



# Town of Kill Devil Hills

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

MAR 29 2018

## Planning and Inspection Department

**BJ2018-066**

**PROJECT NAME:** John and Mary Bartell  
**SITE ADDRESS:** 234 EDEN ST ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

**APPLICANT:** FRANK SOLES/SANDY BOTTOM HOMES  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**OWNER:** Bartell, John  
PO Box 742  
Manteo, NC 27954  
252-489-1875

**CONTRACTOR:** Sandy Bottom Homes  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**GENERAL BUILDING-LIMITED:** SANDY BOTTOM HOMES  
400 DaVinci Lane  
kitty hawk, nc 27949  
757-448-8162

**License:** 67524  
**Expires:** 12/30/2018

### PARCEL:

**PIN:** 988517019136

**Parcel Number:** 000472000

**Address:** 234 EDEN ST ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 27 **Lot(s):** 37-38

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$56.25	\$0.00	Covered Porches/Decks	75 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,291.70	\$0.00	Residential Unheated (.40)	98 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1670 sq. Ft.
<b>Totals :</b>	<b>\$1,547.95</b>	<b>\$0.00</b>	# of Temporary Poles	1 EA

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

Town of Kill Devil Hills

Water Charges

**PAID**

Water Tap #: T23072

**BJ2018-066****PROJECT NAME:** John and Mary Bartell  
**SITE ADDRESS:** 234 EDEN ST ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 03/29/2018**EXPIRES:** 09/25/2018

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27628
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	10.50
CONSTRUCTION COST	160000.00
LOT COVERAGE	36.10
SURVEYOR NAME AND NUMBER	Seaboard Surveying and Planning
CULVERT	N
DRIVEWAY INVERT 2	N

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**REQUIRED INSPECTIONS**

Piling	Rough In
T-Pole	Vapor Barrier
Floor box	Insulation
In-Slab Plumbing	Pre-final
Slab/Foundation	Final
Sheathing	Zoning Final

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**CONDITIONS**

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

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

**BJ2018-066**

**PROJECT NAME:** John and Mary Bartell  
**SITE ADDRESS:** 234 EDEN ST ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

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

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

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 3-29-18



**Town of Kill Devil Hills**

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

PAID

MAR 29 2018

**Planning and Inspection Department**

**BP2018-051**

**PROJECT NAME:** ALSTON DECK REPAIR  
**SITE ADDRESS:** 103 COVE CT KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

**APPLICANT:** ALSTON, MICHAEL CURTIS  
405 HOLLYHILL ROAD  
MURFREESBORO, NC 27855

**OWNER:** ALSTON, MICHAEL CURTIS  
405 HOLLYHILL ROAD  
MURFREESBORO, NC 27855

**BUILDING-UNLIMITED:** Aria Construction and Development, Inc  
PO Box 321  
CRESWELL, NC 27928  
252-796-7737

**License:** 78928  
**Expires:** 01/02/2019

**PARCEL:**

**PIN:** 988415545711

**Parcel Number:** 003521000

**Address:** 103 COVE CT KILL DEVIL HILLS

**Addition:** LANDING SECTION 1, THE

**Zoning:**

**Block:** 0 **Lot(s):** 11

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE DECKING, RAILINGS AND STAIRS



**BP2018-051**

**PROJECT NAME:** ALSTON DECK REPAIR  
**SITE ADDRESS:** 103 COVE CT KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

### DETAILS

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13000.00
CONSTRUCTION TYPE	V

### REQUIRED INSPECTIONS

Final

### CONDITIONS

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

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

Date: 3-29-18



# Town of Kill Devil Hills

PO BOX 1719  
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## Planning and Inspection Department

**MC2018-075**

**PROJECT NAME:** PULLEY HVAC  
**SITE ADDRESS:** 1237B South Virginia Dare Trail Kill Devil Hills

**MECHANICAL**  
**ISSUED:** 03/27/2018  
**EXPIRES:** 09/23/2018

**APPLICANT:** Pulley, John  
3813 7th St. S  
ARLINGTON, VA 22204

**OWNER:** Pulley, John  
3813 7th St. S  
ARLINGTON, VA 22204

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

**License:** 33023  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 989309066923

**Parcel Number:**

**Address:** 1237B South Virginia Dare Trail Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 2, Block A, Sec. 1, Kill Devil Beach Subdivision Sec. 1 Lots 9-10

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

**PROJECT DESCRIPTION:** Replace HVAC system

PAID

MAR 28 2018

TOWN OF  
KILL DEVIL HILLS

**MC2018-075**

**PROJECT NAME:** PULLEY HVAC

**SITE ADDRESS:** 1237B South Virginia Dare Trail Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/27/2018

**EXPIRES:** 09/23/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4663.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
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: \_\_\_\_\_

3/28



# Town of Kill Devil Hills

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PAID

MAR 29 2018

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**MC2018-076**

**PROJECT NAME:** DAVENPORT HVAC  
**SITE ADDRESS:** 1835 Virginia Dare Tr. N. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

**APPLICANT:** LLOYD EARL DAVENPORT  
600 Golfers Ln.  
Nashville, NC 27856

**OWNER:** LLOYD EARL DAVENPORT  
600 Golfers Ln.  
Nashville, NC 27856

**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:** 988406483839

**Parcel Number:** 002793001

**Address:** 1835 Virginia Dare Tr. N. Kill Devil Hills

**Zoning:** OIR

**Addition:** Croatan Shores Amended

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

**MC2018-076**

**PROJECT NAME:** DAVENPORT HVAC

**SITE ADDRESS:** 1835 Virginia Dare Tr. N. Kill Devil Hills

**MECHANICAL**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

3-29-18





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PAID

MAR 29 2018

## Planning and Inspection Department

TOWN OF  
 KILL DEVIL HILLS

**MC2018-077**

**PROJECT NAME:** Lindsey HVAC  
**SITE ADDRESS:** 503 FOURTH ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

**APPLICANT:** Air Apparent LLC  
 324 W. Eden St.  
 Kill Devil Hills, NC 27948  
 252-256-1742

**OWNER:** Lindsey, David  
 503 WEST Fourth ST  
 Kill Devil Hills, NC 27948

**H-3, CLASS 1:** Air Apparent LLC  
 324 W. Eden St.  
 Kill Devil Hills, NC 27948  
 252-256-1742

**License:** 32975  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988405270852

**Parcel Number:** 002217014

**Address:** 503 FOURTH ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** WRIGHT'S SHORES SEC 2

**Block:** 0 **Lot(s):** 14

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace 2.5 ton HVAC system.

