



Town of Kill Devil Hills

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

PAID

FEB 13 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2017-028

PROJECT NAME: Paul Breaux Jr./Sun Realty
SITE ADDRESS: 1500 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 09/11/2017

EXPIRES: 03/10/2018

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

OWNER: BREAUX, EARL P JR
BOX 1630
KILL DEVIL HILLS, NC 27948

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

License: LEGACY UNKNOWN
Expires: 12/31/2017

PARCEL:

PIN: 988312957385

Parcel Number: 027933000

Address: 1500 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace free-standing sign



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FEB 14 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-024

PROJECT NAME: BUTLER HVAC
SITE ADDRESS: 2035 ELIZABETH CITY ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

APPLICANT: BUTLER, MICHAEL K
721 CORAPEAKE DRIVE
CHESAPEAKE, VA 23322

OWNER: BUTLER, MICHAEL K
721 CORAPEAKE DRIVE
CHESAPEAKE, VA 23322

MECHANICAL: R A HOY
PO Box 265
Kitty Hawk, NC 27949

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988517200042

Parcel Number: 001177000

Address: 2035 ELIZABETH CITY ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 718

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system



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FEB 14 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-023
PROJECT NAME:
SITE ADDRESS: 1101 Cambridge Rd. Kill Devil Hills

BUILDING
ISSUED: 02/09/2018
EXPIRES: 08/08/2018

APPLICANT: Bermuda Bay Homeowners Association
PO Box 1807
Nags Head, NC 27959
480-4722

OWNER: Bermuda Bay Homeowners Association
PO Box 1807
Nags Head, NC 27959
480-4722

BUILDING: Fernando Hernadez
802 W. 3rd St.
Kill Devil Hills, NC 27948
305-0962

License: non Lic.
Expires:

PARCEL:

PIN: 988310279410300
Address: 1101 Cambridge Rd. Kill Devil Hills
Addition: Bermuda Bay
Legal Description:

Parcel Number:

Zoning: G&I
Block: **Lot(s):**

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

PROJECT DESCRIPTION: Repair concrete at pool island.



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FEB 14 2018

Planning and Inspection Department

BP2018-020

PROJECT NAME: PARKS DECK REPAIR
SITE ADDRESS: 1626 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

APPLICANT: DON PARKS JR.
1626 N. Va. Dare Tr.
Kill Devil Hills, Nc 27948

OWNER: DON PARKS JR.
1626 N. Va. Dare Tr.
Kill Devil Hills, Nc 27948

GENERAL: LOWE CUSTOM BUILDERS
4705 SOUTH PAMLICO WAY
KILL DEVIL HILLS, NC 27948
252-202-6452

License: 55620
Expires: 01/02/2019

PARCEL:

PIN: 988411560719

Parcel Number: 002822000

Address: 1626 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:
Block: C **Lot(s):** 6

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE DECKING, RAILINGS AND STAIRS.

BP2018-020

PROJECT NAME: PARKS DECK REPAIR

SITE ADDRESS: 1626 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	30
HEALTH DEPARTMENT PERMIT #	27526
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

* NEW RAILINGS, DECKING AND STAIRS MUST MEET CURRENT BUILDING CODE REQUIREMENTS.

BP2018-020

PROJECT NAME: PARKS DECK REPAIR

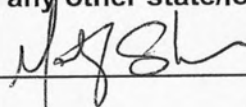
SITE ADDRESS: 1626 VA DARE TRL N KILL DEVIL HILLS

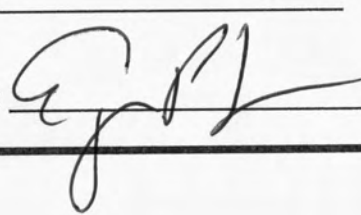
BUILDING

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2/14/18



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Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2017-152

PROJECT NAME: Add 4 pilings and boat lift.
SITE ADDRESS: 1402 CAPTAINS CIR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/11/2017

EXPIRES: 02/07/2018

APPLICANT: Atkinson, Dave
18200 Hull St
MOSELEY, VA 23120
804-387-0078

OWNER: Atkinson, Dave
18200 Hull St
MOSELEY, VA 23120
804-387-0078

LIMITED- SPECIALTY-MARINE CONSTR: NORTHEASTERN MARINE CONSTRUCTION
P.O. Box 42
Kitty Hawk, NC 27949
261-3682

License: 30026
Expires: 12/30/2018

PARCEL:

PIN: 988413123690

Parcel Number: 003658000

Address: 1402 CAPTAINS CIR KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 3, THE

Block: 0 **Lot(s):** 153

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION:

BJ2017-152

PROJECT NAME: Add 4 pilings and boat lift.
SITE ADDRESS: 1402 CAPTAINS CIR KILL DEVIL HILLS

BUILDING JOINT**ISSUED:** 08/11/2017**EXPIRES:** 02/07/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	6400.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2017-160

PROJECT NAME: Kill Devil Hills Properties LLC Remodel
SITE ADDRESS: 1402 HILL ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 08/24/2017

EXPIRES: 02/20/2018

APPLICANT: PARTRIDGE, BASCOM F
1402 HILL STREET
KILL DEVIL HILLS, NC 27948

OWNER: Kill Devil Hills Properties, LLC
1407 Percy St
Kill Devil Hills, NC 27948
252-305-7082

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988315649113

Parcel Number: 004838000

Address: 1402 HILL ST KILL DEVIL HILLS

Addition: KILL DEVIL BEACH EXTENDED

Zoning:

Block: 14 Lot(s): 2&3

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Renovation/Remodel/Relocate	\$610.65	\$0.00	Remodel/Renovation	1357 SQFT
Totals :	\$760.65	\$0.00		

PROJECT DESCRIPTION: Remodel existing structure.



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Planning and Inspection Department

BJ2018-022

PROJECT NAME: Jasper Rogers
SITE ADDRESS: 1403 Lake Ridge Court KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

APPLICANT: Finch & Company, Inc
 116 Sandy Ridge Rd
 kitty hawk, nc 27949
 252-261-8710

OWNER: Rogers, Jasper
 PO Box 1183
 kitty hawk, nc 27949
 252-305-4415

UNLIMITED BUILDING: Finch & Company, Inc
 116 Sandy Ridge Rd
 kitty hawk, nc 27949
 252-261-8710

License: 52567
Expires:

PARCEL:

PIN: 988315646178

Parcel Number:

Address: 1403 Lake Ridge Court KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 2, Lake Ridge Estates

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$336.00	\$0.00	Covered Porches/Decks	448 SQFT
Res. Building Permit Fee	\$1,381.30	\$0.00	Residential Unheated (.40)	322 Sq. Ft
Totals :	\$1,767.30	\$0.00	Residential Heated Space (.75)	1670 sq. Ft.

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills

Water

PA

Water Tap #: T 23004

BJ2018-022

PROJECT NAME: Jasper Rogers
SITE ADDRESS: 1403 Lake Ridge Court KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2/13/2018



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Planning and Inspection Department

BP2017-136	BUILDING
PROJECT NAME: Sadowski storage	ISSUED: 07/12/2017
SITE ADDRESS: 219 QUAIL LN KILL DEVIL HILLS	EXPIRES: 01/08/2018

APPLICANT: JERNIGAN ENTERPRISES CONSTRUCTION & DEVELOPMENT, INC. P.O. Box 95 Grandy, NC 27545 252-441-9337	OWNER: Sadowski, George 312 Salmon Lane VA Beach, VA 23456 757-297-3225
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GENERAL, UNLIMITED:	JERNIGAN ENTERPRISES CONSTRUCTION & DEVELOPMENT, INC. P.O. Box 95 Grandy, NC 27545 252-441-9337	License: 49781 Expires:
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PARCEL:

PIN: 988316941499	Parcel Number: 005111000
Address: 219 QUAIL LN KILL DEVIL HILLS	Zoning:
Addition: WHISPERING PINES SEC 1	Block: A Lot(s): 15
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Close in a 255 sq. ft. storage room under footprint of house.

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TOWN OF
KILL DEVIL HILLS

BP2017-136PROJECT NAME: Sadowski storage
SITE ADDRESS: 219 QUAIL LN KILL DEVIL HILLS**BUILDING**

ISSUED: 07/12/2017

EXPIRES: 01/08/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
STORAGE (SQFT)	255

REQUIRED INSPECTIONS

Progress	Final
Zoning Final	

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-13-18



Town of Kill Devil Hills

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Planning and Inspection Department

FEB 13 2018

BP2018-026

PROJECT NAME:

SITE ADDRESS: 1500 CROATAN HWY S KILL DEVIL HILLS

TOWN OF
KILL DEVIL HILLS **BUILDING**
ISSUED: 02/13/2018
EXPIRES: 08/12/2018

APPLICANT: BREAUX, EARL P JR
BOX 1630
KILL DEVIL HILLS, NC 27948

OWNER: BREAUX, EARL P JR
BOX 1630
KILL DEVIL HILLS, NC 27948

CONTRACTOR: HADDON HOMES, INC.
PO Box 1868
Nags Head, NC 27959

License: 55566
Expires: 01/05/2019

PARCEL:

PIN: 988312957385

Parcel Number: 027933000

Address: 1500 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace windows and siding, glazing must comply with wind borne debris requirements.

BP2018-026

PROJECT NAME:

SITE ADDRESS: 1500 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	235263.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



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FEB 12 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-025

PROJECT NAME:

SITE ADDRESS: 1911 VA DARE TRL N KILL DEVIL HILLS

PAID
WITH
CASH

BUILDING

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

APPLICANT: KRUEGER, C NORMAN
PO BOX 53
HAMPDEN-SYDNEY, VA 23943

OWNER: KRUEGER, C NORMAN
PO BOX 53
HAMPDEN-SYDNEY, VA 23943

CONTRACTOR: HANDYMAN SERVICES
229 Eagle Dr.
Kill Devil Hills, NC 27948
252-202-5712

License: LEGACY UNKNOWN
Expires: 12/30/2019

PARCEL:

PIN: 988406491264

Parcel Number: 002815000

Address: 1911 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: Croatan Shores Amended

Block: E **Lot(s):** 14

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace old beach walkway and steps. Min. pile depth is 5' provided walkway is not over 4' wide; if over 4' wide pile depth is 16' below grade.



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Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-024

PROJECT NAME: Epps Deck Replacement
SITE ADDRESS: 213 THIRD ST E KILL DEVIL HILLS

BUILDING

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

APPLICANT: Paul Epps
803 Burton Dr.
SMITHVILLE, VA 23430
757-371-5035

OWNER: Paul Epps
803 Burton Dr.
SMITHVILLE, VA 23430
757-371-5035

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988406473872

Parcel Number: 002895000

Address: 213 THIRD ST E KILL DEVIL HILLS

Addition: HEDRICKS ADDITION - CROATAN SH

Zoning:

Block: 0

Lot(s): 1 & PT 3

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00

Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: Replace deck and steps "as is where is"

BP2018-024PROJECT NAME: Epps Deck Replacement
SITE ADDRESS: 213 THIRD ST E KILL DEVIL HILLS**BUILDING**

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1200.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: Steven Paul Epps Date: 2-12-18



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FEB - 8 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2018-019

PROJECT NAME:

SITE ADDRESS: 302 SHILOH ST KILL DEVIL HILLS

BUILDING

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

APPLICANT: Duane Rosa
495 Quail Run Rd.
SUMMIT POINT, WV 25446
571-233-0578

OWNER: DAVIS, DOUGLAS & LAURA
18 OLD OAK DR.
MAHWAH, NJ 07430

UNLICENSED BUILDER: Emanuelson and Dad
4717 N Croatan Hwy
kitty hawk, nc 27949
252-261-2215

License: Unlicensed
Expires: 06/14/2018

PARCEL:

PIN: 987516936182

Parcel Number: 000980001

Address: 302 SHILOH ST KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:

Block: 0 **Lot(s):** 40

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace 21 existing pilings with 8x8x16 pilings.

BP2018-019

PROJECT NAME:

SITE ADDRESS: 302 SHILOH ST KILL DEVIL HILLS

BUILDING

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15750.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-8-19



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FEB - 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-022

PROJECT NAME: JAMES DECK REBUILD
SITE ADDRESS: 1804 APACHE ST KILL DEVIL HILLS

BUILDING

ISSUED: 02/09/2018

EXPIRES: 08/08/2018

APPLICANT: JAMES, JOHN
305 WEST ATLANTIC ST
Kill Devil Hills, NC 27948
252-202-8217

OWNER: JAMES, JOHN
305 WEST ATLANTIC ST
Kill Devil Hills, NC 27948
252-202-8217

PARCEL:

PIN: 988409164893

Parcel Number: 002394000

Address: 1804 APACHE ST KILL DEVIL HILLS

Zoning:

Addition: SEA HOLLY RIDGE

Block: D **Lot(s):** 14

Legal Description:

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

PROJECT DESCRIPTION: REBUILD REAR DECK & STAIRS - EXISTING PILINGS TO REMAIN. PLANS NOT SUBMITTED. REBUILD MUST BE TO CURRENT CODE REQUIREMENTS.

BP2018-022PROJECT NAME: JAMES DECK REBUILD
SITE ADDRESS: 1804 APACHE ST KILL DEVIL HILLS**BUILDING**

ISSUED: 02/09/2018

EXPIRES: 08/08/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
OCCUPANCY TYPE	One & Two Family Dwelling



REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Contractor or Authorized Agent: 

Date: 2-9-18



Town of Kill Devil Hills

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

PAID

FEB - 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-021	BUILDING
PROJECT NAME: Harold Lehman	ISSUED: 02/09/2018
SITE ADDRESS: 204 AIRSTRIP RD W KILL DEVIL HILLS	EXPIRES: 08/08/2018

APPLICANT: Lehman, Harold
75 Battlefield Bluff Dr.
NEW MARKET, VA 22844
540-335-8675

OWNER: Lehman, Harold
75 Battlefield Bluff Dr.
NEW MARKET, VA 22844
540-335-8675

GENERAL: OCEAN CONSTRUCTION
UNKNOWN
UNKNOWN, XX 00000
252-261-5240

License: 65696
Expires: 12/01/2018

PARCEL:

PIN: 988312874242

Parcel Number: 004376000

Address: 204 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 16 **Lot(s):** 6

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace existing rear deck with new open deck.



