT

Permit NO. 17523 Permit Type: Commercial

Work Classification: [Permit Type]

Permit Status: Open

Subdivision

987508775995

**Building Code** 

MECH2012

PIN

N E HURDLE ESTATE

Issue Date: 12/13/2017

Expires: 6/11/2018

Main Permit: Main Permit

Project Address

3800 N Croatan Highway

Lot A

Flood Zone

X

**Owner Information** 

Harvey K & Kathleen Hess, Jr.

**Applicant Information** 

Roberson's Heating & Air

Zoning

BC-1

**Block** 

**Constuction Type** 

Repair/Replace

Address

P O Box 335 Kitty Hawk NC 27949

Address

14698 US Highway 64 Williamston, NC 27892

Address

Phone

**Phone** 

252-792-3006

Construction Cost:

5485.00

Unheated Sq. Feet Total Sq. Feet: 0.00

Roberson's Heating &

A/C, Inc.

Contractor(s)

A/C, Inc.

Roberson's Heating & Air Conditioning, Inc.

252-792-3006

Phone

252-793-5487

Mechanical

Electrical

**Contractor Type** 

13851 07357

License Number

**Building Comments:** 

Permit Cost \$50.00

**Planning Conditions:** 

Description of Work: HVAC changeout of 5 ton system

| _        |     |           |              |   |       | D.4  |
|----------|-----|-----------|--------------|---|-------|------|
| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|          |     |           |              |   |       |      |
| Building | 2.0 | fficial   |              | - |       | Date |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

**PERMIT** 

Permit NO. 17512

Permit Type: Commercial

Work Classification: [Permit Type]

Permit Status: Open

Issue Date: 12/5/2017

Expires: 6/3/2018

Main Permit: Main Permit

**Project Address** 

3919 N Croatan Highway

Lot

D

Flood Zone

X **Owner Information** 

Yo Ho Town, Inc.

**Applicant Information** R A Hoy Heating & Air

Zoning

BC-1

Block

**Constuction Type** 

Repair/Replace

Address

1236 Knight Bridge Lane Virginia Beach VA 23455

**Address** 

3908 N Croatan Highway Kitty Hawk, NC 27949

Subdivision

SHELLBANK DEVELOPMENT

CORP

PIN

987507699926

**Building Code MECH2012** 

**Phone** 

**Phone** 

252-261-2008

**Construction Cost:** 2250.00 Unheated Sq. Feet 0.00 0.00 **Contractor Type License Number** Total Sq. Feet: **Phone** Contractor(s)

R. A. Hoy Heating & Air Conditioning, Inc.

R A Hoy Heating & Air

Conditioning, Inc.

(252)261-2008 Mechanical

(252)261-2008 Electrical

13056

22222-L

**Building Comments:** 

Permit Cost \$50.00

**Planning Conditions:** 

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

Description of Work: HVAC changeout of 5 ton system in

dining area

| Owner    | 1    | Applicant | / Contractor | 1 | Agent | Date |
|----------|------|-----------|--------------|---|-------|------|
| Building | g Of | fficial   |              | _ |       | Date |



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

#### PERMIT

Permit NO. **17521**Permit Type: Commercial
Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/12/2017

Expires: 6/10/2018

Main Permit: Main Permit

Subdivision **Project Address** Zoning HARBOUR BAY 3708 N Croatan Highway BC-1 PIN **Block** Lot 987512862851 C2 Flood Zone **Constuction Type Building Code** Repair/Replace MECH2012 **Phone Owner Information Address** Harbour Bay LLC 3048 Martins Point Kitty Hawk NC 27949 **Applicant Information** Address Phone 3908 N Croatan Highway 252-261-2008 R A Hoy Heating & Air Kitty Hawk, NC 27949

| Contractor(s)                              | Phone         | Contractor Type | License Number | Construction Cost: Unheated Sq. Feet _ Total Sq. Feet: | 5795.00<br>0.00<br>0.00 |
|--|---------------|-----------------|----------------|--|-------------------------|
| R. A. Hoy Heating & Air Conditioning, Inc. | (252)261-2008 | Mechanical      | 13056          |  |                         |
| R A Hoy Heating & Air Conditioning, Inc.   | (252)261-2008 | Electrical      | 22222-L        |  |                         |
| <b>Building Comments:</b>                  |               |                 |                | Description of Work:<br>changeout of 3 ton sy          |                         |

Permit Cost \$50.00

Planning Conditions:

Flood Zone-Shaded X; Map# 3720987500J; Effective-09/20/2006

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |  |
|----------|-----|-----------|--------------|---|-------|------|--|
| Building | g O | fficial   |              |   |       | Date |  |



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 17510 Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/5/2017

Expires: 6/3/2018

Main Permit: Main Permit

**Project Address** 

4831 N Virginia Dare Trail

Lot

Zoning BR-1

Block

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987606381495

**Building Code MECH2012** 

**Phone** 

Flood Zone

VE **Owner Information** 

JEFFREY WEIL

**Applicant Information** 

Air Handlers OBX

**Constuction Type** Repair/Replace

**Address** 

83 -32 255 ST

GLEN OAKS NY 11004

Address

8788 N Caratoke Highway

Harbinger, NC 27941

Phone

252-491-8637

Contractor(s) Phone **Contractor Type** License Number

Air Handlers OBX

Sun Realty of Nags

Head Inc/Air Handlers

**OBX** 

252-491-8637 Mechanical

Electrical

26599

07514-L

**Construction Cost:** 

Unheated Sq. Feet Total Sq. Feet:

8500.00 0.00

0.00

**Building Comments:** 

Permit Cost \$100.00

**Planning Conditions:** 

Flood Zone-VE; Elevation-12'+1'=13'; Map #-3720987600J; Effective-09/20/2006;

252-491-8637

**Description of Work: HVAC** changeout 2 ton for 2nd floor and a 1.5 ton heat pump changeout for 1st floor

| Owner    | 1   | Applicant | / Contractor | 1 | Agent | Date |
|----------|-----|-----------|--------------|---|-------|------|
| Building | g O | fficial   |              | _ |       | Date |



101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552 **PERMIT** 

Permit NO. 17536

Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 12/20/2017

Expires: 6/18/2018

Main Permit: Main Permit

**Project Address** 

5220 Birch Lane

Lot

71

Flood Zone

AE

Owner Information

Marjory L Darwicki & James B Handlan

**Applicant Information** 

Air-O-Smith, Inc.

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

1245 Belle Meade Drive

Lancaster PA 17601

Address

330 N Dogwood Trail

Southern Shores, NC 27949

Subdivision

SEA SCAPE SEC 3

PIN

986607696497

**Building Code** 

MECH2012

**Phone** 

Phone

252-261-5238

 Construction Cost:
 10500.00

 Unheated Sq. Feet
 0.00

 Total Sq. Feet:
 0.00

Contractor(s)PhoneContractor TypeLicense NumberAir-O-Smith, Inc.(252)261-5238Mechanical30070Griffiths Electrical<br/>Contractor(252)599-789126180-L

**Building Comments:** 

Permit Cost \$100.00

**Planning Conditions:** 

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map #-3720986600J; Effective-09/20/2006

Description of Work: HVAC changeout of a 1.5 and a 2 ton systems

| Owner / Applicant / Contractor / Agent | Date |  |
|--|------|--|
| Building Official                      | Date |  |