### DETAILS

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4400.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N



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## Planning and Inspection Department

**EL2018-020**

**PROJECT NAME:** McAllister Generator Install  
**SITE ADDRESS:** 1508 PRINCESS ANNE DR KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

**APPLICANT:** SUBURBAN ELECTRIC, LLC  
1210 Burnside Rd.  
Manteo, NC 27954  
252-475-1372

**OWNER:** Patrick, McAllister  
1508 PRINCESS ANNE DR  
Kill Devil Hills, NC 27948

**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:** 988410459457 **Parcel Number:** 003140006  
**Address:** 1508 PRINCESS ANNE DR KILL DEVIL HILLS  
**Addition:** W R DEATON - DELRAY BEACH **Zoning:**  
**Block:** 4 **Lot(s):** 6  
**Legal Description:**

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

**PROJECT DESCRIPTION:** Install generator circuits and relocate receptacles

### DETAILS

**Permit**

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1500.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8

PAID  
MAR 29 2018

**EL2018-020**

**PROJECT NAME:** McAllister Generator Install  
**SITE ADDRESS:** 1508 PRINCESS ANNE DR KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/29/2018

**EXPIRES:** 09/25/2018

### REQUIRED INSPECTIONS

Final

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### CONDITIONS

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

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

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



# Town of Kill Devil Hills

PO BOX 1719  
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PAID

MAR 28 2018

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**ZP2018-019**

**PROJECT NAME:** Kidd Fence  
**SITE ADDRESS:** 104 THIRD ST E KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

**APPLICANT:** DOUG MORRIS  
324 Tern Ct.  
KDH, NC 27948  
252-216-7669

**OWNER:** William C. Kidd III  
2721 Van Dyke Ave.  
RALEIGH, NC 27607

**UNLICENSED - REMODELING:** DOUG MORRIS  
324 Tern Ct.  
KDH, NC 27948  
252-216-7669

**License:** 0000000  
**Expires:**

**PARCEL:**

**PIN:** 988406377832

**Parcel Number:** 002733000

**Address:** 104 THIRD ST E KILL DEVIL HILLS

**Zoning:**

**Addition:** SUBDIVISION - NONE

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Construct wood fence around property.

**ZP2018-019**

**PROJECT NAME:** Kidd Fence

**SITE ADDRESS:** 104 THIRD ST E KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Accessory
CONSTRUCTION COST	3500.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

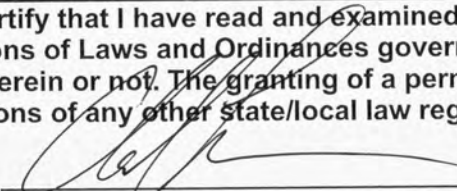
Zoning Final

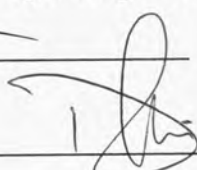
**CONDITIONS**

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

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Issued By: 

Contractor or Authorized Agent: 

Date: 3/28/18





# 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

**BP2018-047**

**PROJECT NAME:** Bill Tucker  
**SITE ADDRESS:** 316 ARCH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/27/2018

**EXPIRES:** 09/23/2018

**APPLICANT:** Tucker, Bill  
316 W Atch St.  
Kill Devil Hills, NC 27948  
573-9400

**OWNER:** Tucker, Bill  
316 W Atch St.  
Kill Devil Hills, NC 27948  
573-9400

**RESIDENTIAL, LIMITED:** Bill Hume Builder, LLC  
505 Quail Lane  
Kill Devil Hills, NC 27948

**License:** 71750  
**Expires:** 01/01/2019

**PARCEL:**

**PIN:** 987516848120

**Parcel Number:** 000213000

**Address:** 316 ARCH ST W KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**  
**Block:** 0 **Lot(s):** 112

**Legal Description:**

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

**PROJECT DESCRIPTION:** Repair/Replace existing decks SAME LOCATION. If deck dimensions change as built survey required. REPLACE 1 WINDOW.

MAR 27 2018

**BP2018-047**

**PROJECT NAME:** Bill Tucker

**SITE ADDRESS:** 316 ARCH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/27/2018

**EXPIRES:** 09/23/2018

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	16285.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Zoning Final

Piling

Final

Rough In

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**CONDITIONS**

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

**BP2018-047**

**PROJECT NAME:** Bill Tucker

**SITE ADDRESS:** 316 ARCH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/27/2018

**EXPIRES:** 09/23/2018

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

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

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



# Town of Kill Devil Hills

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MAR 27 2018

## Planning and Inspection Department

**BJ2018-067**

**PROJECT NAME:** C & T Contracting  
**SITE ADDRESS:** 2004 EDENTON ST ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**OWNER:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**BUILDING LIMITED:** C & T CONTRACTING  
1700 Bell Ave.  
Kill Devil Hills, NC 27948  
252-202-9943

**License:** 45367  
**Expires:** 12/30/2018

**PARCEL:**

**PIN:** 988405081006

**Parcel Number:** 001292000

**Address:** 2004 EDENTON ST ST KILL DEVIL HILLS

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

**Zoning:**

**Block:** 0 **Lot(s):** 847

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$63.00	\$0.00	Covered Porches/Decks	84 SQFT
Res. Building Permit Fee	\$1,256.25	\$0.00	Residential Heated Space	1675 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
			# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$1,369.25</b>	<b>\$0.00</b>		

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

Town of Kill Devil Hills  
Water Charges

Water Tap #: T23073

**BJ2018-067**

PROJECT NAME: C &amp; T Contracting

SITE ADDRESS: 2004 EDENTON ST ST KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 03/23/2018

EXPIRES: 09/19/2018

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27499
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	10.20
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	145000.00
LOT COVERAGE	35.36
LIVING SPACE (SQFT)	1675
COVERED PORCHES/DECKS (SQFT)	84
TOTAL SQUARE FOOTAGE	1759
SURVEYOR NAME AND NUMBER	William S. Jones, Jr.
ENGINEER AND LICENSE NUMBER	RAYMOND PATE 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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**BJ2018-067**

**PROJECT NAME:** C & T Contracting

**SITE ADDRESS:** 2004 EDENTON ST ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**REQUIRED INSPECTIONS**

Piling

In-Slab Plumbing

Slab/Foundation

Sheathing

Rough In

Insulation

Final

Zoning Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* 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.
- \* 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).
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

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

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

**Date:** 3/27/18



# 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

**BJ2018-070**

**PROJECT NAME:** Robert Self Bathroom Remodel  
**SITE ADDRESS:** 2018 PORTSMOUTH ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