Town of Kill Devil Hills

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

PAID

FEB - 8 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-005
PROJECT NAME:
SITE ADDRESS: 507 MCCABE CT KILL DEVIL HILLS

ELECTRICAL
ISSUED: 02/08/2018
EXPIRES: 08/07/2018

APPLICANT: CASPER, WILLIAM A
108 MILL POINT
KITTY HAWK, NC 27949

OWNER: CASPER, WILLIAM A
108 MILL POINT
KITTY HAWK, NC 27949

ELECTRICAL-UNLIMITED: SUBURBAN ELECTRIC CONTRACTORS OF NC INC. License: 30633-U
PO Box 925 Expires: 04/05/2018
Manteo, NC 27954
252-475-1372

PARCEL:

PIN: 988414342429 Parcel Number: 003405000
Address: 507 MCCABE CT KILL DEVIL HILLS
Addition: FIRST FLIGHT VILLAGE SEC 1 Zoning:
Block: 0 Lot(s): 148
Legal Description:

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

PROJECT DESCRIPTION: Add recepticals in garage.

EL2018-005

PROJECT NAME:

SITE ADDRESS: 507 MCCABE CT KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
OCCUPANCY TYPE	One & Two Family Dwelling

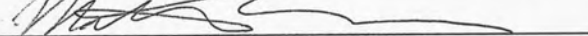
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2/8/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-022

PROJECT NAME: KICHLINE HVAC
SITE ADDRESS: 506 MEMORIAL BLVD N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

APPLICANT: Kickline, Richard
214 Sunset Drive
Kill Devil Hills, NC 27948
252-207-1150

OWNER: Kickline, Richard
214 Sunset Drive
Kill Devil Hills, NC 27948
252-207-1150

H-3, CLASS 2: R S ANDREWS OF TIDEWATER
620 LINCOLN ST
Portsmouth, VA 23704
757-488-9611

License: 30680
Expires: 12/31/2018

PARCEL:

PIN: 988419712794

Parcel Number: 003928000

Address: 506 MEMORIAL BLVD N KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 41 **Lot(s):** 1-2

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

PAID

FEB - 8 2018

TOWN OF
KILL DEVIL HILLS

MC2018-022

PROJECT NAME: KICHLINE HVAC
SITE ADDRESS: 506 MEMORIAL BLVD N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/08/2018

EXPIRES: 08/07/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4646.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

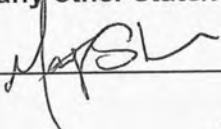
REQUIRED INSPECTIONS

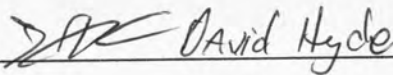
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  David Hyde Date: 2-8-18



Town of Kill Devil Hills

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

PAID

FEB - 8 2018

Planning and Inspection Department

BP2018-017	TOWN OF KILL DEVIL HILLS
PROJECT NAME: PATTERSON BULKHEAD AND PIER	BUILDING
SITE ADDRESS: 2016 BAY DR KILL DEVIL HILLS	ISSUED: 02/06/2018
	EXPIRES: 08/05/2018

APPLICANT: PATTERSON, CHASE & LINDSEY
4212 IVY LN
kitty hawk, nc 27949
252-489-3748

OWNER: PATTERSON, CHASE & LINDSEY
4212 IVY LN
kitty hawk, nc 27949
252-489-3748

UNLICENSED BUILDER: ALBEMARLE BULKHEADS
PO BOX 50
KILL DEVIL HILLS, NC 27948
252-256-0857

License: 00000
Expires: 04/30/2019

PARCEL:

PIN: 987408976996

Parcel Number: 002010000

Address: 2016 BAY DR KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1040

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: 73 LF VINYL REPLACEMENT BULKHEAD PER APPROVED CAMA PERMIT.

BP2018-017PROJECT NAME: PATTERSON BULKHEAD AND PIER
SITE ADDRESS: 2016 BAY DR KILL DEVIL HILLS**BUILDING**

ISSUED: 02/06/2018

EXPIRES: 08/05/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	IV
SURVEYOR NAME AND NUMBER	DOUGLAS STYONS L- 3227
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

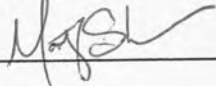
Piling

Final

CONDITIONS

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

Issued By: Contractor or Authorized Agent: Date: 2/8/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-016

PROJECT NAME: On Trading Corp.
SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

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

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

BUILDING: Dun Rite, Inc.
714 Fenway Ave.
CHESAPEAKE, VA 23320
757-435-3513

License: 74845
Expires: 12/24/2019

PARCEL:

PIN: 988420809320L1

Parcel Number: 008118000

Address: 405 VA DARE TRL S KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

Zoning:

Block: 0

Lot(s): PAR. 2 & 3
& UNBRD.

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add door and sidewalk.

PAID

FEB - 7 2018

TOWN OF
KILL DEVIL HILLS

BP2018-016

PROJECT NAME: On Trading Corp.
SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	12
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5500.00
LOT COVERAGE	52.62
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Zoning Final Inspection is required.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

BP2018-016

PROJECT NAME: On Trading Corp.

SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2/7/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-014	BUILDING
PROJECT NAME: John Dean	ISSUED: 02/05/2018
SITE ADDRESS: 115 SOTHEL ST E KILL DEVIL HILLS	EXPIRES: 08/04/2018

APPLICANT: Barry Danner
1 Sweet Gum Lane
Southern Shores, NC 27949
252-207-5699

OWNER: John Dean
P.O. Box 993
Louisburg, NC 27549
252-207-4947

UNLICENSED - REMODELING: Barry Danner
1 Sweet Gum Lane
Southern Shores, NC 27949
252-207-5699

License: 123456
Expires: 01/31/2019

PARCEL:

PIN: 988513121665

Parcel Number: 002998000

Address: 115 SOTHEL ST E KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 18 **Lot(s):** 17-20

Legal Description:

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

PROJECT DESCRIPTION: Apt. 1 - Repair/replace back deck

PAID

FEB - 6 2018

TOWN OF
KILL DEVIL HILLS

BP2018-014

PROJECT NAME: John Dean
SITE ADDRESS: 115 SOTHEL ST E KILL DEVIL HILLS

BUILDING

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	400.00
OPEN DECK (SQFT)	100
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	W. Jones C-1301
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

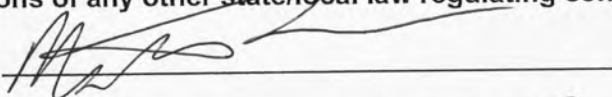
Zoning Final

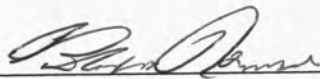
Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Zoning Final Inspection is required.
- * Repair and replace rear deck and steps "as-is/where-is". No changes approved.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2-6-2018



Town of Kill Devil Hills

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

PAID

FEB - 7 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-018

PROJECT NAME: FLINTOFF DECK REBUILD
SITE ADDRESS: 3313 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 02/07/2018

EXPIRES: 08/06/2018

APPLICANT: FLINTOFF, ROBERT & SHARON
726 EAST RIVERVIEW DR
NORFOLK, VA 23434
757-676-4802

OWNER: FLINTOFF, ROBERT & SHARON
726 EAST RIVERVIEW DR
NORFOLK, VA 23434
757-676-4802

PARCEL:

PIN: 987516749178

Parcel Number: 000168000

Address: 3313 BAY DR KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:
Block: 0 **Lot(s):** 57

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: ADD NEW LOWER DECK & FRAMING TO SUPPORT EXISTING UPPER DECK.

BP2018-018

PROJECT NAME: FLINTOFF DECK REBUILD
SITE ADDRESS: 3313 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 02/07/2018

EXPIRES: 08/06/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Piling

Zoning Final

Final

CONDITIONS

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

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

* (2)2X10 GIRDBERS SPANNING 12'-1" VERIFIED BY PHONE WITH ENGINEER RAYMOND PATE 2/7/18. CODE ALLOWS FOR SPAN OF 7'-0".

* PROVIDE FOR MID STRINGER SUPPORT AT STAIRS AS PER 2012 NC RESIDENTIAL CODE AM110.1

BP2018-018

PROJECT NAME: FLINTOFF DECK REBUILD
SITE ADDRESS: 3313 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 02/07/2018

EXPIRES: 08/06/2018

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 2/7/18



Town of Kill Devil Hills

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

PAID

FEB - 7 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

EL2018-004	ELECTRICAL
PROJECT NAME:	ISSUED: 02/07/2018
SITE ADDRESS: 1513A PRINCESS ANNE DR KILL DEVIL HILLS	EXPIRES: 08/06/2018

APPLICANT: Paul Rannenburg
53 Janelle Dr.
Agawam, MA 01001
413 789-4937

OWNER: Paul Rannenburg
53 Janelle Dr.
Agawam, MA 01001
413 789-4937

ELECTRICAL - LIMITED: Cabe & Son Electric
207 S. Lost Colony Dr.
nags head, nc 27959
252-996-0338

License: SP-SFD-32136
Expires:

PARCEL:

PIN: 988411550649 **Parcel Number:** 003128000

Address: 1513A PRINCESS ANNE DR KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH **Zoning:**

Legal Description: **Block:** 2 **Lot(s):** 13

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

PROJECT DESCRIPTION: Replace electrical service.

EL2018-004

PROJECT NAME:

SITE ADDRESS: 1513A PRINCESS ANNE DR KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/07/2018

EXPIRES: 08/06/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
OCCUPANCY TYPE	One & Two Family Dwelling

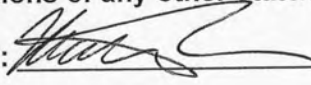
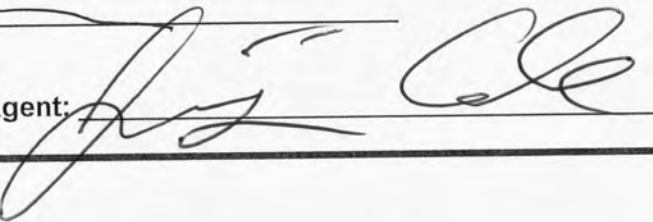
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 
Contractor or Authorized Agent:  Date: 2/7/18



Town of Kill Devil Hills

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

PAID

FEB - 7 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2018-004

PROJECT NAME: Chips Wine and Beer
SITE ADDRESS: 2200 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 02/02/2018

EXPIRES: 08/01/2018

APPLICANT: Wayland Enterprises, Inc.
704 Teakwood Lane
Kill Devil Hills, NC 27948
757-630-2031

OWNER: Michael Davenport
406 W Lake Dr
Kill Devil Hills, NC 27948

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

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

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988517116001

Parcel Number: 016628000

Address: 2200 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORE AMD BLK 24

Zoning:

Block: 24

Lot(s): 11-14 & 2
LOTS

Legal Description:

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

PROJECT DESCRIPTION: Sign on the building



Town of Kill Devil Hills

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

Planning and Inspection Department

OP2018-007	OCCUPANCY
PROJECT NAME: East Coast Construction Group Inc. SFD	ISSUED: 02/06/2018
SITE ADDRESS: 905 SWAN ST KILL DEVIL HILLS	EXPIRES:

APPLICANT: Lane Investment Properties LLC PO Box 329 Kill Devil Hills, NC 27948 252-441-9442	OWNER: Lane Investment Properties LLC PO Box 329 Kill Devil Hills, NC 27948 252-441-9442
--	--

GENERAL: EAST COAST CONSTRUCTION GROUP PO Box 329 KILL DEVIL HILLS, NC 27948 252-202-1600	License: 34495 Expires: 01/01/2019
---	---

PARCEL:

PIN: 988312776188	Parcel Number: 004447000
Address: 905 SWAN ST KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 27 Lot(s): 8
Legal Description:	

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

PROJECT DESCRIPTION: Proposed 4 bedroom SFD

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New

FEB 6 2018

CONDITIONS

TOWN OF
KILL DEVIL HILLS

OP2018-007

PROJECT NAME: East Coast Construction Group Inc. SFD
SITE ADDRESS: 905 SWAN ST KILL DEVIL HILLS

OCCUPANCY

ISSUED: 02/06/2018

EXPIRES:

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Bill

Date: 2-6-2018



Town of Kill Devil Hills

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

Planning and Inspection Department

Printed : 02-05-2018

Page 1 of 2

CERTIFICATE OF OCCUPANCY

This Certificate issued pursuant to the requirements of the North Carolina State Building Code certifying that at the time of issuance this structure was in compliance with the technical codes and other applicable laws and ordinances and released by the Inspections Department.

Occupancy Permit Number : OP2018-006

PAID

Applicant IHLE, LINDA LOUISE
1407 KETCH LANE
KILL DEVIL HILLS, NC 27948

Approval Date:

FEB 5 2018

Parcel:

PIN:

Parcel Number:

988405082609

Address: 2025 PORTSMOUTH ST KILL DEVIL HILLS

Section/Town/Range:

Zoning

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0

Lot(s): 886

Legal Description:

TOWN OF
KILL DEVIL HILLS

Owners

Name: IHLE, LINDA LOUISE

Phone:

Address: 1407 KETCH LANE
KILL DEVIL HILLS, NC 27948

Contractors

Name: JOHN OGDEN CONSTRUCTION

Phone: 256-1507

Fees and Receipts

Number	Description	Paid	Due
CERTIFICATE OF OCCUPANCY	Certificate of Occupancy Fee	\$50.00	\$0.00
RESIDENTIAL TRASH CAN	Residential Trash Can	\$106.75	\$0.00
Totals :		\$156.75	\$0.00

Additional Information

Building Permit Number:

Conditions :



Town of Kill Devil Hills

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

Planning and Inspection Department

Printed : 02-05-2018

Page 2 of 2

2/5/18

Date

Building Inspector Signature



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-020

PROJECT NAME: Monroe HVAC
SITE ADDRESS: 1607 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/06/2018

EXPIRES: 08/05/2018

APPLICANT: AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

OWNER: Monroe, Stephen
20846 FURR ROAD
ROUND HILL, VA 20141

MECHANICAL H2 AND H3: AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

License: 29480
Expires: 12/31/2018

PARCEL:

PIN: 988410465035

Parcel Number: 003136020

Address: 1607 CROATAN HWY N KILL DEVIL HILLS

Addition: DELRAY BEACH RESUBDIV

Zoning:
Block: 3 **Lot(s):** 20

Legal Description:

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

PROJECT DESCRIPTION: Remove and replace mid level heat pump and airhandler

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6100.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

PAID
FEB - 6 2018

MC2018-020

PROJECT NAME: Monroe HVAC

SITE ADDRESS: 1607 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/06/2018

EXPIRES: 08/05/2018

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2/6/18



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2018-006

PROJECT NAME: UNDERHILL FENCE
SITE ADDRESS: 1207 WINDSONG WAY KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/06/2018

EXPIRES: 08/05/2018

APPLICANT: UNDERHILL, THOMAS
4156 WESTNECK RD
Virginia Beach, Va 23455
757-426-8585

OWNER: UNDERHILL, THOMAS
4156 WESTNECK RD
Virginia Beach, Va 23455
757-426-8585

PARCEL:

PIN: 988415646257

Parcel Number: 004080000

Address: 1207 WINDSONG WAY KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: FENCE ALONG EAST PROPERTY LINE

PAID

FEB - 6 2018

TOWN OF
KILL DEVIL HILLS

ZP2018-006

PROJECT NAME: UNDERHILL FENCE
SITE ADDRESS: 1207 WINDSONG WAY KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/06/2018

EXPIRES: 08/05/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	400.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

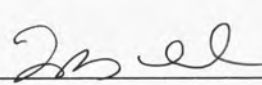
CONDITIONS

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

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 2/16/18



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2018-005

PROJECT NAME: ROGERS FENCE
SITE ADDRESS: 803 AIRSTRIP RD W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

APPLICANT: ROGERS, MICHAEL & ERIN
803 WEST AIRSTRIP RD
Kill Devil Hills, NC 27948

OWNER: ROGERS, MICHAEL & ERIN
803 WEST AIRSTRIP RD
Kill Devil Hills, NC 27948

PARCEL:

PIN: 988311751573

Parcel Number: 004595000

Address: 803 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 52 **Lot(s):** 5

Legal Description:

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

PROJECT DESCRIPTION: PERIMETER FENCE ALONG EAST, WEST AND SOUTH PROPERTY LINES, RETURNING TO STRUCTURE.

PAID

FEB 5 2018

TOWN OF
KILL DEVIL HILLS

ZP2018-005

PROJECT NAME: ROGERS FENCE

SITE ADDRESS: 803 AIRSTRIP RD W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

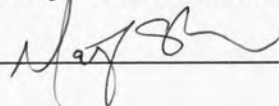
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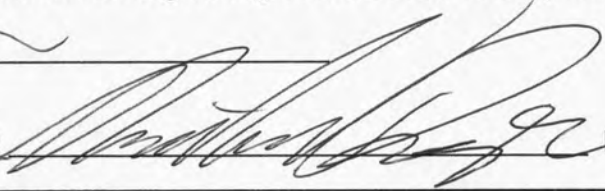
CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-004	BUILDING
PROJECT NAME: Pate steps	ISSUED: 01/09/2018
SITE ADDRESS: 3316 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/08/2018

APPLICANT: Pate, Raymond PO Box 350 Kill Devil Hills, NC 27948	OWNER: Michael Mangum P. O. Box 350 Kill Devil Hills, NC 27948 202-0830
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988509053291	Parcel Number: 000061000
Address: 3316 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH BLK 2	Block: 2 Lot(s): 3-4
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace exterior steps to the second floor.

PAID

FEB 5 2018

TOWN OF
KILL DEVIL HILLS

PAID
WITH
CASH

BP2018-004

PROJECT NAME: Pate steps

SITE ADDRESS: 3316 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 01/09/2018

EXPIRES: 07/08/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	500.00

REQUIRED INSPECTIONS

Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 2/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-010	BUILDING
PROJECT NAME: ADMIN BLDG DECK & STAIRS	ISSUED: 01/16/2018
SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill	EXPIRES: 07/15/2018

APPLICANT: TOWN OF KILL DEVIL HILLS
P O BOX 1719
102 Town Hall Drive
KILL DEVIL HILLS, NC 27948

OWNER: TOWN OF KILL DEVIL HILLS
P O BOX 1719
102 Town Hall Drive
KILL DEVIL HILLS, NC 27948

GENERAL BUILDING - LIMITED: 2 GUYS SERVICES
605 W. Archdale St.
Kill Devil Hills, NC 27948
252-489-8753

License: 75144
Expires: 12/30/2018

PARCEL:

PIN: 9876543210

Parcel Number: 23

Address: 102 Town Hall Dr Kill Devil Hill

Zoning: LIGHT INDUSTRIAL 2

Addition:

Block: blk **Lot(s):** lot

Legal Description: This is the legal description test

FEES: Paid Due

Totals :

PAID

PROJECT DESCRIPTION: REBUILD DECK/STAIRS AT REAR OF ADMIN BUILDING

FEB - 5 2018

PAID

FEB 5 2018

TOWN OF
KILL DEVIL HILLS

TOWN OF
KILL DEVIL HILLS

BP2018-010PROJECT NAME: ADMIN BLDG DECK & STAIRS
SITE ADDRESS: 102 Town Hall Dr Kill Devil Hill**BUILDING**

ISSUED: 01/16/2018

EXPIRES: 07/15/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15600.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Piling

Final

CONDITIONS

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Issued By: Contractor or Authorized Agent:  Date: 2/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-014

PROJECT NAME: Replace HVAC compressor unit
SITE ADDRESS: 2035 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/30/2018

EXPIRES: 07/29/2018

APPLICANT: David Couchoud
3130 Richfield Rd.
Huntingtown, MD 20639

OWNER: David Couchoud
3130 Richfield Rd.
Huntingtown, MD 20639

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2018

PARCEL:

PIN: 98931323283906

Parcel Number: 028903000

Address: 2035 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

Block: 3 **Lot(s):** 9-10 UNIT 6

Legal Description:

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

PROJECT DESCRIPTION:

PAID
FEB - 5 2018
TOWN OF
KILL DEVIL HILLS

MC2018-014

PROJECT NAME: Replace HVAC compressor unit
SITE ADDRESS: 2035 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/30/2018

EXPIRES: 07/29/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

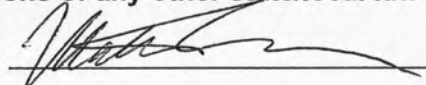
REQUIRED INSPECTIONS

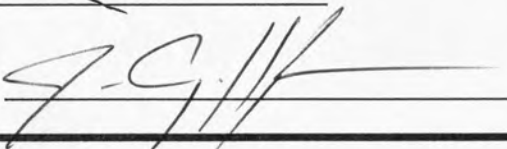
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Issued By: 

Contractor or Authorized Agent:  Date: 2/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-015

PROJECT NAME: Replace HVAC System
SITE ADDRESS: 107 LANDING DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/31/2018

EXPIRES: 07/30/2018

APPLICANT: Jonathan Gish
150 Calvary Church Rd.
WRIGHTSVILLE, PA 17368
717-761-9061

OWNER: Jonathan Gish
150 Calvary Church Rd.
WRIGHTSVILLE, PA 17368
717-761-9061

MECHANICAL, H-3, I: MASTER HEATING AND COOLING
P.O. Box 707
Kitty Hawk, NC 27949
255-0095

License: 18066
Expires: 12/31/2018

PARCEL:

PIN: 988415543984

Parcel Number: 003529000

Address: 107 LANDING DR E KILL DEVIL HILLS

Addition: LANDING SECTION 1, THE

Zoning:
Block: 0 **Lot(s):** 20

Legal Description:

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

PROJECT DESCRIPTION:

PAID

FEB - 5 2018

TOWN OF
KILL DEVIL HILLS

MC2018-015

PROJECT NAME: Replace HVAC System
SITE ADDRESS: 107 LANDING DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/31/2018

EXPIRES: 07/30/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

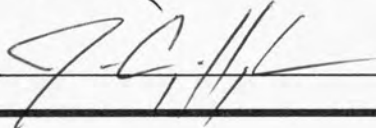
Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 2/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-019

PROJECT NAME: PATTERSON WATER HEATER
SITE ADDRESS: 2016 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

APPLICANT: PATTERSON, CHASE & LINDSEY
4212 IVY LN
kitty hawk, nc 27949
252-489-3748

OWNER: PATTERSON, CHASE & LINDSEY
4212 IVY LN
kitty hawk, nc 27949
252-489-3748

FUEL PIPING: Outer Banks LP Gas
538 Parkwood Dr
Kill Devil Hills, NC 27948
473-3200

License: 21896
Expires:

PARCEL:

PIN: 987408976996

Parcel Number: 002010000

Address: 2016 BAY DR KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 1040

Legal Description:

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

PROJECT DESCRIPTION: REPLACE WATER HEATER WITH GAS FIRED WATER HEATER. ADD NEW GAS LINE.

PAID

FEB 5 2018

TOWN OF
KILL DEVIL HILLS

MC2018-019

PROJECT NAME: PATTERSON WATER HEATER
SITE ADDRESS: 2016 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/05/2018

EXPIRES: 08/04/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Rough In

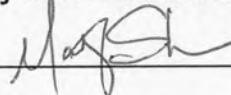
Final

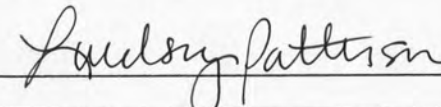
CONDITIONS

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* ROUGH IN INSPECTION REQUIRED WITH A PRESSURE TEST ON THE LINE BEFORE CONNECTION.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-002	ELECTRICAL
PROJECT NAME: OUTER BANKS BEACH CLUB STAGE II LIGHTING	ISSUED: 02/02/2018
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 08/01/2018

APPLICANT: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

OWNER: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

ELECTRICAL-LIMITED:

BRS ELECTRICAL SERVICES
1607 Sir Walter Rd.
Kill Devil Hills, NC 27948
252-207-5334

License: 23077
Expires: 07/31/2018

PARCEL:

PIN: 98930508005501

Parcel Number: 027867000

Address: 1110 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 4

Lot(s): 1-8/CONDO-BLDGS 1-2

Legal Description:

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

PROJECT DESCRIPTION: ADD EXIT LIGHTING & EMERGENCY LIGHTING AT STAGE II BUILDINGS.

PAID

FEB - 2 2018

TOWN OF
KILL DEVIL HILLS

EL2018-002

PROJECT NAME: OUTER BANKS BEACH CLUB STAGE II LIGHTING
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/02/2018

EXPIRES: 08/01/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	24000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

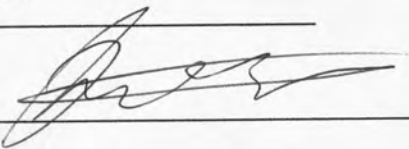
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 2/2/18



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-003

PROJECT NAME: OUTER BANKS BEACH CLUB ELECTRICAL
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/02/2018

EXPIRES: 08/01/2018

APPLICANT: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

OWNER: OUTER BANKS BEACH CLUB
1110 S. Va. Dare Tr.
Kill Devil Hills, NC 27948

ELECTRICAL-LIMITED: BRS ELECTRICAL SERVICES
1607 Sir Walter Rd.
Kill Devil Hills, NC 27948
252-207-5334

License: 23077
Expires: 07/31/2018

PARCEL:

PIN: 98930508005501

Parcel Number: 027867000

Address: 1110 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 4 **Lot(s):** 1-8/CONDO-BLDGS 1-2

Legal Description:

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

PROJECT DESCRIPTION: REPLACE EXISTING SERVICE DISCONNECTS & ADD (2) 200 AMP TRANSFER SWITCHES.

PAID
FEB - 2 2018

TOWN OF
KILL DEVIL HILLS

EL2018-003

PROJECT NAME: OUTER BANKS BEACH CLUB ELECTRICAL
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/02/2018

EXPIRES: 08/01/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature]

Date: 2/2/18



Town of Kill Devil Hills

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

Planning and Inspection Department

Printed : 02-02-2018

Page 1 of 2

CERTIFICATE OF OCCUPANCY

This Certificate issued pursuant to the requirements of the North Carolina State Building Code certifying that at the time of issuance this structure was in compliance with the technical codes and other applicable laws and ordinances and released by the Inspections Department.

Occupancy Permit Number : OP2018-005

Applicant Spencer, Richard
721 Ship Point Rd.
YORKTOWN, VA 23692
757-870-5398

Approval Date: 02/02/2018

Parcel:

PIN:

Parcel Number: 987520814819

Address: 600 W Wilkinson KILL DEVIL HILLS

Section/Town/Range:

Zoning

Addition: VIRGINIA DARE SHORES

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

Legal Description:

Owners

Name: Spencer, Richard
Address: 721 Ship Point Rd.
YORKTOWN, VA 23692

Phone: 757-870-5398

Contractors

Name: SEA COUNTRY HOMES, INC.

Phone: 207-8338

Fees and Receipts

Number	Description	Paid	Due
CERTIFICATE OF OCCUPANCY	Certificate of Occupancy Fee	\$50.00	\$0.00
RESIDENTIAL TRASH CAN	Residential Trash Can	\$106.75	\$0.00

FEB - 2 2018

Totals : \$156.75 \$0.00

Additional Information

Building Permit Number: 18-000118

Conditions :



Town of Kill Devil Hills

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

Planning and Inspection Department

Printed : 02-02-2018

Page 2 of 2

2/2/18

Date

Building Inspector Signature



Town of Kill Devil Hills

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

PAID

FEB - 1 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-017

PROJECT NAME: Michael Hamilton
SITE ADDRESS: 1513 GLIDER CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

APPLICANT: Joe Moran Construction
103 Broadbay St.
KILL DEVIL HILLS, NC 27948
252-207-9861

OWNER: Hamilton, Mike
209 E. HAYMAN ST.
KILL DEVIL HILLS, NC 27948
858-866-4970

UNLICENSED BUILDER: Joe Moran Construction
103 Broadbay St.
KILL DEVIL HILLS, NC 27948
252-207-9861

License: 123456
Expires: 01/31/2019

PARCEL:

PIN: 988414347755

Parcel Number: 003414000

Address: 1513 GLIDER CT KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 158

Legal Description:

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

PROJECT DESCRIPTION: Remodel bathroom, change closet into 1/2 bath

BJ2018-017

PROJECT NAME: Michael Hamilton
SITE ADDRESS: 1513 GLIDER CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	27481
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
Proposed First Floor Elevation	8.60
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8000.00
LOT COVERAGE	16.63
SURVEYOR NAME AND NUMBER	Gloria Rogers
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Rough In	Final
Insulation	

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Side yard setbacks are incorrect on survey. Should be 10' - not 8'.

BJ2018-017

PROJECT NAME: Michael Hamilton
SITE ADDRESS: 1513 GLIDER CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

[Handwritten signature]
[Handwritten signature]
2/1/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-020

PROJECT NAME: Add storage room under house, and 6x8 storage building in rear yard, must comply with setbacks and lot coverage.
SITE ADDRESS: 404 HOLLY ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

APPLICANT: Tom & Seanne Switzer
404 Holly St W.
Kill Devil Hills, NC 27948
804-402-1546

OWNER: Tom & Seanne Switzer
404 Holly St W.
Kill Devil Hills, NC 27948
804-402-1546

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988312858444

Parcel Number: 028409000

Address: 404 HOLLY ST W KILL DEVIL HILLS

Addition: KILL DEVIL BEACH EXTENDED

Zoning:
Block: W **Lot(s):** 10

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Accessory Residential (MIN)	\$100.00	\$0.00	Residential Unheated (.40)	156 Sq. Ft
Res. Building Permit Fee	\$62.40	\$0.00		
Totals :	\$162.40	\$0.00		

PROJECT DESCRIPTION:

PAID

FEB - 2 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-020

PROJECT NAME: Add storage room under house, and 6x8 storage building in rear yard, must comply with setbacks and lot coverage.