**APPLICANT:** Self, Robert  
2018 Portsmouth St.  
Kill Devil Hills, NC 27948  
757-613-3066

**OWNER:** Self, Robert  
2018 Portsmouth St.  
Kill Devil Hills, NC 27948  
757-613-3066

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

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

**PARCEL:**

**PIN:** 988405081449

**Parcel Number:** 001086000

**Address:** 2018 PORTSMOUTH ST KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 867

**Legal Description:**

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

**PROJECT DESCRIPTION:** Remodel existing ground level to add half bathroom.

PAID

MAR 26 2018

TOWN OF  
KILL DEVIL HILLS

**BJ2018-070**

**PROJECT NAME:** Robert Self Bathroom Remodel  
**SITE ADDRESS:** 2018 PORTSMOUTH ST KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 03/26/2018

EXPIRES: 09/22/2018

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27631
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	18200.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

In-Slab Plumbing	Final
Rough In	Zoning Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Min. 21 clearance x the width of plumbing fixtures required in bathroom. Pedestal sink cannot encroach into required space in front of water closet.

**BJ2018-070**

**PROJECT NAME:** Robert Self Bathroom Remodel  
**SITE ADDRESS:** 2018 PORTSMOUTH ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

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: Robert Self Date: 3/26/2018



# Town of Kill Devil Hills

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

PAID  
WITH  
CASH

PAID

MAR 27 2018

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2018-071**

**PROJECT NAME:** SKULTETY RENOVATIONS  
**SITE ADDRESS:** 1713 SUNSET AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/27/2018

**EXPIRES:** 09/23/2018

**APPLICANT:** Patrik Skultety  
196 Swan View Dr.  
Kill Devil Hills, NC 27948  
252-548-7494

**OWNER:** Patrik Skultety  
196 Swan View Dr.  
Kill Devil Hills, NC 27948  
252-548-7494

**BUILDING, REMODELING:** Radegart Painting  
408 Holly St.  
Kill Devil Hills, NC 27948  
252-216-6669

**License:** 999  
**Expires:**

**PARCEL:**

**PIN:** 988409059763

**Parcel Number:** 002601000

**Address:** 1713 SUNSET AVE KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SHORES SUBDIV

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** ADD OUTSIDE SHOWER AT NE CORNER OF MAIN STRUCTURE. ADD COVERED PATIO AT NW CORNER OF MAIN STRUCTURE.



**BJ2018-071****PROJECT NAME:** SKULTETY RENOVATIONS  
**SITE ADDRESS:** 1713 SUNSET AVE KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 03/27/2018**EXPIRES:** 09/23/2018

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	900.00
LOT COVERAGE	33.70
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Piling	Rough In
In-Slab Plumbing	Final
Slab/Foundation	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!

\* NEW COMPONENTS MUST MEET SETBACKS. 5" OFF CORNER AT FRONT AND 4" AT REAR.

**BJ2018-071**

**PROJECT NAME:** SKULTETY RENOVATIONS  
**SITE ADDRESS:** 1713 SUNSET AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/27/2018

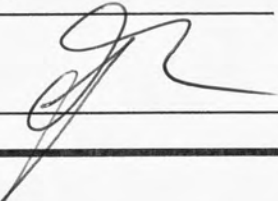
**EXPIRES:** 09/23/2018

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: \_\_\_\_\_

03/27/2018



# 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

<b>BP2018-046</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> LEACH STAIR REPLACEMENT	<b>ISSUED:</b> 03/26/2018
<b>SITE ADDRESS:</b> 2404 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/22/2018

**APPLICANT:** THELMA LEACH  
1801 North Inglewood Street  
Arlington, VA 22205

**OWNER:** THELMA LEACH  
1801 North Inglewood Street  
Arlington, VA 22205

**UNLICENSED - REMODELING:** BOTTOM LINE CONSTRUCTION  
PO BOX 816  
nags head, nc 27959  
252-202-2824

**License:** 0000000  
**Expires:**

**PARCEL:**

**PIN:** 988517212918

**Parcel Number:** 000353000

**Address:** 2404 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** VIRGINIA DARE SHORES

**Block:** 3 **Lot(s):** 2

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Building Permit Fee - Minimum Fee	\$0.00	\$0.00
	<i>\$150</i>	
<b>Totals :</b>	<b>\$0.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPLACE REAR EXTERIOR STAIRS

PAID

MAR 26 2018

TOWN OF  
KILL DEVIL HILLS

**BP2018-046**

**PROJECT NAME:** LEACH STAIR REPLACEMENT  
**SITE ADDRESS:** 2404 VA DARE TRL N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

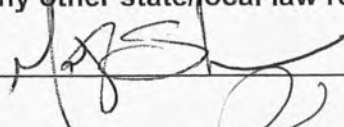
Piling

**CONDITIONS**

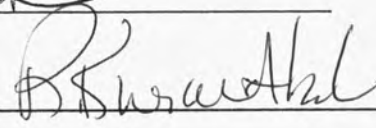
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

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



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



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

3/26/18



# 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

<b>OP2018-020</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Elizabeth Scullin	<b>ISSUED:</b> 03/27/2018
<b>SITE ADDRESS:</b> 2020 NEW BERN ST KILL DEVIL HILLS	<b>EXPIRES:</b>

**APPLICANT:** HERNDON, TY A  
302 W. Sportsman Dr.  
KILL DEVIL HILLS, NC 27948  
252-202-1962

**OWNER:** Scullin, Elizabeth  
7403 Admiral Dr.  
ALEXANDRIA, VA 22307  
703-768-3258

**BUILDING LIMITED:** HERNDON, TY A  
302 W. Sportsman Dr.  
KILL DEVIL HILLS, NC 27948  
252-202-1962

**License:** 65165  
**Expires:** 06/01/2018

### PARCEL:

**PIN:** 988518300040

**Parcel Number:** 001875000

**Address:** 2020 NEW BERN ST KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH ANNEX 1

**Block:** 0 **Lot(s):** 431

**Legal Description:**

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

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

### DETAILS

#### Permit

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New

MAR 27 2018

### CONDITIONS

**OP2018-020**

**PROJECT NAME:** Elizabeth Scullin

**SITE ADDRESS:** 2020 NEW BERN ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/27/2018

**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: Max Sh

Contractor or Authorized Agent: J. P. Miller Date: 3/27/18





# 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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MAR 26 2018

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2018-069**

**PROJECT NAME:** Hunter and Dena Walters  
**SITE ADDRESS:** 301 ARCH ST E. KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

**APPLICANT:** MR F H WALTERS  
306 collins rd  
suffolk, va 23434

**OWNER:** MR F H WALTERS  
306 collins rd  
suffolk, va 23434

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

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

**PARCEL:**

**PIN:** 988513044686

**Parcel Number:** 000093000

**Address:** 301 ARCH ST E. KILL DEVIL HILLS

**Addition:** ORVILLE BEACH BLK 5

**Zoning:**

**Block:** 5 **Lot(s):** 16

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace steps, change out main power wire to meter (underground), add concrete to driveway, add to walls under house for storage



**BJ2018-069**

**PROJECT NAME:** Hunter and Dena Walters  
**SITE ADDRESS:** 301 ARCH ST E. KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
CONSTRUCTION COST	6000.00
LOT COVERAGE	17.34
SURVEYOR NAME AND NUMBER	Paul J. Toti
CULVERT	N
DRIVEWAY INVERT 2	N

**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.
- \* 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.
- \* Driveway cannot exceed 40'.

**BJ2018-069**

**PROJECT NAME:** Hunter and Dena Walters  
**SITE ADDRESS:** 301 ARCH ST E. KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/26/2018

**EXPIRES:** 09/22/2018

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

MAR 26 2018

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BP2018-033**

**PROJECT NAME:** Small front steps  
**SITE ADDRESS:** 2025 VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 02/27/2018

**EXPIRES:** 08/26/2018

**APPLICANT:** Small, Markam  
283 Dryride Road  
ELIZABETH CITY, NC 27909  
252-338-2487

**OWNER:** SMALL FAMILY LIMITED  
1009 WEST CHURCH STREET  
ELIZABETH CITY, NC 27909

**GENERAL:** Self  
UNKNOWN  
UNKNOWN, XX 00000

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 989313241105

**Parcel Number:** 008502000

**Address:** 2025 VA DARE TRL S KILL DEVIL HILLS

**Addition:** NAGS HEAD SHORES AMENDED SEC 4

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace front steps and landing

**BP2018-033**

PROJECT NAME: Small front steps

SITE ADDRESS: 2025 VA DARE TRL 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	OIR
PURPOSE	Residential 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	2500.00

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

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

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

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





**Town of Kill Devil Hills**

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

PAID

MAR 26 2018

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>SG2018-009</b>	<b>SIGN</b>
<b>PROJECT NAME:</b> Coastal NC Holdings, LLC	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 3210 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

<b>APPLICANT:</b> Coastal NC Holdings, LLC PO Box 1446 kitty hawk, nc 27949 252-573-9547	<b>OWNER:</b> Coastal NC Holdings, LLC PO Box 1446 kitty hawk, nc 27949 252-573-9547
---	---

<b>CONTRACTOR:</b>	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	<b>License:</b> Same as Owner <b>Expires:</b> 12/30/2019
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**PARCEL:**

<b>PIN:</b> 987516948182	<b>Parcel Number:</b> 000048001
<b>Address:</b> 3210 CROATAN HWY N KILL DEVIL HILLS	
<b>Addition:</b> ORVILLE BEACH AMENDED BLK 15	<b>Zoning:</b> <b>Block:</b> 15 <b>Lot(s):</b> 2-13
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Sign

**SG2018-009**

**PROJECT NAME:** Coastal NC Holdings, LLC  
**SITE ADDRESS:** 3210 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	72.00
SIGN- WALL PROPOSED (SQ FT)	24.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	450.00
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.

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

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

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

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

3/24/18



# 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

**MC2018-066**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 4D  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

PAID  
MAR 26 2018  
TOWN OF  
KILL DEVIL HILLS

**MC2018-066**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 4D  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

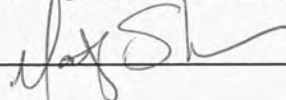
**REQUIRED INSPECTIONS**

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: 

Contractor or Authorized Agent:  Date: 3/26/18



# 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

<b>MC2018-067</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 4F	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-067**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 4F  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 3/22/18





# 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

<b>MC2018-068</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 4L	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-068**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 4L  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 3/26/18



# 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

**MC2018-069**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 4I  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-069**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 4I  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: AD Myers Date: 3/26/18



# 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

<b>MC2018-070</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 3S	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-070**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 3S  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 3/26/18





# 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

<b>MC2018-071</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 3Q	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-071**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 3Q  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential


**REQUIRED INSPECTIONS**

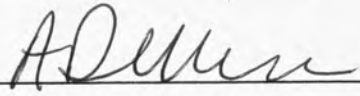
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 3/22/18



# 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

<b>MC2018-072</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 3P	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-072**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 3P  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 3/24/18



**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**

<b>MC2018-073</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 3N	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-073**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 3N  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: A. DeWine

Date: 3/26/18





# 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

<b>MC2018-074</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> CROATAN SURF CLUB UNIT 3M	<b>ISSUED:</b> 03/23/2018
<b>SITE ADDRESS:</b> 1325 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 09/19/2018

**APPLICANT:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

**OWNER:** CROATAN SURF CLUB - UNIT OWNERS  
PO BOX 310  
nags head, nc 27959  
786-301-8006

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988411653031

**Parcel Number:** 004037003

**Address:** 1325 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SURF CLUB

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 26 2018

**MC2018-074**

**PROJECT NAME:** CROATAN SURF CLUB UNIT 3M  
**SITE ADDRESS:** 1325 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2086.66
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

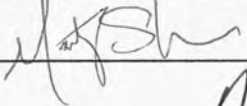
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 3/26/18



# 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

**ZP2018-016**

**PROJECT NAME:** Rickie and Mary Baxter  
**SITE ADDRESS:** 1205 VA DARE TRL S KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