SITE ADDRESS: 404 HOLLY ST W KILL DEVIL HILLS


BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2/2/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-021	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/01/2018
SITE ADDRESS: 2010 EDENTON ST ST KILL DEVIL HILLS	EXPIRES: 07/31/2018

APPLICANT: THOMAS, BUDDY
2010 EDENTON ST
Kill Devil Hills, NC 27948

OWNER: THOMAS, BUDDY
2010 EDENTON ST
Kill Devil Hills, NC 27948

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988405080230

Parcel Number: 001286000

Address: 2010 EDENTON ST ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 841

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Remodel/Renovation 258 SQFT
Renovation/Remodel/Relocate	\$116.10	\$0.00	
Totals :	\$266.10	\$0.00	

PROJECT DESCRIPTION: Remodel kitchen, and baths, siding, windows, & decking

PAID

FEB - 1 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-021

PROJECT NAME:

SITE ADDRESS: 2010 EDENTON ST ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
# OF UNITS	1
LIVING SPACE (SQFT)	258
TOTAL SQUARE FOOTAGE	258
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-021

PROJECT NAME:

SITE ADDRESS: 2010 EDENTON ST ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

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

Issued By: Matt Lowcher

Contractor or Authorized Agent: LHJ Date: 2/1/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-013

PROJECT NAME: Replace existing deck stairs and railings in same foot print.

SITE ADDRESS: 113 WOODMERE AVE KILL DEVIL HILLS

BUILDING

ISSUED: 01/30/2018

EXPIRES: 07/29/2018

APPLICANT: MELTZER, ALFRED J
7848 WILLOWBROOK ROAD
FAIRFAX STATION, VA 22039

OWNER: MELTZER, ALFRED J
7848 WILLOWBROOK ROAD
FAIRFAX STATION, VA 22039

GENERAL BUILDING: Dan Osman
P. O. Box 7403
Kill Devil Hills, NC 27948
252-202-4599

License: 76259
Expires: 12/30/2018

PARCEL:

PIN: 988415626691

Parcel Number: 004006000

Address: 113 WOODMERE AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 45 **Lot(s):** 19

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION:

PAID

FEB - 2 2018

TOWN OF
KILL DEVIL HILLS

BP2018-013**PROJECT NAME:** Replace existing deck stairs and railings in same foot print.**SITE ADDRESS:** 113 WOODMERE AVE KILL DEVIL HILLS**BUILDING****ISSUED:** 01/30/2018**EXPIRES:** 07/29/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
LOT COVERAGE	38.76
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	C. Gomez L-3241
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-013

PROJECT NAME: Replace existing deck stairs and railings in same foot print.

SITE ADDRESS: 113 WOODMERE AVE KILL DEVIL HILLS

BUILDING

ISSUED: 01/30/2018

EXPIRES: 07/29/2018

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-2-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-015

PROJECT NAME:

SITE ADDRESS: 1219 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 02/02/2018

EXPIRES: 08/01/2018

APPLICANT: BOB'S GRILL
1219 S. Croatan Hwy.
Kill Devil Hills, NC 27948

OWNER: BOB'S GRILL
1219 S. Croatan Hwy.
Kill Devil Hills, NC 27948

BUILDING: R & M Exteriors
P. O. Box 4
Aydlett, NC 27916
252-457-0632

License: Non Licensed
Expires:

PARCEL:

PIN: 988312966508

Parcel Number: 004747000

Address: 1219 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

Zoning:

Block: I **Lot(s):** 6-12

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PAID

FEB - 2 2018

TOWN OF
KILL DEVIL HILLS

PROJECT DESCRIPTION: Replace 4 damaged rafters, plywood sheathing and shingles on rear shed roof

BP2018-015

PROJECT NAME:

SITE ADDRESS: 1219 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 02/02/2018

EXPIRES: 08/01/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1750.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 2/2/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-017

PROJECT NAME:

SITE ADDRESS: 803 Seventh Ave. Kill Devil Hills

MECHANICAL

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

APPLICANT: Dail, Derek
803 7th AVE
Kill Devil Hills, NC 27948

OWNER: Dail, Derek
803 7th AVE
Kill Devil Hills, NC 27948

H3, CLASS 1:

OUTER BANKS HEATING AND COOLING
P.O. Box 1415
Nags Head, NC 27959
441-1740

License: 12643
Expires: 12/31/2018

PARCEL:

PIN: 988311679162

Parcel Number: 004631007

Address: 803 Seventh Ave. Kill Devil Hills

Zoning:

Addition: KILL DEVIL HILLS RLTY CORP ADD

Block: 38 **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

PAID

FEB - 2 2018

TOWN OF
KILL DEVIL HILLS

MC2018-017

PROJECT NAME:

SITE ADDRESS: 803 Seventh Ave. Kill Devil Hills

MECHANICAL

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5276.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 2-2-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-018

PROJECT NAME:

SITE ADDRESS: 2100 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

APPLICANT: JO WHITEHEAD
P O BOX 1653
KILL DEVIL HILLS, NC 27948

OWNER: JO WHITEHEAD
P O BOX 1653
KILL DEVIL HILLS, NC 27948

H3, CLASS 1:

OUTER BANKS HEATING AND COOLING
P.O. Box 1415
Nags Head, NC 27959
441-1740

License: 12643
Expires: 12/31/2018

PARCEL:

PIN: 988518217121

Parcel Number: 003073000

Address: 2100 VA DARE TRL N KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0

Lot(s): 9 & PT 10

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

PAID
FEB - 2 2018
TOWN OF
KILL DEVIL HILLS

MC2018-018

PROJECT NAME:

SITE ADDRESS: 2100 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7472.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

22-18



Town of Kill Devil Hills

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

PAID

FEB - 1 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

PL2018-002

PROJECT NAME: Ramada
SITE ADDRESS: 1701 VA DARE TRL S KILL DEVIL HILLS

PLUMBING

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

APPLICANT: O W L NEAL PARTNERSHIP
PO BOX 2716
KILL DEVIL HILLS, NC 27948

OWNER: O W L NEAL PARTNERSHIP
PO BOX 2716
KILL DEVIL HILLS, NC 27948

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

License: 30190
Expires: 12/31/2018

PARCEL:

PIN: 989309154444

Parcel Number: 008235000

Address: 1701 VA DARE TRL S KILL DEVIL HILLS

Addition: OCEAN ACRES INC

Zoning:
Block: 0 **Lot(s):** C & D

Legal Description:

FEES:	Paid	Due
Plumbing Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace (2) gas valves and install water isolation valves

PL2018-002

PROJECT NAME: Ramada

SITE ADDRESS: 1701 VA DARE TRL S KILL DEVIL HILLS

PLUMBING

ISSUED: 02/01/2018

EXPIRES: 07/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	900.00
CONSTRUCTION TYPE	II
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 2/1/18



Town of Kill Devil Hills

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

FEB 28 2018

Planning and Inspection Department

BJ2018-023

PROJECT NAME: Robert and Jennifer Major
SITE ADDRESS: 1717 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

APPLICANT: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-202-0703

OWNER: Major, Robert William
804 Angler Way
kitty hawk, nc 27949
540-903-3284

GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-202-0703

License: 62306
Expires: 12/30/2019

PARCEL:

PIN: 988409057509

Parcel Number:

Address: 1717 BAY DR KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 18, Block 20, Section 1, Croatan Shores S/D

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$234.00	\$0.00	# of Temporary Poles	1 EA
Res. Building Permit Fee	\$1,709.40	\$0.00	Covered Porches/Decks	312 SQFT
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	576 Sq. Ft
Totals :	\$1,993.40	\$0.00	Residential Heated Space (.75)	1972 sq. Ft.

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23005

BJ2018-023PROJECT NAME: Robert and Jennifer Major
SITE ADDRESS: 1717 BAY DR KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	26537
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	9.50
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
# OF UNITS	1
LOT COVERAGE	39.96
LIVING SPACE (SQFT)	1972
COVERED PORCHES/DECKS (SQFT)	312
GARAGE (SQFT)	336
STORAGE (SQFT)	240
TOTAL SQUARE FOOTAGE	2860
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	F. House 24740
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-023

PROJECT NAME: Robert and Jennifer Major
SITE ADDRESS: 1717 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-28-18



Town of Kill Devil Hills

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

PAID

FEB 28 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-041

PROJECT NAME: Melanie Moore
SITE ADDRESS: 514 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/27/2018

EXPIRES: 08/26/2018

APPLICANT: MOORE, MELANIE
514 APACHE ST
Kill Devil Hills, NC 27948
252-207-5505

OWNER: MOORE, MELANIE
514 APACHE ST
Kill Devil Hills, NC 27948
252-207-5505

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988409252785

Parcel Number: 002557000

Address: 514 APACHE ST KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:

Block: 0 **Lot(s):** 276

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Renovation/Remodel/Relocate	\$352.35	\$0.00	Remodel/Renovation 783 SQFT
Totals :	\$352.35	\$0.00	

PROJECT DESCRIPTION: Proposed bedroom, bath and den addition

BJ2018-041

PROJECT NAME: Melanie Moore
 SITE ADDRESS: 514 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/27/2018

EXPIRES: 08/26/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	27553
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	25000.00
LOT COVERAGE	20.00
LIVING SPACE (SQFT)	783
TOTAL SQUARE FOOTAGE	783
SURVEYOR NAME AND NUMBER	BILD L-3740
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

BJ2018-041

PROJECT NAME: Melanie Moore
SITE ADDRESS: 514 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/27/2018

EXPIRES: 08/26/2018

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

FEB 28 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-034	BUILDING
PROJECT NAME: PARKER DECK/STAIR REBUILD	ISSUED: 02/27/2018
SITE ADDRESS: 805 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 08/26/2018

APPLICANT: ROY PARKER
UNKNOWN
UNKNOWN, XX 00000

OWNER: ROY PARKER
UNKNOWN
UNKNOWN, XX 00000

RESIDENTIAL - LIMITED:

PHILLIP KANIS
713 COLINGTON DR
Kill Devil Hills, NC 27948
252-480-5547

License: 38788
Expires: 07/31/2018

PARCEL:

PIN: 988308884634

Parcel Number: 009168000

Address: 805 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 2 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION: COMPLETE REBUILD OF DECK & STAIR TO SECOND LEVEL.

BP2018-034

PROJECT NAME: PARKER DECK/STAIR REBUILD
SITE ADDRESS: 805 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 02/27/2018

EXPIRES: 08/26/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	7500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

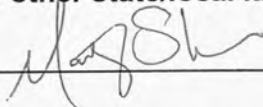
REQUIRED INSPECTIONS

Piling Zoning Final
Final

CONDITIONS

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

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Issued By: _____ 

Contractor or Authorized Agent: Roy E Park **Date:** 2-28-18



Town of Kill Devil Hills

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

PAID

FEB 28 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-035	BUILDING
PROJECT NAME: MEANA DECK & STAIR REPAIRS	ISSUED: 02/28/2018
SITE ADDRESS: 1407 PIRATES LOOP KILL DEVIL HILLS	EXPIRES: 08/27/2018

APPLICANT: MEANA, CAROLYN
1407 PIRATES LOOP
Kill Devil Hills, NC 27948
252-573-0866

OWNER: MEANA, CAROLYN
1407 PIRATES LOOP
Kill Devil Hills, NC 27948
252-573-0866

PARCEL:

PIN: 988414440066

Parcel Number: 003557000

Address: 1407 PIRATES LOOP KILL DEVIL HILLS

Addition: LANDING SECTION 2, THE

Zoning:

Block: 0 **Lot(s):** 52

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE DECKING, RAILINGS AND 2 STAIRS.

BP2018-035

PROJECT NAME: MEANA DECK & STAIR REPAIRS
SITE ADDRESS: 1407 PIRATES LOOP KILL DEVIL HILLS

BUILDING

ISSUED: 02/28/2018

EXPIRES: 08/27/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

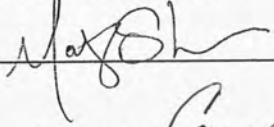
REQUIRED INSPECTIONS

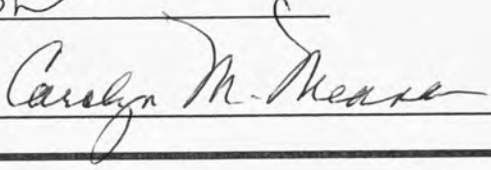
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2/28/18



Town of Kill Devil Hills

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

PAID

FEB 28 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-035

PROJECT NAME: BILLINGSLEY HVAC
SITE ADDRESS: 2010 FRANKLIN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/28/2018

EXPIRES: 08/27/2018

APPLICANT: RONNIE BILLINGSLEY
21 Blaque Trax Lane
Fredricksburg, Va 22406
540-659-6477

OWNER: RONNIE BILLINGSLEY
21 Blaque Trax Lane
Fredricksburg, Va 22406
540-659-6477

MECHANICAL: R A HOY
PO Box 265
Kitty Hawk, NC 27949

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988405183933

Parcel Number: 001450001

Address: 2010 FRANKLIN ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1319

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

MC2018-035

PROJECT NAME: BILLINGSLEY HVAC

SITE ADDRESS: 2010 FRANKLIN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/28/2018

EXPIRES: 08/27/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5969.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

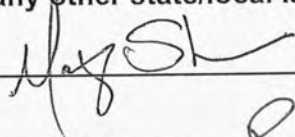
REQUIRED INSPECTIONS

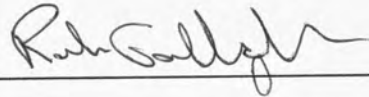
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2-28-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-034

PROJECT NAME:

SITE ADDRESS: 2016 S VA DARE TRL Kill Devil Hills

MECHANICAL

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

APPLICANT: Renee Kuntz
204 S. Rolling Rd.
CATONSVILLE, MD 21228

OWNER: Renee Kuntz
204 S. Rolling Rd.
CATONSVILLE, MD 21228

MECHANICAL H2 AND H3: AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

License: 29480
Expires: 12/31/2018

PARCEL:

PIN: 028053004

**Parcel
Number:**

Address: 2016 S VA DARE TRL Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: COASTAL RETREAT CONDO, LOT: UNIT 202 BLK: SEC: PL: UOF 5 SL: 314 Units: 1 Deed
Date: 02/29/2008 BkPg: 1759/0154