**APPLICANT:** Rickie Thomas and Mary Baxter  
1205 S. Virginia Dare Tr.  
Kill Devil Hills, NC 27948  
804-405-2414

**OWNER:** Rickie Thomas and Mary Baxter  
1205 S. Virginia Dare Tr.  
Kill Devil Hills, NC 27948  
804-405-2414

**CONTRACTOR:** Keystone Custom Builders  
P. O. Box 3678  
Kill Devil Hills, NC 27948  
202-4696

**GENERAL BUILDING - LIMITED:** Keystone Custom Builders  
P. O. Box 3678  
Kill Devil Hills, NC 27948  
202-4696

**License:** 58838  
**Expires:**

**PARCEL:**

**PIN:** 989305072732

**Parcel Number:** 004272001

**Address:** 1205 VA DARE TRL S KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS SEC 1

**Block:** 5 **Lot(s):** 3

**Legal Description:**

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

**PROJECT DESCRIPTION:** Fence

PAID  
WITH  
CASH

Value:  
\$800<sup>00</sup>

VE

MAR 23 2018

**ZP2018-016**

**PROJECT NAME:** Rickie and Mary Baxter

**SITE ADDRESS:** 1205 VA DARE TRL S KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

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: Donna Elliott

Contractor or Authorized Agent: Derek Williams Date: 3/23/18



# 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

**BP2018-042**

**PROJECT NAME:** BRITT SIDING & WINDOW RENOVATIONS  
**SITE ADDRESS:** 302 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/19/2018

**EXPIRES:** 09/15/2018

**APPLICANT:** BRITT, PAUL F  
P O BOX 2964  
KILL DEVIL HILLS, NC 27948

**OWNER:** BRITT, PAUL F  
P O BOX 2964  
KILL DEVIL HILLS, NC 27948

**GENERAL BUILDING-UNLIMITED:** Blue Streak Real Estate and Construction  
P.O. Box 338  
159 W Mobile Rd  
Harbinger, NC 27941

**License:** 64644  
**Expires:** 03/05/2019

**PARCEL:**

**PIN:** 988405281855

**Parcel Number:** 002061000

**Address:** 302 FIFTH ST W KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 7

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE SIDING ON EAST WALL & ADD 4 NEW WINDOWS.

MAR 23 2018

**BP2018-042**

**PROJECT NAME:** BRITT SIDING & WINDOW RENOVATIONS  
**SITE ADDRESS:** 302 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/19/2018

**EXPIRES:** 09/15/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10700.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Rough In

Final

**CONDITIONS**

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: John T. Walker Date: 3/23/18





# 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

<b>MC2018-054</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/15/2018</b>
<b>SITE ADDRESS: 1101 Croatan HWY S KILL DEVIL HILLS</b>	<b>EXPIRES: 09/11/2018</b>

**APPLICANT:** KILL DEVIL HILLS ASSOCIATION  
1 CVS DR.  
WOONSOCKET, RI 02895

**OWNER:** KILL DEVIL HILLS ASSOCIATION  
1 CVS DR.  
WOONSOCKET, RI 02895

**ELECTRICAL - UNLIMITED:** Moore's Electrical and Mechanical Construction, Inc. **License:** 16934-U  
101 Edgewood Ave **Expires:** 10/31/2019  
Altavista, VA 24517  
434-309-2497

**PARCEL:**

**PIN:** 988312971475 **Parcel Number:** 004325000

**Address:** 1101 Croatan HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP **Zoning:**

**Block:** 5 **Lot(s):** 1-3 & PT 8-10

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC

MAR 3 2018

**MC2018-054**

**PROJECT NAME:**

**SITE ADDRESS:** 1101 Croatan HWY S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/15/2018

**EXPIRES:** 09/11/2018

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	II
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Merchantile

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**REQUIRED INSPECTIONS**

Final

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**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

## Planning and Inspection Department

<b>MC2018-062</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> KELLIHAN HVAC	<b>ISSUED:</b> 03/22/2018
<b>SITE ADDRESS:</b> 817 KITTY CT KILL DEVIL HILLS	<b>EXPIRES:</b> 09/18/2018

**APPLICANT:** KELLIHAN, JANICE  
107 ELLERY ST  
YORKTOWN, VA 23692  
757-509-1456

**OWNER:** KELLIHAN, JANICE  
107 ELLERY ST  
YORKTOWN, VA 23692  
757-509-1456

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

**License:** 13056  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988405079913

**Parcel Number:** 002196000

**Address:** 817 KITTY CT KILL DEVIL HILLS

**Zoning:**

**Addition:** WRIGHT'S SHORES

**Block:** 0 **Lot(s):** 102

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

PAID

MAR 22 2018

TOWN OF  
KILL DEVIL HILLS

**MC2018-062**

**PROJECT NAME:** KELLIHAN HVAC  
**SITE ADDRESS:** 817 KITTY CT KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

---

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6100.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final


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**CONDITIONS**

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

**Issued By:** 

**Contractor or Authorized Agent:**  **Date:** 3-22-18



# 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

<b>MC2018-063</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> BARKER HVAC	<b>ISSUED:</b> 03/22/2018
<b>SITE ADDRESS:</b> 2030 EDENTON ST ST KILL DEVIL HILLS	<b>EXPIRES:</b> 09/18/2018

**APPLICANT:** BARKER, DONALD  
23 13TH AVE  
SOUTHERN SHORES, nc 27949  
252-489-9389

**OWNER:** BARKER, DONALD  
23 13TH AVE  
SOUTHERN SHORES, nc 27949  
252-489-9389

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

**License:** 13056  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 987408987668

**Parcel Number:** 001267000

**Address:** 2030 EDENTON ST ST KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 819

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

PAID

MAR 22 2018

TOWN OF  
KILL DEVIL HILLS

**MC2018-063**

**PROJECT NAME:** BARKER HVAC

**SITE ADDRESS:** 2030 EDENTON ST ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6222.00
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: 3-22-18





# 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

**MC2018-064**

**PROJECT NAME:** BRYAN HVAC  
**SITE ADDRESS:** 2010 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** BRYAN, EDWARD & DANA  
27 MILLSTREAM CT  
PAWLING, NY 12564

**OWNER:** BRYAN, EDWARD & DANA  
27 MILLSTREAM CT  
PAWLING, NY 12564

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

**License:** 29480  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 989313144047

**Parcel Number:** 018735000

**Address:** 2010 VA DARE TRL S KILL DEVIL HILLS

**Addition:** SUBDIVISION - NONE

**Zoning:**

**Block:** 0

**Lot(s):** PARCELS  
B-1,B-2

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 23 2018

TOWN OF  
KILL DEVIL HILLS

**MC2018-064**

**PROJECT NAME:** BRYAN HVAC

**SITE ADDRESS:** 2010 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5260.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	10
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

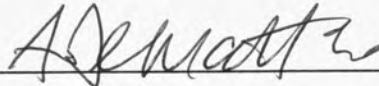
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 3/23/18



# 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

**MC2018-065**

**PROJECT NAME:** LOFTUS HVAC  
**SITE ADDRESS:** 1731 BOBBY LEE TRL KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** Loftus, Michael  
1731 Bobby Lee Trail  
Kill Devil Hills, NC 27948  
252-207-5120

**OWNER:** Loftus, Michael  
1731 Bobby Lee Trail  
Kill Devil Hills, NC 27948  
252-207-5120

**MECHANICAL, PLUMBING, ELECTRICAL:** CHRIS'S ELECTRICAL AND MECHANICAL, LLC  
2039 Newbern St.  
Kill Devil Hills, NC 27948  
480-0738

**License:** 20044 H-3, P, 22217-L  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988406473730

**Parcel Number:** 002894011

**Address:** 1731 BOBBY LEE TRL KILL DEVIL HILLS

**Addition:** NINE ESTATES

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

PAID

MAR 23 2018

TOWN OF  
KILL DEVIL HILLS

**MC2018-065**

**PROJECT NAME:** LOFTUS HVAC

**SITE ADDRESS:** 1731 BOBBY LEE TRL KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

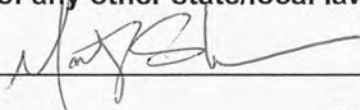
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 3-23-18



# 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

**ZP2018-017**

**PROJECT NAME:** Chris Balch Fence  
**SITE ADDRESS:** 200 BURNS DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** MICHAEL DAVENPORT  
114 Fort Huger Way  
Manteo, NC 27954

**OWNER:** Balch, Chris  
250 Richland Rd.  
PETERSBURG, VA 23805  
804-539-5070

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

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

**PARCEL:**

**PIN:** 988316949911

**Parcel Number:** 008368000

**Address:** 200 BURNS DR KILL DEVIL HILLS

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

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Fence

MAR 23 2018

TOWN OF  
KILL DEVIL HILLS

**ZP2018-017**

**PROJECT NAME:** Chris Balch Fence  
**SITE ADDRESS:** 200 BURNS DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	2400.00
LOT COVERAGE	29.88
SURVEYOR NAME AND NUMBER	William S. Jones Jr. L-2532
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.



**ZP2018-017**

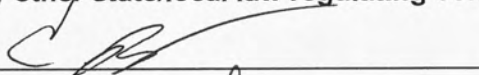
**PROJECT NAME:** Chris Balch Fence  
**SITE ADDRESS:** 200 BURNS DR KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

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: Christophe Abab Date: 3-23-18



# 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

**ZP2018-018**

**PROJECT NAME:** David Pearson Fence  
**SITE ADDRESS:** 1104 AVALON DR W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**APPLICANT:** DAVID PEARSON  
UNKNOWN  
CHESAPEAKE, VA 23322

**OWNER:** DAVID PEARSON  
UNKNOWN  
CHESAPEAKE, VA 23322

**GENERAL UNDER 30,000.00:**

OUTER BANKS DECK AND FENCE  
P.O. Box 1130  
MARLBOROUGH, MA 27954

**License:** n/a  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 987408995396

**Parcel Number:** 001640000

**Address:** 1104 AVALON DR W KILL DEVIL HILLS

**Addition:** AVALON BEACH

**Zoning:**  
**Block:** 0 **Lot(s):** 287

**Legal Description:**

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

**PROJECT DESCRIPTION:** Fence

PAID

MAR 23 2018

TOWN OF  
KILL DEVIL HILLS

**ZP2018-018**

**PROJECT NAME:** David Pearson Fence

**SITE ADDRESS:** 1104 AVALON DR W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 03/23/2018

**EXPIRES:** 09/19/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	2500.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

Zoning Final

**CONDITIONS**

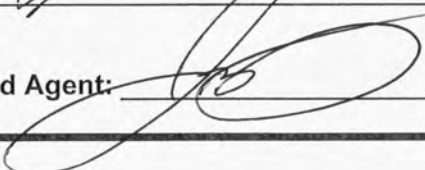
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

\* 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: 

Date: 3-23-18



# 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

**OP2018-018**

**PROJECT NAME:** Garland Dunstan, Jr.  
**SITE ADDRESS:** 106 SPORTSMAN DR W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/23/2018

**EXPIRES:**

**APPLICANT:** GARLAND DUNSTAN  
P.O. Box 402  
Kitty Hawk, NC 27949

**OWNER:** Gary Dunstan  
P. O. box 407  
kitty hawk, nc 27949  
202-1100

**GENERAL BUILDING, UNLIMITED:** GARLAND DUNSTAN  
P.O. Box 402  
Kitty Hawk, NC 27949

**License:** 19436  
**Expires:** 12/30/2018

**PARCEL:**

**PIN:** 988517105796

**Parcel Number:** 001741000

**Address:** 106 SPORTSMAN DR W KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 108

**Legal Description:**

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling, not to be used as duplex.

### DETAILS

**Permit**

Name	Value
# OF TRASH CANS	0
PURPOSE	Residential New

**CONDITIONS** MAR 23 2018

**OP2018-018**

**PROJECT NAME:** Garland Dunstan, Jr.

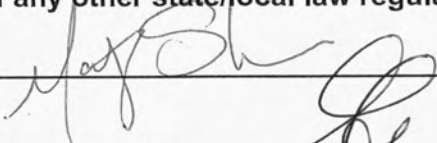
**SITE ADDRESS:** 106 SPORTSMAN DR W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 03/23/2018

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

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

Date: 3/23/18



# 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

<b>BJ2018-055</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Cville Ventures, LLC	<b>ISSUED:</b> 03/21/2018
<b>SITE ADDRESS:</b> 103 CARLOW AVE KILL DEVIL HILLS	<b>EXPIRES:</b> 09/17/2018

**APPLICANT:** Cville Ventures, LLC  
505 Foxdale Lane  
CHARLOTTESVILLE, VA 22903  
434-326-3903

**OWNER:** Cville Ventures, LLC  
505 Foxdale Lane  
CHARLOTTESVILLE, VA 22903  
434-326-3903

**CONTRACTOR:** Cville Ventures, LLC  
6105 N. Croatan Hwy.  
kitty hawk, nc 27949  
252-256-9200

**License:** 79096  
**Expires:** 03/31/2019

### PARCEL:

**PIN:** 988419619567

**Parcel Number:** 003939000

**Address:** 103 CARLOW AVE KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 41 **Lot(s):** 14

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$1,399.50	\$0.00	Residential Heated Space	1794 sq. Ft.
Covered Porch Residential	\$131.25	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
			Residential Unheated (.40)	135 Sq. Ft
<b>Totals :</b>	<b>\$1,580.75</b>	<b>\$0.00</b>	Covered Porches/Decks	175 SQFT