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

PROJECT DESCRIPTION: Replace HVAC

PAID

FEB 28 2018

TOWN OF
KILL DEVIL HILLS

MC2018-034

PROJECT NAME:

SITE ADDRESS: 2016 S VA DARE TRL Kill Devil Hills

MECHANICAL

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4869.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

FEB 28 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-012

PROJECT NAME: LIPSCOMB RV RECEPTACLE
SITE ADDRESS: 901 SUFFOLK ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/28/2018

EXPIRES: 08/27/2018

APPLICANT: Lipscomb, Donald
901 SUFFOLK ST
Kill Devil Hills, NC 27948
505-306-3883

OWNER: Lipscomb, Donald
901 SUFFOLK ST
Kill Devil Hills, NC 27948
505-306-3883

ELECTRICAL - UNLIMITED:

SEABREEZE ELECTRIC & LIGHTING INC
136 CAROLINA CT WEST
MANTEO, NC 27954
(252) 654-2094

License: 30079
Expires: 04/05/2019

PARCEL:

PIN: 988405093300

Parcel Number: 001151000

Address: 901 SUFFOLK ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 952

Legal Description:

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

PROJECT DESCRIPTION: INSTALL NEW 30 AMP RV RECEPTACLE

EL2018-012

PROJECT NAME: LIPSCOMB RV RECEPTACLE
SITE ADDRESS: 901 SUFFOLK ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/28/2018

EXPIRES: 08/27/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	168.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 2/28/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2018-006

PROJECT NAME: Maria Sanchez
SITE ADDRESS: 1208 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

APPLICANT: Sanche, Maria
2041 Edenton Street
Kill Devil Hills, NC 27948
252-255-8338

OWNER: PARKER, ROY E
P.O. BOX 49
KILL DEVIL HILLS, NC 27948

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2020

PARCEL:

PIN: 988312961635

Parcel Number: 004331000

Address: 1208 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 7

Lot(s): 11-12 & PT 5-6

Legal Description:

FEES:	Paid	Due
Sign Permit Fee	\$200.00	\$0.00
Totals :	\$200.00	\$0.00

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

**PAID
WITH
CASH**

FEB 26 2018

SG2018-006

PROJECT NAME: Maria Sanchez

SITE ADDRESS: 1208 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

DETAILS

Permit

Name	Value
# OF SIGNS	2
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	21.60
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	35.91
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	1300.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

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

* Zoning Final Inspection is required.

SG2018-006

PROJECT NAME: Maria Sanchez

SITE ADDRESS: 1208 CROATAN HWY S KILL DEVIL HILLS

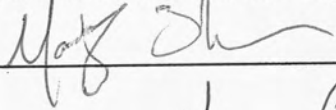
SIGN

ISSUED: 02/22/2018

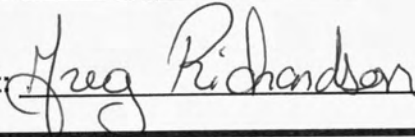
EXPIRES: 08/21/2018

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

26 Feb 2018



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-035

PROJECT NAME: Jose and Nasmin Flores
SITE ADDRESS: 600 HOLLY ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

APPLICANT: Simple Side Construction
308 W. Helga St.
Kill Devil Hills, NC 27948
252-564-8307

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

BUILDING LIMITED: Simple Side Construction
308 W. Helga St.
Kill Devil Hills, NC 27948
252-564-8307

License: 78583
Expires:

PARCEL:

PIN: 988312853280

Parcel Number: 008228000

Address: 600 HOLLY ST W KILL DEVIL HILLS

Addition: KILL DEVIL BEACH EXTENDED

Zoning:
Block: AA **Lot(s):** 6 & PT 7

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,766.25	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$138.00	\$0.00	Residential Heated Space	2059 sq. Ft.
Open Deck Fee	\$150.00	\$0.00	(.75)	
Totals :	\$2,104.25	\$0.00	Covered Porches/Decks	184 SQFT
			Residential Unheated (.40)	555 Sq. Ft

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

PAID
FEB 23 2018

Water Tap #: T23008

BJ2018-035**PROJECT NAME:** Jose and Nasmin Flores
SITE ADDRESS: 600 HOLLY ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 02/22/2018**EXPIRES:** 08/21/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	27498
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	190000.00
# OF UNITS	1
LOT COVERAGE	25.06
LIVING SPACE (SQFT)	2059
COVERED PORCHES/DECKS (SQFT)	184
GARAGE (SQFT)	555
OPEN DECK (SQFT)	40
TOTAL SQUARE FOOTAGE	2838
SURVEYOR NAME AND NUMBER	William S. Jones, Jr.
ENGINEER AND LICENSE NUMBER	r. Pate 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-035

PROJECT NAME: Jose and Nasmin Flores
SITE ADDRESS: 600 HOLLY ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-23-18



Town of Kill Devil Hills

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

PAID

FEB 26 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-040

PROJECT NAME: Remodel area of covered porch into laundry area.
SITE ADDRESS: 1102 THIRD ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

APPLICANT: Edwards, William
1102 West Third Street
Kill Devil Hills, NC 27948
757-675-9415

OWNER: Edwards, William
1102 West Third Street
Kill Devil Hills, NC 27948
757-675-9415

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988409067342

Parcel Number: 002511000

Address: 1102 THIRD ST W KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:

Block: 17 **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION:

BJ2018-040

PROJECT NAME: Remodel area of covered porch into laundry area.
SITE ADDRESS: 1102 THIRD ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	500.00
LIVING SPACE (SQFT)	48
TOTAL SQUARE FOOTAGE	48
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-040

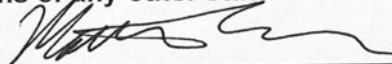
PROJECT NAME: Remodel area of covered porch into laundry area.
SITE ADDRESS: 1102 THIRD ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2-26-18



Town of Kill Devil Hills

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

PAID

FEB 26 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-030
PROJECT NAME:
SITE ADDRESS: 1716 SOBLE DR KILL DEVIL HILLS

BUILDING
ISSUED: 02/26/2018
EXPIRES: 08/25/2018

APPLICANT: Jeanne Borkowski
26 Hixon Dr.
BURLINGTON, NJ 08016
609-364-4403

OWNER: Jeanne Borkowski
26 Hixon Dr.
BURLINGTON, NJ 08016
609-364-4403

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988410471156

Parcel Number: 002933022

Address: 1716 SOBLE DR KILL DEVIL HILLS

Addition: HEDRICKS ADD-PAR B CROATAN SH

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace existing decks and stairs in same place, must be compliant with current NCBC Codes, and KDH setbacks.

BP2018-030

PROJECT NAME:

SITE ADDRESS: 1716 SOBLE DR KILL DEVIL HILLS

BUILDING

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
LOT COVERAGE	33.60
OPEN DECK (SQFT)	260
COVERED PORCHES/DECKS (SQFT)	208
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	D. Styons C-1697
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2018-030

PROJECT NAME:

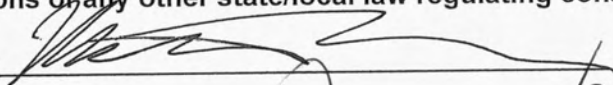
SITE ADDRESS: 1716 SOBLE DR KILL DEVIL HILLS

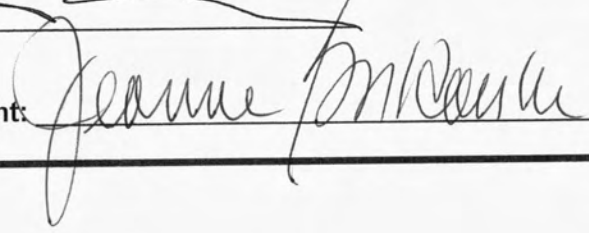
BUILDING

ISSUED: 02/26/2018

EXPIRES: 08/25/2018

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2-26-18



Town of Kill Devil Hills

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

PAID

FEB 22 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-037	BUILDING JOINT
PROJECT NAME: Fuji Steak House	ISSUED: 02/22/2018
SITE ADDRESS: 1201 S. CROATAN HWY. KILL DEVIL HILLS	EXPIRES: 08/21/2018

APPLICANT: Jack Chen
519 W. Walker St.
Kill Devil Hills, NC 27948

OWNER: Jack Chen
519 W. Walker St.
Kill Devil Hills, NC 27948

GENERAL: ANDRUS, PAUL R.
PO Box 687
Kitty Hawk, NC 27949
252-216-8902

License: 13497
Expires:

PARCEL:

PIN: 988312912144

Parcel Number: 004271000

Address: 1201 S. CROATAN HWY. KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block:

Lot(s): 1, 2, 17, 18

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Renovation/Remodel/Relocate	\$1,715.40	\$0.00	Remodel/Renovation 3812 SQFT
Totals :	\$1,715.40	\$0.00	

PROJECT DESCRIPTION: Remodel restaurant from fire damage. Final elevation certificate required.

BJ2018-037

PROJECT NAME: Fuji Steak House

SITE ADDRESS: 1201 S. CROATAN HWY. KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
Proposed First Floor Elevation	8.30
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	400000.00
# OF UNITS	1
TOTAL SQUARE FOOTAGE	3812
ENGINEER AND LICENSE NUMBER	D. W. Pou 021993
ARCHITECT NAME AND LICENSE NUMBER	M. Kasten 7220
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

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

BJ2018-037

PROJECT NAME: Fuji Steak House

SITE ADDRESS: 1201 S. CROATAN HWY. KILL DEVIL HILLS

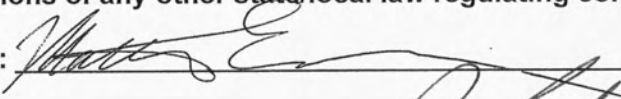
BUILDING JOINT

ISSUED: 02/22/2018

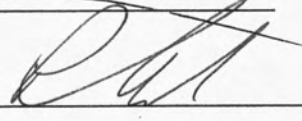
EXPIRES: 08/21/2018

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Issued By:



Contractor or Authorized Agent:



Date:

2-22-18



Town of Kill Devil Hills

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

Planning and Inspection Department **FEB 22 2018**

BJ2018-033

PROJECT NAME: Colson Construction Co.
SITE ADDRESS: 222 AYCOCK ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

APPLICANT: COLSON CONSTRUCTION CO., INC.
1305 Campground Rd.
Elizabeth city, NC 27909
252-202-2764

OWNER: COLSON CONSTRUCTION CO., INC.
1305 Campground Rd.
Elizabeth city, NC 27909
252-202-2764

GENERAL: COLSON CONSTRUCTION CO., INC.
1305 Campground Rd.
Elizabeth city, NC 27909
252-202-2764

License: 40746-u
Expires: 12/30/2018

PARCEL:

PIN: 988517019447

Parcel Number: 000483000

Address: 222 AYCOCK ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 28 **Lot(s):** 30-32

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	283 SQFT
Covered Porch Residential	\$212.25	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	333 Sq. Ft
Res. Building Permit Fee	\$1,622.70	\$0.00	Open Decks	1 EA
Totals :	\$2,034.95	\$0.00	Residential Heated Space (.75)	1986 sq. Ft.

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: 723WJ

BJ2018-033

PROJECT NAME: Colson Construction Co.
SITE ADDRESS: 222 AYCOCK ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 2-22-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-034

PROJECT NAME: Haddon Homes, INC.
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/21/2018

EXPIRES: 08/20/2018

APPLICANT: HADDON HOMES, INC.
PO Box 1868
Nags Head, NC 27959

OWNER: HADDON HOMES, INC.
PO Box 1868
Nags Head, NC 27959

CONTRACTOR: HADDON HOMES, INC.
PO Box 1868
Nags Head, NC 27959

License: 55566
Expires: 01/05/2019

PARCEL:

PIN: 988316749087

Parcel Number: 004890302

Address: 1424 SHAY ST KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

Zoning:

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Heated Space	2110 sq. Ft.
Covered Porch Residential	\$71.25	\$0.00	(.75)	
Res. Building Permit Fee	\$1,741.30	\$0.00	# of Temporary Poles	1 EA
			Residential Unheated (.40)	397 Sq. Ft
Totals :	\$1,862.55	\$0.00	Covered Porches/Decks	95 SQFT

PROJECT DESCRIPTION: Proposed 4 Bedroom SFD

PAID

FEB 22 2018

TOWN OF
KILL DEVIL HILLS

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: _____

BJ2018-034PROJECT NAME: Haddon Homes, INC.
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 02/21/2018

EXPIRES: 08/20/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	27271
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	275000.00
# OF UNITS	1
LOT COVERAGE	23.40
LIVING SPACE (SQFT)	2110
COVERED PORCHES/DECKS (SQFT)	95
GARAGE (SQFT)	353
STORAGE (SQFT)	44
TOTAL SQUARE FOOTAGE	2602
SURVEYOR NAME AND NUMBER	M. Douglas Styons, Jr. L-3227
ENGINEER AND LICENSE NUMBER	R. Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-034

PROJECT NAME: Haddon Homes, INC.
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/21/2018

EXPIRES: 08/20/2018

REQUIRED INSPECTIONS

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

CONDITIONS

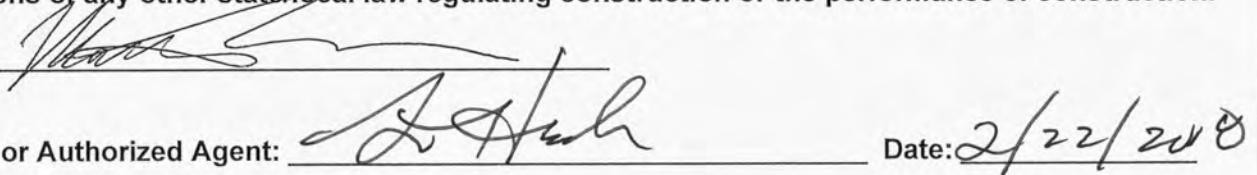
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



The signature for 'Issued By' is illegible. The signature for 'Contractor or Authorized Agent' is 'A. Ash'. The date is '2/22/2018'.



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-039

PROJECT NAME: WRIGHT RENOVATION
SITE ADDRESS: 1700 WYANDOTTE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

APPLICANT: WRIGHT, JOSEPH
531 MARYLAND AVE
VIRGINIA BEACH, VA 23451
757-553-7196

OWNER: WRIGHT, JOSEPH
531 MARYLAND AVE
VIRGINIA BEACH, VA 23451
757-553-7196

PARCEL:

PIN: 988409262052

Parcel Number: 002709000

Address: 1700 WYANDOTTE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:

Block: E **Lot(s):** 14

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Remodel/Renovation	46 SQFT
			Residential Heated Space (.75)	83 sq. Ft.
Totals :	\$150.00	\$0.00	Residential Unheated (.40)	66 Sq. Ft

PROJECT DESCRIPTION: REMOVE EXISTING INTERIOR STAIR & CREATE MASTER CLOSET. RENOVATE EXISTING HALL CLOSET & MASTER CLOSET TO CREATE NEW HALL. RENOVATE EXISTING REAR PORCH TO CREATE SMALLER PORCH, LAUNDRY ROOM & NEW STAIR TO LOWER LEVEL. ADD NEW STORAGE ROOM AT LOWER LEVEL.

PAID

FEB 22 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-039

PROJECT NAME: WRIGHT RENOVATION

SITE ADDRESS: 1700 WYANDOTTE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-039

PROJECT NAME: WRIGHT RENOVATION

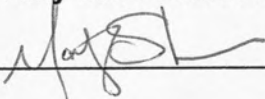
SITE ADDRESS: 1700 WYANDOTTE ST KILL DEVIL HILLS


BUILDING JOINT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

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Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 2/28/ _____



Town of Kill Devil Hills

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

PAID

FEB 22 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-032
PROJECT NAME: BRITT HVAC
SITE ADDRESS: 705 CANAL DR KILL DEVIL HILLS

MECHANICAL
ISSUED: 02/22/2018
EXPIRES: 08/21/2018

APPLICANT: BRITT, HOLLY
705 CANAL DRIVE
KILL DEVIL HILLS, NC 27948

OWNER: BRITT, HOLLY
705 CANAL DRIVE
KILL DEVIL HILLS, NC 27948

MECHANICAL H2 AND H3: AIR HANDLERS OBX
8788 Caratoke Hwy
Harbinger, NC 27941
252-216-8945

License: 29480
Expires: 12/31/2018

PARCEL:

PIN: 988409156127

Parcel Number: 003282000

Address: 705 CANAL DR KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 317

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

MC2018-032

PROJECT NAME: BRITT HVAC

SITE ADDRESS: 705 CANAL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

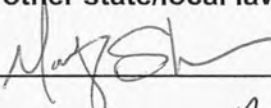
REQUIRED INSPECTIONS


Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 2/22/18



Town of Kill Devil Hills

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

PAID

PAID
WITH
CASH

FEB 21 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-009

PROJECT NAME: Mattox Disconnects
SITE ADDRESS: 705 Virginia Dare Tr. S. Kill Devil Hills

ELECTRICAL

ISSUED: 02/21/2018

EXPIRES: 08/20/2018

APPLICANT: PAUL KING ELECTRIC
PO Box 7304
Kill Devil Hills, NC 27948
207-5438

OWNER: JOEL MATTOX
7217 Crescent Ridge Dr.
Chapel Hill, NC 27516

ELECTRICAL, LIMITED: PAUL KING ELECTRIC
PO Box 7304
Kill Devil Hills, NC 27948
207-5438

License: 26212
Expires: 12/31/2018

PARCEL:

PIN: 988308992518

Parcel Number: 027931002

Address: 705 Virginia Dare Tr. S. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

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

PROJECT DESCRIPTION: Replace service disconnects

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2500.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11

EL2018-009

PROJECT NAME: Mattox Disconnects
SITE ADDRESS: 705 Virginia Dare Tr. S. Kill Devil Hills

ELECTRICAL

ISSUED: 02/21/2018

EXPIRES: 08/20/2018

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 2-21-18



Town of Kill Devil Hills

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

PAID

FEB 22 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-011

PROJECT NAME: Breaker meter base and disconnect
SITE ADDRESS: 1801 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

APPLICANT: SPECIALTY ELECTRICAL CONTRACTORS,
INC.
104 Waterway CT
Aydlett, NC 27916

OWNER: Taimi, Thomas
13851 Springstone Dr
CLIFTON, VA 20124

ELECTRICAL-I: SPECIALTY ELECTRICAL CONTRACTORS, INC.
104 Waterway CT
Aydlett, NC 27916

License: 24891-I
Expires: 08/19/2018

PARCEL:

PIN: 989309155170C2

Parcel Number: 028132000

Address: 1801 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** A, UNIT 2

Legal Description:

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

PROJECT DESCRIPTION: Replace meter base and disconnect

EL2018-011

PROJECT NAME: Breaker meter base and disconnect
SITE ADDRESS: 1801 VA DARE TRL S KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

DETAILS

Permit

Name	Value
NCP PROJECT #	10183935
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	400.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 2-22-18



Town of Kill Devil Hills

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

PAID

FEB 22 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-009

PROJECT NAME: Michael Davieds Fence
SITE ADDRESS: 3120 BATH ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

APPLICANT: DAVIEDS, MICHAEL
231 FINCASTLE DR
NEWPORT NEWS, VA 23601

OWNER: DAVIEDS, MICHAEL
231 FINCASTLE DR
NEWPORT NEWS, VA 23601

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 987516825891

Parcel Number: 001023000

Address: 3120 BATH ST KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:

Block: 0 **Lot(s):** 78

Legal Description:

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Fence

ZP2018-009

PROJECT NAME: Michael Davieds Fence
SITE ADDRESS: 3120 BATH ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	2500.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

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

Issued By: _____

Contractor or Authorized Agent: _____

Michael Davieds

Date: 2/20/18



Town of Kill Devil Hills

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

PAID

FEB 22 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-010

PROJECT NAME: Earl David Roberts
SITE ADDRESS: 1005 SPORTSMAN DR W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

APPLICANT: Jensen, Jody
1005 W. Sportsman Dr.
Kill Devil Hills, NC 27948
252-305-6230

OWNER: Roberts, Earl David
1005 W. Sportsman Dr.
Kill Devil Hills, NC 27948
252-256-1827

PARCEL:

PIN: 987408997557

Parcel Number: 001645000

Address: 1005 SPORTSMAN DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 292

Legal Description:

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

PROJECT DESCRIPTION: Fence

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	N
DRIVEWAY INVERT 2	N

\$1,000⁰⁰ value

ZP2018-010

PROJECT NAME: Earl David Roberts

SITE ADDRESS: 1005 SPORTSMAN DR W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/22/2018

EXPIRES: 08/21/2018

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* Call for a string line inspection before installing the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Jody Jansen Date: February 22, 2018



Town of Kill Devil Hills

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

PAID

FEB 21 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-008

PROJECT NAME:
SITE ADDRESS: 1819 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL
ISSUED: 02/21/2018
EXPIRES: 08/20/2018

APPLICANT: Wanda & Robert Coleman
500 Sterling Rd.
Virginia Beach, VA 23464

OWNER: Wanda & Robert Coleman
500 Sterling Rd.
Virginia Beach, VA 23464

ELECTRICAL-LIMITED: BRS ELECTRICAL SERVICES
1607 Sir Walter Rd.
Kill Devil Hills, NC 27948
252-207-5334

License: 23077
Expires: 07/31/2018

PARCEL:

PIN: 988406485524

Parcel Number: 002798000

Address: 1819 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

Zoning:
Block: D Lot(s): 10

Legal Description:

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

PROJECT DESCRIPTION: Change out service.

EL2018-008

PROJECT NAME:

SITE ADDRESS: 1819 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/21/2018

EXPIRES: 08/20/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	One & Two Family Dwelling

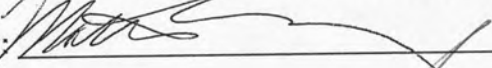
REQUIRED INSPECTIONS

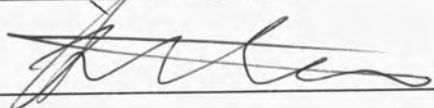
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 2/21/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-029

PROJECT NAME: HOWELL HVAC
SITE ADDRESS: 108 OCEAN BAY BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

APPLICANT: HOWELL, SUE ANNE
6501 HOLLAND ROAD
SUFFOLK, VA 00000

OWNER: HOWELL, SUE ANNE
6501 HOLLAND ROAD
SUFFOLK, VA 00000

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

License: 33023
Expires: 12/31/2018

PARCEL:

PIN: 988420706613

Parcel Number: 003871000

Address: 108 OCEAN BAY BLVD KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 37 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

PAID

FEB 20 2018

TOWN OF
KILL DEVIL HILLS

MC2018-029

PROJECT NAME: HOWELL HVAC
SITE ADDRESS: 108 OCEAN BAY BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3050.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

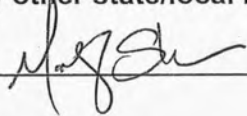
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2-20-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-028

PROJECT NAME: DUNN HVAC
SITE ADDRESS: 205 HELGA ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

APPLICANT: WILLIAM CHRISTOPHER DUNN
1043 Brink Rd.
EMPORIA, VA 23847

OWNER: WILLIAM CHRISTOPHER DUNN
1043 Brink Rd.
EMPORIA, VA 23847

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

License: 33023
Expires: 12/31/2018

PARCEL:

PIN: 988513045148

Parcel Number: 000033000

Address: 205 HELGA ST E KILL DEVIL HILLS

Zoning:

Addition:

Block: 9 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

PAID

FEB 20 2018

TOWN OF
KILL DEVIL HILLS

MC2018-028

PROJECT NAME: DUNN HVAC

SITE ADDRESS: 205 HELGA ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5360.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 2-20-18



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

BJ2018-026

PROJECT NAME: William Jones
SITE ADDRESS: 300 GUNAS DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

APPLICANT: Conway, Matt
409 Palmetto St.
Kill Devil Hills, NC 27948
207-5322

OWNER: JONES, WILLIAM S JR
P O BOX 2942
303 Archdale Street
KILL DEVIL HILLS, NC 27948
252-441-3673

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

License: 57214
Expires: 01/01/2019

PARCEL:

PIN: 988316935835 **Parcel Number:** 008480000
Address: 300 GUNAS DR KILL DEVIL HILLS
Addition: OCEAN ACRES TRACT 3 SEC 1 **Zoning:**
Legal Description: **Block:** G **Lot(s):** 2

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,365.30	\$0.00	Covered Porches/Decks	78 SQFT
Covered Porch Residential	\$58.50	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	162 Sq. Ft
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$1,623.80	\$0.00	Residential Heated Space (.75)	1734 sq. Ft.

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T 23006



Town of Kill Devil Hills

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

PAID

FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-027	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/12/2018
SITE ADDRESS: 109 PALMETTO ST E KILL DEVIL HILLS	EXPIRES: 08/11/2018

APPLICANT: BOWMAN, RICHARD E JR 7945 QUINTON COURT QUINTON, VA 23140	OWNER: BOWMAN, RICHARD E JR 7945 QUINTON COURT QUINTON, VA 23140
CONTRACTOR: SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	License: Same as Owner Expires: 12/30/2019

PARCEL:

PIN: 988517119277	Parcel Number: 000809000
Address: 109 PALMETTO ST E KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORE AMD BLK 24	Block: 24 Lot(s): PT 1 & 2
Legal Description:	

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$250.00	\$0.00

PROJECT DESCRIPTION: Replace HVAC and add fencing in rear yard.

BJ2018-027

PROJECT NAME:

SITE ADDRESS: 109 PALMETTO ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	6000.00
# OF UNITS	1
SURVEYOR NAME AND NUMBER	W. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-027

PROJECT NAME:

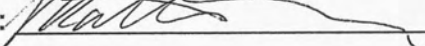
SITE ADDRESS: 109 PALMETTO ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/12/2018

EXPIRES: 08/11/2018

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

Issued By: 

Contractor or Authorized Agent: Richard Bauman Date: 2-16-18



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-028	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/13/2018
SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 08/12/2018

APPLICANT: Paul Dunn 314 Sycamore Dr. NEW WINDSOR, NY 12553 845-496-1570	OWNER: Paul Dunn 314 Sycamore Dr. NEW WINDSOR, NY 12553 845-496-1570
GENERAL - LIMITED:	JETTY CONSTRUCTION 1002 WEST Memorial BLVD Kill Devil Hills, NC 27948 252-715-8025
	License: 72090 Expires: 01/01/2019

PARCEL:

PIN: 98841157138110	Parcel Number: 028093000
Address: 1701 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: C Lot(s): UNIT 4A LT 17-19
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$399.60	\$0.00	Remodel/Renovation 888 SQFT
Totals :	\$399.60	\$0.00	

PROJECT DESCRIPTION: Repair water damage from frozen pipes.

BJ2018-028

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	75000.00
# OF UNITS	1
TOTAL SQUARE FOOTAGE	888
ENGINEER AND LICENSE NUMBER	J. Delucia 18759
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-028

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-029	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/13/2018
SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 08/12/2018

APPLICANT: Paul Cox
126 Waters Edge Dr
Williamsburg, VA 23188

OWNER: Paul Cox
126 Waters Edge Dr
Williamsburg, VA 23188

GENERAL - LIMITED: JETTY CONSTRUCTION
1002 WEST Memorial BLVD
Kill Devil Hills, NC 27948
252-715-8025

License: 72090
Expires: 01/01/2019

PARCEL:

PIN: 98841157138111

Parcel Number: 028094000

Address: 1701 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: C

Lot(s): UNIT 4B LT
17-19

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$399.60	\$0.00	Remodel/Renovation 888 SQFT
Totals :	\$399.60	\$0.00	

PROJECT DESCRIPTION: Repair water damage from frozen pipe.