**PROJECT DESCRIPTION:** 103 Carlow Ave.

Town of Kill Devil Hills  
Water Charges

# PAID

Water Tap #: 723071

PAID  
MAR 22 2018

TOWN OF  
KILL DEVIL HILLS



**BJ2018-055**

PROJECT NAME: Cville Ventures, LLC

SITE ADDRESS: 103 CARLOW AVE KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 03/21/2018

EXPIRES: 09/17/2018

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27527
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	10.30
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	125000.00
# OF UNITS	1
LOT COVERAGE	39.28
LIVING SPACE (SQFT)	1794
COVERED PORCHES/DECKS (SQFT)	175
STORAGE (SQFT)	135
TOTAL SQUARE FOOTAGE	2104
SURVEYOR NAME AND NUMBER	Coastal Engineering
ENGINEER AND LICENSE NUMBER	C. Gomez 014071
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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**BJ2018-055**

**PROJECT NAME:** Cville Ventures, LLC  
**SITE ADDRESS:** 103 CARLOW AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/21/2018

**EXPIRES:** 09/17/2018

### 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.
- \* 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).
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent:  Date: 3/22/18



# 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

<b>BP2018-044</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> STAIR REPLACEMENT	<b>ISSUED:</b> 03/22/2018
<b>SITE ADDRESS:</b> 1209 WINDSONG WAY KILL DEVIL HILLS	<b>EXPIRES:</b> 09/18/2018

**APPLICANT:** DREAM TIME OBX LLC  
319 WHITESTONE RD  
CHARLOTTE, NC 28270  
704-400-4871

**OWNER:** DREAM TIME OBX LLC  
319 WHITESTONE RD  
CHARLOTTE, NC 28270  
704-400-4871

**CONTRACTOR:** BARRY TWIFORD  
UNKNOWN  
UNKNOWN, XX 00000  
252-423-0568

**License:** LEGACY UNKNOWN  
**Expires:** 12/30/2019

**PARCEL:**

**PIN:** 988415647321

**Parcel Number:** 004079000

**Address:** 1209 WINDSONG WAY KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 11

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE EXTERIOR STAIRS, SAME LOCATION.

PAID

MAR 22 2018

TOWN OF  
KILL DEVIL HILLS

**BP2018-044**

**PROJECT NAME:** STAIR REPLACEMENT

**SITE ADDRESS:** 1209 WINDSONG WAY KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Bary [Signature] Date: 3-22-18



# 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

<b>MC2018-053</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 03/15/2018</b>
<b>SITE ADDRESS: 1402 MEMORIAL BLVD S KILL DEVIL HILLS</b>	<b>EXPIRES: 09/11/2018</b>

<b>APPLICANT:</b> Morel, Kevin 42691 Laurier Drive Ashburn, VA 20148 703-629-7987	<b>OWNER:</b> Morel, Kevin 42691 Laurier Drive Ashburn, VA 20148 703-629-7987
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<b>H-3, CLASS I:</b>	ALL AMERICAN HEATING & COOLING UNKNOWN UNKNOWN, XX 00000	<b>License:</b> 22354 <b>Expires:</b> 12/31/2018
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**PARCEL:**

<b>PIN:</b> 989309063020	<b>Parcel Number:</b> 004736002
<b>Address:</b> 1402 MEMORIAL BLVD S KILL DEVIL HILLS	
<b>Addition:</b> KILL DEVIL BEACH SEC 1 REVISED	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> H <b>Lot(s):</b> 2

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

**PROJECT DESCRIPTION:** Replace HVAC

**PAID**  
**MAR 22 2018**  
TOWN OF  
KILL DEVIL HILLS

**MC2018-053**

**PROJECT NAME:**

**SITE ADDRESS:** 1402 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/15/2018

**EXPIRES:** 09/11/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3975.00
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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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

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

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

Date: 3-22-18





# 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

**MC2018-055**

**PROJECT NAME:** SCOTT HVAC  
**SITE ADDRESS:** 1217 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/15/2018

**EXPIRES:** 09/11/2018

**APPLICANT:** SCOTT, BRIAN & DEBORAH  
1427 GALVESTON ST  
SAN DIEGO, CA 92110  
252-305-5320

**OWNER:** SCOTT, BRIAN & DEBORAH  
1427 GALVESTON ST  
SAN DIEGO, CA 92110  
252-305-5320

**MECHANICAL:** American Refrigeration  
P.O. Box 835  
nags head, nc 27959  
252-305-5320

**License:** 29031  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988312979212

**Parcel Number:** 029912000

**Address:** 1217 MEMORIAL BLVD S KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS SEC 1

**Block:** 6 **Lot(s):** 17

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

MAR 22 2018

**MC2018-055**

PROJECT NAME: SCOTT HVAC  
SITE ADDRESS: 1217 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 03/15/2018

EXPIRES: 09/11/2018

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5000.00
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: Marty Shaw

Contractor or Authorized Agent: Paul Smith Date: 3-22-18



# 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

**MC2018-056**

**PROJECT NAME:** PRISCILLA SMALL HVAC  
**SITE ADDRESS:** 1001 CROATAN HWY S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/16/2018

**EXPIRES:** 09/12/2018

**APPLICANT:** SMALL, PRISCILLA  
PO BOX 426  
Kill Devil Hills, NC 27948  
252-449-5565

**OWNER:** SMALL, PRISCILLA  
PO BOX 426  
Kill Devil Hills, NC 27948  
252-449-5565

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

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

**License:** 11618  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988308877997

**Parcel Number:** 027929000

**Address:** 1001 CROATAN HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 4 **Lot(s):** PT 10 & PT 9

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC system

PAID

MAR 22 2018

TOWN OF  
KILL DEVIL HILLS

**MC2018-056**

**PROJECT NAME:** PRISCILLA SMALL HVAC  
**SITE ADDRESS:** 1001 CROATAN HWY S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/16/2018

**EXPIRES:** 09/12/2018

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5680.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Merchantile

**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: 3/22/18



# 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

**MC2018-061**

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

**MECHANICAL**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

**APPLICANT:** ABSOLUTE PLUMBING  
 101 Quarter Landing  
 Harbinger, NC 27941  
 252-489-1439

**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

**Zoning:**

**Addition:** OCEAN ACRES INC

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace portion of gas line from roof to pool & spa heater.