BJ2018-029

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	75000.00
# OF UNITS	1
ENGINEER AND LICENSE NUMBER	J. Delucia 18759
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-029

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

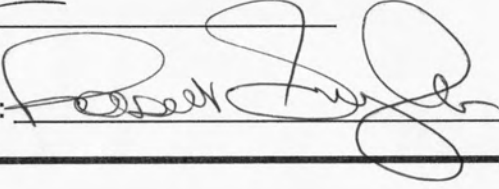
BUILDING JOINT

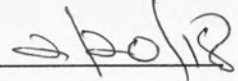
ISSUED: 02/13/2018

EXPIRES: 08/12/2018

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

Issued By: 

Contractor or Authorized Agent: 

Date: 



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-030	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/14/2018
SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 08/13/2018

APPLICANT: EVANS, STEPHEN LARRY
1828 DARIAN DRIVE
ELIZABETH CITY, NC 27909

OWNER: EVANS, STEPHEN LARRY
1828 DARIAN DRIVE
ELIZABETH CITY, NC 27909

GENERAL - LIMITED:

JETTY CONSTRUCTION
1002 WEST Memorial BLVD
Kill Devil Hills, NC 27948
252-715-8025

License: 72090
Expires: 01/01/2019

PARCEL:

PIN: 98841157138114

Parcel Number: 028097000

Address: 1701 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: C

Lot(s): UNIT 5B LT
17-19

Legal Description:

FEES:

Renovation/Remodel/Relocate Paid \$399.60

Due

\$0.00

BUILDING AREA:

Remodel/Renovation

888 SQFT

Totals : **\$399.60** **\$0.00**

PROJECT DESCRIPTION: Repair water damage from broken water line, Eng. J. Delucia 18759

BJ2018-030

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	75000.00
# OF UNITS	1
TOTAL SQUARE FOOTAGE	888
ENGINEER AND LICENSE NUMBER	j. Delucia 18759
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Storage

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-030

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2/20/18



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-031	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/14/2018
SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 08/13/2018

APPLICANT: Michael & Laura Wagner
1701 N. Va. Dare Tr. Unit 5A
Kill Devil Hills, NC 27948
252-255-0580

OWNER: Michael & Laura Wagner
1701 N. Va. Dare Tr. Unit 5A
Kill Devil Hills, NC 27948
252-255-0580

GENERAL - LIMITED: JETTY CONSTRUCTION
1002 WEST Memorial BLVD
Kill Devil Hills, NC 27948
252-715-8025

License: 72090
Expires: 01/01/2019

PARCEL:

PIN: 98841157138113

Parcel Number: 028096000

Address: 1701 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: C

Lot(s): UNIT 5A LT
17-19

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Renovation/Remodel/Relocate	\$399.60	\$0.00	Remodel/Renovation 888 SQFT
Totals :	\$399.60	\$0.00	

PROJECT DESCRIPTION: Repair water damage from frozen water line, Eng. J. Delucia 18759

BJ2018-031

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	75000.00
# OF UNITS	1
TOTAL SQUARE FOOTAGE	888
ENGINEER AND LICENSE NUMBER	J. Delucia 18759
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

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

CONDITIONS

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

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BJ2018-031

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

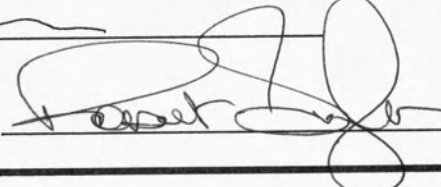
BUILDING JOINT

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

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Issued By: 

Contractor or Authorized Agent: 

Date: 2/20/18



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-032	BUILDING JOINT
PROJECT NAME:	ISSUED: 02/14/2018
SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 08/13/2018

APPLICANT: Ross Malley
1212 Smokey Mt. Tr.
CHESAPEAKE, VA 23320
757-617-0426

OWNER: Ross Malley
1212 Smokey Mt. Tr.
CHESAPEAKE, VA 23320
757-617-0426

GENERAL - LIMITED: JETTY CONSTRUCTION
1002 WEST Memorial BLVD
Kill Devil Hills, NC 27948
252-715-8025

License: 72090
Expires: 01/01/2019

PARCEL:

PIN: 98841157138115

Parcel Number: 028098000

Address: 1701 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: C

Lot(s): UNIT 5C LT
17-19

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$399.60	\$0.00	Remodel/Renovation	888 SQFT
Totals :	\$399.60	\$0.00		

PROJECT DESCRIPTION: Repair water damage from frozen pipes, Eng. J. Delucia 18759

BJ2018-032

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	75000.00
# OF UNITS	1
TOTAL SQUARE FOOTAGE	888
ENGINEER AND LICENSE NUMBER	J. Delucia 18759
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-032

PROJECT NAME:

SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

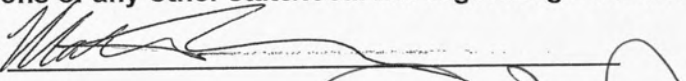
BUILDING JOINT

ISSUED: 02/14/2018

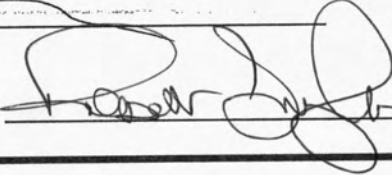
EXPIRES: 08/13/2018

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Issued By:



Contractor or Authorized Agent:



Date:

2/20/18



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-030	MECHANICAL
PROJECT NAME: Buchanan HVAC	ISSUED: 02/20/2018
SITE ADDRESS: 2058 BAY DR KILL DEVIL HILLS	EXPIRES: 08/19/2018

APPLICANT: Buchanan, Howard & Betsy
2058 Bay DR
Kill Devil Hills, NC 27948
757-373-1131

OWNER: Buchanan, Howard & Betsy
2058 Bay DR
Kill Devil Hills, NC 27948
757-373-1131

PLUMBING, MECHANICAL: NORRIS MECHANICAL
P.O. Box 217
HARBINGER, NC 27941
252-441-4102

License: 11100
Expires: 12/31/2018

PARCEL:

PIN: 987408982947

Parcel Number: 001674000

Address: 2058 BAY DR KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH

Block: 0 **Lot(s):** 324

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

MC2018-030

PROJECT NAME: Buchanan HVAC
SITE ADDRESS: 2058 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

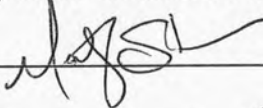
REQUIRED INSPECTIONS

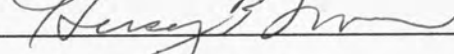
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2-20-18



Town of Kill Devil Hills

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

PAID

FEB 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-031

PROJECT NAME: SHUTTERS HVAC CHANG OUTS
SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

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

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

BUILDING: Dun Rite, Inc.
714 Fenway Ave.
CHESAPEAKE, VA 23320
757-435-3513

License: 74845
Expires: 12/24/2019

PARCEL:

PIN: 988420809320L1

Parcel Number: 008118000

Address: 405 VA DARE TRL S KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

Zoning:

Block: 0

Lot(s): PAR. 2 & 3
& UNBRD.

Legal Description:

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

PROJECT DESCRIPTION: REPLACE 3 MINI SPLIT SYSTEMS

MC2018-031

PROJECT NAME: SHUTTERS HVAC CHANG OUTS
SITE ADDRESS: 405 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/20/2018

EXPIRES: 08/19/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	19500.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

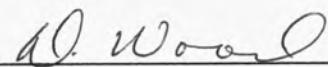
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 2/20/18



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-007	ELECTRICAL
PROJECT NAME:	ISSUED: 02/16/2018
SITE ADDRESS: 1406 MOLLIE ST KILL DEVIL HILLS	EXPIRES: 08/15/2018

APPLICANT: MIRENZI, FRANK F 1406 MOLLIE ST KILL DEVIL HILLS, NC 27948-8942	OWNER: MIRENZI, FRANK F 1406 MOLLIE ST KILL DEVIL HILLS, NC 27948-8942
---	---

ELECTRICAL - LIMITED:	Cabe & Son Electric 207 S. Lost Colony Dr. Nags Head, NC 27959 252-996-0338	License: SP-SFD-32136 Expires:
------------------------------	--	---

PARCEL:

PIN: 988315741292	Parcel Number: 004824000
Address: 1406 MOLLIE ST KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL BEACH EXTENDED	Block: 12 Lot(s): 6
Legal Description:	

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

PROJECT DESCRIPTION: Replace electrical service.

PAID
FEB 16 2018
FEB 16 2018
TOWN OF
KILL DEVIL HILLS

EL2018-007

PROJECT NAME:

SITE ADDRESS: 1406 MOLLIE ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/16/2018

EXPIRES: 08/15/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling


REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 2/16/18



Town of Kill Devil Hills

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

Planning and Inspection Department

DM2018-001

PROJECT NAME:
SITE ADDRESS: 706 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

APPLICANT: Duncan Aydlett
P. O. Box 1649
kitty hawk, nc 27949
202-7712

OWNER: Duncan Aydlett
P. O. Box 1649
kitty hawk, nc 27949
202-7712

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988311752816

Parcel Number: 004555000

Address: 706 AIRSTRIP RD W KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:
Block: 46 **Lot(s):** 7

Legal Description:

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

PROJECT DESCRIPTION: Demo SFD

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FLOOD ZONE	X
CONSTRUCTION COST	6000.00

PAID
FEB 16 2018

TOWN OF
KILL DEVIL HILLS

DM2018-001

PROJECT NAME:

SITE ADDRESS: 706 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 02/14/2018

EXPIRES: 08/13/2018

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: [Signature]

Contractor or Authorized Agent: [Signature] Date: 2/16/18

SET 17 CPI
Town of Kill Devil Hills
4400
Printed by : Meredith Guns on: 02/17/2018 11:58 AM
Date / Time : 02/20/18 10:54
Payment : \$ 100.00
Receipt # : 528687
Check/Credit Card #: 1300
Clerk : 981msnyd
Paid By : LIGHTNING MARINE CO

FEB 16 2018



Town of Kill Devil Hills

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

PAID

FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EG2018-001	EXCAVATION AND GRADING
PROJECT NAME: Sedimentation and Erosion Control Block 76, Virginia Dare Shores	ISSUED: 02/15/2018
SITE ADDRESS: 0 PALMETTO ST W KILL DEVIL HILLS	EXPIRES: 08/14/2018

APPLICANT: OBX Cottages, LLC 200 E. Blackman Street Kill Devil Hills, NC 27948	OWNER: OBX Cottages, LLC 200 E. Blackman Street Kill Devil Hills, NC 27948
---	---

BUILDING LIMITED: H&H Land Development, 313 Ascension Drive Kitty Hawk, NC 27949 252-261-5143	License: 62986 Expires: 02/15/2019
---	---

PARCEL:

PIN: 987408992775	Parcel Number: 008525000
Address: 0 PALMETTO ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 76 Lot(s): 5-8
Legal Description:	

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Virginia Dare Shores, Block 76 site clearing, Lots 5-34 per plan (Block 73-78 SESC, Virginia Dare Shores, Sheets 1-3, 2/9/18)

EG2018-001

PROJECT NAME: Sedimentation and Erosion Control Block 76, Virginia
Dare Shores
SITE ADDRESS: 0 PALMETTO ST W KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	40000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
ENGINEER AND LICENSE NUMBER	Cathleen M. Saunders 043652

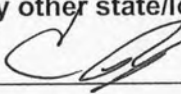
REQUIRED INSPECTIONS


Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

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

Issued By: 

Contractor or Authorized Agent:  Date: 2-16-18



Town of Kill Devil Hills

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

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FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EG2018-002	EXCAVATION AND GRADING
PROJECT NAME: Sedimentation and Erosion Control Block 75, Virginia Dare Shores	ISSUED: 02/15/2018
SITE ADDRESS: 0 PALMETTO ST W KILL DEVIL HILLS	EXPIRES: 08/14/2018

APPLICANT: OBX Cottages, LLC 200 E. Blackman Street Kill Devil Hills, NC 27948	OWNER: OBX Cottages, LLC 200 E. Blackman Street Kill Devil Hills, NC 27948
---	---

BUILDING LIMITED: H&H Land Development, 313 Ascension Drive Kitty Hawk, NC 27949 252-261-5143	License: 62986 Expires: 02/15/2019
---	---

PARCEL:

PIN: 988517000137	Parcel Number:
Address: 0 PALMETTO ST W KILL DEVIL HILLS	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 8R, Block 75.	

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Virginia Dare Shores, Block 75 site clearing, Lots 1R-15R per plan (Block 73-78 SESC, Virginia Dare Shores, Sheets 1-3, 2/9/18)

EG2018-002

PROJECT NAME: Sedimentation and Erosion Control Block 75, Virginia
Dare Shores
SITE ADDRESS: 0 PALMETTO ST W KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	40000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
ENGINEER AND LICENSE NUMBER	Cathleen M. Saunders 043652

REQUIRED INSPECTIONS

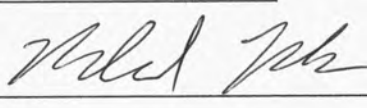
Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

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

Issued By: 

Contractor or Authorized Agent:  Date: 2-16-18



Town of Kill Devil Hills

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

PAID

FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EG2018-003	EXCAVATION AND GRADING
PROJECT NAME: Sedimentation and Erosion Control Block 75, Virginia Dare Shores	ISSUED: 02/15/2018
SITE ADDRESS: 0 W Palmetto/Eden St. Kill Devil Hills	EXPIRES: 08/14/2018

APPLICANT: OBX Cottages, LLC
200 E. Blackman Street
Kill Devil Hills, NC 27948

OWNER: OBX Cottages, LLC
200 E. Blackman Street
Kill Devil Hills, NC 27948

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

License: 62986
Expires: 02/15/2019

PARCEL:

PIN: 988517000137000

Parcel Number:

Address: 0 W Palmetto/Eden St. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Parcel created for land disturbing for 10' utility easements on all properties within Blocks (73-78)

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Virginia Dare Shores, Blocks 73-78 site clearing for 10' utility easements, Lots 1R-15R per plan (Block 73-78 SESC, Virginia Dare Shores, Sheets 1-3, 2/9/18)

EG2018-003

PROJECT NAME: Sedimentation and Erosion Control Block 75, Virginia Dare Shores
SITE ADDRESS: 0 W Palmetto/Eden St. Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	40000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
ENGINEER AND LICENSE NUMBER	Cathleen M. Saunders 043652

REQUIRED INSPECTIONS


Final

CONDITIONS

- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

Issued By: 

Contractor or Authorized Agent:  Date: 2-16-18



Town of Kill Devil Hills

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

PAID

FEB 15 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-007

PROJECT NAME: James Moore Fence
SITE ADDRESS: 433 W Palmetto Street Kill Devil Hills

ZONING PERMIT

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

APPLICANT: Moore, James
433 W Palmetto St.
Kill Devil Hills, NC 27948
707-599-0175

OWNER: Moore, James
433 W Palmetto St.
Kill Devil Hills, NC 27948
707-599-0175

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

License: Same as Owner
Expires: 12/30/2019

PARCEL:

PIN: 988517001295

**Parcel
Number:**

Address: 433 W Palmetto Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Virginia Dare Shores, Lot 2R, Block 50

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Fence

ZP2018-007

PROJECT NAME: James Moore Fence
SITE ADDRESS: 433 W Palmetto Street Kill Devil Hills

ZONING PERMIT

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27546
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Accessory
CONSTRUCTION COST	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

ZP2018-007

PROJECT NAME: James Moore Fence
SITE ADDRESS: 433 W Palmetto Street Kill Devil Hills

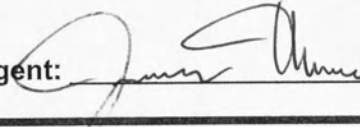
ZONING PERMIT

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 2/15/18



Town of Kill Devil Hills

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

PAID

FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-008

PROJECT NAME: Tucker Parking Pad
SITE ADDRESS: 3138 Raymond Ave. KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/16/2018

EXPIRES: 08/15/2018

APPLICANT: TUCKER, J O
3138 RAYMOND AVE
Kill Devil Hills, NC 27948

OWNER: TUCKER, J O
3138 RAYMOND AVE
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988513046212

Parcel Number: 000027000

Address: 3138 Raymond Ave. KILL DEVIL HILLS

Zoning:

Addition:

Block: 9 **Lot(s):** 1

Legal Description:

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Increase parking area by 10'x15'

ZP2018-008

PROJECT NAME: Tucker Parking Pad
SITE ADDRESS: 3138 Raymond Ave. KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 02/16/2018

EXPIRES: 08/15/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Accessory
CONSTRUCTION COST	1300.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2/16/18



Town of Kill Devil Hills

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

PAID

FEB 15 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2018-005

PROJECT NAME: Publix
SITE ADDRESS: 1530 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

APPLICANT: GMG, GOOD MEASURE GRAPHICS
PO Box 7804
Kill Devil Hills, NC 27948
252-441-8374

OWNER: Kill Devil Development Company, LLC
3920 Magazine Street
NEW ORLEANS, LA 70115
504-866-7300

GENERAL: GMG, GOOD MEASURE GRAPHICS
PO Box 7804
Kill Devil Hills, NC 27948
252-441-8374

License: unlicensed
Expires: 12/31/2019

PARCEL:

PIN: 988410452430

Parcel Number: 002747000

Address: 1530 CROATAN HWY N KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

FEES:	Paid	Due
Banner Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: 90 day banner

SG2018-005

PROJECT NAME: Publix

SITE ADDRESS: 1530 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
# OF BANNERS	1
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	60.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	1000.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
 - * Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.
- No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).
- Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.
- * Zoning Final Inspection is required.
 - * Banner may be displayed for a period not to exceed 90 days.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature] Date: 2/15/18



Town of Kill Devil Hills

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

PAID

FEB 15 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

OP2018-009

PROJECT NAME: BJ2017-067
SITE ADDRESS: 1530 CROATAN HWY N KILL DEVIL HILLS

OCCUPANCY

ISSUED: 02/15/2018

EXPIRES:

APPLICANT: Kill Devil Development Company, LLC
3920 Magazine Street
NEW ORLEANS, LA 70115
504-866-7300

OWNER: Kill Devil Development Company, LLC
3920 Magazine Street
NEW ORLEANS, LA 70115
504-866-7300

GENERAL: WIMCO
PO Box 121
Washington, NC 27889
252-946-5175

License: 3478
Expires:

PARCEL:

PIN: 988410452430

Parcel Number: 002747000

Address: 1530 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: SUBDIVISION - NONE

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

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>
Certificate of Occupancy Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Conditional Certificate of Compliance see attached comments.

DETAILS

Permit

Name	Value
PURPOSE	Commercial New

CONDITIONS

OP2018-009

PROJECT NAME: BJ2017-067

SITE ADDRESS: 1530 CROATAN HWY N KILL DEVIL HILLS

OCCUPANCY

ISSUED: 02/15/2018

EXPIRES:

* Conditions below must be met no later than (03/30/18).

Lighting: Provide missing (1) lighting fixture in rear parking area.

Stormwater: Existing drop inlet at Professor Hackers' entrance - Clean pipe from this structure to box culvert to remove any blockages from bore gel.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2/15/18



Town of Kill Devil Hills

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

STIH TEBD TIM
TOWN OF

FEB 16 2018

Planning and Inspection Department

Printed: 02-16-2018

CERTIFICATE OF OCCUPANCY

This Certificate issued pursuant to the requirements of the North Carolina State Building Code certifying that at the time of issuance this structure was in compliance with the technical codes and other applicable laws and ordinances and released by the Inspections Department.

Occupancy Permit Number : OP2018-010

Applicant Robins, Rotraud
121 Skimino Road
WILLIAMSBURG, VA 23185

Approval Date: 02/16/2018

Parcel:

PIN:

Parcel Number: 988409171459

Address: 816 FRANCES LN KILL DEVIL HILLS

Section/Town/Range:

Zoning

Addition: WRIGHT'S SHORES SEC 2

Block: 0 **Lot(s):** 89

Legal Description:

Owners

Name: Robins, Rotraud

Phone:

Address: 121 Skimino Road
WILLIAMSBURG, VA 23185

Contractors

Name: Robins, Terry

Phone: 252-305-0028

Fees and Receipts

Number	Description	Paid	Due
CERTIFICATE OF OCCUPANCY	Certificate of Occupancy Fee	\$50.00	\$0.00
RESIDENTIAL TRASH CAN	Residential Trash Can	\$100.75	\$0.00

Totals : ~~\$150.75~~ + \$50.00 = \$0.00

Additional Information

Building Permit Number:

Conditions :



Town of Kill Devil Hills

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

Planning and Inspection Department

Printed : 02-16-2018

Page 2 of 2

2/16/18

Date

Building Inspector Signature



Town of Kill Devil Hills

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

PAID

FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2017-213	BUILDING JOINT
PROJECT NAME: The Nature Conservancy	ISSUED: 02/13/2018
SITE ADDRESS: 701 OCEAN ACRES DR W KILL DEVIL HILLS	EXPIRES: 08/12/2018

APPLICANT: NATURE CONSERVANCY
4245 N. FAIRFAX DR
SUITE 100
ARLINGTON, VA 22203

OWNER: NATURE CONSERVANCY
4245 N. FAIRFAX DR
SUITE 100
ARLINGTON, VA 22203

GENERAL - UNLIMITED:

RPC, INC.
P.O. Box 333
Kitty Hawk, NC 27949

License: 34430
Expires: 01/01/2019

PARCEL:

PIN: 988319629287

Parcel Number: 005059000

Address: 701 OCEAN ACRES DR W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): RESERVED
BY OWNER

Legal Description:

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

PROJECT DESCRIPTION: Demo existing brick building, Replace existing parking lot with new parking area with striping and lighting.

BJ2017-213

PROJECT NAME: The Nature Conservancy
 SITE ADDRESS: 701 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	MFED
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	56000.00
ENGINEER AND LICENSE NUMBER	David A. Deel 025158
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Rough In
Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Stormwater Certificate Required

BJ2017-213

PROJECT NAME: The Nature Conservancy

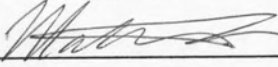
SITE ADDRESS: 701 OCEAN ACRES DR W KILL DEVIL HILLS

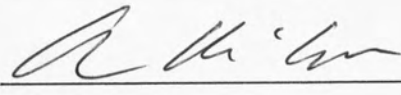
BUILDING JOINT

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

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

Issued By: 

Contractor or Authorized Agent:  Date: 2/16/18



Town of Kill Devil Hills

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

PAID

FEB 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-027
PROJECT NAME:
SITE ADDRESS: 300 FIL LN KILL DEVIL HILLS

MECHANICAL
ISSUED: 02/15/2018
EXPIRES: 08/14/2018

APPLICANT: SHELTON, EDWARD L &
5107 Mariners Cove
suffolk, va 23435

OWNER: SHELTON, EDWARD L &
5107 Mariners Cove
suffolk, va 23435

H3, CLASS 1:

OUTER BANKS HEATING AND COOLING
P.O. Box 1415
Nags Head, NC 27959
441-1740

License: 12643
Expires: 12/31/2018

PARCEL:

PIN: 988406285201

Parcel Number: 002242000

Address: 300 FIL LN KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES SEC 2

Block: 0 **Lot(s):** 141

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

MC2018-027

PROJECT NAME:

SITE ADDRESS: 300 FIL LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5406.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

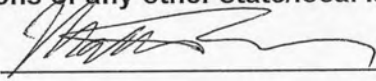
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 2-16-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-024	BUILDING JOINT
PROJECT NAME: Aria Construction and Development, INC	ISSUED: 02/13/2018
SITE ADDRESS: 402 HOLLY ST W KILL DEVIL HILLS	EXPIRES: 08/12/2018

APPLICANT: Aria Construction and Development, Inc PO Box 321 CRESWELL, NC 27928 252-796-7737	OWNER: Aria Construction and Development, Inc PO Box 321 CRESWELL, NC 27928 252-796-7737
--	--

BUILDING-UNLIMITED: Aria Construction and Development, Inc PO Box 321 CRESWELL, NC 27928 252-796-7737	License: 78928 Expires: 01/02/2019
---	---

PARCEL:

PIN: 988312858486	Parcel Number: 028410000
Address: 402 HOLLY ST W KILL DEVIL HILLS	
Addition: KILL DEVIL BEACH EXTENDED	Zoning: Block: W Lot(s): 9
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$66.75	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	89 SQFT
Res. Building Permit Fee	\$1,655.20	\$0.00	Residential Unheated (.40)	763 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1800 sq. Ft.
Totals :	\$1,921.95	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 4 Bedroom, 3 Bathroom SFD

PAID
 FEB 15 2018
 TOWN OF
 KILL DEVIL HILLS

Town of Kill Devil Hills
 Water Charges
PAID
 Water Tap #: T23003

BJ2018-024**PROJECT NAME:** Aria Construction and Development, INC
SITE ADDRESS: 402 HOLLY ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 02/13/2018**EXPIRES:** 08/12/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	27506
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	34.39
LIVING SPACE (SQFT)	1800
COVERED PORCHES/DECKS (SQFT)	89
GARAGE (SQFT)	763
OPEN DECK (SQFT)	118
TOTAL SQUARE FOOTAGE	2770
SURVEYOR NAME AND NUMBER	William S. Jones Jr. L-2532
ENGINEER AND LICENSE NUMBER	Frederick House 24740
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-024

PROJECT NAME: Aria Construction and Development, INC
SITE ADDRESS: 402 HOLLY ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 02/13/2018

EXPIRES: 08/12/2018

REQUIRED INSPECTIONS

Piling	Rough In
T-Pole	Vapor Barrier
In-Slab Plumbing	Insulation
Slab/Foundation	Final
Sheathing	Zoning Final

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 2-15-18



Town of Kill Devil Hills

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

PAID

FEB 14 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-023	MECHANICAL
PROJECT NAME: DUNSTAN HVAC	ISSUED: 02/09/2018
SITE ADDRESS: 403 LAKE DR E KILL DEVIL HILLS	EXPIRES: 08/08/2018

APPLICANT: DUNSTAN, JOHN F
129 CAMDEN AVENUE
CAMDEN, NC 27921

OWNER: DUNSTAN, JOHN F
129 CAMDEN AVENUE
CAMDEN, NC 27921

H-3, CLASS 2:

OBX Air Pro's Heating and Cooling
197 WEST MOBILE
HARBINGER, NC 27941
252-435-8782

License: 29480
Expires:

PARCEL:

PIN: 989313143692

Parcel Number: 008307000

Address: 403 LAKE DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

MC2018-023

PROJECT NAME: DUNSTAN HVAC
SITE ADDRESS: 403 LAKE DR E KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/09/2018

EXPIRES: 08/08/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-14-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-025

PROJECT NAME: JOLLY ROGER HVAC
SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

APPLICANT: CHELLO INC
P O BOX 2517
KILL DEVIL HILLS, NC 27948

OWNER: CHELLO INC
P O BOX 2517
KILL DEVIL HILLS, NC 27948

MECHANICAL: American Refrigeration
P.O. Box 835
nags head, nc 27959
252-305-5320

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988406389793

Parcel Number: 002863000

Address: 1836 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

Zoning:

Block: G **Lot(s):** 1,2,20,21

Legal Description:

FEES:	Paid	Due
Mechanical Permit Fee	\$150.00	\$0.00
Mechanical Permit Fee	\$150.00	\$0.00
Totals :	\$300.00	\$0.00

PROJECT DESCRIPTION: Replace 2 HVAC systems

FEB 15 2018

MC2018-025

PROJECT NAME: JOLLY ROGER HVAC

SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS**Permit**

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	14000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

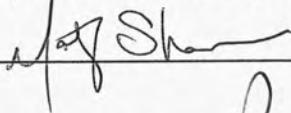
Final

CONDITIONS

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

2-15-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-026	MECHANICAL
PROJECT NAME: JOLLY ROGER HVAC	ISSUED: 02/15/2018
SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 08/14/2018

APPLICANT: CHELLO INC
P O BOX 2517
KILL DEVIL HILLS, NC 27948

OWNER: CHELLO INC
P O BOX 2517
KILL DEVIL HILLS, NC 27948

MECHANICAL: American Refrigeration
P.O. Box 835
nags head, nc 27959
252-305-5320

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988406389793

Parcel Number: 002863000

Address: 1836 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

Zoning:
Block: G **Lot(s):** 1,2,20,21

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC system

FEB 15 2018

TOWN OF
KILL DEVIL HILLS

MC2018-026

PROJECT NAME: JOLLY ROGER HVAC

SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

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Issued By: Marty Shaw
Contractor or Authorized Agent: Paul Smith Date: 2-15-18



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-006

PROJECT NAME:

SITE ADDRESS: 103 WILSON ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

APPLICANT: Don & Sharon Rose
1005 Tower Rd.
MARGARETSVILLE, NC 27853
252-377-3852

OWNER: Don & Sharon Rose
1005 Tower Rd.
MARGARETSVILLE, NC 27853
252-377-3852

ELECTRICAL, LIMITED: GRIFFITHS ELECTRICAL CONTRACTOR
Harbinger
Harbinger, NC 27941
252-599-7891

License: 26180-U
Expires: 12/30/2019

PARCEL:

PIN: 988517202451

Parcel Number: 001924000

Address: 103 WILSON ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:

Block: 0 **Lot(s):** 484

Legal Description:

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

PROJECT DESCRIPTION: Change out electrical service and upgrade to 200 amp.

PAID

FEB 15 2018

TOWN OF
KILL DEVIL HILLS

EL2018-006

PROJECT NAME:

SITE ADDRESS: 103 WILSON ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 02/15/2018

EXPIRES: 08/14/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

2-15-18



Town of Kill Devil Hills

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

Planning and Inspection Department

OP2018-008

PROJECT NAME: Carol Bruffey
SITE ADDRESS: 3118 BAY DR KILL DEVIL HILLS

OCCUPANCY

ISSUED: 02/15/2018

EXPIRES:

APPLICANT: Bruffey, Carol
2044 Creek St.
kitty hawk, nc 27949
709-307-1912

OWNER: Bruffey, Carol
2044 Creek St.
kitty hawk, nc 27949
709-307-1912

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 987520822153

Parcel Number: 001074000

Address: 3118 BAY DR KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:

Block: 0 **Lot(s):** 139

Legal Description:

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

PROJECT DESCRIPTION: Proposed new 3 bedroom SFD

DETAILS

PAID

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New

FEB 15 2018

TOWN OF
KILL DEVIL HILLS

CONDITIONS