### DETAILS

**Permit**

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	2500.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N

MAR 22 2018

**MC2018-061**

**PROJECT NAME:** Ramada Gas Line

**SITE ADDRESS:** 1701 VA DARE TRL S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/22/2018

**EXPIRES:** 09/18/2018

### REQUIRED INSPECTIONS

Final

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### CONDITIONS

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

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

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

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

Date: 3/22/2018





**Town of Kill Devil Hills**

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

PAID

MAR 21 2018

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

**BJ2018-050**  
PROJECT NAME:  
SITE ADDRESS: 3149 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**  
ISSUED: 03/06/2018  
EXPIRES: 09/02/2018

**APPLICANT:** Rick Berry  
332 Sibn Pine rd.  
chesapeake, va 23322  
757-777-8585

**OWNER:** Rick Berry  
332 Sibn Pine rd.  
chesapeake, va 23322  
757-777-8585

**GENERAL:** CARRIBEAN POOLS & SPAS  
UNKNOWN  
UNKNOWN, XX 00000

**License:** 48519  
**Expires:** 12/30/2019

**PARCEL:**

**PIN:** 987516833098

**Parcel Number:** 000309000

**Address:** 3149 BAY DR KILL DEVIL HILLS

**Addition:** ORVILLE BEACH WEST

**Zoning:**

**Block:** 0 **Lot(s):** 230

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Pool/Hot Tub	\$200.00	\$0.00
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Pool, fence, concrete decking, and electrical; As-Built Survey required prior to CO.

**BJ2018-050**

PROJECT NAME:

SITE ADDRESS: 3149 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 03/06/2018

EXPIRES: 09/02/2018

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	26747
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	27868.00
# OF UNITS	1
SURVEYOR NAME AND NUMBER	G. Rogers L-3531
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!

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

**BJ2018-050**

PROJECT NAME:

SITE ADDRESS: 3149 BAY DR KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 03/06/2018

EXPIRES: 09/02/2018

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: \_\_\_\_\_

3-21-18



# Town of Kill Devil Hills

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

PAID

MAR 21 2018

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**BJ2018-068**

**PROJECT NAME:** Leon Bathroom Addition  
**SITE ADDRESS:** 2017 HAMPTON ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 03/20/2018

**EXPIRES:** 09/16/2018

**APPLICANT:** Leon, Christopher  
2017 Hampton St.  
Kill Devil Hills, NC 27948  
951-541-3206

**OWNER:** Leon, Christopher  
2017 Hampton St.  
Kill Devil Hills, NC 27948  
951-541-3206

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

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

**PARCEL:**

**PIN:** 988405085625

**Parcel Number:** 002039000

**Address:** 2017 HAMPTON ST KILL DEVIL HILLS

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

**Zoning:**

**Block:** 0 **Lot(s):** 1114

**Legal Description:**

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

**PROJECT DESCRIPTION:** CONVERT EXISTING SHOWER ROOM AT LOWER LEVEL INTO FULL BATH WITHIN THE EXISTING FOOTPRINT OF HOUSE.

**BJ2018-068**

**PROJECT NAME:** Leon Bathroom Addition  
**SITE ADDRESS:** 2017 HAMPTON ST KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 03/20/2018

EXPIRES: 09/16/2018

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27652
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	11.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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

**CONDITIONS**

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

**BJ2018-068**

**PROJECT NAME:** Leon Bathroom Addition

**SITE ADDRESS:** 2017 HAMPTON ST KILL DEVIL HILLS

**BUILDING JOINT**

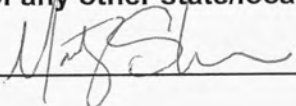
**ISSUED:** 03/20/2018

**EXPIRES:** 09/16/2018

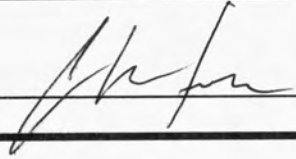
\* All fixtures must maintain 21" clearance in front of each fixture.

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: \_\_\_\_\_

21 MAR 18





# Town of Kill Devil Hills

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

PAID

MAR 21 2018

TOWN OF  
KILL DEVIL HILLS

## Planning and Inspection Department

**MC2018-059**

**PROJECT NAME:** Haskett HVAC  
**SITE ADDRESS:** 101 SPORTSMAN DR E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED: 03/20/2018**

**EXPIRES: 09/16/2018**

**APPLICANT:** Beach Air Heating and Cooling  
PO Box 1047  
Manteo, NC 27954  
252-216-7544

**OWNER:** HASKETT, DONNA W  
321 Great Hope Road  
HERTFORD, NC 27944  
252-426-9952

**H-3, CLASS I:** Beach Air Heating and Cooling  
PO Box 1047  
Manteo, NC 27954  
252-216-7544

**License:** 29768  
**Expires:** 12/31/2018

**PARCEL:**

**PIN:** 988517109861

**Parcel Number:** 001713000

**Address:** 101 SPORTSMAN DR E KILL DEVIL HILLS

**Zoning:**

**Addition:** AVALON BEACH

**Block:** 0 **Lot(s):** 61

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace 2.5 ton HVAC system.

### DETAILS

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6156.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

**MC2018-059**

**PROJECT NAME:** Haskett HVAC

**SITE ADDRESS:** 101 SPORTSMAN DR E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 03/20/2018

**EXPIRES:** 09/16/2018

**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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

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

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

Contractor or Authorized Agent: Cota John Date: 3-21-18



# 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

**EL2018-018**

**PROJECT NAME:** BERNHARD ELECTRICAL  
**SITE ADDRESS:** 2024 SMITHFIELD ST KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 03/20/2018

**EXPIRES:** 09/16/2018

**APPLICANT:** BERNHARD, KEVIN & THERESA  
3432 LEVERTON AVE  
BALTIMORE, MD 21224  
301-385-1911

**OWNER:** BERNHARD, KEVIN & THERESA  
3432 LEVERTON AVE  
BALTIMORE, MD 21224  
301-385-1911

### PARCEL:

**PIN:** 988405193386

**Parcel Number:** 001431000

**Address:** 2024 SMITHFIELD ST KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 1297

**Legal Description:**

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

**PROJECT DESCRIPTION:** METER BASE AND SEC CHANGOUT

### DETAILS

Final

*AE Flood zone  
Value \$1,000<sup>00</sup>*

### REQUIRED INSPECTIONS

### 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.

MAR 20 2018

PAID  
WITH  
CASH

**EL2018-018**

PROJECT NAME: BERNHARD ELECTRICAL  
SITE ADDRESS: 2024 SMITHFIELD ST KILL DEVIL HILLS

**ELECTRICAL**

ISSUED: 03/20/2018

EXPIRES: 09/16/2018

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: Howard Bell

Date: Mar 20 2018